

Sandwell and West Birmingham Hospitals

NHS Trust



Integrated Quality & Performance Report

Month Reported: **August 2019**

Reported as at: 19/09/2019

TRUST BOARD

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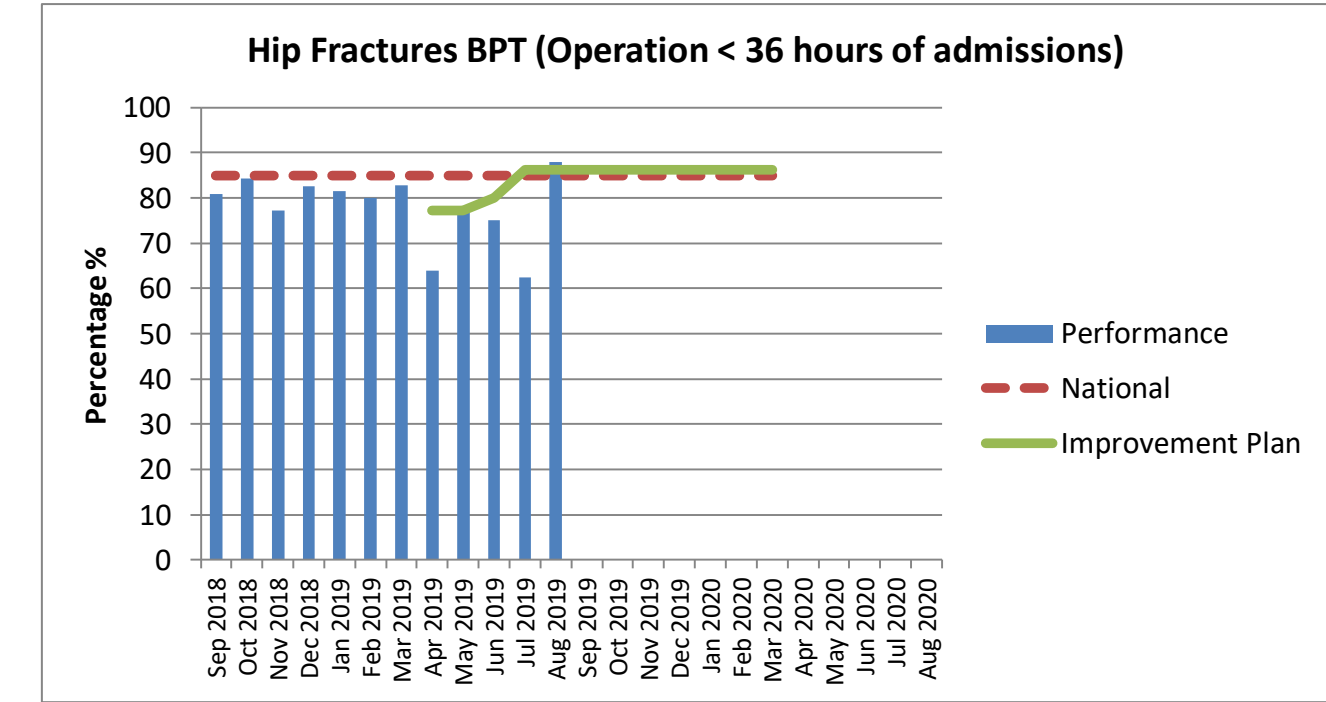
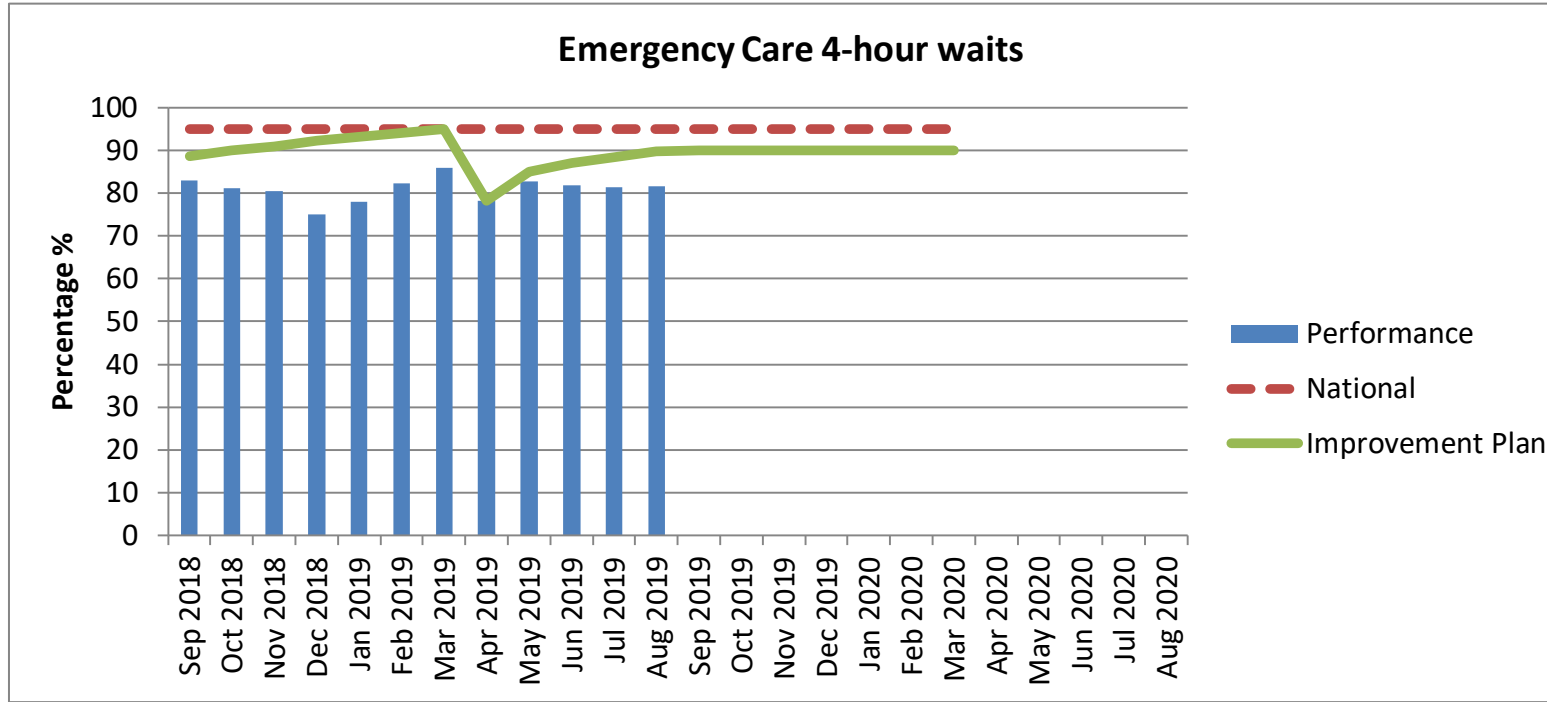
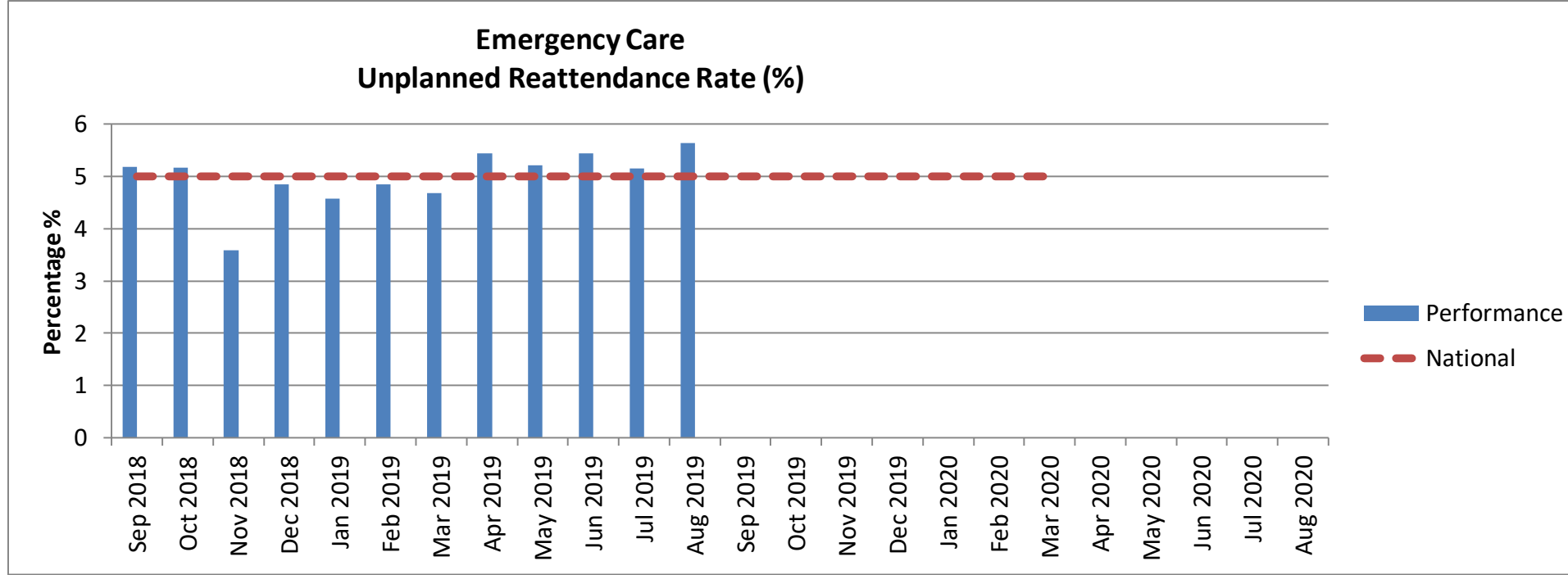
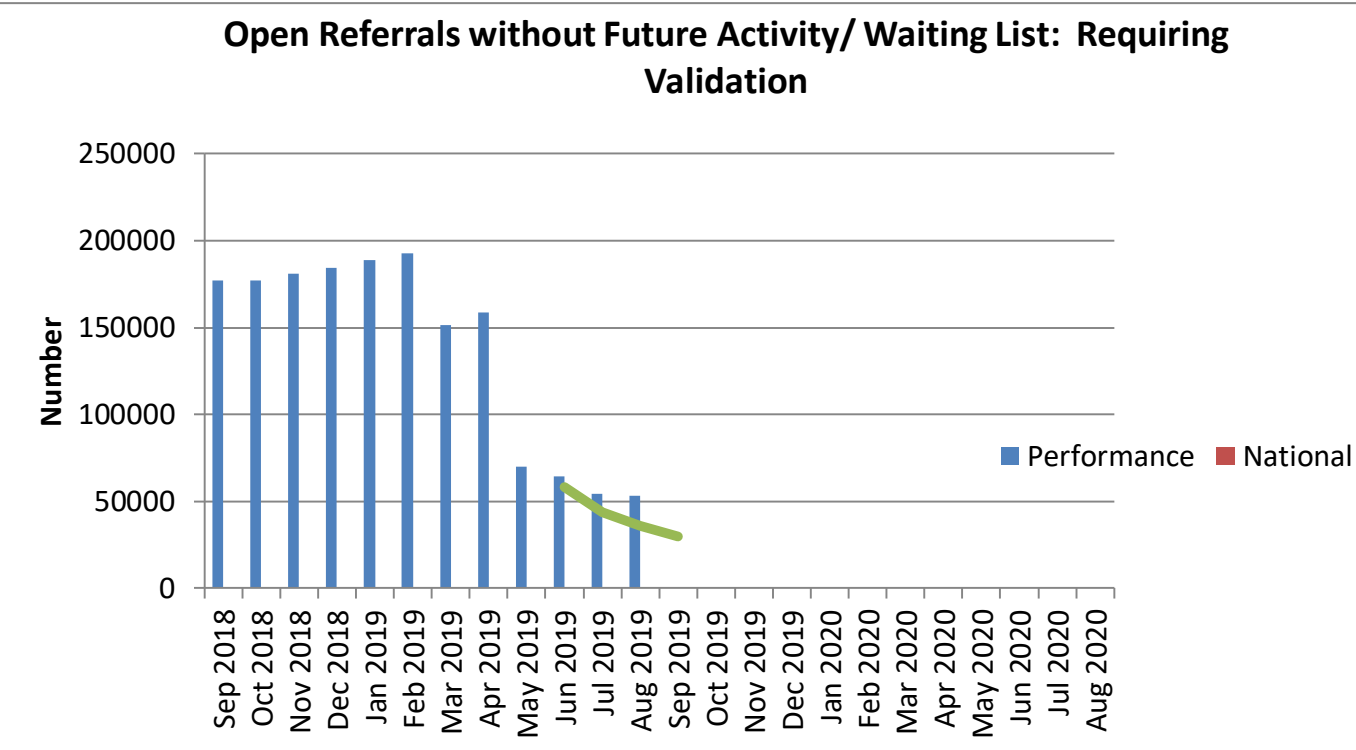
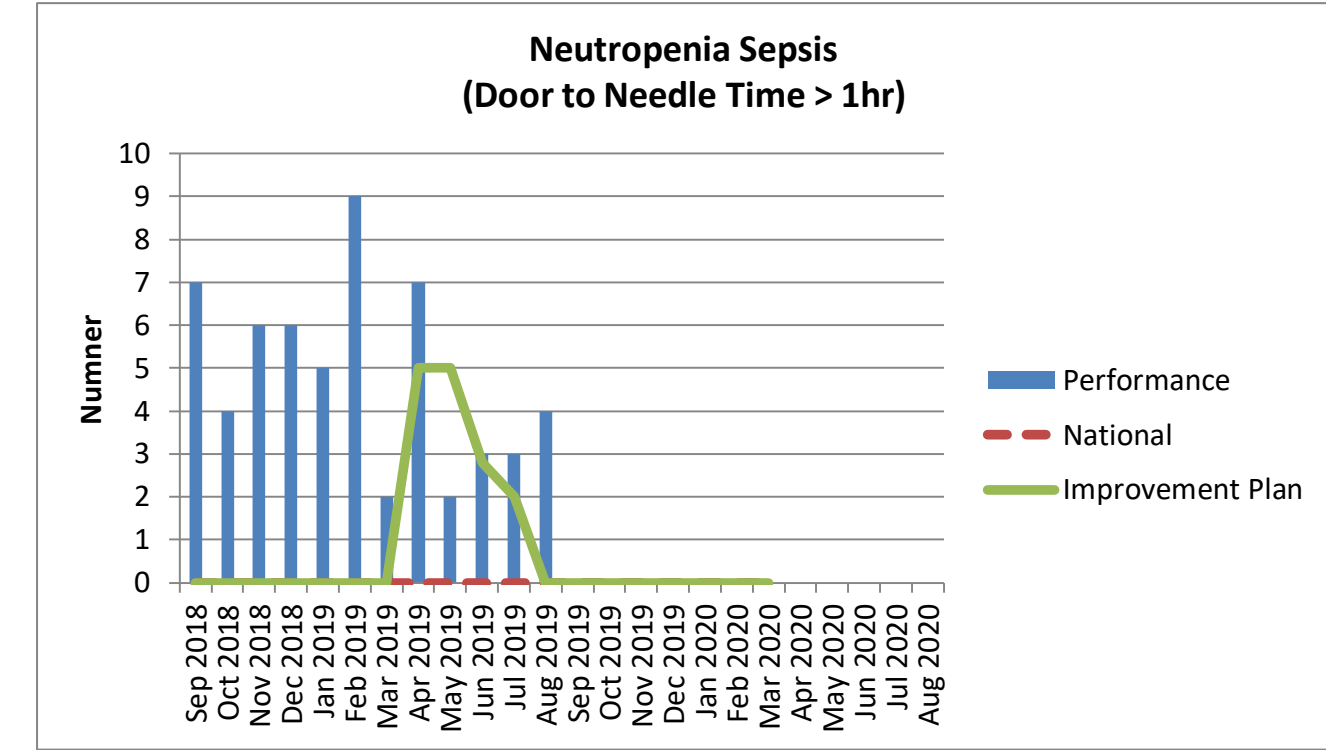
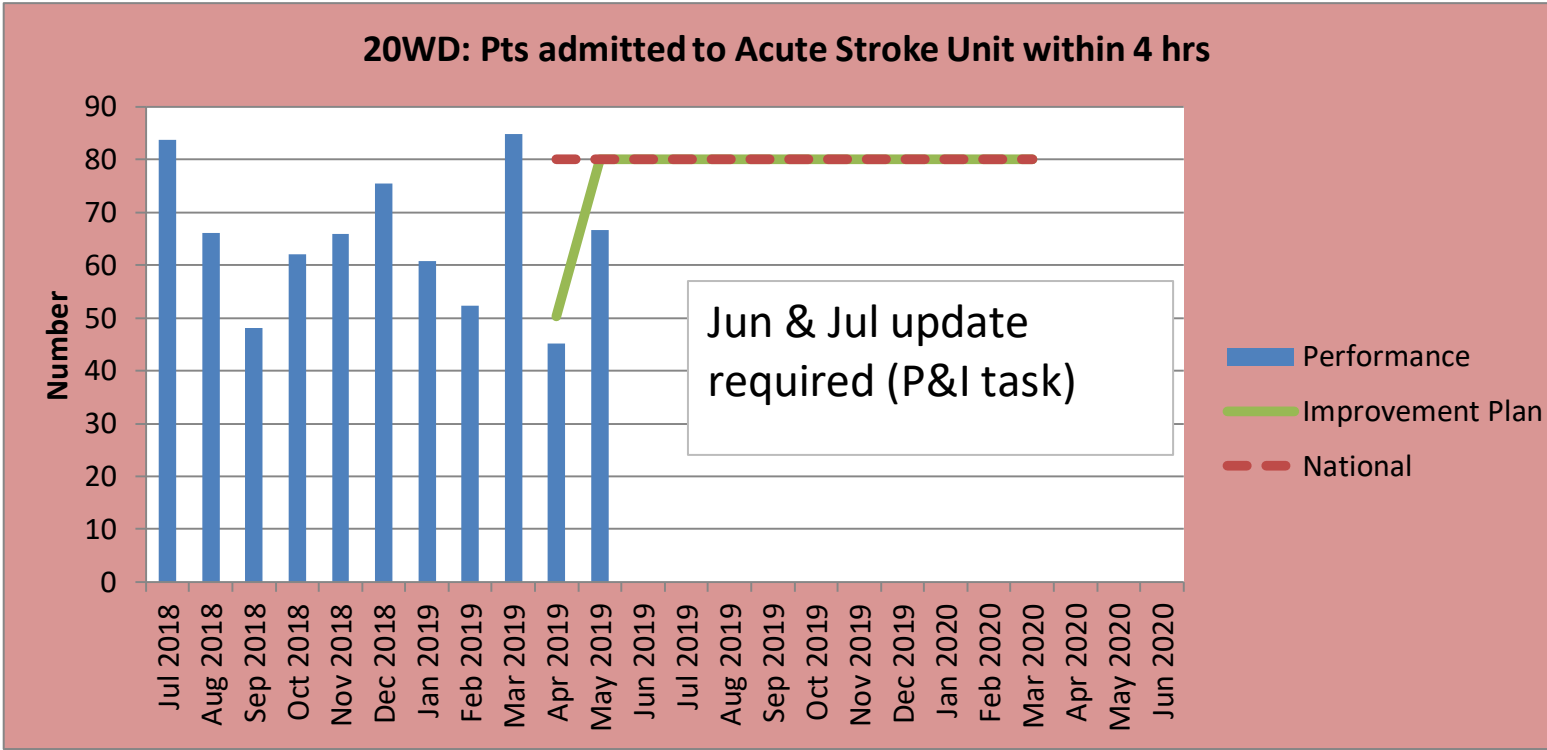
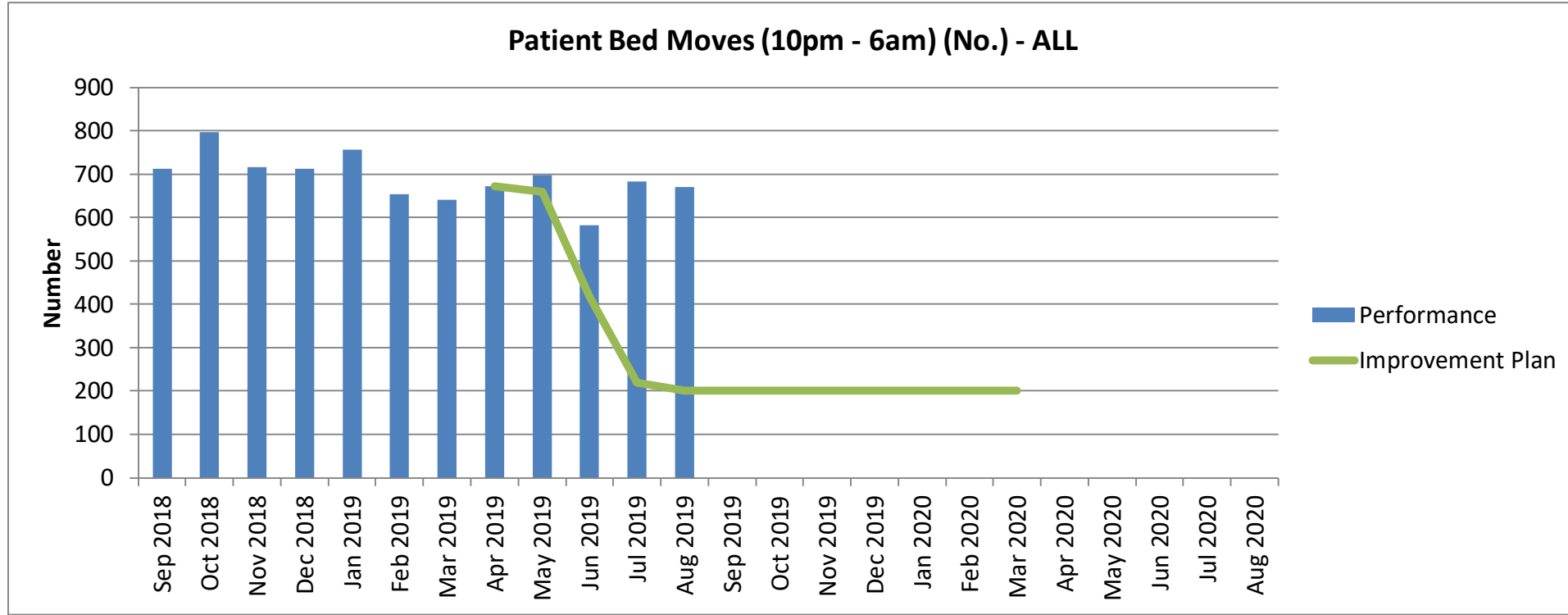
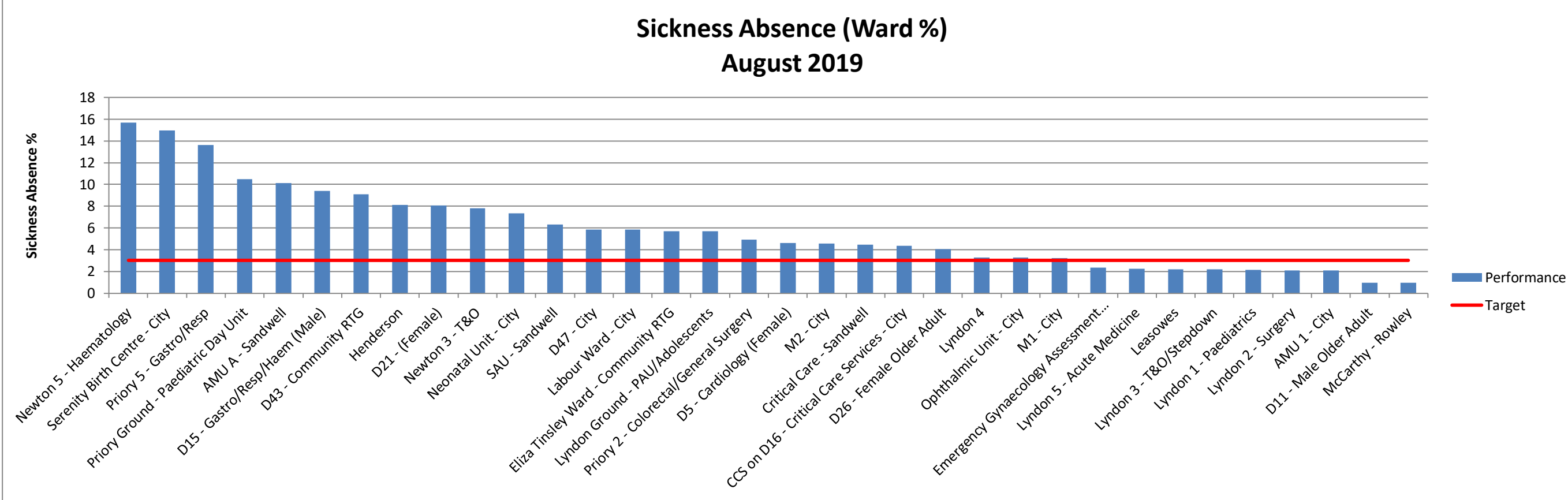
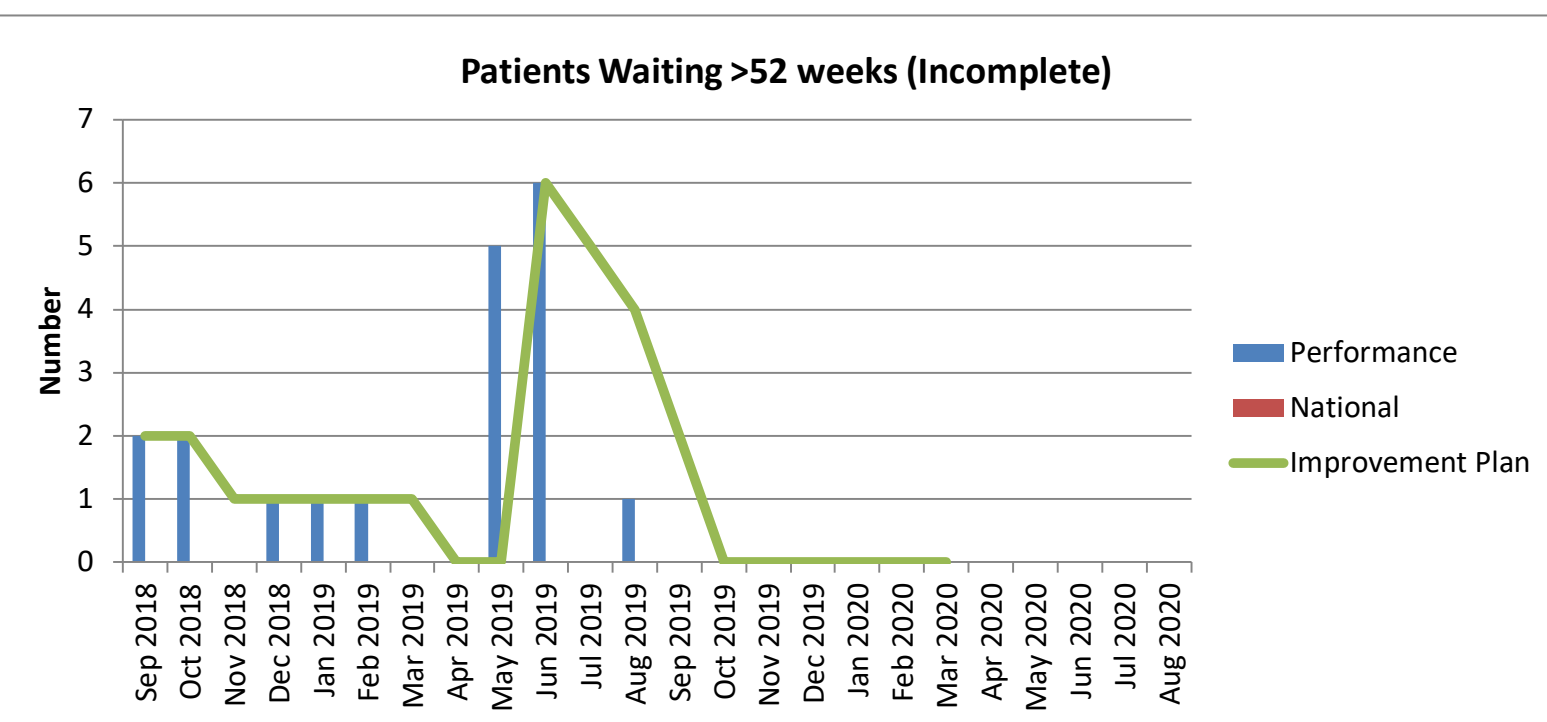
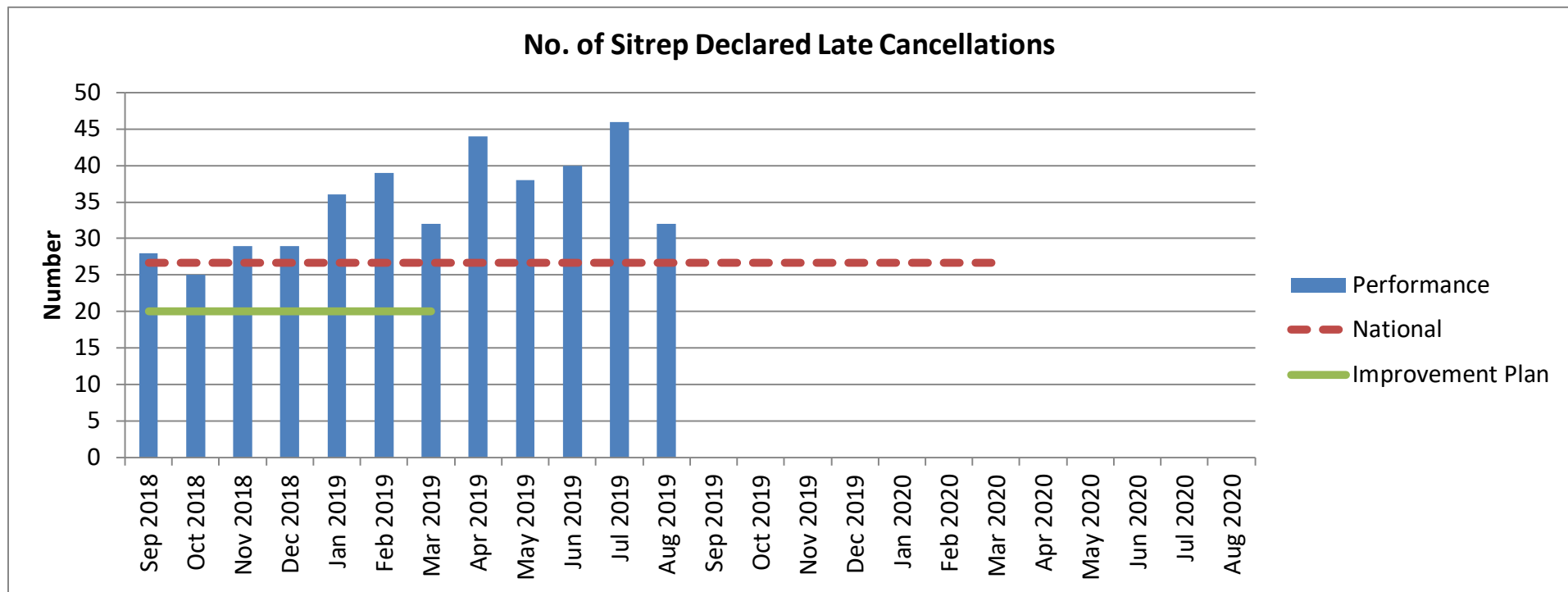
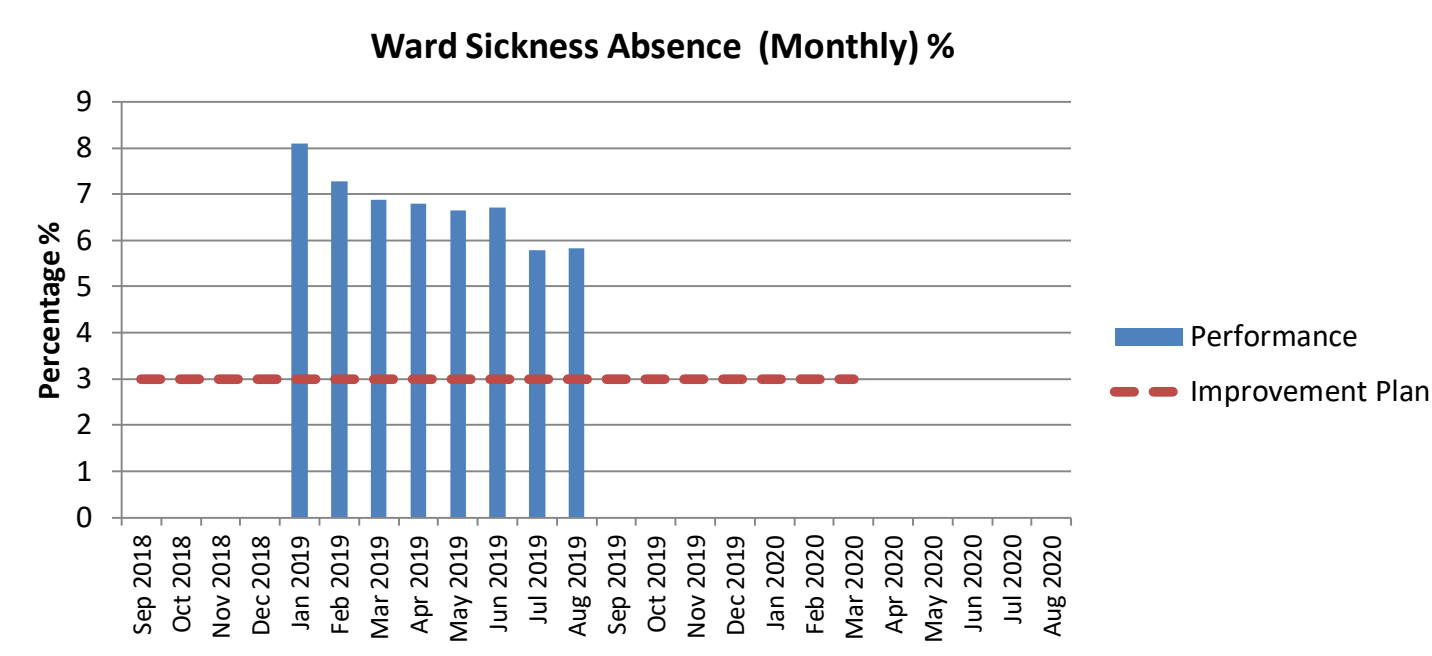
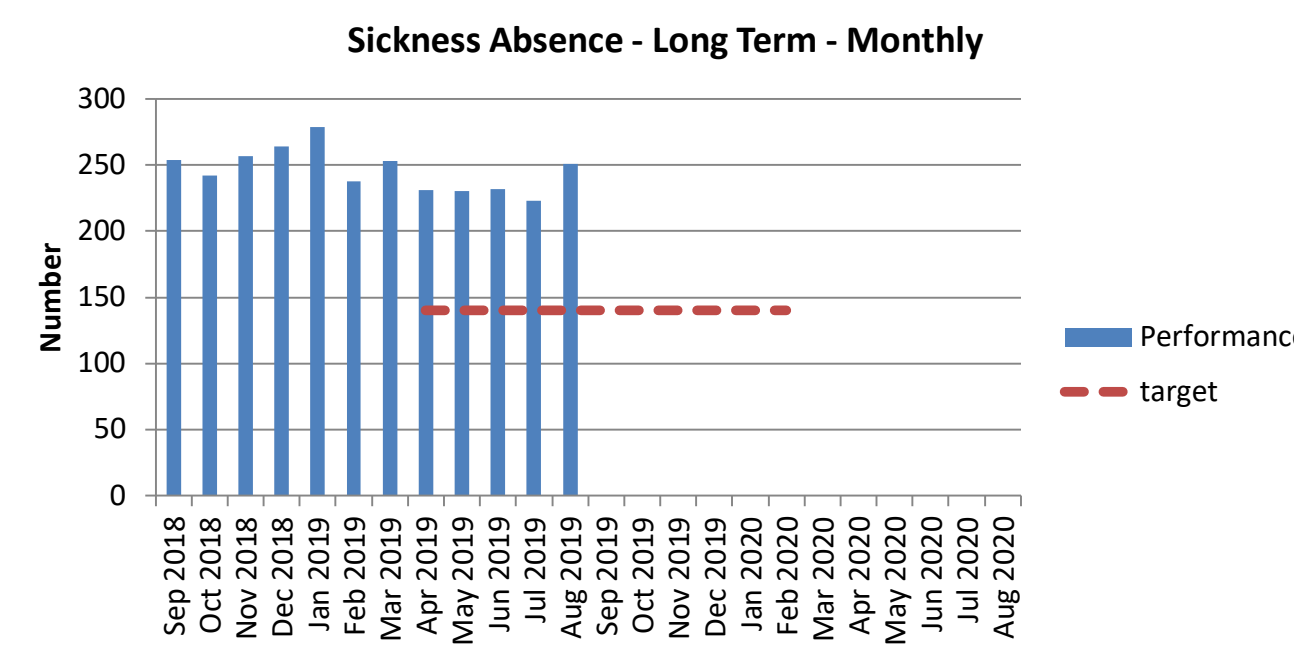
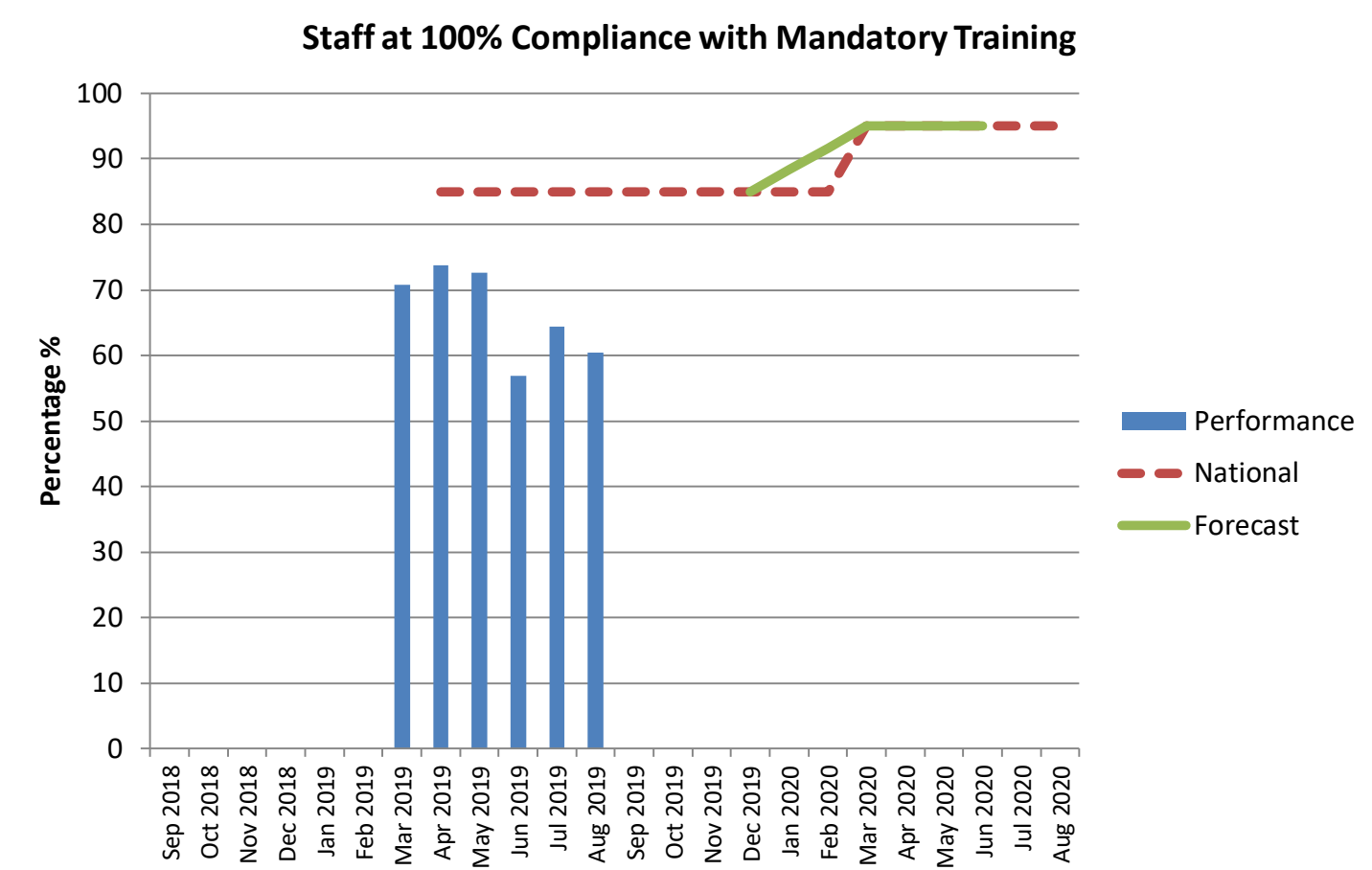
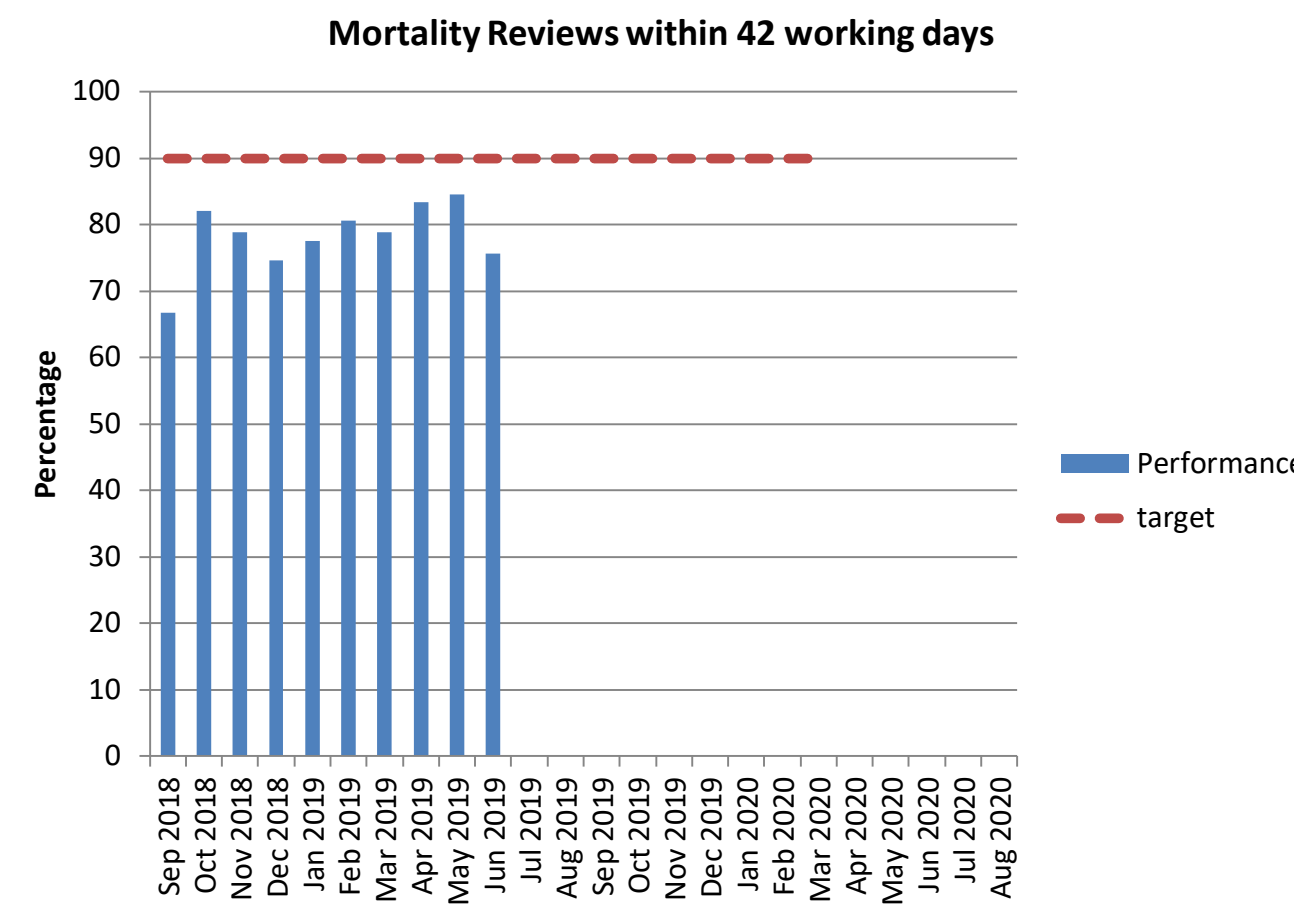
AUGUST 2019				
Infection Control	Harm Free Care	Obstetrics	Mortality & Readmissions	Stroke Care & Cardiology
CDiff - compliant • The Cdiff objective for S&WB Trust for 2019-20 has increased from 29 to 41 full year. However, the case definitions for attribution has changed too, and therefore the Trust is expected to see an increase in the number of Trust apportioned / reportable cases. • 2x C. Diff case reported during the month of August taking year to date cases to 6 vs target of 18 so the trust is continuing to perform very well	Safety thermometer - not compliant • The Trust continuous, since June 2018, to report Patient Safety Thermometer based on only 'new harm'; as at August 2019 we report performance at 93% against the 95% target, which is an unusual dip in performance following 14 months of continuous delivery.	C-section rate -compliant • The overall Caesarean Section rate for August in month is 26.9% mainly driven by an increase in non-elective C-Sections; year to date at 26.3% above the 25% target; but considered still in line with other trusts regionally • Elective rates are at 10% (historical long term avg trend of 8.8% so trending reasonably well against this) and • Non-elective rates are 19.7% in August against a long term average trend of ~17.3% hence observing an increase of non-elective C Sections. • Performance considered at Q&S & Board and to be kept in view.	Mortality - alerts against Trust HSMR & RAMI (being validated still) • The Trust overall RAMI for most recent 12-mth cumulative period is 105 (available data is as at May19) • RAMI for weekday and weekend each at 105 and 105 respectively, • SHMI measure which includes deaths 30-days after hospital discharge is at 105 for the month of Dec18 (latest available data) • HSMR Mortality indicator an outlier at 115, which is still outside statistical confidence limits. Trust Board continues to monitor routinely.	Patient Stay on Stroke Ward - compliant • In August 98.2% of patients spent more than 90% of their time on a stroke ward, which is above the 90% operational threshold in the month and at 91.5%; recent improvement focus has clearly recovered the performance to the required standard.
	MRSA - compliant • No MRSA Bacteraemia was reported in August; 1x case year to date. • Annual target 19/20 set at zero.			Falls - compliant to target rate per 1,000 Occupied Bed Days • x92 falls reported in August with no falls resulting in serious harm (defined as death or severe harm); • August Falls per 1,000 bed days rate is at 4.3 against the trust target of 5.0. • x22 falls within I-Cares Community (reducing significantly from last months), x64 in acute settings broadly similar to last month. • Falls remain subject to ongoing CNO scrutiny and routine tracking of the Safety Plan on falls reduction; falls monitoring is an integral part of 'ward dashboards' including now newly set ward specific targets to match the trust desired rate.
MRSA Screening - non compliant • Non-elective patients screening at 81% against 85% target • Elective patients screening at 78% achieving target of 85% • Both indicators are expected to deliver immediate milestone target of 85% increasing to 95% by the year end.	Pressure Ulcers • x63 total PUs have been reported in August showing a slightly higher position to last month particularly in Community setting • 28 PUs of the total are reported in the acute setting resulting in a PU /1000 bed days rate of 1.2 • x35 cases of the total PUs are reported within the community setting • CNO monitors as part of Safety Plan and ward nursing dashboards	The level of births in August is at 449; lower compared to the same period of last year (480) - we observe a general downward trend in births in the Trust and the service is reviewing this position in comparison to other providers.	Deaths in Low Risk Diagnosis Groups (RAMI) - month of May19 (latest available data) is at 98. This indicator measures in-month expected versus actual deaths so subject to larger month on month variations, but sits within control limits. • Crude in-month mortality rate for Jun19 month is 1.3% caused by lower deaths in month; • There were x109 deaths in our hospitals in the month of July, less than last year, same period, which was at 124	Scans - compliant • Pts receiving CT Scan within 24 hrs of presentation delivery in month of August are at 100% meeting the 95% standard • Pts receiving CT Scan within 1hr of presentation is at 73.5% in August meeting the target; both indicator consistently meet the imaging performance.
MSSA - compliant • MSSA Bacteraemia (expressed per 100,000 bed days) showing a rate of 4.4 year to date compared to target of 9.4	WHO Safer Surgery - non compliant • Currently the indicators are reflecting performance only in main theatres rather than across the organisation • due to this the indicators are subject to a deep dive data quality review currently ongoing led by Clinical Effectiveness team and P&I	Still birth rate (per 1000 babies) at 8.93 in August • Zero Neonatal death rate (per 1000 babies) in August	Mortality Reviews within 42 Days - not compliant, but consistently improving • Mortality review rate as at Jun19 at 81% and whilst below trust target of 90% it has shown improvement since the introduction of medical examiners in the review process; • Revised Learning from Deaths arrangements are being implemented, which will provide for routine 100% deaths review, coupled with implementation of a Medical Examiner screening process this will streamline the 1st and 2st stage mortality reviews.	Angioplasty - compliant • August Primary Angioplasty Door to balloon time (<90 minutes) was at 100% vs target of 80% . • Primary Angioplasty Call to balloon time (<150 minutes) at 90.9% against a target of 80%. • Both indicators consistently meet performance targets.
	Nil Never Event was reported in August, 3x year to date reported events • 12x serious incidents reported in August which is subject to review to ensure there are no errors in reporting • There were no reported medication errors causing serious harm in August	Admissions to Neonatal Critical Care - compliant • 2% admissions to the NCC have occurred in August against the 10% target; 1.71% on a year to date basis vs 10% target	Emergency Readmissions (in-hospital within 30 days) - increasing • Reported at 8.4% for July in month position; cumulative position at 7.9%, but we note an increasing trend, which warrants analysis and review • We can split down the total readmissions; where discharge and readmission are within the same speciality and this stands year to date at 3.5%; discharge and readmission in different specialities is at the 4.4%	RACP - compliant RACP performance for August continuous at 100% exceeding the 98% target consistently
	VTE Assessments - compliant • Compliance at 95.2% in August at Trust level, however, Medicine group in isolation reporting at 92.6%, below standard of 95%	Breastfeeding - compliant • August month count is at 83.4% achieving the 74% target; over-achieving target routinely		TIA Treatments - compliant • TIA (High Risk) Treatment <24 Hours from receipt of referral delivery as at August at 75% against the target of 70%. • TIA (Low Risk) Treatment <7 days from receipt of referral delivery at August is 90.9% against a target of 75%. • Both indicators are consistently delivering the required standard and it is unusual for these indicators not to hit the required standards
Cancer Care	Patient Experience - MSA & Complaints	Patient Experience - Cancelled Operations	Emergency Care	Referral To Treatment
Cancer standards - compliant • Reporting always one month in arrears hence IQPR latest reported period is July 2019. • In July all cancer standards have been met including 62 days at 85.1% vs 85% target • Un-validated position for August is tight, but anticipated to meet 85% leaving September delivery at some risk and hence the full Q2 position, but this is being managed with appropriate focus.	MSA - not compliant to zero target, but in line with trajectory • The standard is zero breaches in any given month • In August we are reporting 7 validated breaches	Cancelled Ops - compliant • 32 sitrep declared late (on day) cancellations were reported in August; still significantly higher than local target of 20 per month, but achieving the national standard of 0.8% cancellations on the day against elective admissions for the same period. • 17 (more than 50%) were avoidable indicating a good scope for further improvement	EC 4hr standard - not compliant • The Trust's performance against the 4-hour EC wait target in August was at 81.6% % against the internal improvement plan 85%for the month. • 3,252 breaches were incurred in August (3,542 July), against the August total patient attendances of 17,657 (19,047, July 18,091 June) hence breach and attendances moving in the same direction	RTT - compliant • Trust level delivery at 92.04% for August compliant with the 92% incomplete standard • 4x specialities remain below the 92% standard in August (Cardiology, Gynae, Oral and Ophthalmology) • The patient wait list is at 38,714 in August with 3,082 patients being on the backlog (>18weeks waiting time) showing an increased waiting list for a period of time indicating potential, elongated patient treatment / management time as we do not see referrals contribution to the same extent in waiting list growth.
Patient Waiting times • x10.0 patients waited longer than the 62 days at the end of July • 2.5 patients waited more than 104 days at the end of July for treatment • The longest individual patient waiting time for treatment, as at the end of July, was 196 days • In April the Trust has introduced shadow monitoring of the new 28 Day Cancer standard (faster 28 day diagnosis); cancer services confirming that there is much more work to be done to ensure the recording of 'patient told' information is in place. The new standard takes effect in April 2020 and IQPR will be introducing the shadow reporting soon.	Friends & Family - not compliant • IP response rates in August at 21% not achieving revised target of 25%. • The IP 'likely to recommend' rate falling to 90% against target of 95% • Outpatient / maternity response and score rates are scheduled for improvement. • Revised national FFT guidance have been issued and corporate nursing team are reviewing the impact and revision to reporting in the trust.	28 Day & Urgent Breaches - compliant • There were no breaches of the 28 days guarantee • There were no urgent cancellations	WMA Handovers • WMA fineable 30 - 60 minutes delayed handovers at 162 in August. • only x9 cases were > 60 minutes delayed handovers; • Handovers >60mins (against all conveyances) calculates at 0.20% (9 cases) vs target of 0.02% against total WMA conveyances of 4,486	52 Week Breaches - not compliant • 1x breach in Cardiology
Neutropenic sepsis - not compliant • The Trust operates a 100% standard against this indicator. Only clinically driven breaches are tolerated. • In August, 41/45 patients (90.3%) of patients have been treated within the hour, 4 patients (8.9%) of patients failed to receive treatment within prescribed period (within 1hr). There are process improvements identified with those - longest wait 'door to needle' at 2hrs25mins for one patient, the other 3 patients have been delayed between 6-57mins. • Performance reporting continuous to monitor daily, weekly and monthly tabled at the OMC; all breaches are routinely reviewed in dedicated, quarterly meetings.	Complaints • The number of complaints received for the month of August is 51 with 2.0 formal complaints per 1000 bed days demonstrating a reduced level of complaints in recent months • 100% of complaints have been acknowledged within agreed timescales • 100% in-month responses have been responded within agreed target time;		Fractured NOF - compliant • Fractured Neck of Femur Best Practice Tariff (surgery within 36 hours) is reporting at 88% in August compared to the 85% target, showing recovery to standard for the first time in the last 12 months.	Acute diagnostic waits - non compliant • DM01 performance at 97.7% in August with main breaches against CT Cardiac scans.
Inter-Provider Transfers - not compliant • 74% of tertiary referrals were met within 38 days requirement in July.			Bed moves after 10pm and before 6am - not compliant • There were 671 system reported bed moves in August in the period from 10pm-6am. Improvement plans are in place. The data count is impacted by data quality issues, which are not allowing patient moves to be recorded on a real time basis. This is being looked at and Unity implementation is anticipated to remove those data quality issues fully.	
Data Completeness	Workforce	Local Quality Requirements 19/20	Indicator Performance : Persistent Red Focus	
• 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 Mailing Health will be validated via the Data Quality Department. • Ethnicity coding is performing for Inpatients at 91% against 90% target, but under-delivering for Outpatients. This is attributed to the capture of data in the Kiosks and revision to capture fields is being considered.	PDR & Medical Appraisals - not available at this stage • PDR scores were due at the end of June organisation wide, but early indicators are that the target rate of 95% will not have been met as the scores have not been entered promptly as per the June deadline. • Medical Appraisals are reporting at 94.9% vs 90% standard.	Local Quality Requirements (LQRs) 2019/20 are monitored by CCG and the Trust is fineable for any breaches in accordance to contract. • LQRs re reported via the SQPR (Service Quality Performance Report; exceptions are summarised in the IQPR on the relevant tab (page 15). • As at August we continue to see some continuing under-performance against a few indicators: • Morning discharges at 17% vs target of 35%; • Community falls assessments reporting at 97% in August, close to, but not meeting the standard of 100%.	• The Trust is progressing 18 indicators on the 'persistent red focus'; details can be found on the persistent red tab • Oversight and assurance is provided through OMC and PMC routinely	
Open Referrals • Open Referrals, referring to patients in the system without a future waiting list activity, stand at c53,000 as at August showing a decrease since last month again being the result of a focussed effort to validate and remove open referrals from the system using a combination of actions driven by clinical groups and auto-closures;	Nursing Turnover & Vacancy rate (Qualified Nursing only) - not compliant • The nursing turnover rate is at 11.7% vs the 10.7% internal target. • The nursing vacancy rate is at a high 15.8% in August below the trust target of 11%		• Progress is good for most indicators in July, however, we have missed some July trajectories. • Some indicators are missing stepped trajectories until full delivery and this does prevent us from monitoring progress, the August PMC has been asked to confirm those with the Executive leads.	
	Mandatory Training (Staff at 100% Compliance) - not compliant • At the end of August dropped again slightly to last month at 60% measuring staff whose MT is at 100% ; internal target to progress performance to 85% in December and 95% by end of March 2020 • Health & Safety related training dropping below standard of 95% and reporting in August at 85.3%			

Persistent Red Performance

Exec Lead	18	Indicator	Standard Expected	Delivery of Plan	Revised Recovery Expected	Aug Actual Perf	Tracking Planned Trajectory
		<i>Note: Some are grouped (two or more indicators)</i>					
Dr DC	1	Mortality Reviews within 42days	90%	✓	Dec-19	76%	X
RG	1	Mandatory Training (staff % where MT 100% complete)	85%/95%	✓	Dec 19 / Mar 20	60.4%	✓
	1	Sickness Absence Rate (wards only to 3%, hold the rest)	3%	✓	Mar-20	5.8%	✓
	1	Sickness Absence long term cases (Open cases only)	<140	✓	Apr-20	159	✓
RB	1	ED	87%	✓	Dec-19	81.6%	X
	1	Treatment Functions below 92% RTT	0	✓	Aug-Nov19	4	X
	1	Patients Waiting >52 weeks	0	✓	Oct-19	1	✓
	1	Open Referrals (relevant for improvement)	30,000	✓	Sep-19	36,000	✓
	1	Neck of Femur - to surgery within 36 hours	85%	✓	Jul-19	88%	✓
	1	Cancellations (20pm)	20	✓	Aug-19	32	✓
	1	Cancellations as %age of elective admissions	0.80%	✓	Aug-19	0.8%	✓
	1	Patient Bed Moves	220	✓	Nov 19 subject to DQ resolution	671	Recast when DQ resolved
	1	Stroke Ward Admissions (Within 4 hrs)	80%	✓	Aug-19	77.1%	X
	1	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	5%	✓	To be agreed at next OMC	5.6%	No Traj
PG	1	Neutropenic Sepsis	100%	✓	Jul-19	91.1%	X
	1	Nursing Turnover (Qualified Only)	10.70%	To be agreed by 1 October	TBC	11.7%	No Traj
	1	MRSA Screening (Elective & Non-Elective)	85% / 95%	TBC	TBC	78% / 81%	No Traj
	1	FFT Response Target (IP, OP, Maternity and A&E)	25%	✓	Dec-19	23%	No Traj

Notes:

- TBC means that we are yet to work up detailed plans & trajectories
- n/a in table = data not reportable at this stage
- the graphs are updated for latest available information, however where incomplete this is due to :
 - absence of 'improvement lines' means we are lacking stepped trajectory plans
 - mortality is two months behind due to reviews being 42 days behind the current month;
 - stroke is behind as it updates based on data signed off on WD21 each month, which is post clinical validations

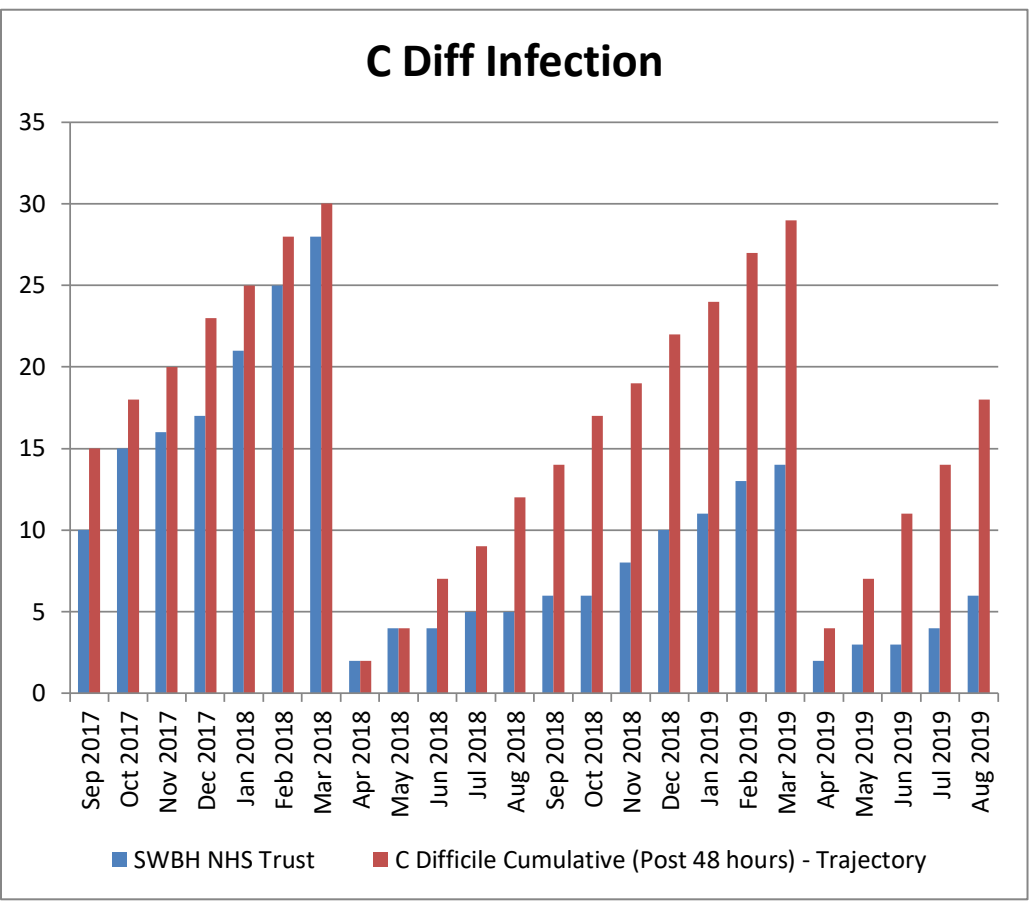
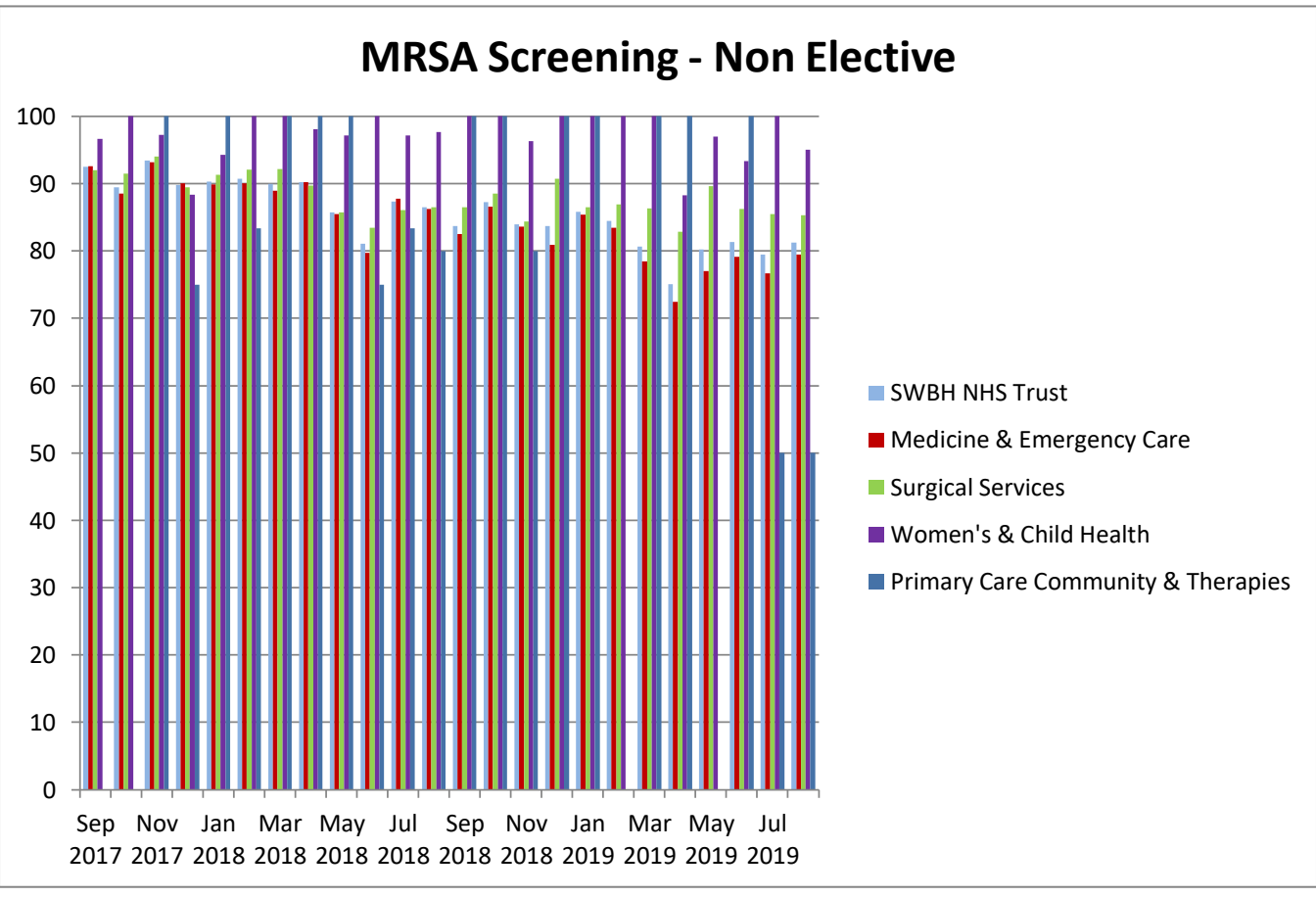
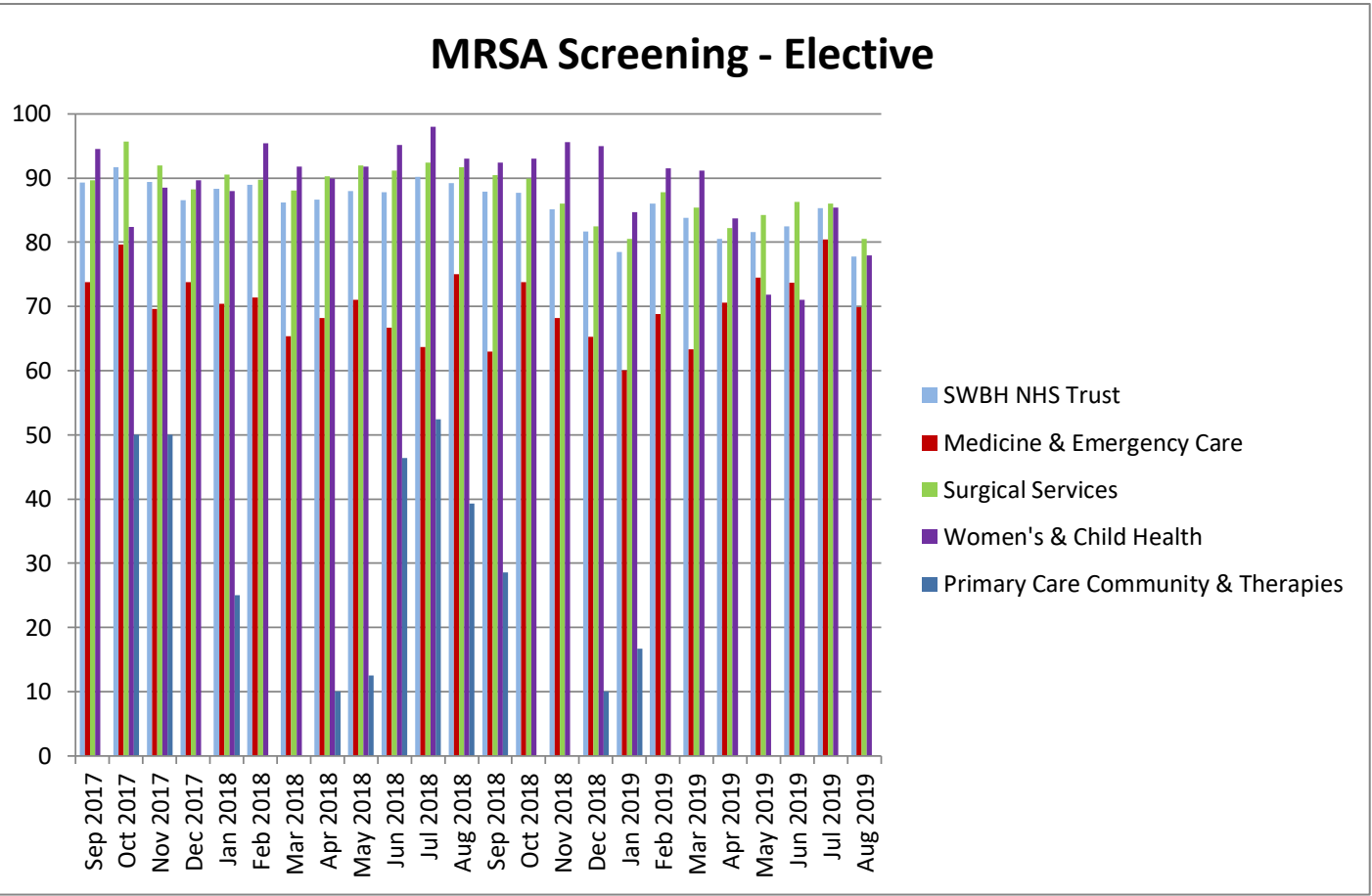


Patient Safety - Infection Control

Data Quality	Reviewed Date	PAF	Indicator	Measure	Trajectory	
					Year	Month
			C. Difficile	<= No	41	3.4
			MRSA Bacteraemia	<= No	0	0
			MSSA Bacteraemia (rate per 100,000 bed days)	<= Rate2	9.42	9.42
			E Coli Bacteraemia (rate per 100,000 bed days)	<= Rate2	94.9	94.9
			MRSA Screening - Elective	=> %	85	85
			MRSA Screening - Non Elective	=> %	85	85

Previous Months Trend (From Mar 2018)															
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J

Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Aug 2019	1	1	0			0		2	6	
Aug 2019	0	0	0			0		0	1	
Aug 2019								5.5	4.4	
Aug 2019								11.0	14.4	
Aug 2019	70	81	78			-		77.8	81.5	
Aug 2019	79	85	95			50		81.3	79.5	

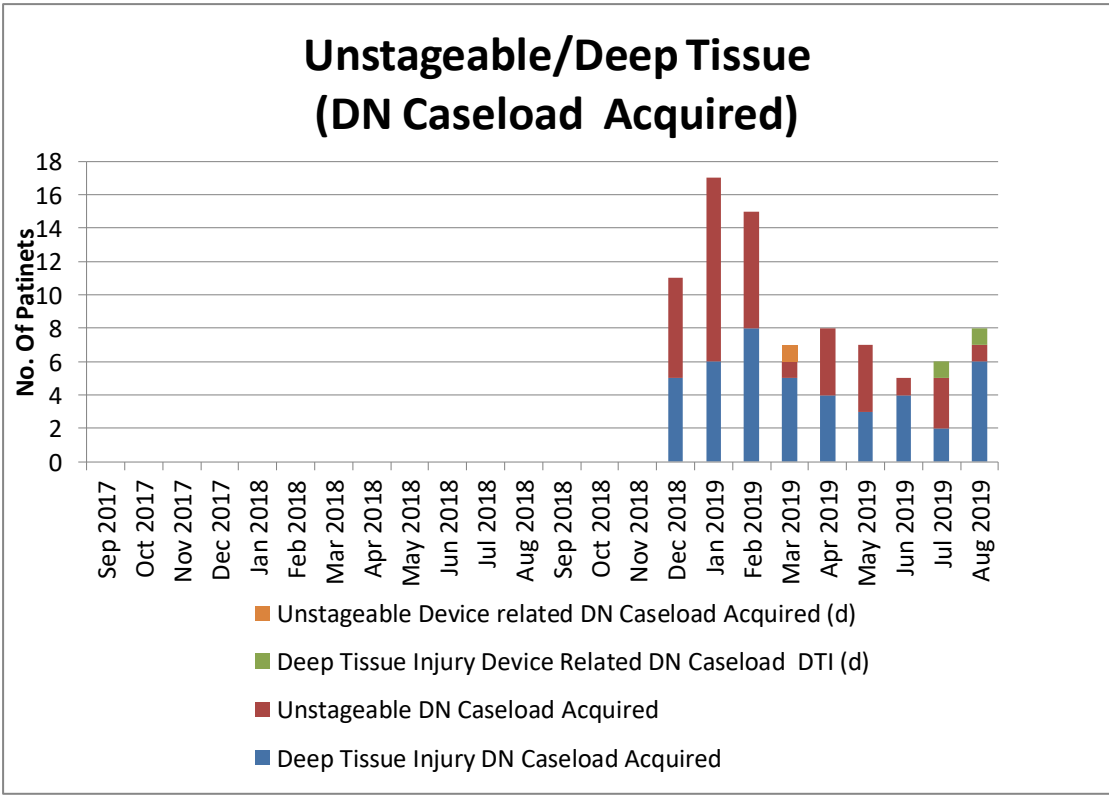
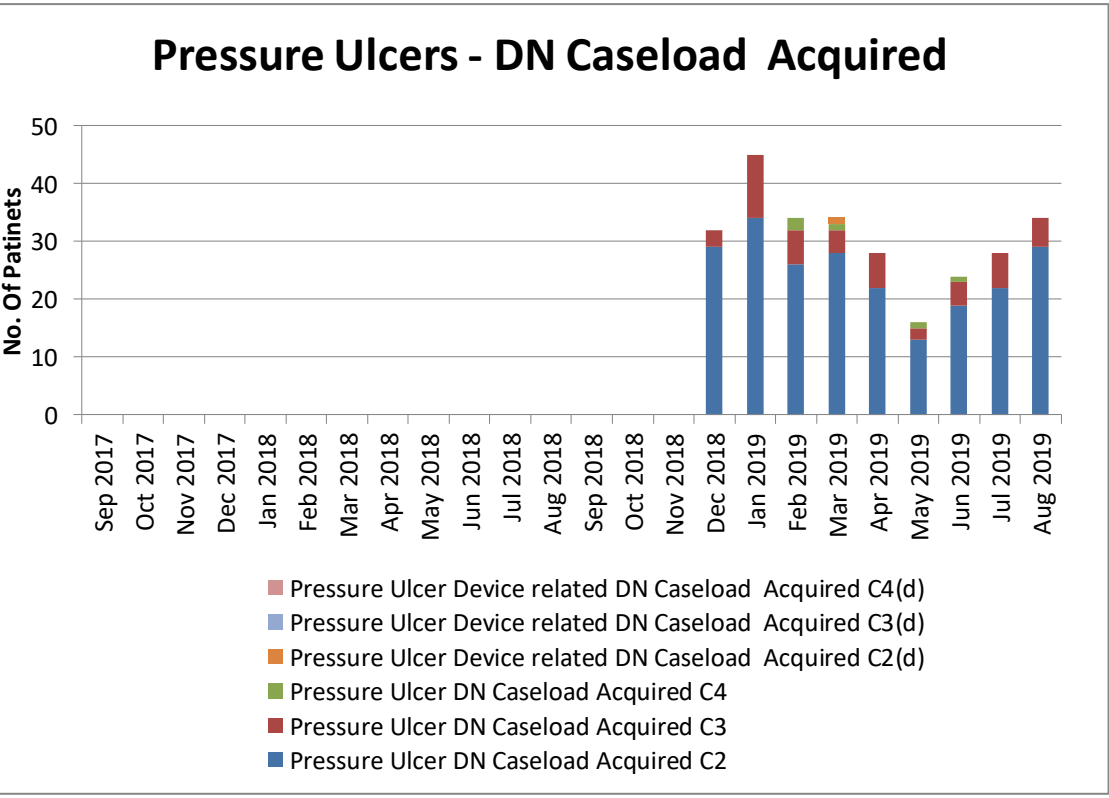
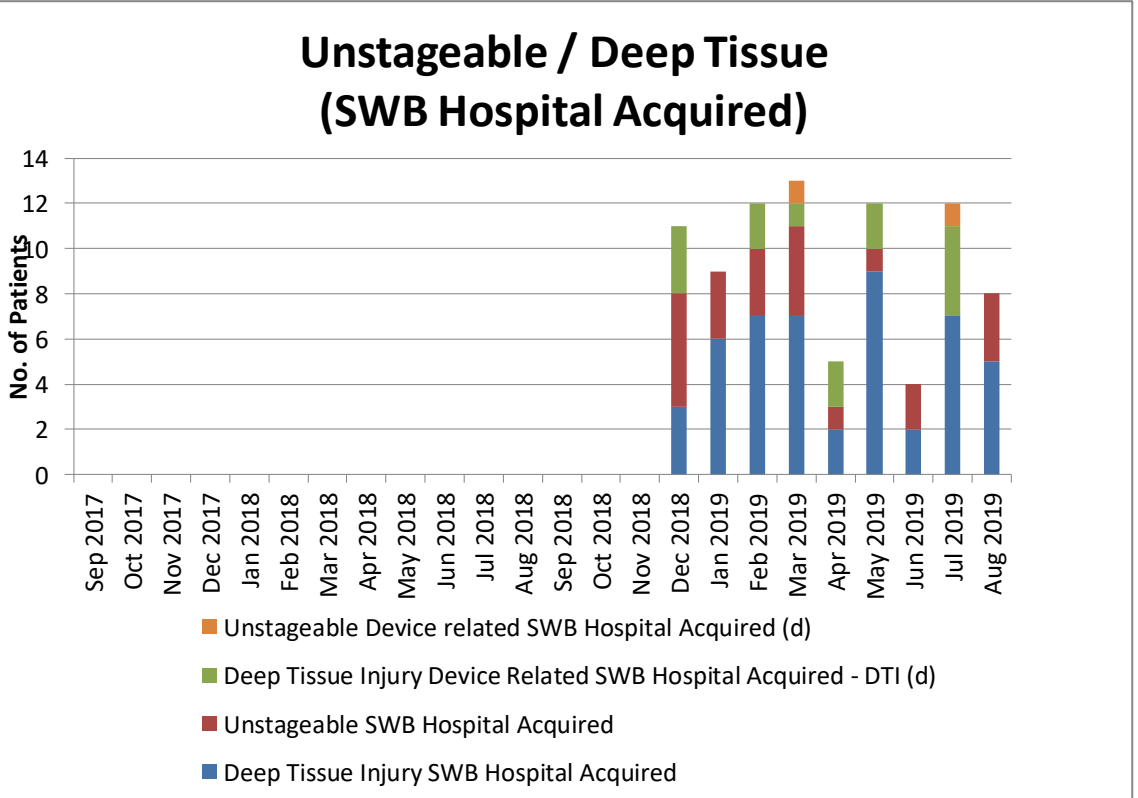
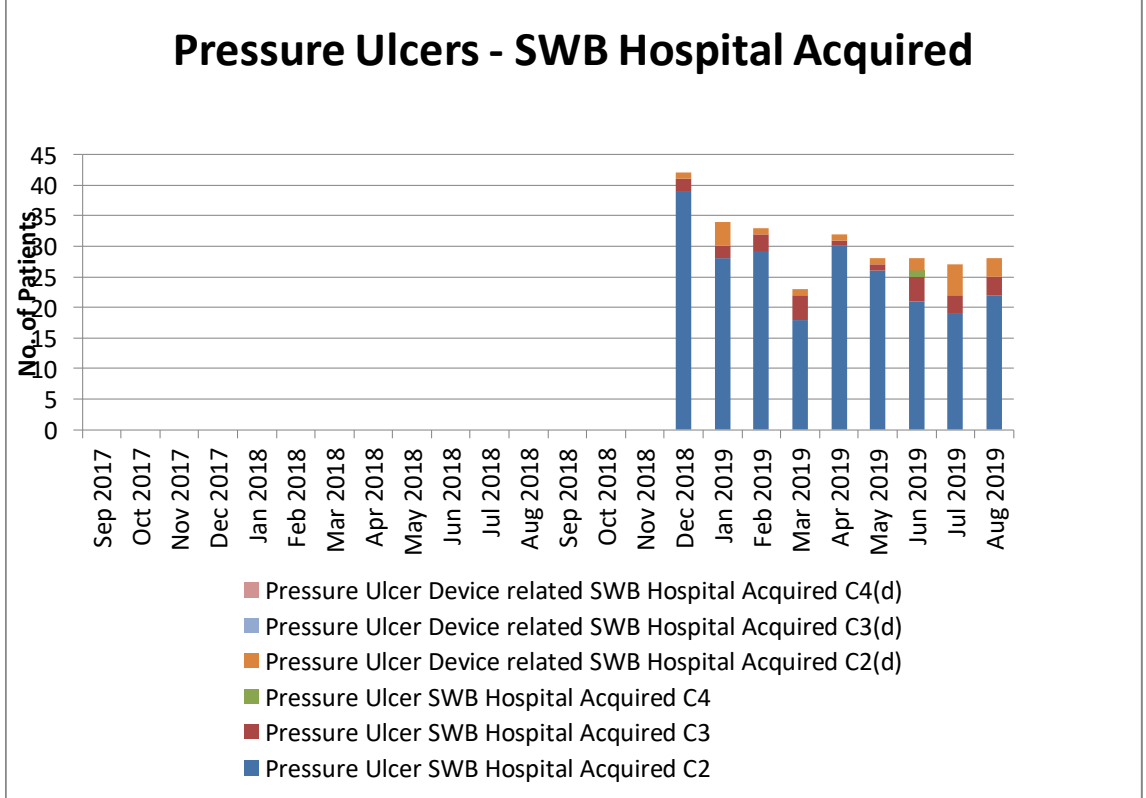
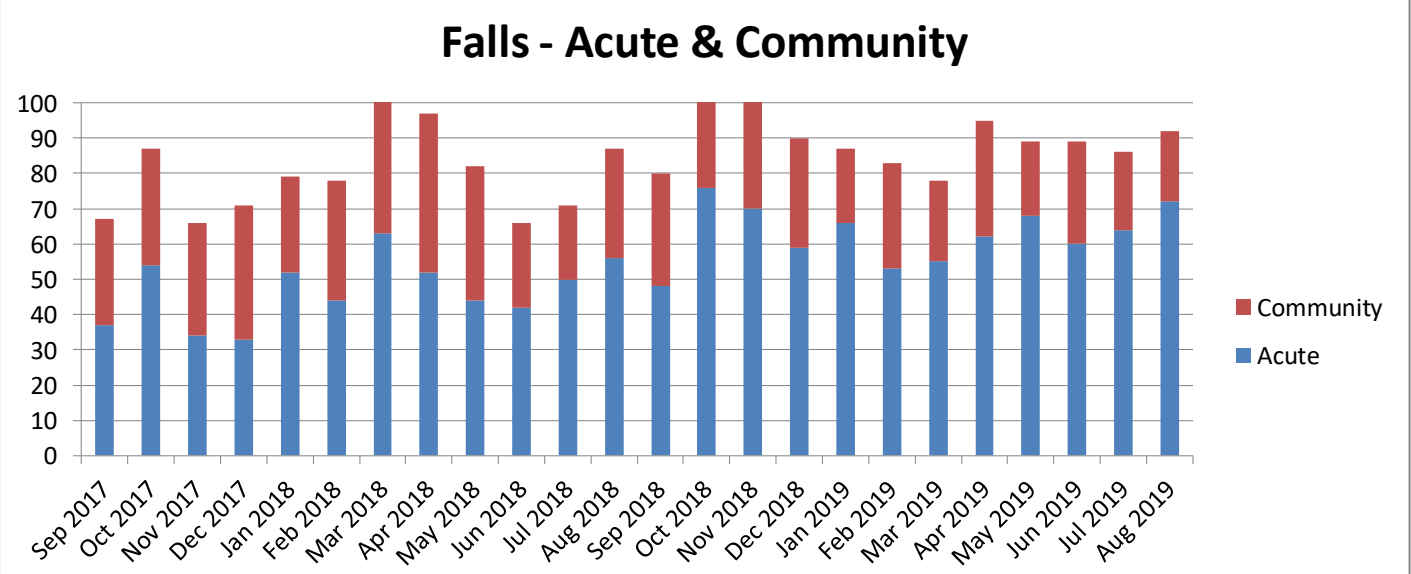
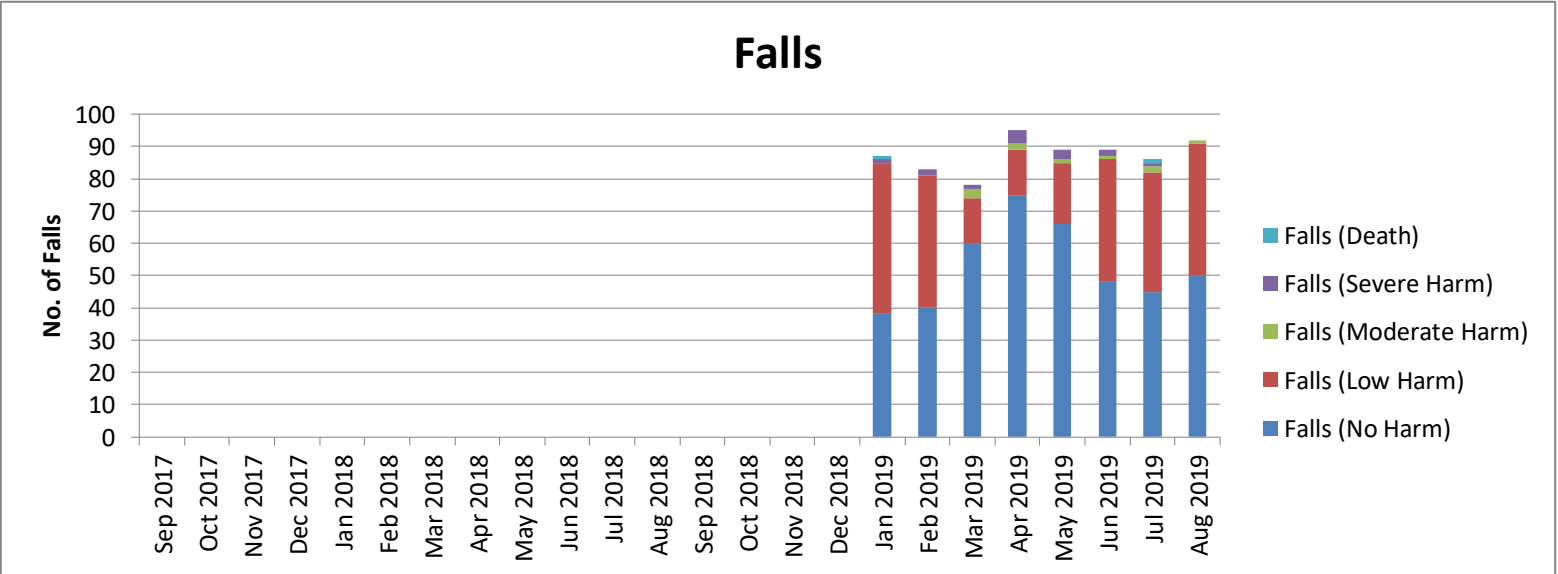
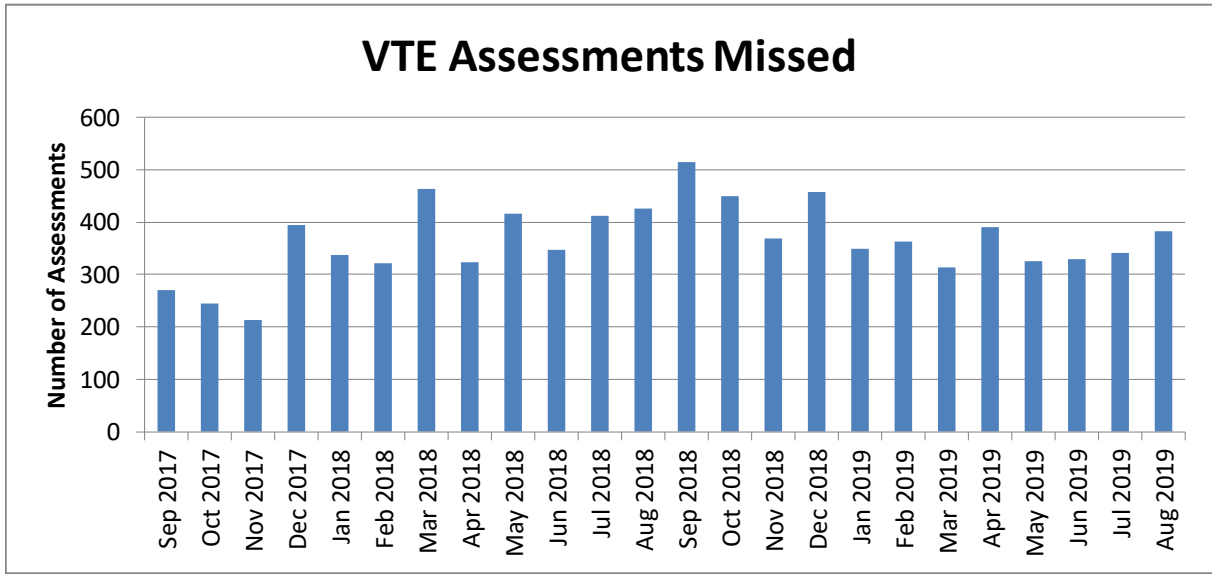


Patient Safety - Harm Free Care
















Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95
			Patient Safety Thermometer - Catheters & UTIs	%		
			Number of DOLS raised	No		
			Number of DOLS which are 7 day urgent	No		
			Number of delays with LA in assessing for standard DOLS application	No		
			Number DOLs rolled over from previous month	No		
			Number patients discharged prior to LA assessment targets	No		
			Number of DOLS applications the LA disagreed with	No		
			Number patients cognitively improved regained capacity did not require LA assessment	No		
	Apr-19		Falls	<= No	804	67
	Apr-19		Falls - Death or Severe Harm	<= No	0	0
			Falls Per 1000 Occupied Bed Days	Rate1		
	Apr-19		Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0
	Apr-19		Pressure Ulcers per 1000 Occupied Bed Days	Rate1		
	Apr-19		Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0
			Pressure Ulcer Present on Admission to SWBH	<= No	0	0
			Venous Thromboembolism (VTE) Assessments	=> %	95	95
	Apr-19		WHO Safer Surgery - Audit - 3 sections (% pts where all sections complete)	=> %	100	100
	Apr-19		WHO Safer Surgery - brief (% lists where complete)	=> %	100	100
	Apr-19		WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100
			Never Events	<= No	0	0
			Medication Errors causing serious harm	<= No	0	0
			Serious Incidents	<= No	0	0
			Open Central Alert System (CAS) Alerts	<= No		
			Open Central Alert System (CAS) Alerts beyond deadline date	No	0	0

Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
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1.0	5.0	4.0	1.0	5.0	3.0	3.0	7.0	4.0	3.0	3.0	2.0	7.0	0.0	2.0	4.0	1.0	3.0
27	34	59	27	43	40	49	51	40	29	56	25	39	32	30	34	26	36
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112	97	82	66	71	87	80	101	110	90	87	83	78	95	89	89	86	92
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6	8	7	9	11	4	10	13	26	42	34	33	23	37	28	28	27	28
-	-	-	0.457	0.389	0.233	0.53	0.578	1.167	2.368	1.521	1.585	1.056	1.715	1.369	1.338	1.193	1.271
4	3	1	1	1	1	1	7	37	32	45	34	34	36	16	24	28	35
-	-	-	-	-	-	-	-	-	-	129	99	96	198	130	141	125	87
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0	0	0	0	0	0	0	2	0	1	0	0	0	0	1	1	1	0
0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0
4	5	9	4	6	3	1	9	4	6	1	7	6	3	3	12	32	12
5	8	9	14	12	15	14	14	15	16	18	20	19	15	15	4	9	8
2	2	2	3	2	4	4	4	5	5	5	5	8	6	7	3	6	5

Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Aug 2019								93.7	96.7	
Aug 2019								0.27	0.17	
Aug 2019	14	9	0	-	-	13		36	158	
Aug 2019	14	9	0	-	-	13		36	158	
Aug 2019	4	1	0	-	-	6		11	42	
Aug 2019	2	0	0	-	-	2		4	21	
Aug 2019	8	7	0	-	-	8		23	92	
Aug 2019	2	0	0	-	-	0		2	5	
Aug 2019	0	0	0	-	-	0		0	11	
Aug 2019	58	9	1	-	-	24	-	92	451	
Aug 2019	0	0	0		0	0	0	0	11	
Aug 2019								4.3	4.14	
Aug 2019	12	8	-			8		28	148	
Aug 2019								1.271	1.38	
Aug 2019						34		35	139	
Aug 2019								87	681	
Aug 2019	92.6	97	95.9					95.2	95.5	
Aug 2019	100.0	100.0	100.0		-			100.0	99.8	
Aug 2019	100	100	-		-			99.8	99.9	
Aug 2019	100	99	-		-			99.6	99.7	
Aug 2019	0	0	0	0	0	0		0	3	
Aug 2019	0	0	0	-	0	0		0	0	
Aug 2019	5	0	0	0	0	7	0	12	62	
Aug 2019								8	51	
Aug 2019								5	27	













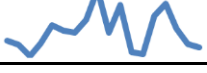
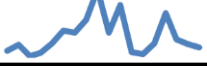



Patient Safety - Obstetrics

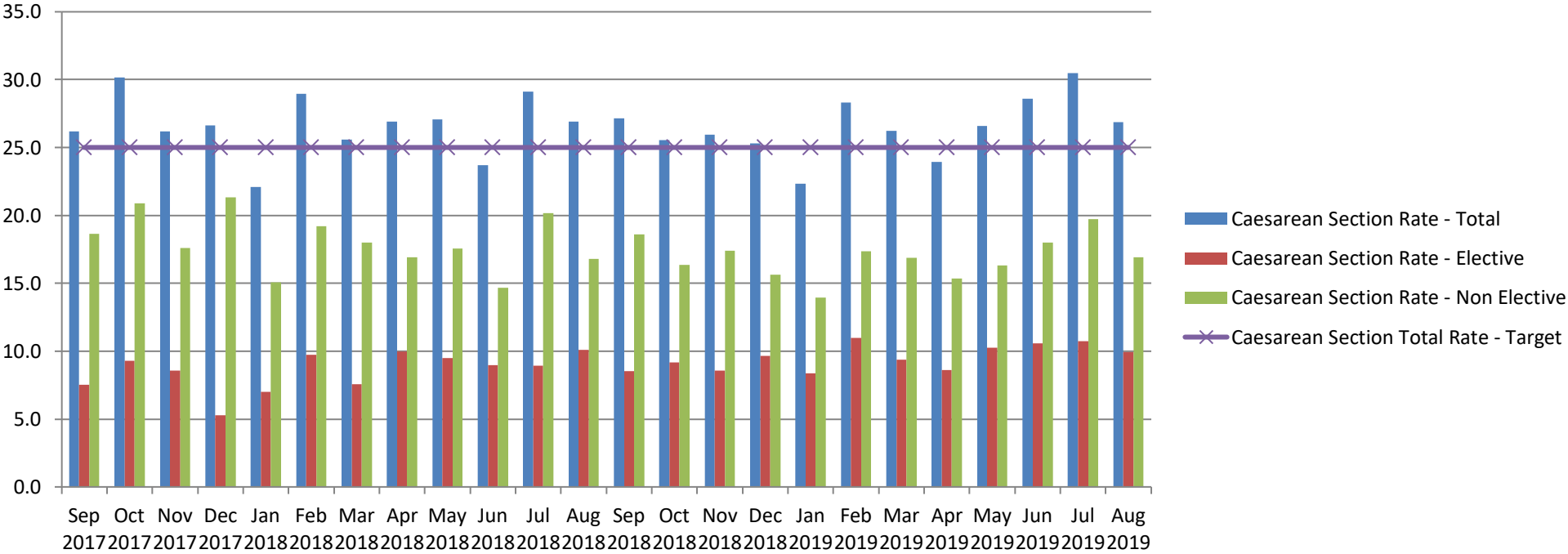
Data Quality	Last review	PAF	Indicator	Measure	Trajectory 2016-2017	
					Year	Month
			Caesarean Section Rate - Total	<= %	25.0	25.0
		●	Caesarean Section Rate - Elective	<= %		
		●	Caesarean Section Rate - Non Elective	<= %		
		● d	Maternal Deaths	<= No	0	0
			Post Partum Haemorrhage (>2000ml)	<= No	48	4
			Admissions to Neonatal Intensive Care (Level 3)	<= %	10.0	10.0
			Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0
	Apr-19		Stillbirth Rate (Corrected) (per 1000 babies)	Rate1		
	Apr-19		Neonatal Death Rate (Corrected) (per 1000 babies)	Rate1		
			Early Booking Assessment (<12 + 6 weeks) - SWBH Specific	=> %	85.0	85.0
			Early Booking Assessment (<12 + 6 weeks) - National Definition	=> %	90.0	90.0
			Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0
	Apr-19	●	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	<= %		
	Apr-19	●	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	<= %		
	Apr-19	●	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	<= %		

Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A

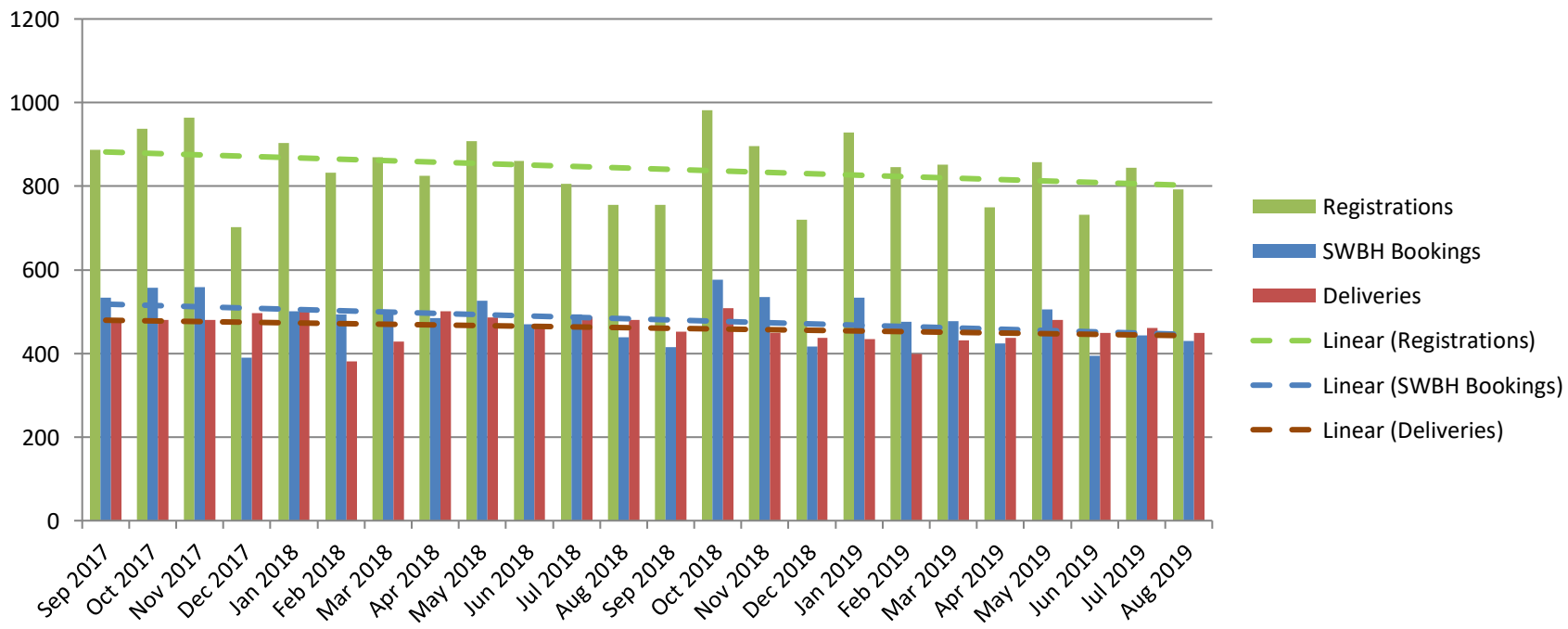
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
8	10	10	9	9	10	9	9	9	10	8	11	9	9	10	11	11	10
18	17	18	15	20	17	19	16	17	16	14	17	17	15	16	18	20	17
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
4.66	5.98	6.16	4.41	2.05	4.17	0.00	7.86	2.23	4.57	2.30	2.51	4.64	0.00	6.25	4.45	6.51	8.93
0.00	1.99	0.00	4.41	4.10	2.08	0.00	0.00	2.23	0.00	0.00	2.51	0.00	0.00	2.08	0.00	0.00	0.00
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
1.0	0.8	0.5	0.9	1.5	1.3	1.2	1.7	2.6	1.2	2.1	0.6	0.5	1.8	2.2	1.4	0.9	0.8
0.7	0.8	0.5	0.6	0.9	1.3	1.2	1.7	2.6	1.2	2.1	0.6	0.5	0.9	1.9	1.0	0.9	0.8
0.0	0.3	0.2	0.0	0.6	0.5	0.3	0.8	1.5	0.4	1.9	0.0	0.0	0.0	0.6	0.7	0.6	0.0

Data Period	Month	Year To Date	Trend
Aug 2019	26.9	27.3	
Aug 2019	9.9	10.0	
Aug 2019	16.9	17.3	
Aug 2019	0	0	
Aug 2019	6	16	
Aug 2019	2.00	1.71	
Aug 2019	8.93	5.71	
Aug 2019	8.93	5.27	
Aug 2019	0.00	0.44	
Aug 2019	92.9	92.1	
Aug 2019	135.1	132.6	
Aug 2019	83.41	78.57	
Aug 2019	0.76	1.38	
Aug 2019	0.76	1.11	
Aug 2019	0.00	0.41	


Caesarean Section Rate (%)


















Registrations & Deliveries



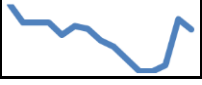
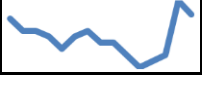
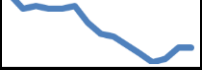

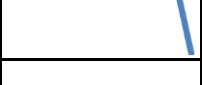









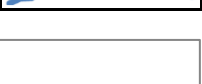
Clinical Effectiveness - Mortality & Readmissions

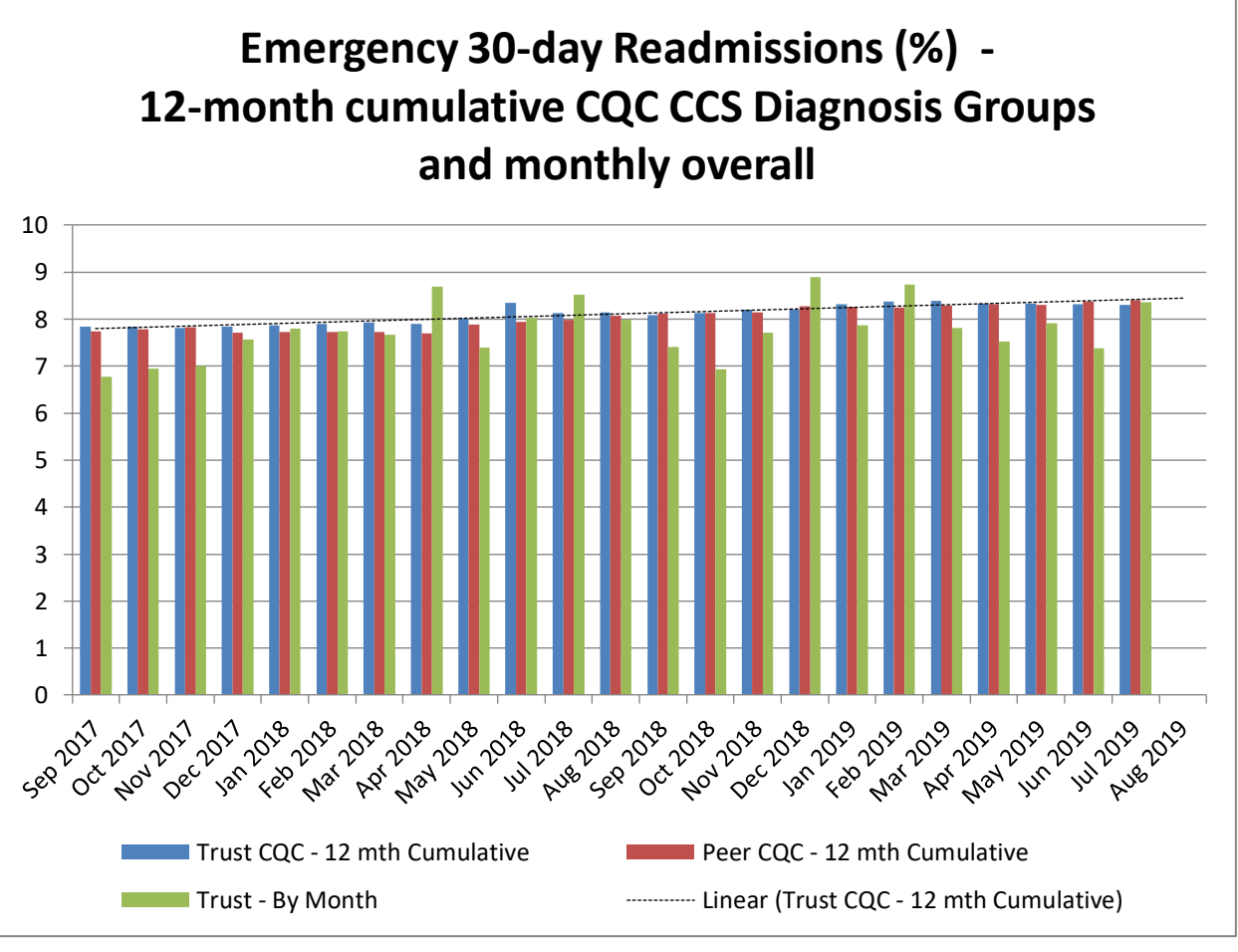
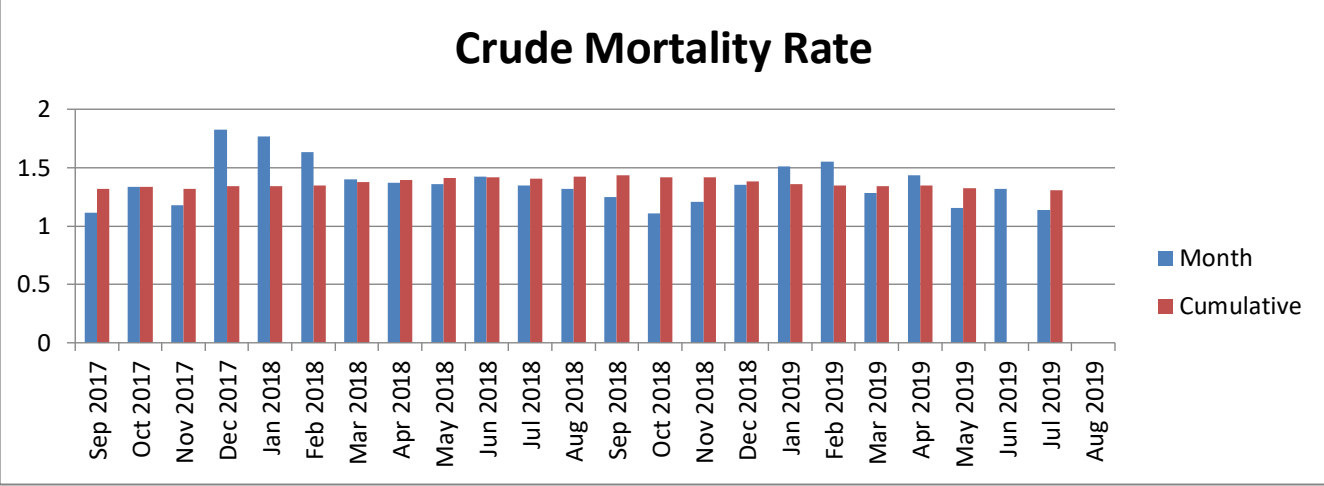
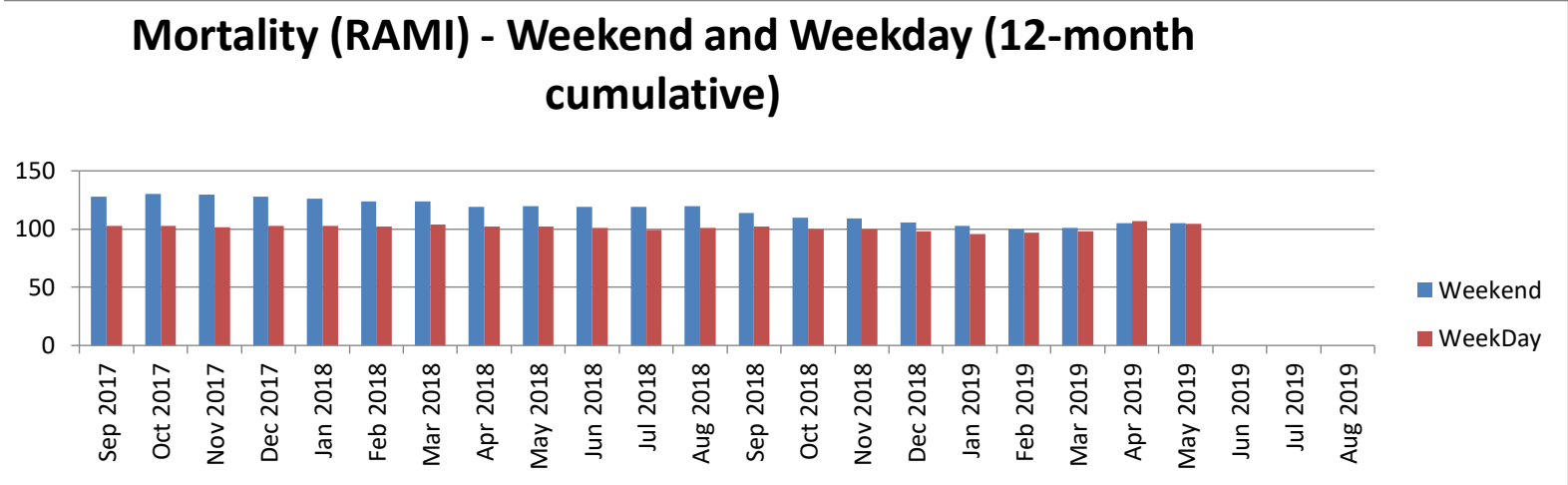
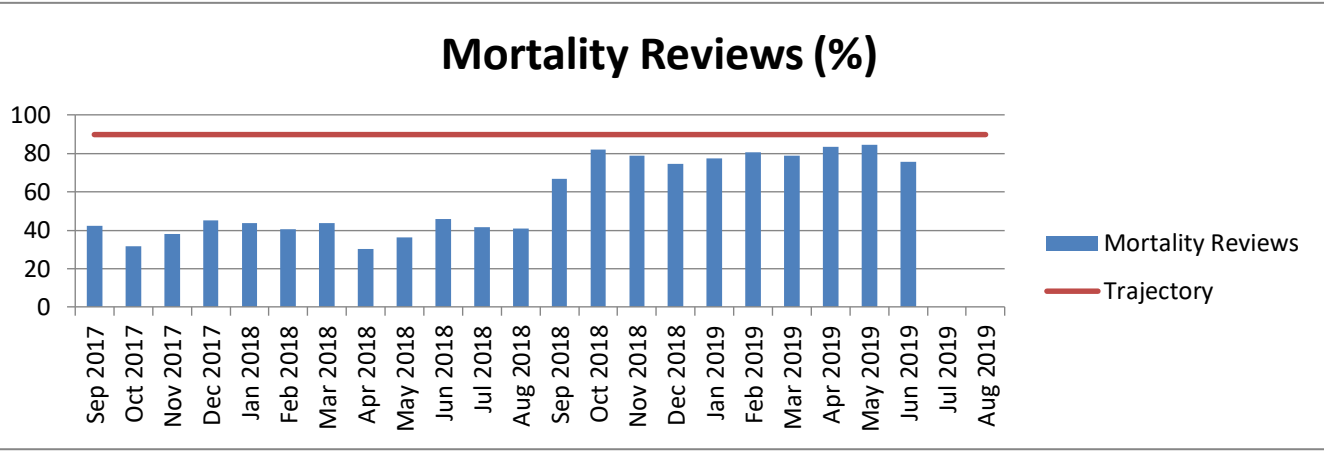
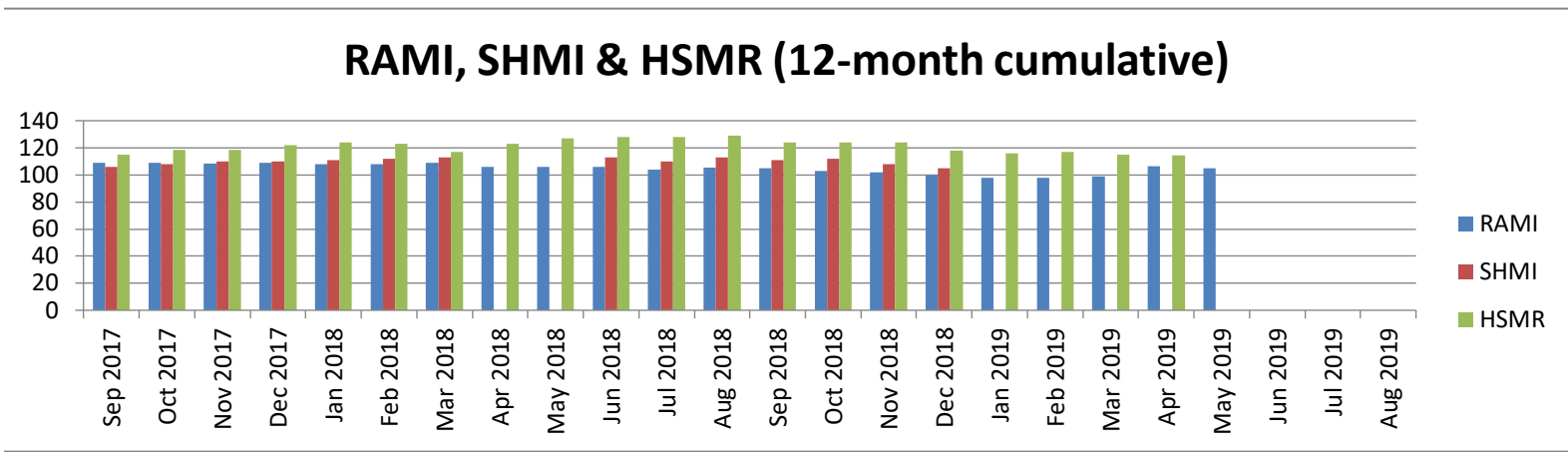
Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI
			Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI
			Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI
			Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	SHMI	Below Upper CI	Below Upper CI
			Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	HSMR		
			Deaths in Low Risk Diagnosis Groups (RAMI) - month	RAMI	Below Upper CI	Below Upper CI
			Mortality Reviews within 42 working days	=> %	90	90
			Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%		
			Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%		
			Deaths in the Trust	No		
	Apr-19		Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%		
	Apr-19		Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%		
			Emergency Readmissions (within 30 days) - CQC CCS Diagnosis Groups (12-month cumulative)	%		
	Apr-19		Emergency Readmissions (within 30 days) - Same Specialty (exc. Deaths and Stillbirths) month	%		
	Apr-19		Emergency Readmissions (within 30 days) - Same Specialty (exc. Deaths and Stillbirths) 12-month cumulative	%		

Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
109	106	106	106	104	105	105	103	102	100	98	98	99	107	105	-	-	-
104	102	102	101	99	101	102	100	100	98	96	97	98	107	105	-	-	-
124	119	120	119	119	120	114	110	109	106	103	100	101	105	105	-	-	-
113	-	-	113	110	113	111	112	108	105	-	-	-	-	-	-	-	-
117	123	127	128	128	129	124	124	124	118	116	117	115	115	-	-	-	-
129	76	100	71	84	71	61	98	105	86	108	88	85	98	-	-	-	-
															-	-	-
1.4	1.4	1.4	1.4	1.3	1.3	1.2	1.1	1.2	1.4	1.5	1.6	1.3	1.4	1.2	1.3	1.1	-
1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.4	1.3	1.3	1.3	1.3	-	1.3	-
143	120	123	127	124	116	106	107	114	122	149	137	121	134	112	117	109	-
7.7	8.7	7.4	8.0	8.5	8.0	7.4	6.9	7.7	8.9	7.9	8.7	7.8	7.5	7.9	7.4	8.4	-
7.3	7.4	7.5	7.5	7.6	7.7	7.7	7.7	7.8	7.9	7.9	8.0	8.0	7.9	7.9	7.9	7.9	-
7.9	7.9	8.0	8.4	8.1	8.1	8.1	8.1	8.2	8.2	8.3	8.4	8.4	8.3	8.3	8.3	8.3	-
3.3	4.0	3.6	3.8	3.7	3.8	3.3	2.7	3.6	4.1	3.6	3.8	3.5	3.0	3.0	2.6	3.5	-
3.3	3.4	3.4	3.4	3.4	3.5	3.5	3.5	3.5	3.6	3.6	3.6	3.6	3.5	3.5	3.4	3.4	-




Data Period
May 2019
May 2019
May 2019
Dec 2018
Apr 2019
Apr 2019
Jun 2019
Jul 2019
Jul 2019
Jul 2019
Jul 2019
Jul 2019
Jul 2019
Jul 2019
Jul 2019





















































































































































































Group						
M	SS	W	P	I	PCCT	CO










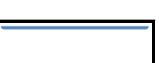
Month	Year To Date	Trend
	211	
	212	
	210	
	772	
	114.5	
98		
76	81	
1.14		
	1.33	
109	472	
8.36		
	7.87	
8.30		
3.48		
3.37		

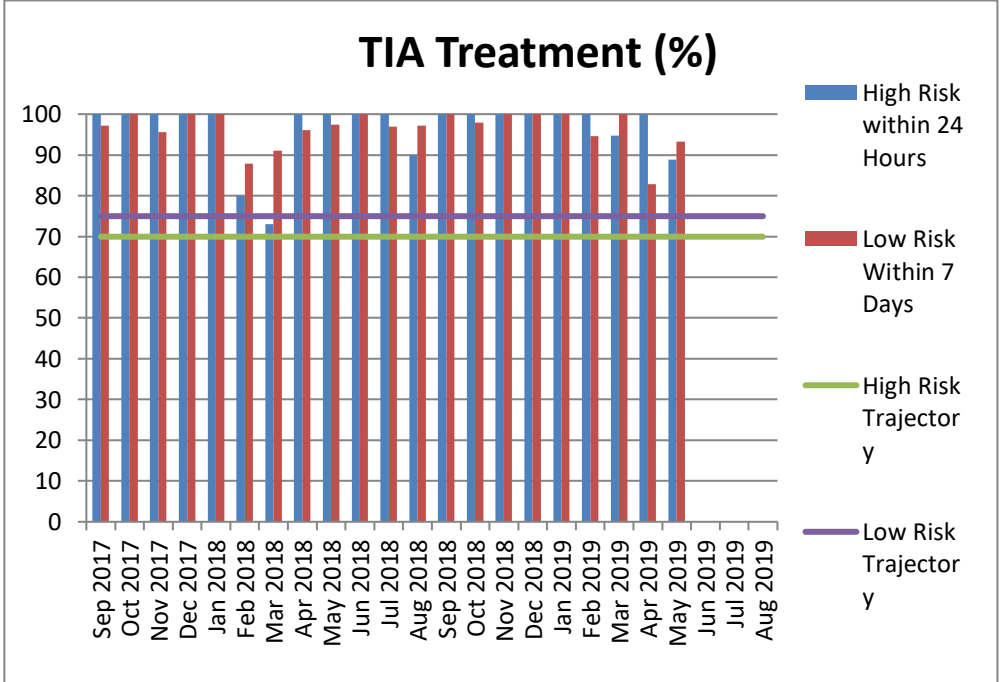
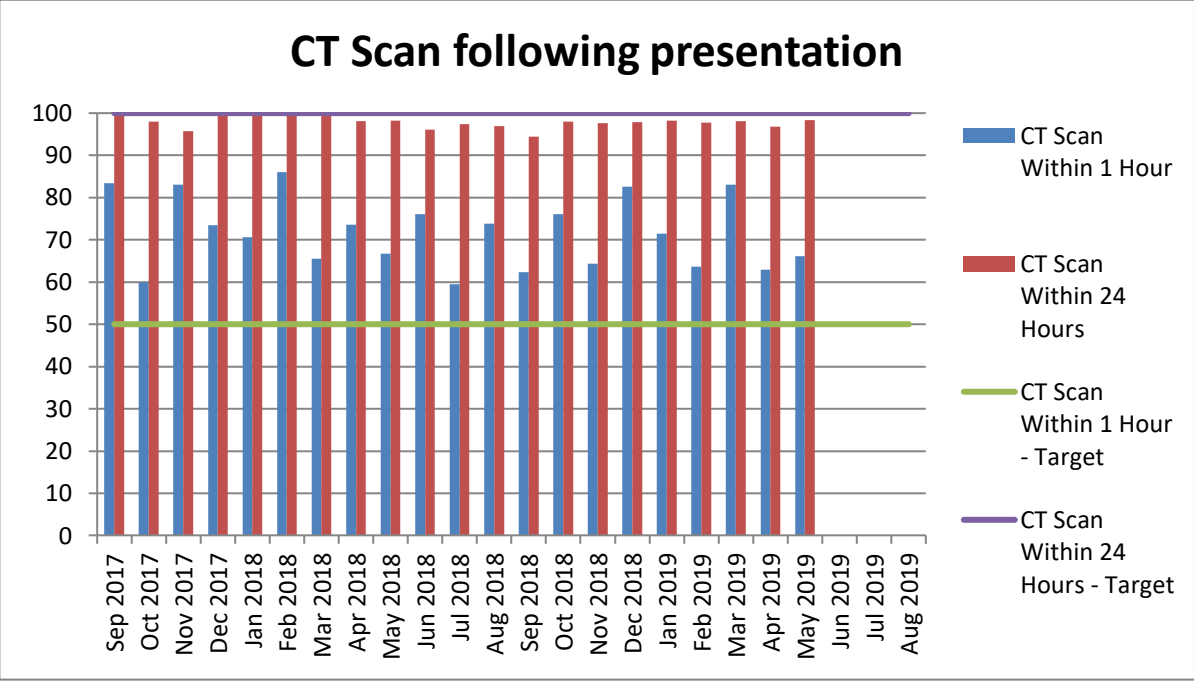
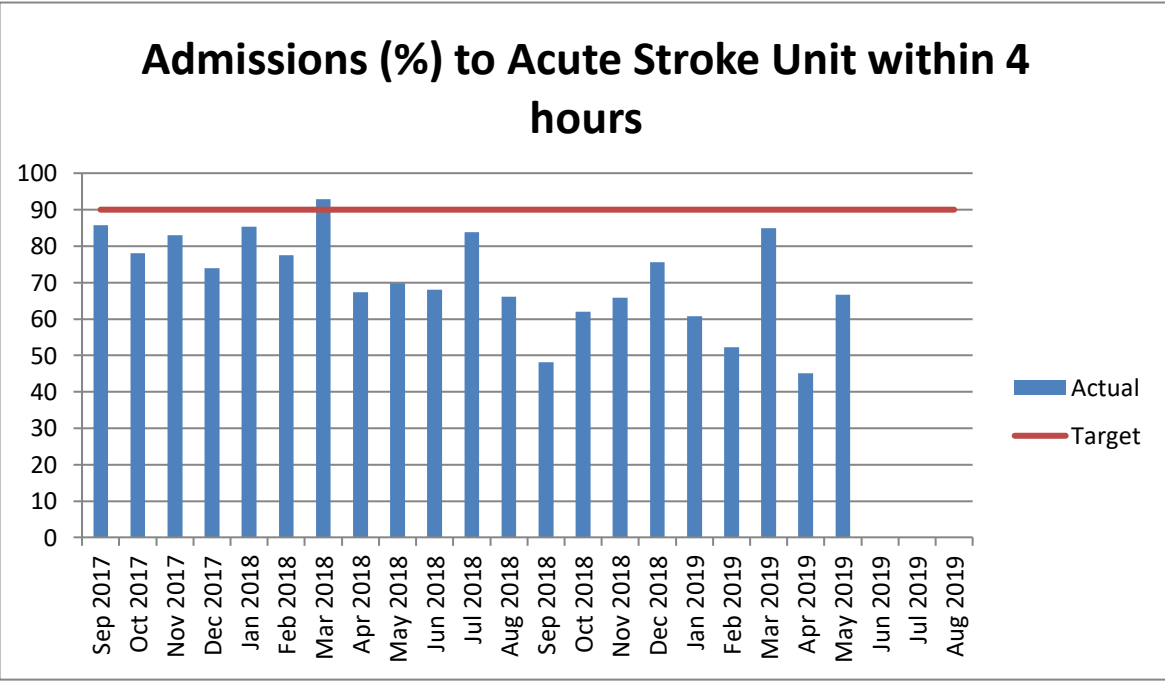


Clinical Effectiveness - Stroke Care & Cardiology

Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90.0	90.0
			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80.0	80.0
			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50.0	50.0
			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95.0	95.0
			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=>	85.0	85.0
			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=>	70.0	70.0
			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=>	75.0	75.0
			Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80.0	80.0
			Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80.0	80.0
			Rapid Access Chest Pain - seen within 14 days	=> %	98.0	98.0


























































































































































Previous Months Trend (Since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
																	
																	
																	
																	
																	
																	
																	
																	
																	
																	

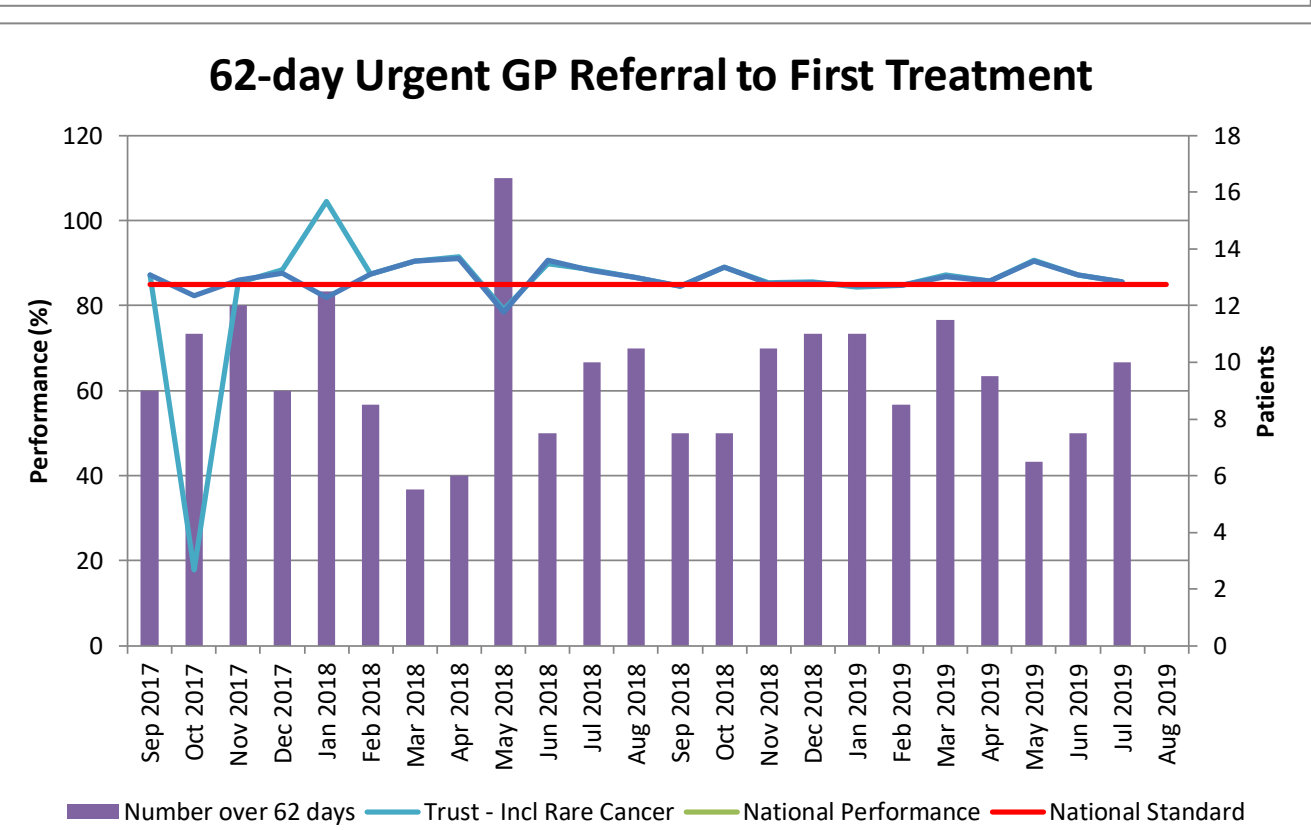
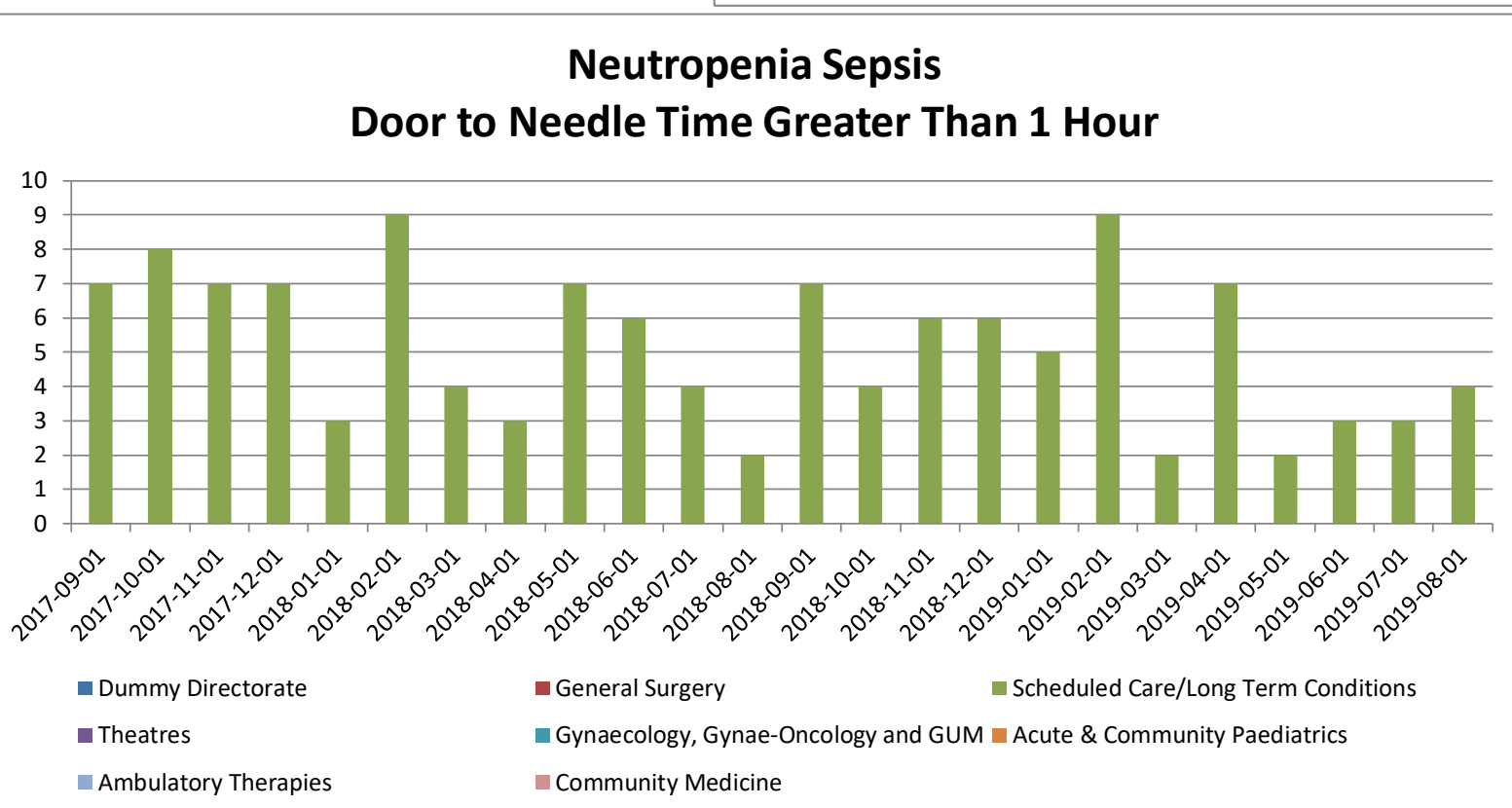
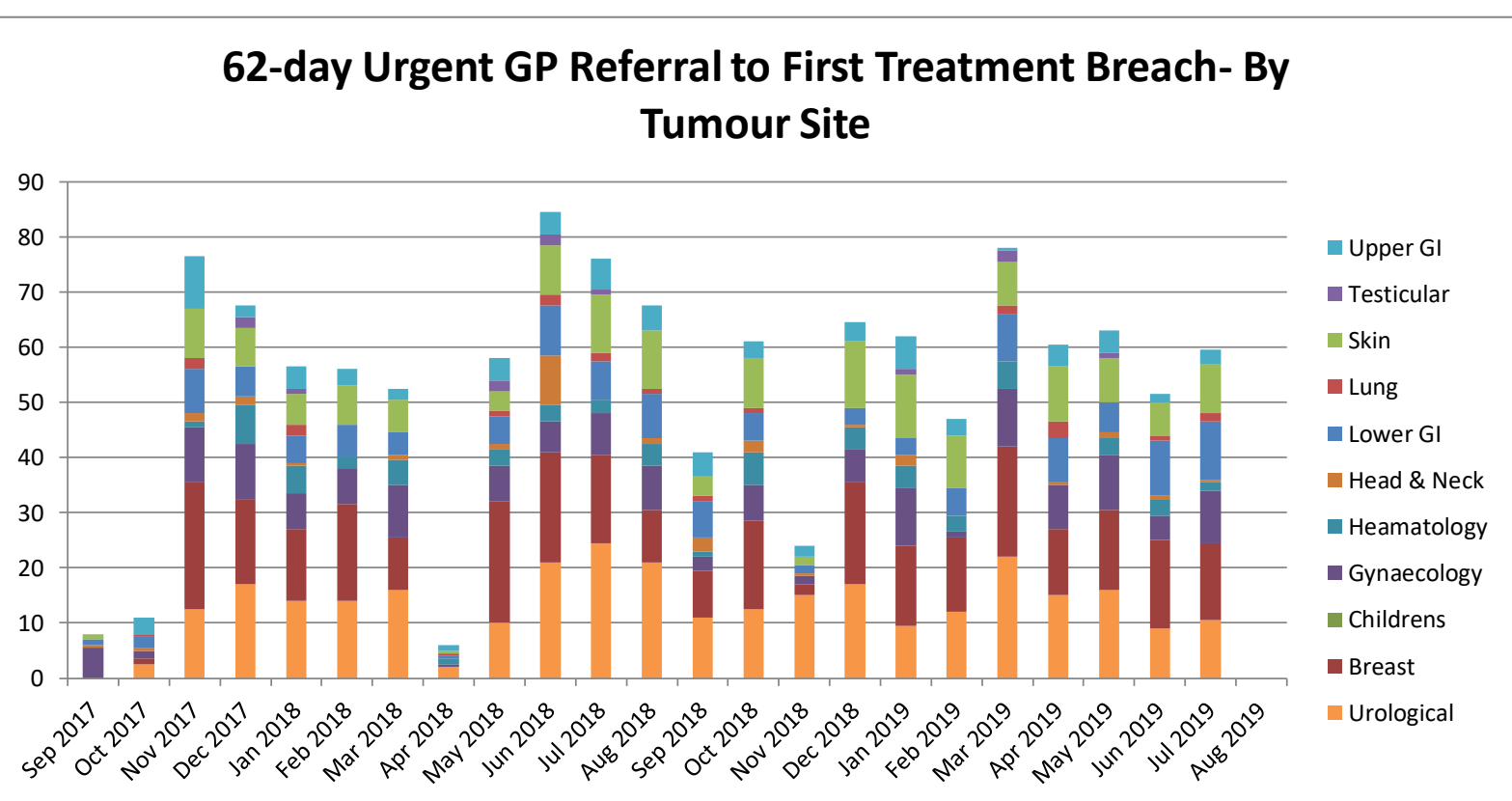
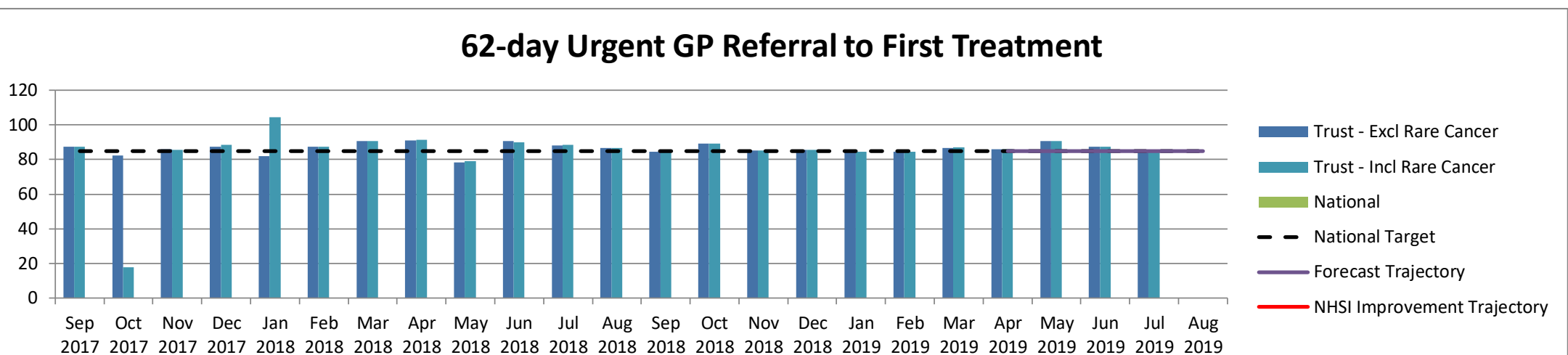
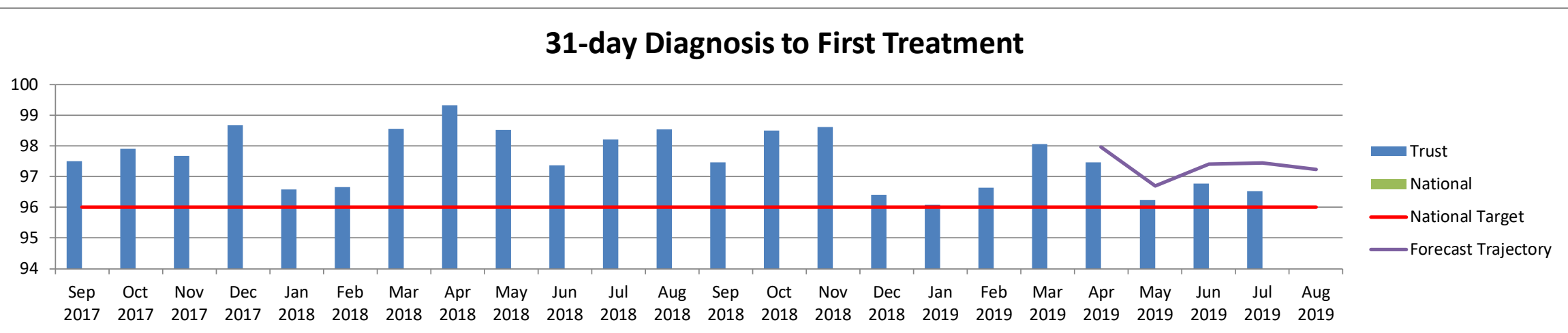
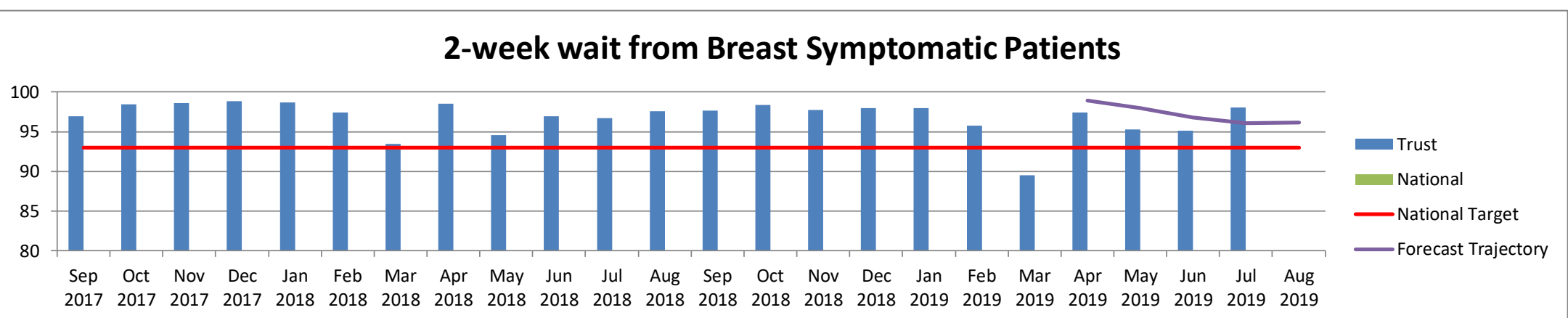
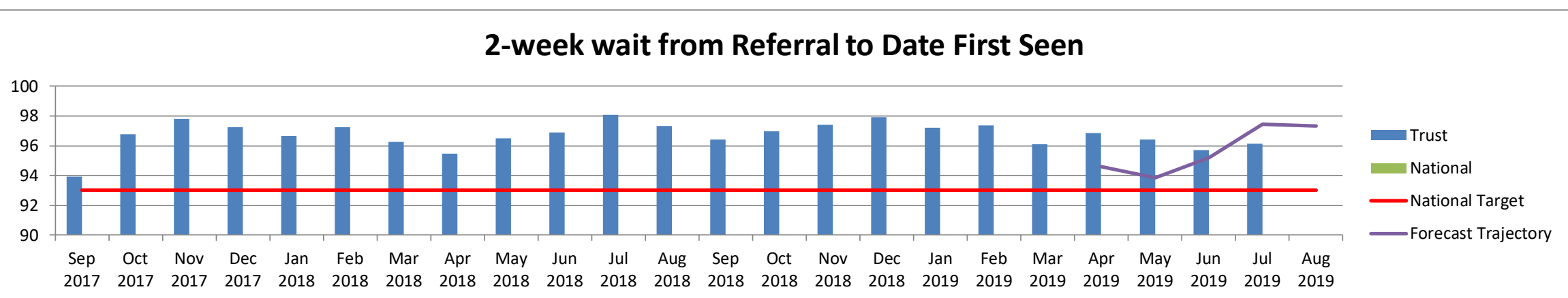
Data Period	Month	Year To Date	Trend
Aug 2019	98.2	91.5	
Aug 2019	77.1	66.1	
Aug 2019	73.5	67.4	
Aug 2019	100.0	98.9	
Aug 2019	60.0	78.6	
Aug 2019	75.0	83.0	
Aug 2019	90.9	85.1	
Aug 2019	100.0	95.2	
Aug 2019	90.9	92.1	
Aug 2019	100.0	100.0	



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)

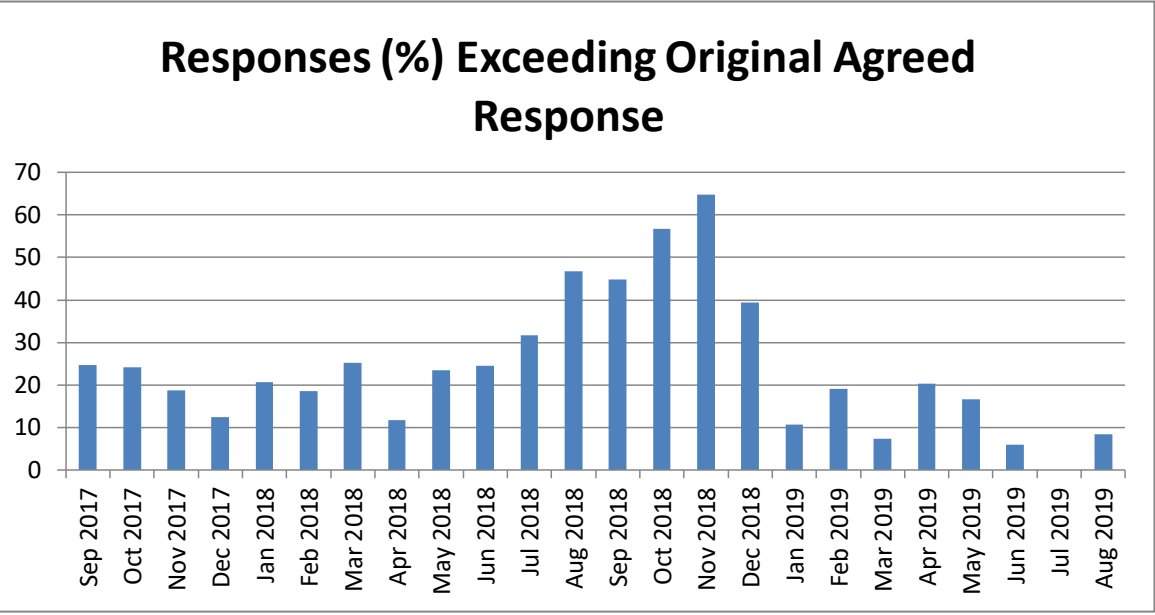
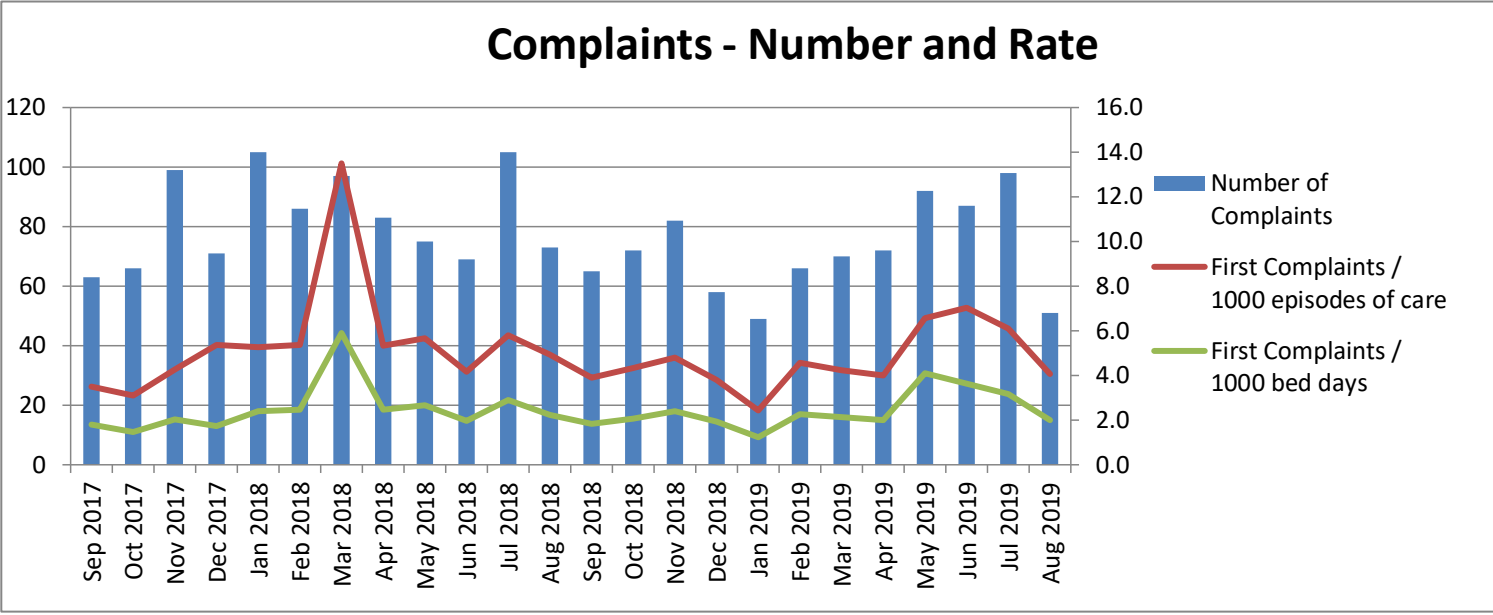
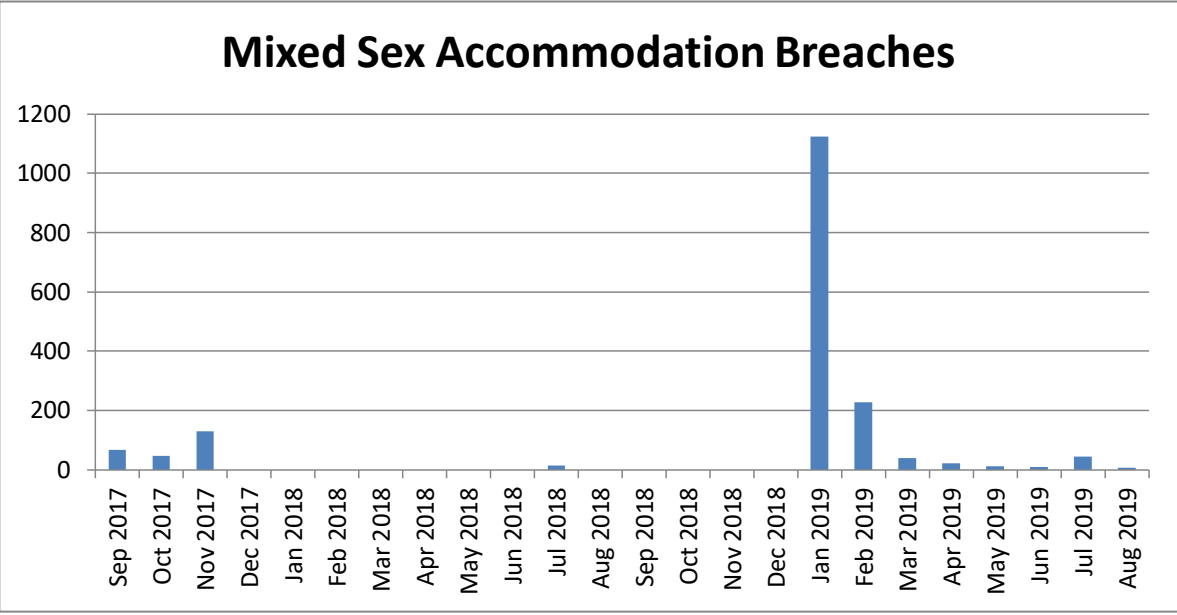
Clinical Effectiveness - Cancer Care

Data Quality	Last review	PAF	Indicator	Measure	Trajectory		Previous Months Trend (since Mar 2018)														Data Period	Group							Month	Year To Date	Trend				
					Year	Month	M	A	M	J	J	A	S	O	N	D	J	F	M	A		M	J	J	A	M	SS	W				P	I	PCCT	CO
	Apr-19		2 weeks	=> %	93.0	93.0															-	Jul 2019	94.3	97.6	94.2			-		96.1	96.3				
	Apr-19		2 weeks (Breast Symptomatic)	=> %	93.0	93.0															-	Jul 2019		-					98.1	96.4					
	Apr-19		31 Day (diagnosis to treatment)	=> %	96.0	96.0															-	Jul 2019	88.6	98.8	100.0			-		96.5	96.7				
	Apr-19		31 Day (second/subsequent treatment - surgery)	=> %	94.0	94.0															-	Jul 2019							96.2	96.4					
	Apr-19		31 Day (second/subsequent treatment - drug)	=> %	98.0	98.0											####	####		####	####	-	Jul 2019							-	100.0				
			31 Day (second/subsequent treat - radiotherapy)	=> %	94.0	94.0															-	Jul 2019							-	-	-				
	Apr-19		62 Day (urgent GP referral to treatment) Excluding Rare Cancer	=> %	85.0	85.0																-	Jul 2019	74.4	92.2	82.6			-		85.6	87.3			
			62 Day (urgent GP referral to treatment) Including Rare Cancer	=> %	85.0	85.0																-	Jul 2019	74.4	92.2	82.6			-		85.6	87.4			
	Apr-19		62 Day (referral to treat from screening)	=> %	90.0	90.0															-	Jul 2019	-	94.1	100.0			-		94.4	96.1				
	Apr-19		62 Day (referral to treat from hosp specialist)	=> %	90.0	90.0																-	Jul 2019	81.6	90.2	50.0			-		84.3	87.0			
			Cancer - Patients Waiting over 62 days	No			6	6	17	8	10	11	8	8	11	11	11	9	12	10	7	8	10.0	-	Jul 2019	5.0	3.0	2.0			0.0		10.0	33.5	
			Cancer - Patients Waiting over 104 days	No			3	1.5	1.5	1.5	2.5	2.5	1.0	2.0	1.0	3.0	2.0	3.0	7.0	3.0	4.0	0.5	2.5	-	Jul 2019	1.5	0.5	0.5			0.0		2.5	10.0	
			Cancer - Longest Waiter in days	No			280	118	104	112	113	146	86	104	101	197	137	177	209	241	183	91	196	-	Jul 2019	149	105	196			0		196		
	Apr-19		Neutropenia Sepsis Door to Needle Time Greater Than 1 Hour	<= No	0.0	0.0	4	3	7	6	4	2	7	4	6	6	5	9	2	7	2	3	3	4	Aug 2019	4	-	-			-		4	19	
			IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway	%			55	60	67	36	67	65	71	69	56	53	87	38	67	48	53	64	74	-	Jul 2019	-	-	-			-		74	60	



Patient Experience - FFT, Mixed Sex Accommodation & Complaints

Data Quality	Last review	PAF	Indicator	Measure	Trajectory		Previous Months Trend (since Mar 2018)																Data Period	Group							Month	Year To Date	Trend						
					Year	Month	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	A	M	SS	W	P	I				PCCT	CO				
	Apr-19		FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	25.0	25.0	10	8.3	7.4	5.4	8.9	8.3	15	19	29	22	24	23	19.7	16	29	26	23	21	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	21	23					
	Apr-19		FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95.0	95.0	88	89	92	92	95	96	90	93	92	92	91	92	90.87	89	89	92	91	90	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	90						
	Apr-19		FFT Response Rate: Type 1 and 2 Emergency Department	=> %	25.0	25.0	7	-	-	-	-	11	6.3	4.3	6.8	7.8	15	16	16.14	12	11	9.6	10	9.5	Aug 2019	9.45	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	9.5	10.5					
	Apr-19		FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95.0	95.0	74	-	-	-	-	76	73	71	74	73	74	75	75.41	75	76	73	76	78	Aug 2019	78	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	78						
	Apr-19		FFT Score - Adult and Children Emergency Department (type 3 WiU)	=> No	95.0	95.0	0	-	-	-	-	0	0	0	0	0	0	0	0	0	0	0	0	0	Aug 2019	-	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	0						
	Apr-19		FFT Score - Outpatients	=> No	95.0	95.0	90	-	-	-	-	91	90	91	90	92	90	90	90.58	90	90	89	88	76	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	76						
	Apr-19		FFT Score - Maternity Antenatal	=> No	95.0	95.0	100	-	-	-	-	88	86	94	0	0	0	0	0	0	0	0	0	0	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	0						
	Apr-19		FFT Score - Maternity Postnatal Ward	=> No	95.0	95.0	100	-	-	-	-	91	0	87	93	100	100	100	0	100	100	0	100	100	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	100						
	Apr-19		FFT Score - Maternity Community	=> No	95.0	95.0	0	-	-	-	-	0	0	0	0	0	0	0	0	0	0	0	0	0	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	0						
	Apr-19		FFT Score - Maternity Birth	=> No	95.0	95.0	100	-	-	-	-	90	93	100	100	100	17	95	100	100	94	94	91	66	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	66						
	Apr-19		FFT Response Rate - Maternity Birth	=> %	25.0	25.0	1.2	-	-	-	-	13	16	8.4	5	3.7	17	5	3.48	2.1	3.5	8.3	10	1.4	Aug 2019	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	1	5					
			Mixed Sex Accommodation Breaches	<= No	0.0	0.0	0	0	0	0	15	0	0	0	0	-	###	229	40	22	11	9	44	7	Aug 2019	0	7	0	<div></div>	0	0	<div></div>	7	93					
			No. of Complaints Received (formal and link)	No			97	83	75	69	105	73	65	72	82	58	49	66	70	72	92	87	98	51	Aug 2019	24	15	4	0	2	6	0	51	400					
			No. of Active Complaints in the System (formal and link)	No			183	176	174	164	194	213	208	206	212	210	165	170	151	163	149	121	148	91	Aug 2019	48	26	6	0	3	7	1	91						
			No. of First Formal Complaints received / 1000 bed days	Rate1			5.9	2.5	2.7	2.0	2.9	2.2	1.8	2.1	2.4	1.9	1.2	2.3	2.1	2.0	4.1	3.6	3.1	2.0	Aug 2019	1.59	2.34	1.55	<div></div>	<div></div>	75.95	<div></div>	1.99	2.92					
			No. of First Formal Complaints received / 1000 episodes of care	Rate1			13.5	5.3	5.7	4.1	5.8	4.9	3.9	4.3	4.8	3.8	2.4	4.6	4.2	4.0	6.6	7.0	6.1	4.0	Aug 2019	4.01	3.58	2.84	<div></div>	<div></div>	14.56	<div></div>	4.05	5.55					
			No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100	99	100	100	100	93	93	100	97	96	98	98	100	98.41	100	2.2	100	100	100	Aug 2019	100	100	100	-	100	100	100	100	76					
			No. of responses which have exceeded their original agreed response date (% of total active complaints)	<= %	0	0	25	12	23	25	32	47	45	57	65	39	11	19	7.246	20	17	5.9	0	8.4	Aug 2019	6.12	8	10	-	33.3	14.29	0	8	12					
			No. of responses sent out	No			81	77	65	64	52	52	57	54	59	47	74	58	95	77	98	97	95	96	Aug 2019	32	22	17	0	2	14	9	96	463					
			Access to healthcare for people with Learning Disability (full compliance)	Yes / No	Yes	Yes	UNDER REVIEW																																

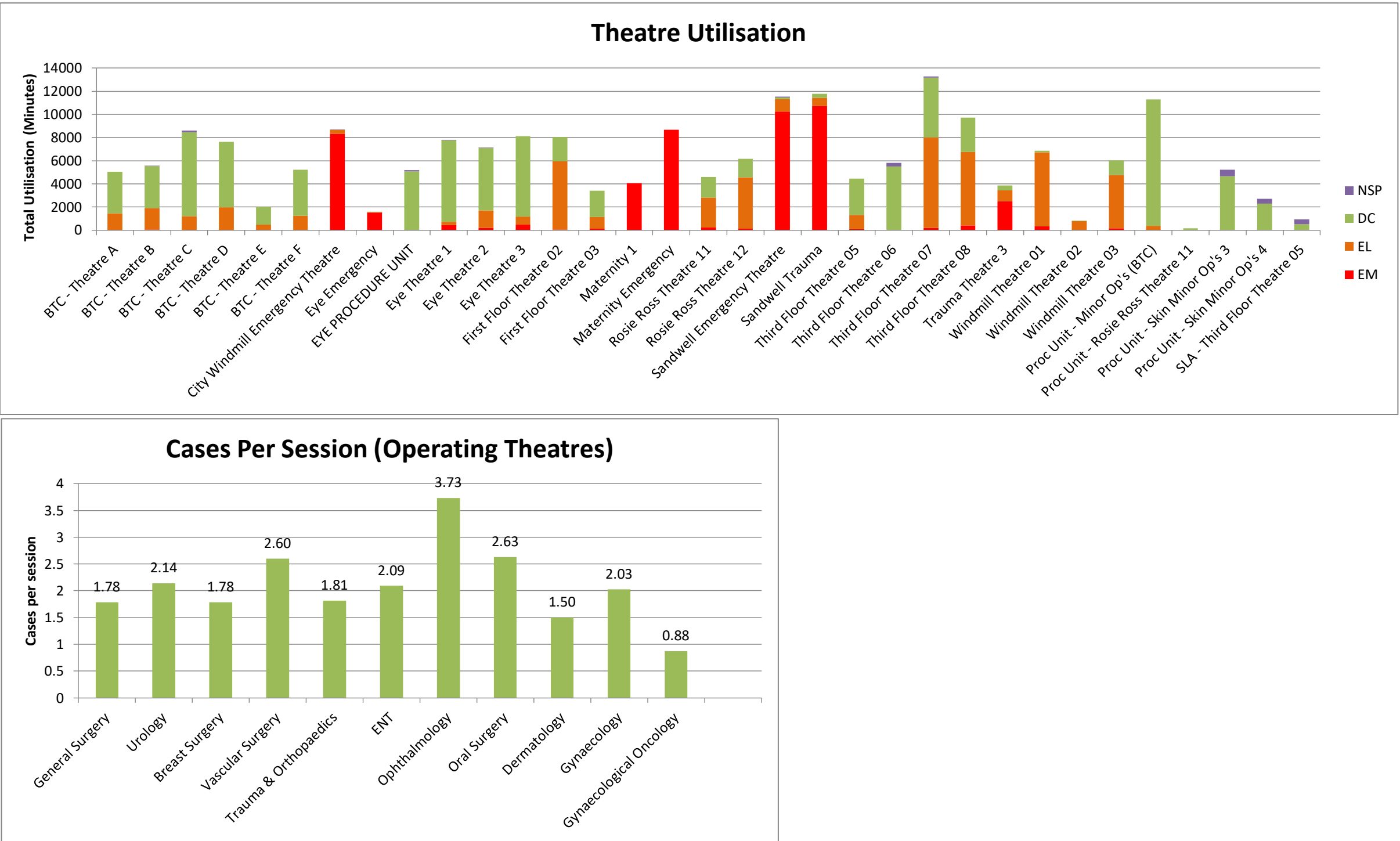
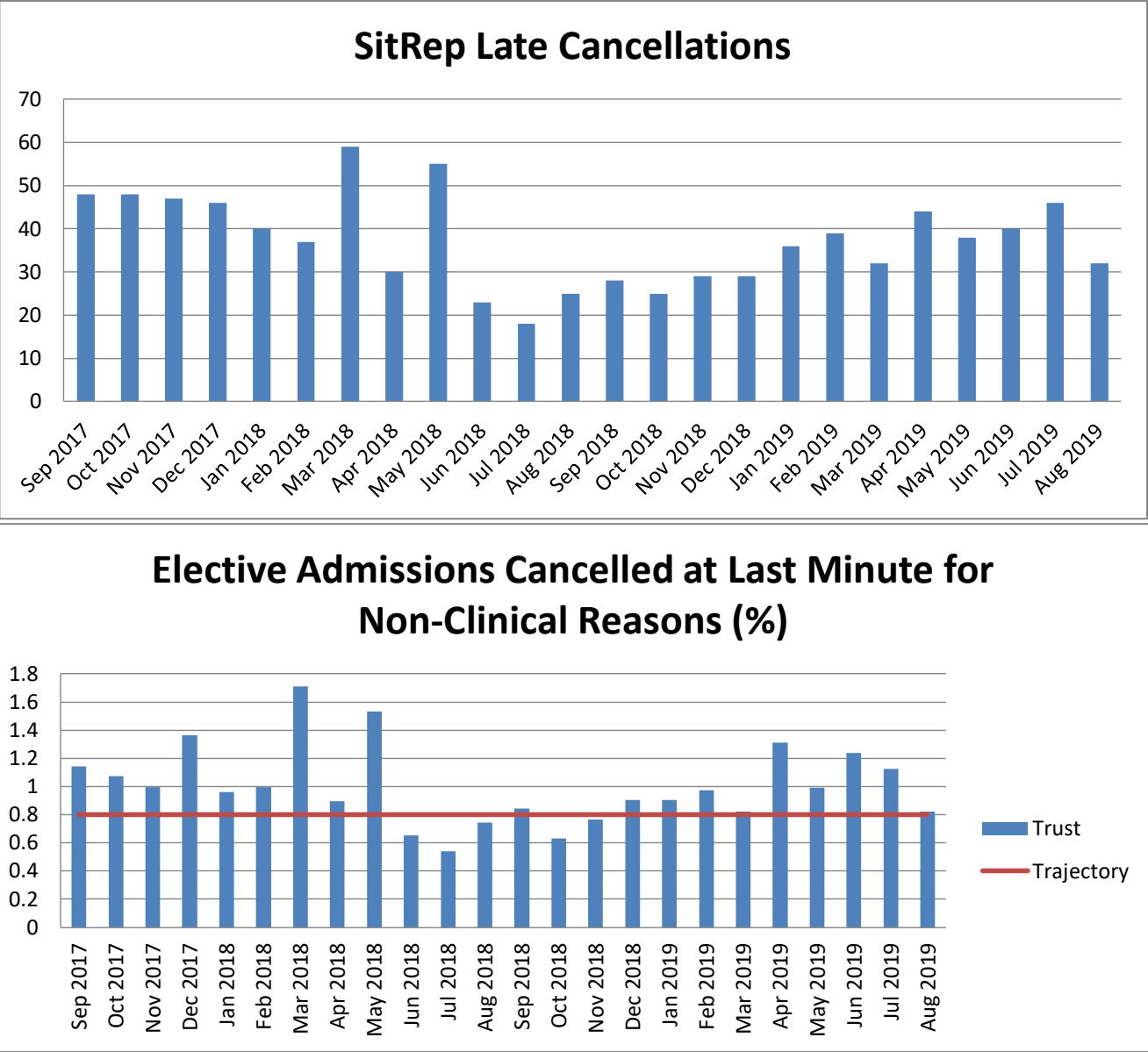


Patient Experience - Cancelled Operations

Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			No. of Sitrep Declared Late Cancellations - Total	<= No	240	20
			No. of Sitrep Declared Late Cancellations - Avoidable	No		
			No. of Sitrep Declared Late Cancellations - Unavoidable	No		
		<div><div></div></div>	Elective Cancellations at last minute for non-clinical reasons (as a percentage of elective admissions)	<= %	0.8	0.8
		<div><div></div></div>	Number of 28 day breaches	<= No	0	0
		<div><div></div></div>	No. of second or subsequent urgent operations cancelled	<= No	0	0
			Urgent Cancellations	<= No	0.0	0.0
			No. of Sitrep Declared Late Cancellations (Pts. >1 occasion)	<= No	0	0
			Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0
			All Hospital Cancellations, with 7 or less days notice	<= No	0	0

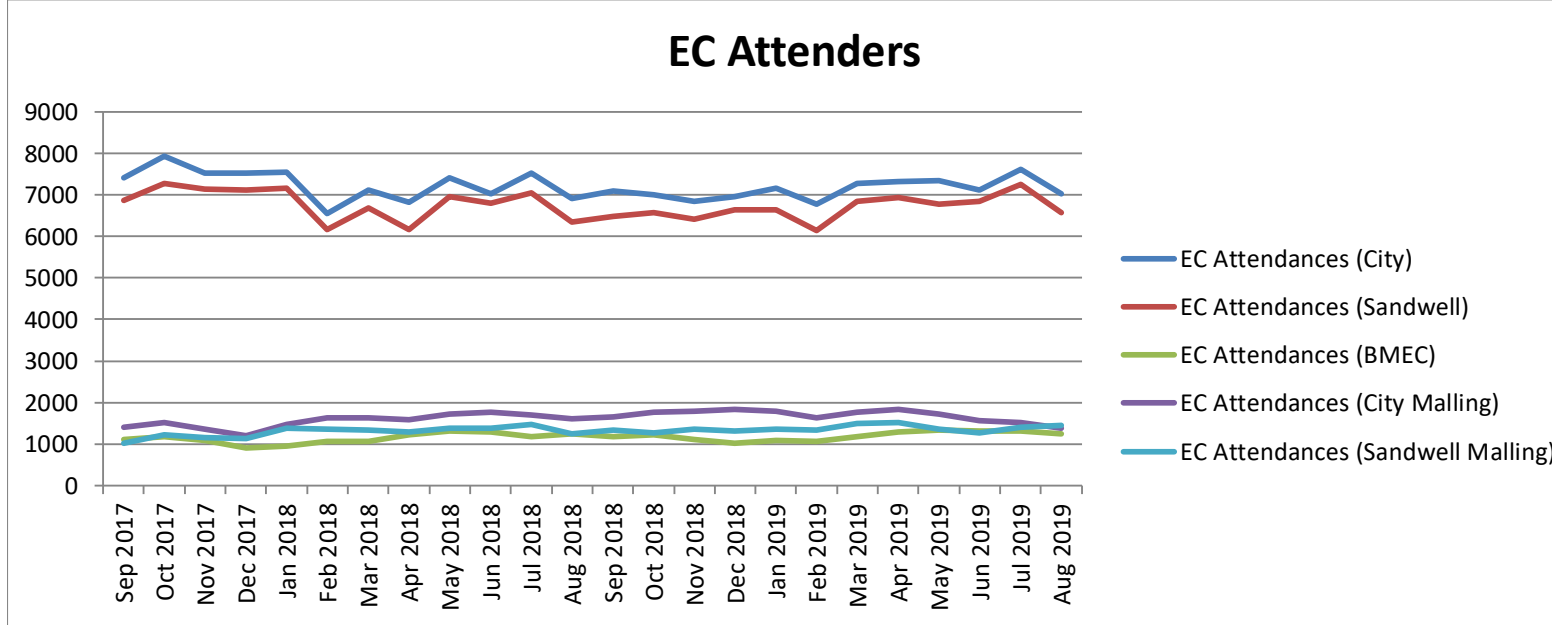
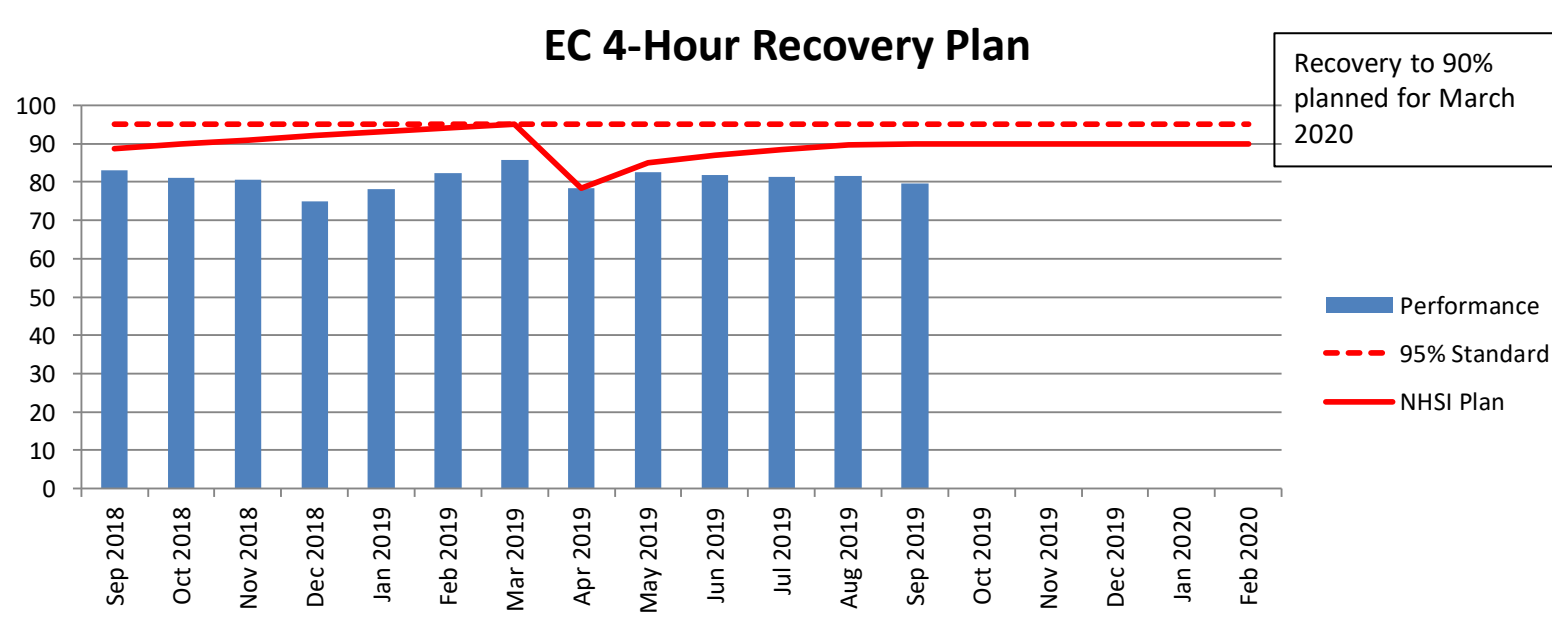
Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
59	30	55	23	18	25	28	25	29	29	36	39	32	44	38	40	46	32
14	3	12	5	8	14	10	9	7	11	18	7	10	16	13	3	16	17
45	26	43	18	10	11	18	16	22	18	18	32	22	28	25	37	30	15
1.7	0.9	1.5	0.7	0.5	0.7	0.8	0.6	0.8	0.9	0.9	1.0	0.8	1.3	1.0	1.2	1.1	0.8
1	2	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2	0	1	1	0	0	0	0	0	0	2	0	0	0	1	2	1	1
89	62	42	40	56	61	54	68	55	39	52	56	69	73	64	75	86	67
276	224	219	205	245	230	193	265	238	156	236	230	244	265	262	277	296	204

Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Aug 2019	0	27	5			0		32	200	
Aug 2019	0	16	1			0		17	65	
Aug 2019	0	11	4			0		15	135	
Aug 2019	-	1.20	2.42			0.00		0.8	1.1	
Aug 2019	0	0	0			0		0	0	
Aug 2019	0	0	0			-		0	0	
Aug 2019	0.0	0.0	0.0			0.0		0	0	
Aug 2019	0	0	1			0		1	5	
Aug 2019	2	61	4			-		67	365	
Aug 2019	14	166	24			-		204	1304	

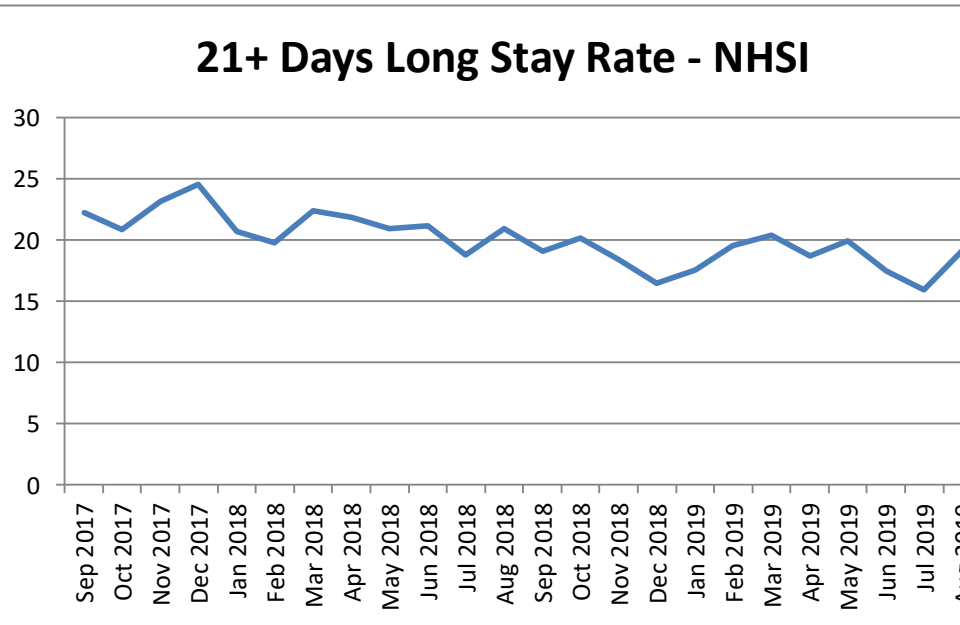
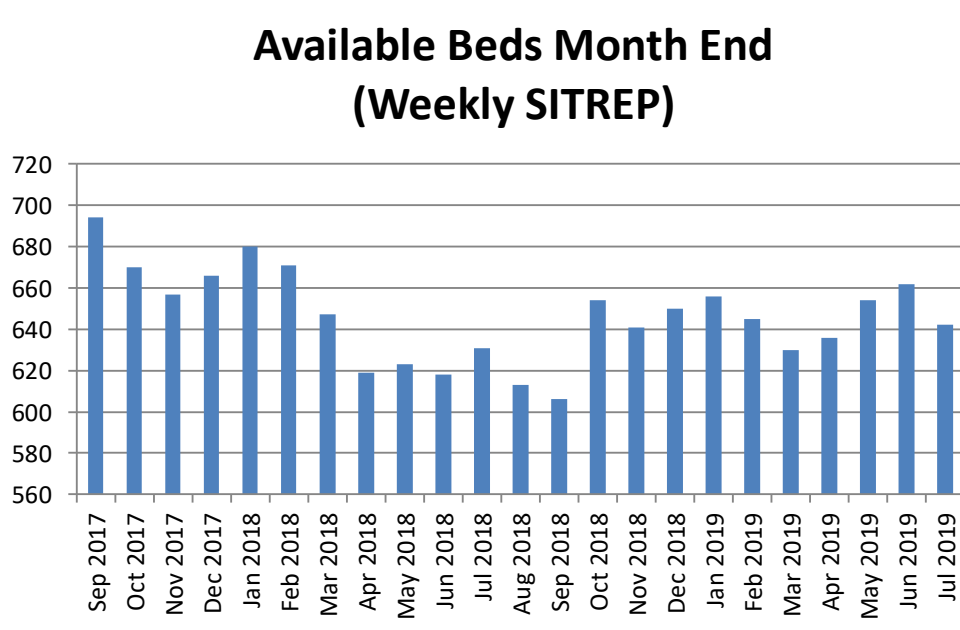


Access To Emergency Care & Patient Flow

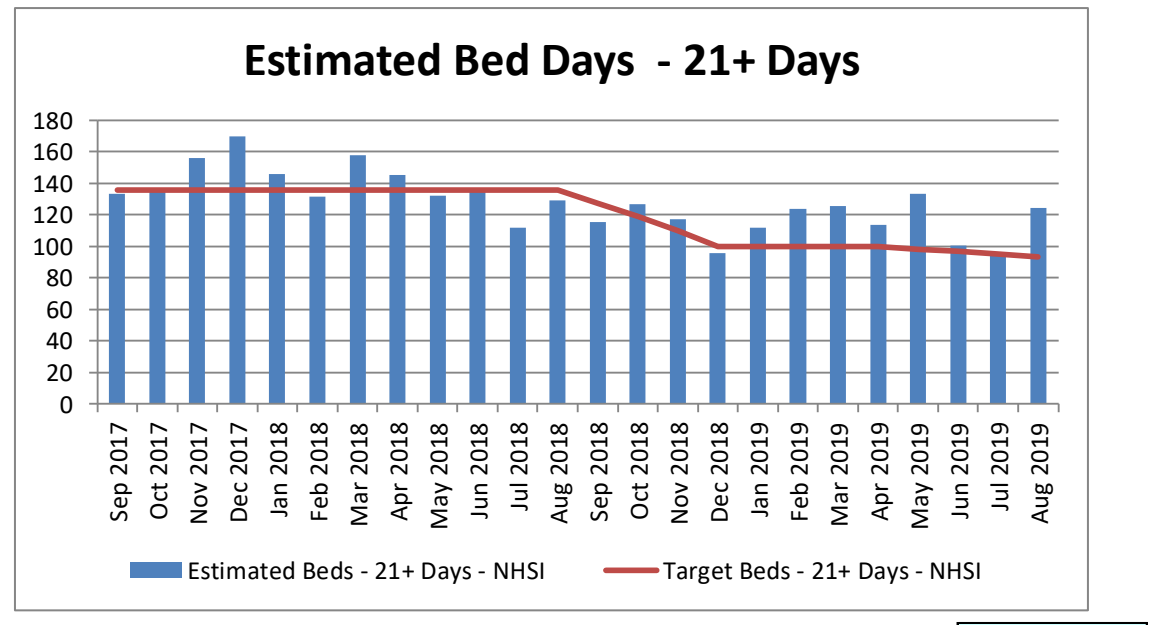
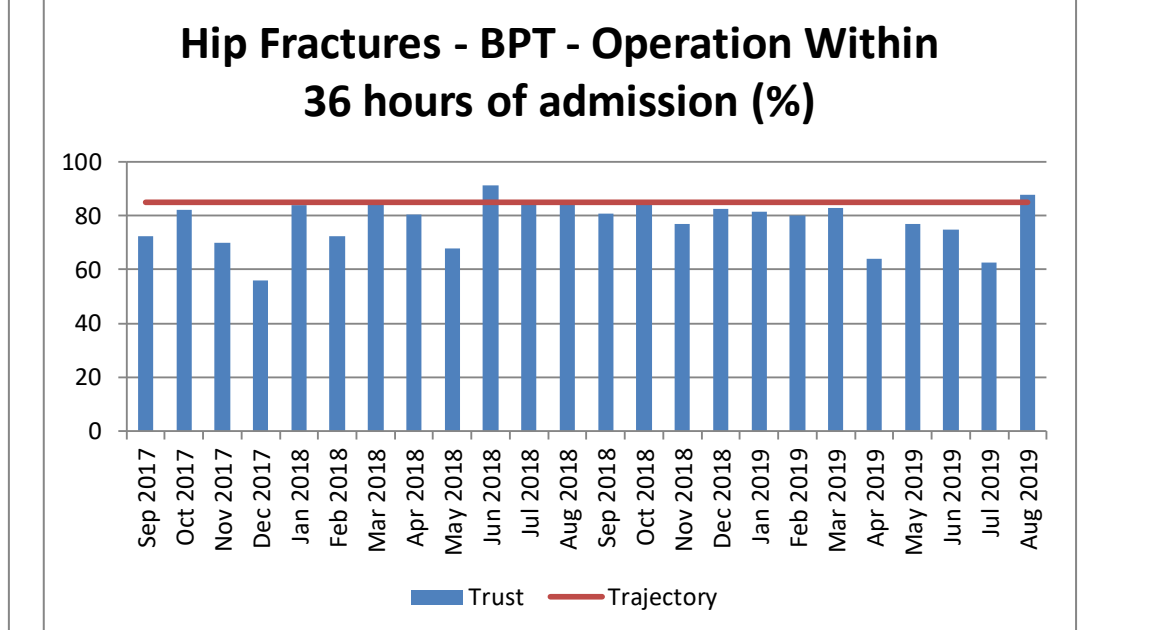
Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			Emergency Care Attendances (Including Mailing)	No		
			Emergency Care 4-hour waits	=> %	95.00	95.00
			Emergency Care 4-hour breach (numbers)	No		
			Emergency Care Trolley Waits >12 hours	<= No	0.00	0.00
			Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.00	15.00
			Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60
			Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0
			Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0
			WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0
			WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0
			WMAS - Handover Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02
			WMAS - Emergency Conveyances (total)	No		
	Apr-19		Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5
			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	<10 per site	<10 per site
	Apr-19		Delayed Transfers of Care (Acute) - Finable Bed Days (Birmingham LA only)	<= No	0	0
	Apr-19		Patient Bed Moves (10pm - 6am) (No.) -ALL	No		
	Apr-19		Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No		
	Apr-19		Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Transfers for Clinical Reasons	No		
	Apr-19		Hip Fractures - Best Practice Tarriiff - Operation < 36 hours of admission (%)	=> %	85.0	85.0
	Apr-19		Inpatients Staying 21+ Days At Month End Census - NHSI	No		
	Apr-19		21+ Days Long Stay Rate - NHSI	%		
	Apr-19		Estimated Beds - 21+ Days - NHSI	<= No	82.0	82.0



Previous Months Trend (From)																		
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	
17818	17075	18766	18258	17333	17740	17819	17502	17753	18042	16949	18592	18908	18541	18091	19047	17657		
3582	2745	3746	3418	3001	2999	3013	3354	3383	4435	3963	3006	2629	4106	3213	3288	3542	3252	
196	172	219	195	165	116	95	121	159	168	160	88	166	4119	128	123	162		
21	6	6	10	2	8	5	6	7	205	160	6	5	4	128	5	9		
4487	4308	4339	4396	4685	4522	454	4622	4579	4872	4835	4655	4814	4670	4555	4658	4486		
152	176	241	192	263	174	181	200	272	275	315	270	211	99	149	295	185		
796	570	628	677	655	731	712	717	717	713	275	241	654	642	672	99	686	671	
278	244	239	242	232	241	240	246	227	247	279	243	223	228	308	218	233		
75	43	26	48	36	38	47	54	38	55	63	63	65	37	30	46	45		
-	-	-	-	-	122	122	146	123	126	137	116	139	130	124	129	118		
22.37	21.83	20.96	21.12	18.79	20.92	19.05	20.2	16.38	16.47	17.54	20.38	18.74	19.96	17.45	15.92	19.19		
158.03	145.54	132.32	137.14	111.67	129.3	115.39	126.71	117	96.05	111.84	125.75	113.61	133.38	100.71	95.78	124.69		



Data Period	Unit			Month	Year To Date	Trend
	S	C	B			
Aug 2019	8023	8390	1244	17657	92244	
Aug 2019	75.8	84.7	98.3	81.58	81.14	
Aug 2019	1945	1286	21	3252	17401	
Aug 2019	0	0		0	0	
Aug 2019	13	14	25	14	14	
Aug 2019	66	54	88	62	57	
Aug 2019	5.66	6.19	2.24	5.63	5.37	
Aug 2019	6.33	7.03	3.66	6.44	6.98	
Aug 2019	148	14		162	698	
Aug 2019	9	0		9	27	
Aug 2019	0.38	0.00		0.20	0.12	
Aug 2019	2348	2138		4486	23183	
Aug 2019	2.7	8.1		4.7	2	
Aug 2019	9.75	17		27		
Aug 2019				185	967	
Aug 2019				671	3308	
Aug 2019				233	1087	
Aug 2019				45	223	
Aug 2019				88	74.5	
Aug 2019				118	-	
Aug 2019				19,192	18.3	
Aug 2019				124.69	-	



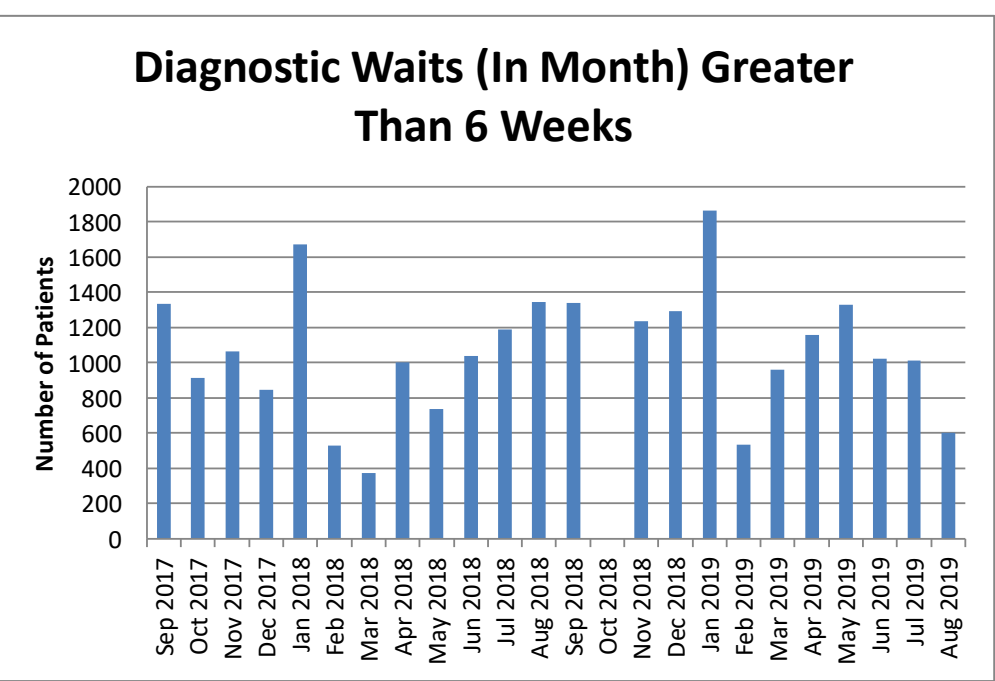
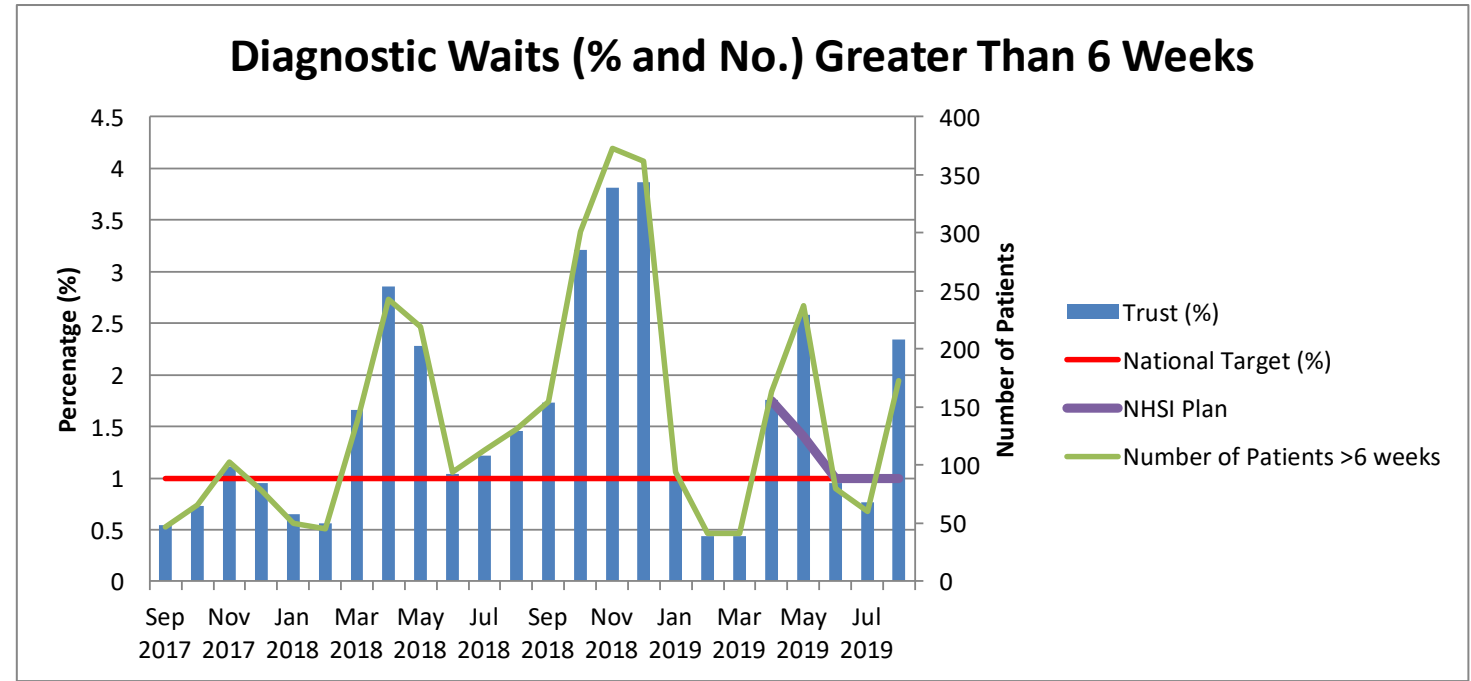
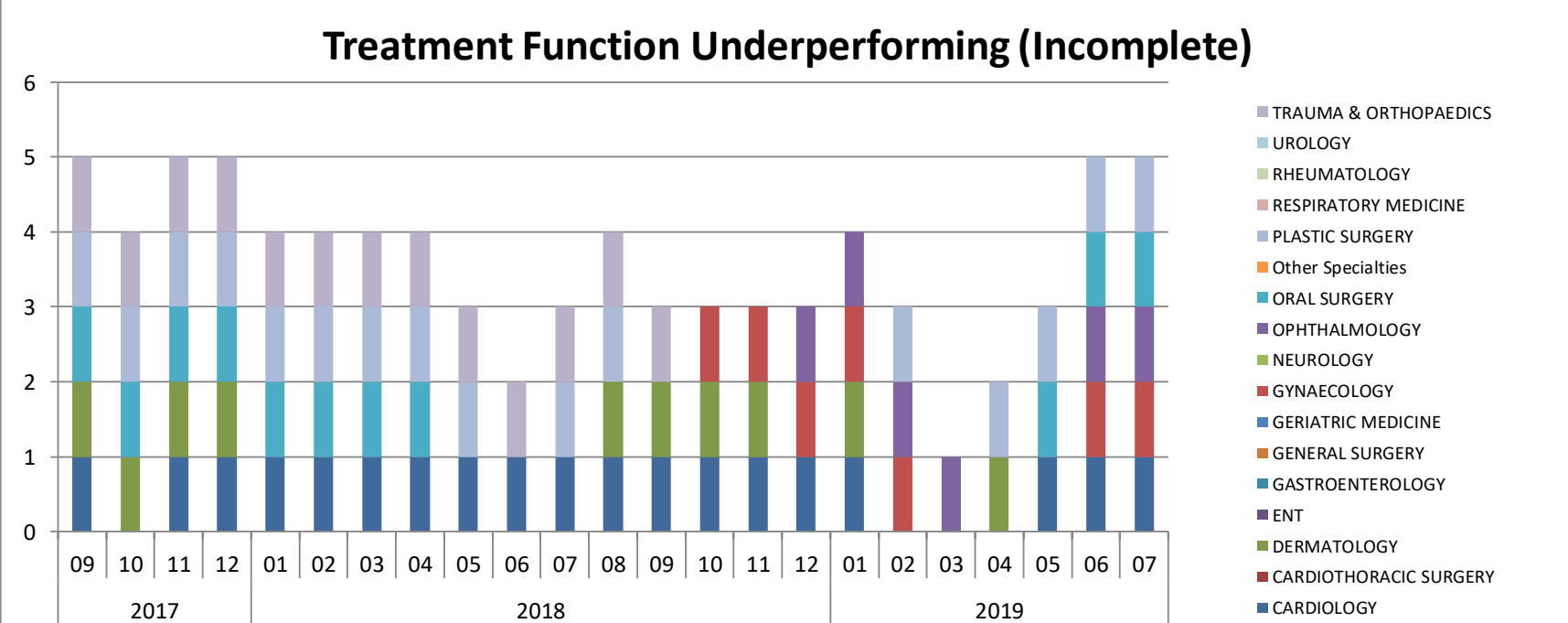
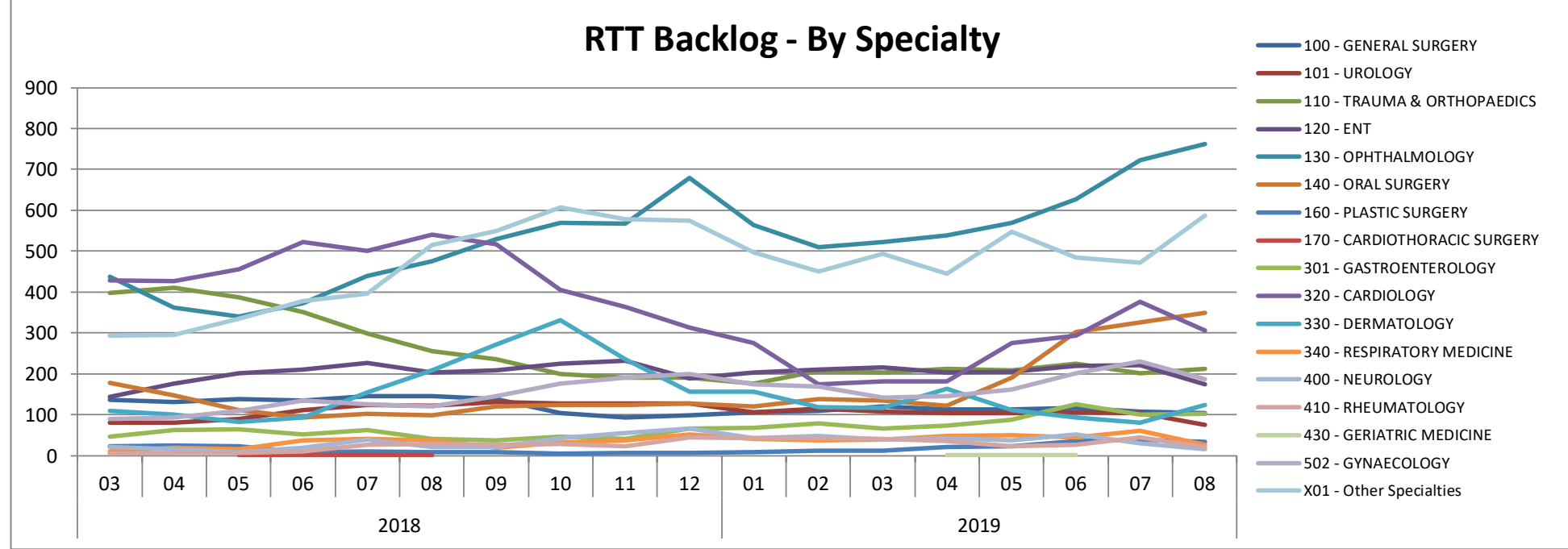
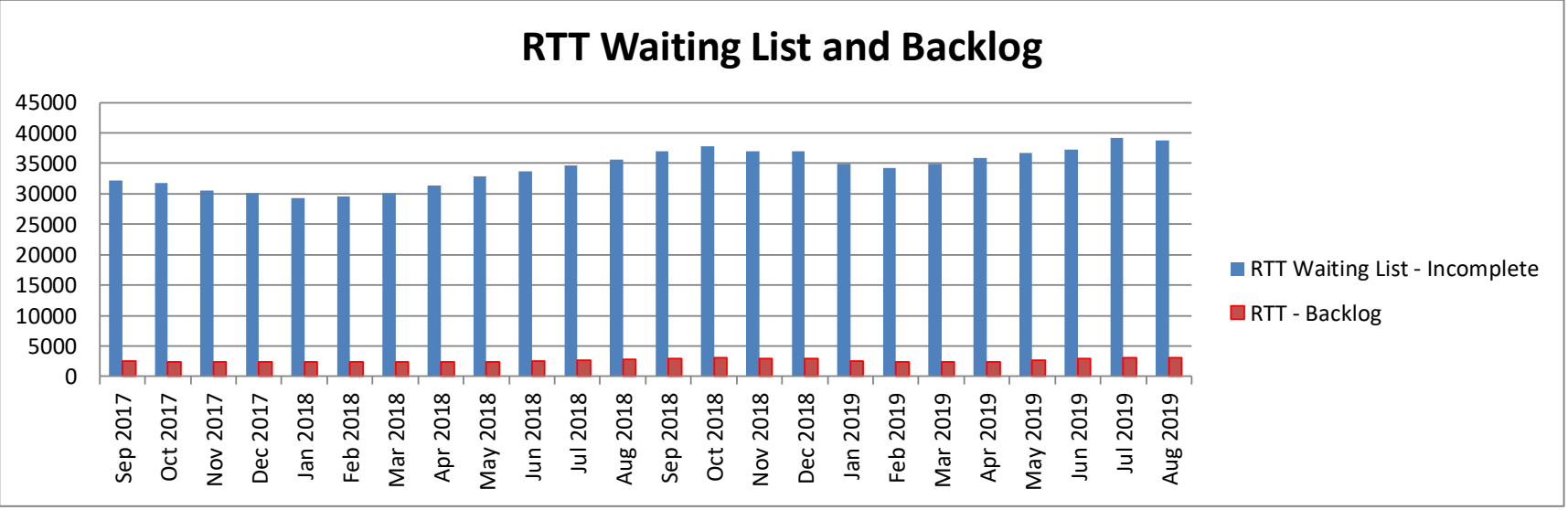
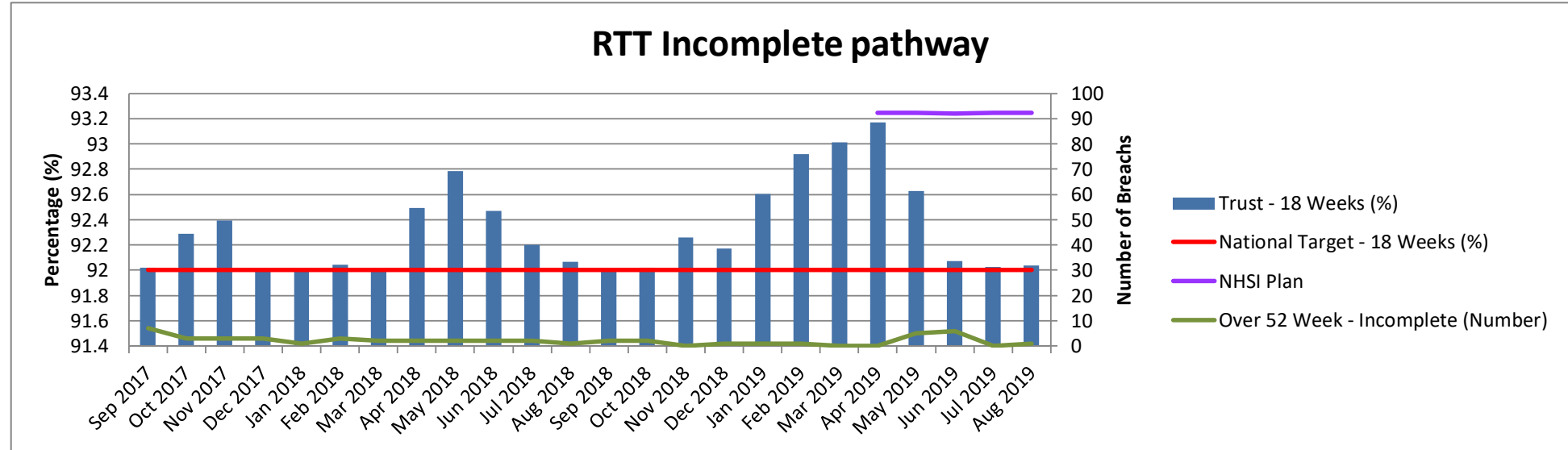
Referral To Treatment

Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
	Apr-19		RTT - Admitted Care (18-weeks)	=> %	90.0	90.0
	Apr-19		RTT - Non Admitted Care (18-weeks)	=> %	95.0	95.0
	Apr-19		RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0
	Apr-19		RTT Waiting List - Incomplete	No		
	Apr-19		RTT - Backlog	No		
	Apr-19		Patients Waiting >52 weeks	<= No	0	0
	Apr-19		Patients Waiting >52 weeks (Incomplete)	<= No	0	0
			Treatment Functions Underperforming (Admitted, Non-Admitted, Incomplete)	<= No	0	0
			Treatment Functions Underperforming (Incomplete)	<= No	0	0
	Apr-19		Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1.0	1.0
	Apr-19		Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No		
	Apr-19		Routine Outpatient Appointments with Short Notice(<3Wks)	%		
	Apr-19		Routine Outpatient Appointments with Short Notice(<3Wks)	No		
	Apr-19		Short Notice Inpatient Admission Offers (<3wks)	%		
	Apr-19		Short Notice Inpatient Admission Offers (<3wks)	No		
			RTT Clearance Time (Wks)	Weeks		

Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
30071	31369	32841	33665	34594	35614	36990	37871	37012	36914	34909	34221	34888	35859	36762	37231	39115	38714
2404	2354	2369	2536	2697	2825	2959	3023	2865	2890	2582	2424	2436	2450	2710	2951	3118	3082
5	4	5	4	7	7	3	5	4	1	3	4	6	1	11	24	12	14
2	2	2	2	2	1	2	2	0	1	1	1	0	0	5	6	0	1
27	27	25	23	27	28	28	27	26	26	28	29	27	23	27	29	30	29
4	4	3	2	3	4	3	3	3	3	4	3	-	2	3	5	5	5
373	1002	739	1038	1190	1344	1340	-	1237	1294	1861	532	958	1158	1330	1023	1010	600
18	19	24	21	21	28	22	25	31	35	33	35	35	39	35	35	36	34
1509	1414	2061	1943	1979	2325	1904	2434	3097	3169	3693	3564	3554	3599	3767	3498	3838	3034
51	49	52	57	59	47	49	55	59	52	44	48	46	58	57	56	54	54
1975	1783	1983	2161	2252	1800	1760	2253	2307	1773	1873	1862	1869	2416	2414	2136	2375	2150
-	-	-	-	-	-	-	-	9.3	11.6	8.6	8.4	9.1	9.5	9.7	10.0	9.7	10.5























Data Period	Group							
	M	SS	W	P	I	PCCT	CO	
Aug 2019	90.5	75.8	73.4				93.4	
Aug 2019	82.4	90.9	79.5			87.1		
Aug 2019	93.6	90.5	91.2			95.2		
Aug 2019	7041	18046	2119			3016		
Aug 2019	451	1711	187			146		
Aug 2019	7	5	1			0		
Aug 2019	1	0	0			0		
Aug 2019	5	16	3.0			3.0		
Aug 2019	1	3	1			0		
Aug 2019	1.5	0.1	-		3.3	-		
Aug 2019	59	55	-		481	-		
Aug 2019	35	32	43	26	-	30	-	
Aug 2019	599	1604	508	76	0	247	-	
Aug 2019	61	54	69	35	90	45	-	
Aug 2019	224	1521	169	14	18	204	-	
Aug 2019	21.0	8.8	12.6	-	-	16.0	-	

Month	Year To Date	Trend
80.48		
89.21		
92.04		
38714		
3082		
14	62	
1	12	
29		
5		
2.34		
600		
33.9	35.7	
3034	17736	
54	55.9	
2150	11491	
10.5	9.9	



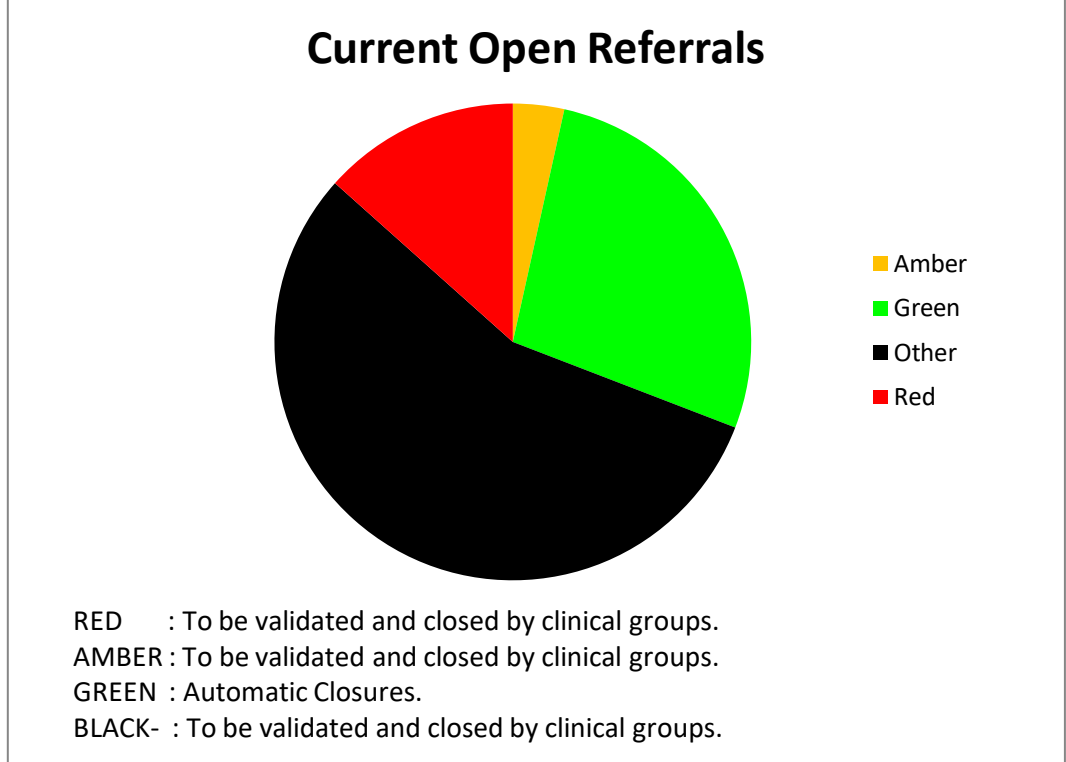
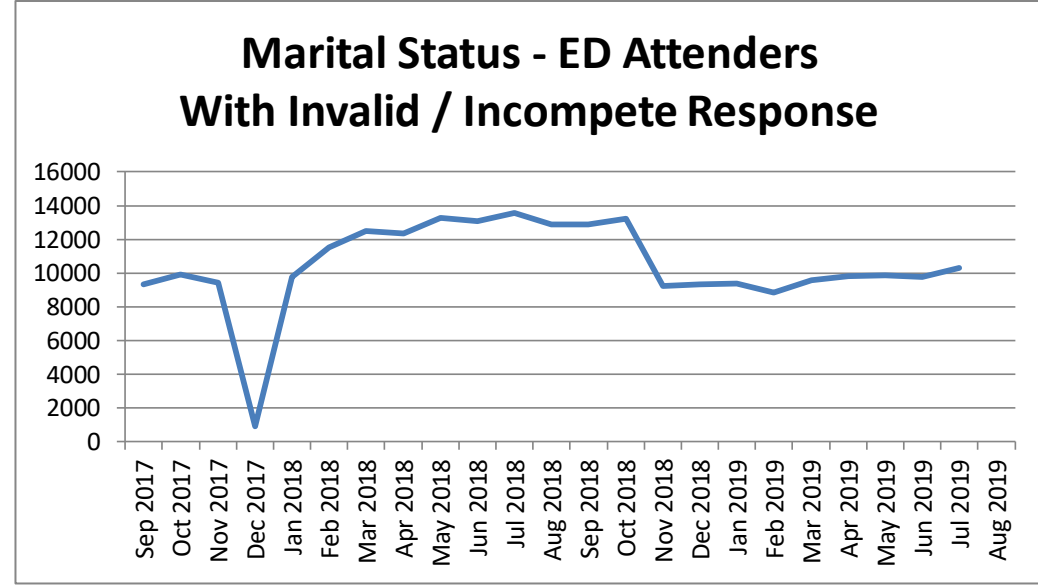
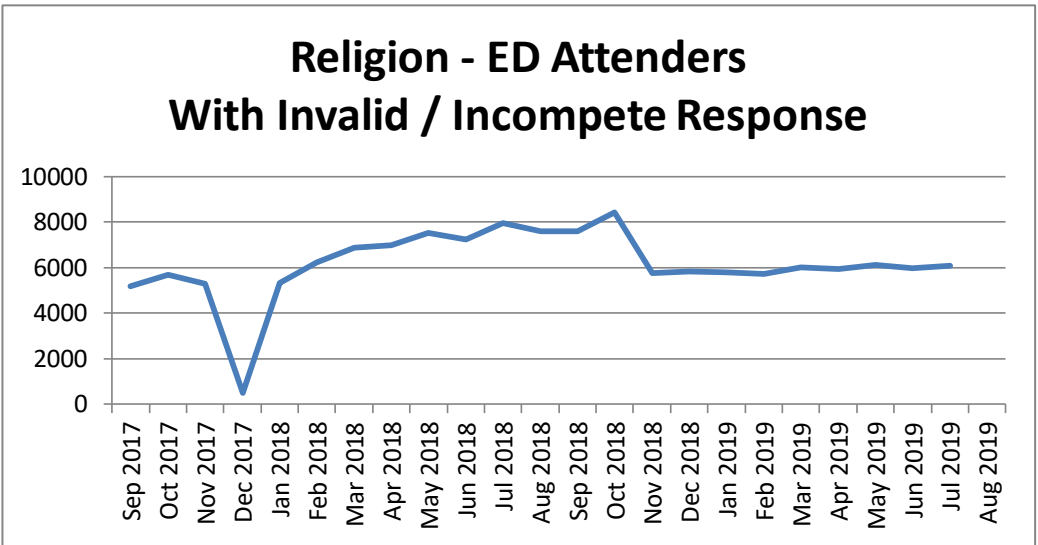
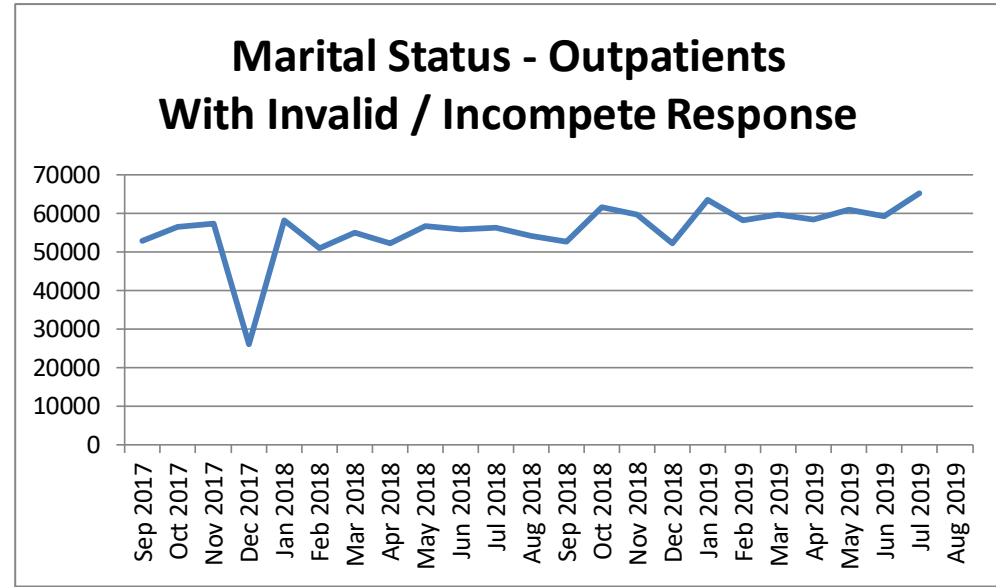
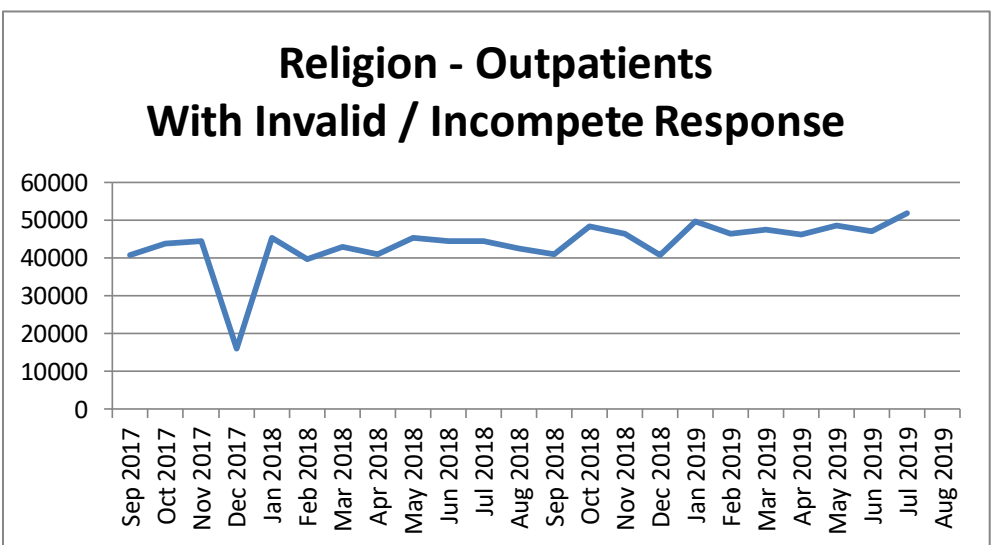
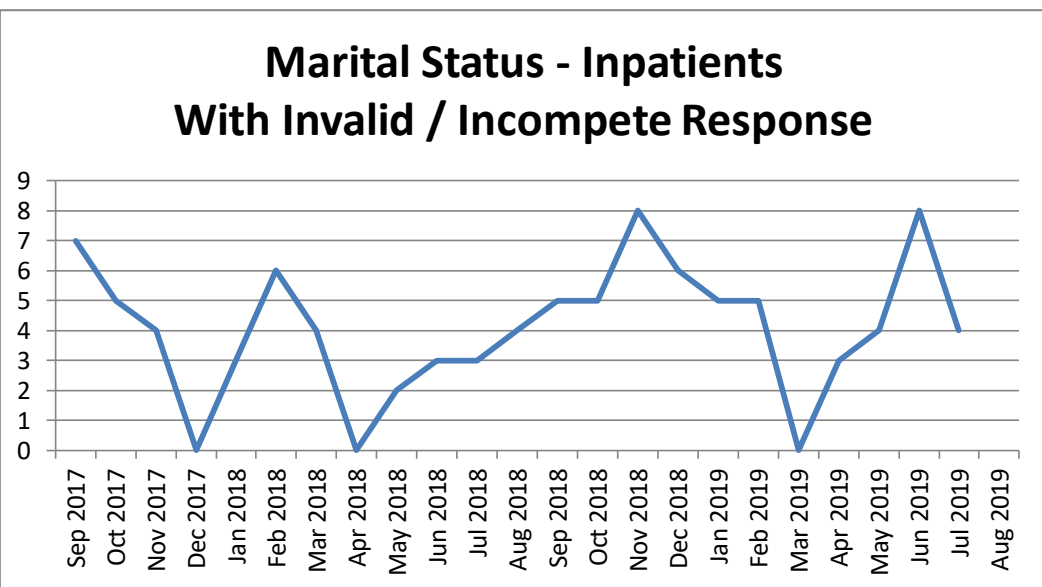
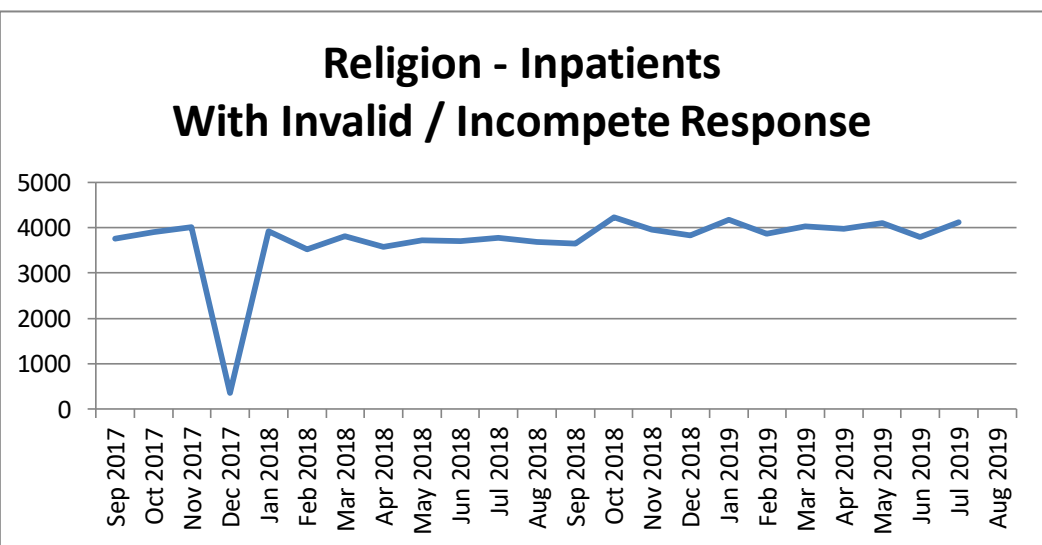
SpecDesc	PTLSize	WeeklyStops	Backlog	Perfo	Clearance	MaxBacklog
Cardiology	2783	112	306	0.89	24.85	56
Cardiothoracic	13	0	0	1	0	0
Dermatology	2093	119	124	0.94	17.59	59
ENT	2865	203	174	0.94	14.11	101
Gastro	1840	91	102	0.94	20.22	45
General Surgery	2261	301	104	0.95	7.51	150
Geriatrics	85	14	0	1	6.07	7
Gynae	2119	168	187	0.91	12.61	84
Neurology	1130	49	16	0.99	23.06	24
Ophthalmology	6739	1085	762	0.89	6.21	542
Oral Surgery	1498	42	349	0.77	35.67	21
Other Specs	8492	924	587	0.93	9.19	462
Plastics	206	7	33	0.84	29.43	3
Rheumatology	923	70	22	0.98	13.19	35
Thoracic Med	1203	70	27	0.98	17.19	35
Trauma & Orthopaedics	2943	315	213	0.93	9.34	157
Urology	1521	105	76	0.95	14.49	52
Total	38714	3675			10.53	

Data Completeness

Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			Data Completeness Community Services	=> %	50.0	50.0
			Percentage SUS Records for AE with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0
			Percentage SUS Records for IP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0
			Percentage SUS Records for OP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0
			Completion of Valid NHS Number Field in acute (inpatient) data set submissions to SUS	=> %	99.0	99.0
			Completion of Valid NHS Number Field in acute (outpatient) data set submissions to SUS	=> %	99.0	99.0
			Completion of Valid NHS Number Field in A&E data set submissions to SUS	=> %	95.0	95.0
			Ethnicity Coding - percentage of inpatients with recorded response	=> %	90.0	90.0
			Ethnicity Coding - percentage of outpatients with recorded response	=> %	90.0	90.0
			Protected Characteristic - Religion - INPATIENTS with recorded response	%		
			Protected Characteristic - Religion - OUTPATIENTS with recorded response	%		
			Protected Characteristic - Religion - ED patients with recorded response	%		
			Protected Characteristic - Marital Status - INPATIENTS with recorded response	%		
			Protected Characteristic - Marital Status - OUTPATIENTS with recorded response	%		
			Protected Characteristic - Marital Status - ED patients with recorded response	%		
			Maternity - Percentage of invalid fields completed in SUS submission	<= %	15.0	15.0
			Open Referrals	No		
			Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		
			Future Appts Where the Referral is Closed	No		



















Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
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99.0	96.8	97.3	97.5	98.4	98.4	98.5	97.7	98.2	97.9	97.3	97.2	97.5	98.2	98.1	96.8	98.7	-
99.6	99.6	99.6	99.6	99.6	99.8	99.8	99.6	99.7	99.7	99.7	99.8	99.6	99.6	99.7	99.6	99.6	-
97.3	97.4	97.4	97.5	97.2	97.6	97.3	97.2	97.6	97.3	97.6	97.6	97.5	97.6	97.6	97.3	97.3	-
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68.8	69.5	68.7	68.5	69.0	67.9	68.1	67.0	68.9	68.5	68.9	67.2	68.4	68.6	68.2	68.0	67.7	-
52.4	52.1	51.1	51.6	52.0	52.0	52.3	51.7	51.6	51.2	51.5	50.1	50.1	50.7	50.2	50.3	50.4	-
66.3	65.1	65.7	66.5	64.2	62.8	63.5	60.1	62.5	62.3	63.2	61.2	62.6	64.0	62.8	62.9	64.7	-
100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	99.9	100.0	100.0	100.0	100.0	100.0	100.0	99.9	100.0	-
38.6	38.8	38.7	38.8	39.1	38.5	38.6	38.1	37.8	37.2	37.9	37.4	37.1	37.5	37.4	37.2	37.5	-
39.0	38.3	39.4	39.2	38.8	37.0	38.0	37.5	39.9	39.7	40.2	40.0	40.4	40.6	40.0	39.5	39.9	-
<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>	<div><div></div></div>
289,164	294,489	299,679	305,223	310,094	314,889	319,931	326,632	330,485	334,632	337,995	341,631	325,229	311,212	223,937	221,026	216,977	215,389
152,201	155,865	159,386	162,765	165,731	169,514	176,924	177,132	181,139	184,452	188,892	192,794	151,428	158,635	69,739	64,564	54,518	53,060
241	230	226	230	129	152	209	213	179	206	233	265	241	248	223	279	294	286

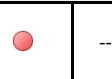
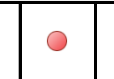
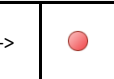

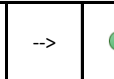
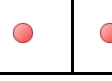
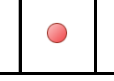
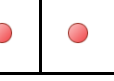
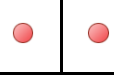
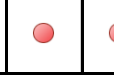
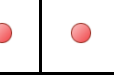
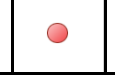
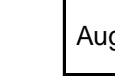


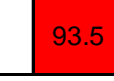
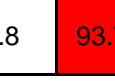






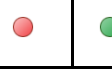
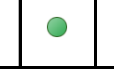
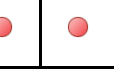
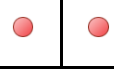
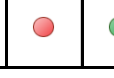
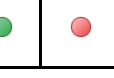
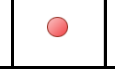
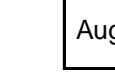

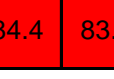
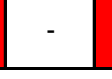
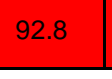






Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Aug 2019							61.2	61.2		
Jul 2019								86.0		
Jul 2019								98.5		
Jul 2019								99.4		
Jul 2019								98.7	98.0	
Jul 2019								99.6	99.6	
Jul 2019								97.3	97.4	
Jul 2019								91.4	91.2	
Jul 2019								92.2	91.9	
Jul 2019								67.7	68.1	
Jul 2019								50.4	50.4	
Jul 2019								64.7	63.6	
Jul 2019								100.0	100.0	
Jul 2019								37.5	37.4	
Jul 2019								39.9	40.0	
Jul 2019								6.8	6.9	
Aug 2019	52,647	107,224	22,571	6,718	350	25,879		215,389		
Aug 2019	20,501	20,403	5,518	1,552	233	4,548		53060		
Aug 2019	95	138	37	3	0	13		286		

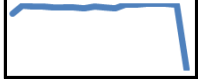
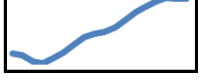


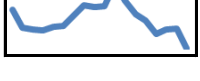

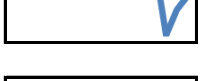










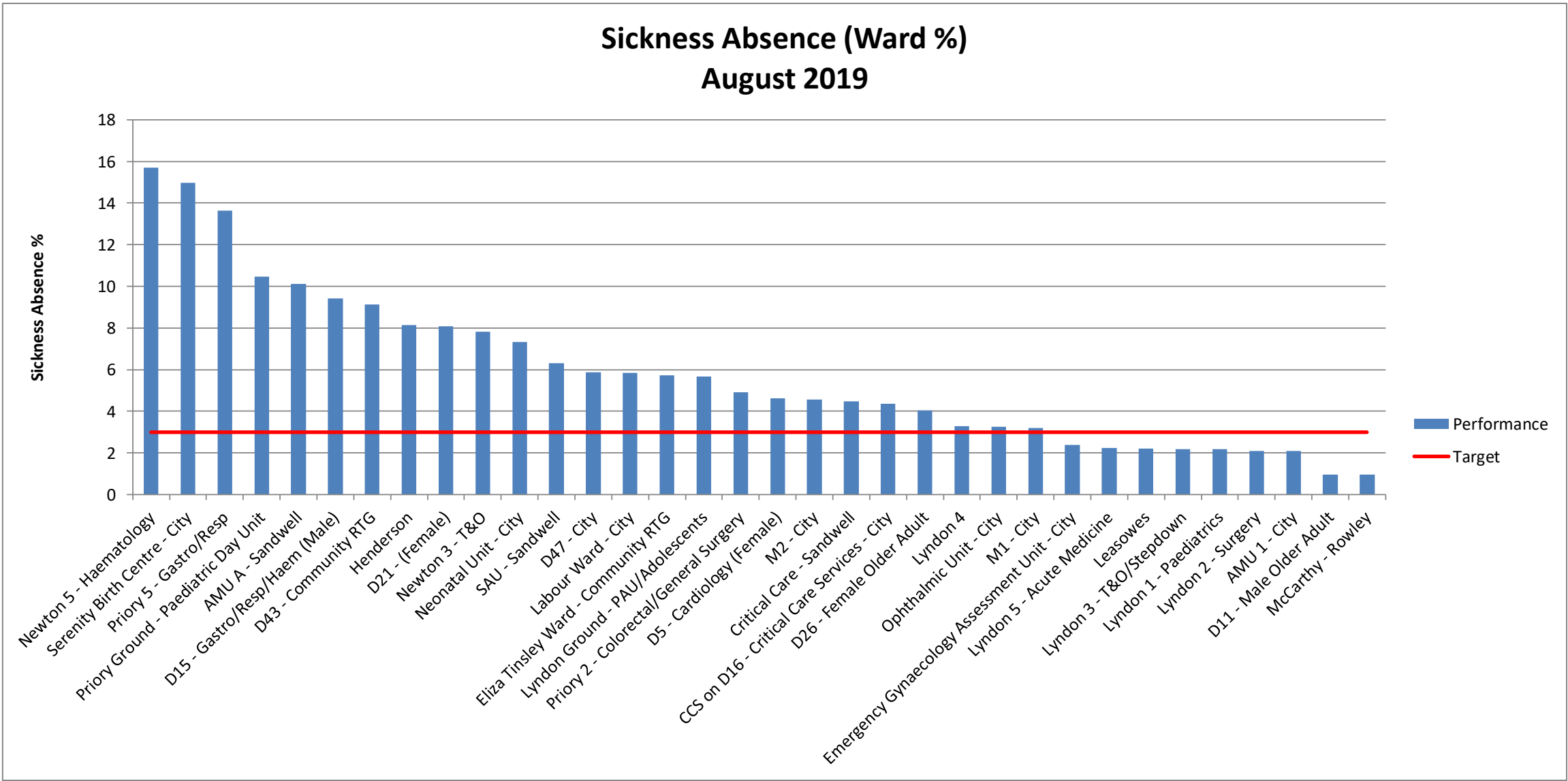
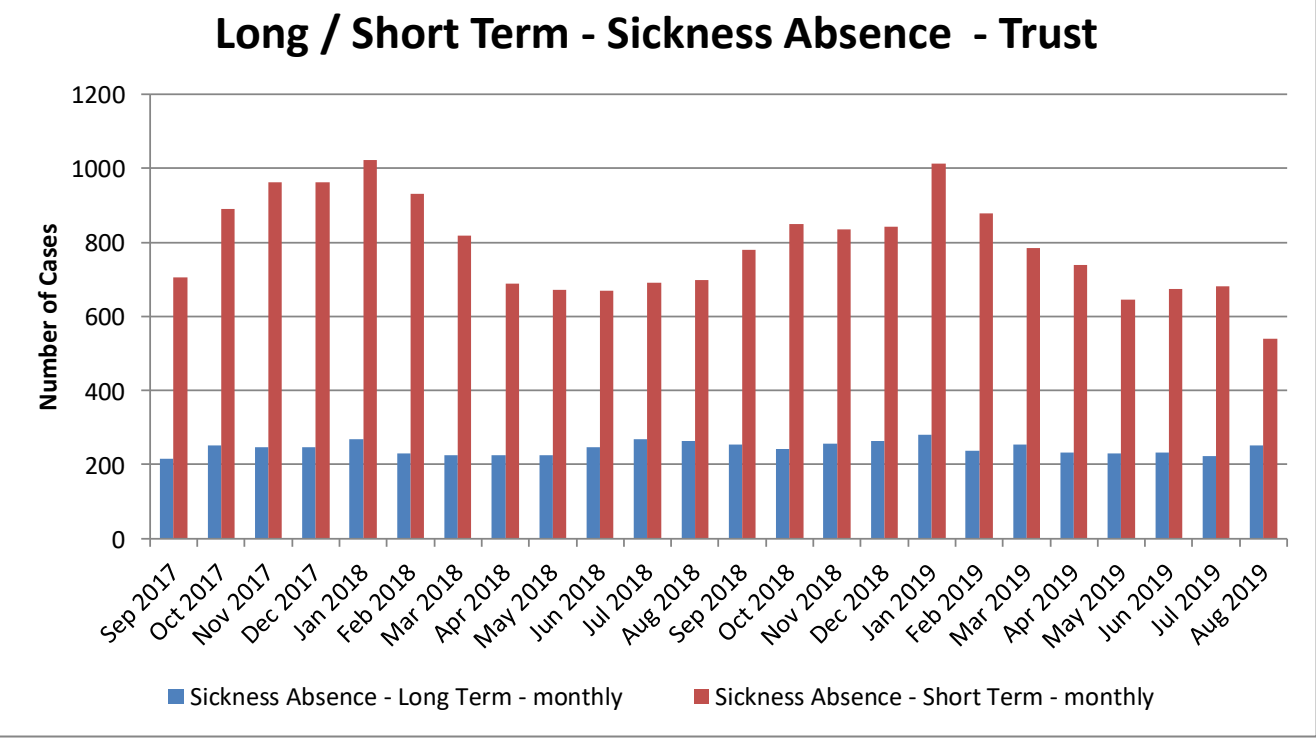
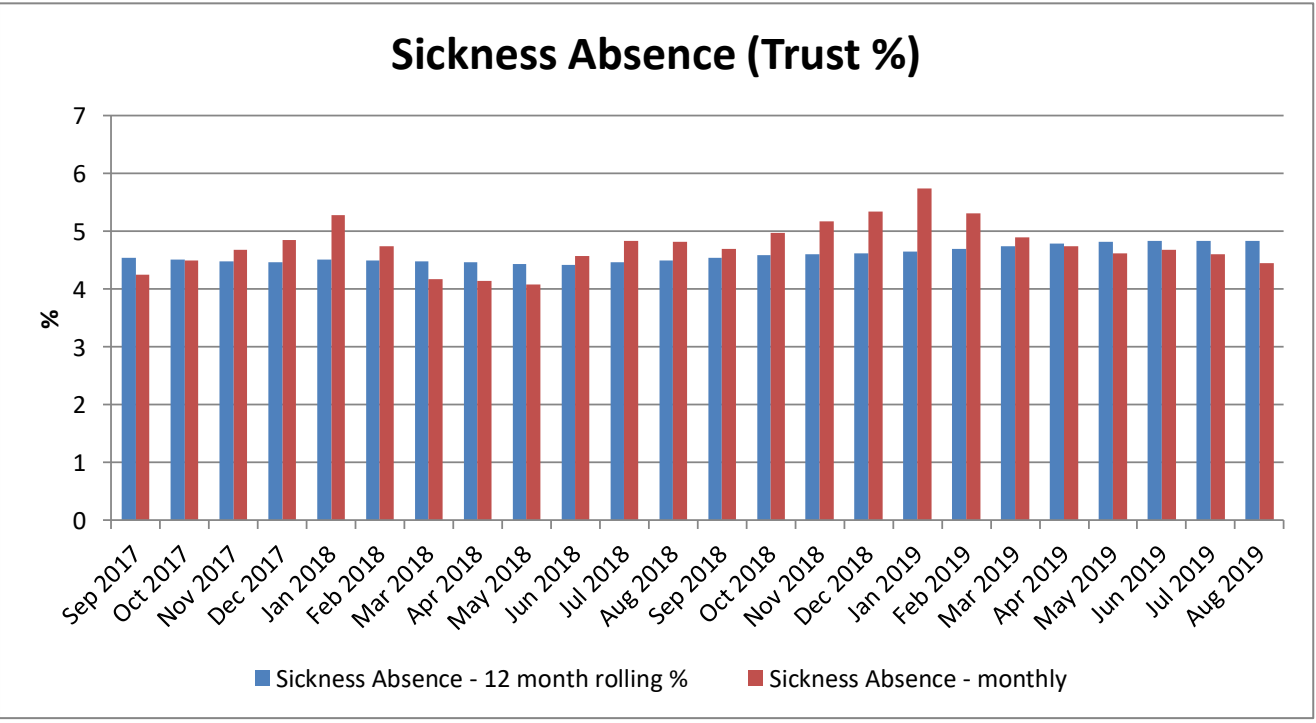
Workforce

2019 5

Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			PDRs - 12 month rolling	=> %	95.0	95.0
			Medical Appraisal	=> %	90.0	90.0
	Apr-19		Sickness Absence (Rolling 12 Months)	<= %	3.00	3.00
	Apr-19		Sickness Absence (Monthly)	<= %	3.00	3.00
	Apr-19		Sickness Absence - Long Term (Monthly)	<= No	140	140
	Apr-19		Sickness Absence - Short Term (Monthly)	No		
			Ward Sickness Absence (Monthly)	<= %	3.00	3.00
			Mandatory Training	=> %	95.0	95.0
			Mandatory Training - Health & Safety (% staff)	=> %	95.0	95.0
			Staff at 100% compliance with mandatory training	%		
			Staff requiring to complete 1 module to be at 100% compliance with mandatory training	%		
			Staff requiring to complete 2 modules to be at 100% compliance with mandatory training	%		
	Apr-19		Nursing Turnover (Qualified Only)	<= %	10.7	10.7
	Apr-19		Nursing Vacancy Rate (Qualified)	<= %	11.0	11.0
	Apr-19		WeConnect Staff Satisfaction Score	=> No	4.0	4.0
	Apr-19		WeConnect Staff Satisfaction Response Rate (%)	=> No	35.0	35.0
	Apr-19		WeConnect Staff Satisfaction Disengagement Rate	=> %	10.0	18.0
	Apr-19		New Starters Complete Onboarding Process	=> %	100.0	100.0
	Apr-19		Flu Vaccination Rate	=> %	85.0	85.0

Previous Months Trend (since Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
	->	->		->	->		->	->		->	->		->	->	->	->	
4.48	4.47	4.43	4.42	4.46	4.49	4.54	4.58	4.61	4.62	4.65	4.69	4.75	4.78	4.82	4.84	4.83	4.83
4.17	4.14	4.08	4.57	4.84	4.81	4.70	4.97	5.17	5.33	5.73	5.31	4.90	4.74	4.61	4.69	4.60	4.45
226	226	224	247	269	263	254	242	257	264	279	238	253	231	230	232	223	251
818	688	672	670	691	698	779	850	836	841	1013	878	784	738	644	674	681	539
-	-	-	-	-	-	-	-	-	-	8.1	7.3	6.9	6.8	6.6	6.7	5.8	5.8
																	
																	
-	-	-	-	-	-	-	-	-	-	-	-	70.82	73.76	72.7	56.83	64.433	60.44
-	-	-	-	-	-	-	-	-	-	-	-	12.42	13.51	12.85	23.03	18.7	21.96
-	-	-	-	-	-	-	-	-	-	-	-	8.077	8.372	6.488	8.489	7.2284	7.588
13.5	13.7	13.4	13.3	13.0	13.4	12.8	12.2	12.7	12.5	12.4	12.2	12.1	11.8	12.4	12.3	12.3	11.7
-	-	-	-	-	-	-	-	11.8	12.1	13.0	12.4	10.6	15.2	15.8	15.9	16.1	15.8
-	-	-	-	-	-	-	-	-	-	-	23.22	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	131.3	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-	-	100	-	-	-	-	-	-
-	-	-	-	-	-	-	-	100	84.21	87.5	82.14	86.89	92.31	77.61	87.5	94.643	87.05
-	-	-	-	-	-	-	-	83.33	83.7	-	-	-	-	-	-	-	-




Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Mar 2019	97.0	99.6	98.7	100.0	97.6	99.9	99.9			
Jul 2019	92.4	93.8	93.9	95.2	96.4	121.7	100.0	94.9	95.9	
Aug 2019	5.4	5.0	5.4	3.8	4.7	4.4	4.3	4.8	4.8	
Aug 2019	4.7	4.3	5.0	0.0	4.8	3.8	4.4	4.5	4.6	
Aug 2019	47	44	46	4	8	26	40	251	1167	
Aug 2019	142.0	93	60	5	19	78	54	539	3276	
Aug 2019	6.2	4.9	6.6	-	-	5.4	-	5.8	6.4	
Aug 2019	87.5	90.9	92.2	-	93.5	95.8	93.7	91.9		
Aug 2019	76.2	84.4	83.4	-	89.2	92.6	89.1	85.3		
Aug 2019	44.0	57.9	43.3	-	-	74.7	-	60.4		
Aug 2019	26.8	21.6	32.7	-	-	17.4	-	22.0		
Aug 2019	10.9	9.9	10.4	-	-	3.2	-	7.6		
Aug 2019								11.7	12.1	
Aug 2019								15.8	15.8	
Jan 2019	3.9	3.9	4.0	0.0	0.0	3.8	7.7	23.2		
Jan 2019								131.3		
Jan 2019	100.0	100.0	100.0	-	-	100.0	100.0	100.0		
Aug 2019	88.2	85.7	100.0	-	-	80.0	-	87.0	87.81	
Dec 2018	-	-	-	-	-	-	-	83.7	83.51	



Local Quality Indicators - 2019/2020

Data Quality	Last review	PAF	Indicator	Measure	Trajectory	
					Year	Month
			Morning Discharges (00:00 to 12:00) - SQPR	=> %	35	35
			Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload	=> %	100	100
			Community Nursing - Pressure Ulcer Risk Assessment For New community patients at initial assessment	=> %	95	95

Previous Months Trend (From Mar 2018)																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
16	15	15	17	17	15	15	16	16	16	20	18	20	19	16	17	17	17
91	91	94	94	96	95	97	95	91	93	93	95	95	93	97	97	97	97
92	93	94	95	96	95	97	95	92	94	93	95	95	93	97	98	97	96

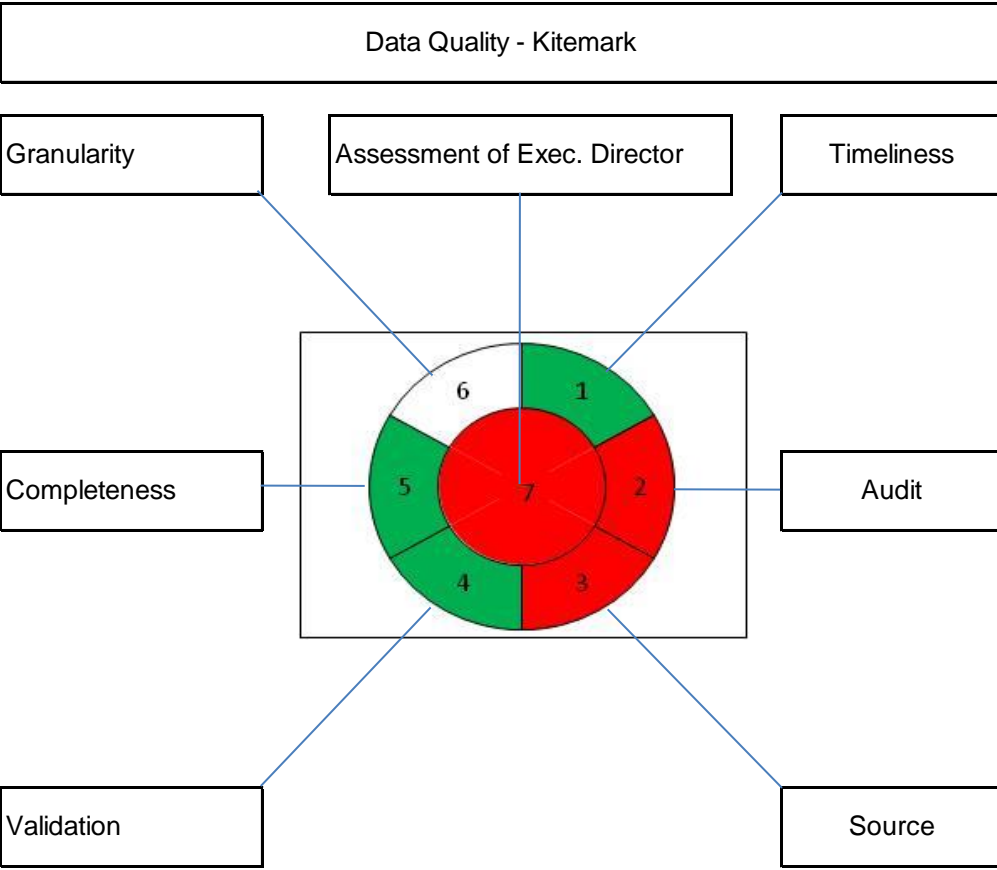
Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Aug 2019	15.9	13.2	20.7			33		17.1	17.1	
Aug 2019								96.8	96.0	
Aug 2019								96.3	96.1	

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	
<div><div></div></div>	NHS TDA Accountability Framework
a	Caring
b	Well-led
c	Effective
d	Safe
e	Responsive
f	Finance
<div><div></div></div>	Monitor Risk Assessment Framework
<div><div></div></div>	CQC Intelligent Monitoring

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



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

Red	Insufficient
Green	Sufficient
White	Not Yet Assessed

The centre of the indicator is colour coded as follows:


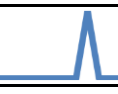

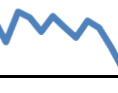
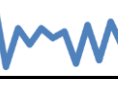
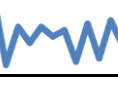
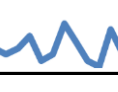
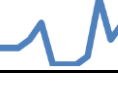

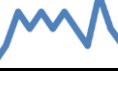

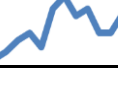

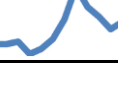

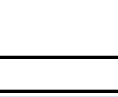
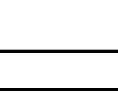



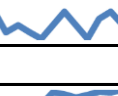

Red / Green	As assessed by Executive Director
White	Awaiting assessment by Executive Director

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

Medicine Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Patient Safety - Inf Control	C. Difficile	<= No	30	3
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	80	80
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	80	80
Patient Safety - Harm Free Care	Number of DOLS raised	No		
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No		
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No		
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No		
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No		
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No		
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No		
Patient Safety - Harm Free Care	Falls	<= No	0	0
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0
Patient Safety - Harm Free Care	Never Events	<= No	0	0
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98

[illegible]

Data Period	Directorate			Month	Year To Date	Trend
	EC	AC	SC			
Aug 2019	0	0	1	1	5	
Aug 2019	0	0	0	0	1	
Aug 2019	68	81	58	69.9		
Aug 2019	78	90	100	79.5		
Aug 2019	2	12	0	14	84	
Aug 2019	2	12	0	14	84	
Aug 2019	0	4	0	4	23	
Aug 2019	0	2	0	2	13	
Aug 2019	1	7	0	8	45	
Aug 2019	1	1	0	2	3	
Aug 2019	0	0	0	0	-	
Aug 2019	15	43	-	58	274	
Aug 2019	0	0	0	0	7	
Aug 2019	2	10	-	12	61	
Aug 2019	92.3	88.4	96.1	92.6		
Aug 2019	100.0	100.0	100.0	100.0		
Aug 2019	100	100	-	99.7		
Aug 2019	100	100	-	99.7		
Aug 2019	0	0	0	0	0	
Aug 2019	0	0	0	0	0	
Aug 2019	0	5	0	5	22	
Jun 2019	58	84	76	75		

Medicine Group

Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%		
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Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0	90.0
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Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0
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Clinical Effect - Stroke & Card	Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85.0	85.0
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Clinical Effect - Stroke & Card	TIA (High Risk) Treatment <24 Hours from receipt of referral (%)	=> %	70.0	70.0
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Clinical Effect - Stroke & Card	Primary Angioplasty (Door To Balloon Time 90 mins) (%)	=> %	80.0	80.0
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Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0	98.0
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Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0
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Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No		
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Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No		
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Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0	0.0
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Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
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10.7	11.0	11.2	11.6	11.9	12.2	12.3	12.2	12.3	12.3	12.4	12.5	12.5	12.4	12.4	12.4	12.4	-
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[illegible]

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[illegible][illegible][illegible][illegible]

1	3	5	2	1	3	2	4	4	6.5	4.5	1.5	2.5	4	0.5	2	5	-
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280	118	104	112	103	146	86	104	101	197	91	154	163	168	183	91	149	-
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0	0	0	0	15	0	0	0	0	-	1058	171	7	4	0	0	31	0
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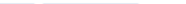
34	36	35	24	55	27	25	30	29	30	14	24	27	33	47	26	31	24
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Jul 2019					12.4	
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May 2019		88.2		88.2	89.4	
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May 2019		66.1		66.1	64.5	
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May 2019		87.5		87.5	81.8	
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May 2019		88.9		88.9	96.0	
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Aug 2019		100.0		100.0	95.2	
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Aug 2019		100.0	100.0	100.0	
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Figure 10 shows the model's output for the July 2019 time step. The output is visualized as a 3x3 grid of cells, where the bottom-right cell contains the value 88.6. A red box highlights the value 88.6, and a line graph shows a sharp drop in the output.

Jul 2019	-	-	5.00	5.00	12	
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Jul 2019	-	-	149	149	
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Aug 2019	0	0	0	0	35	
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Aug 2019	14	10	0	24	161	
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Medicine Group

Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		
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Section	Indicator	Measure	Trajectory	
			Year	Month
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8
Pt. Experience - Cancellations	28 day breaches	<= No	0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0
Pt. Experience - Cancellations	Urgent Cancelled Operations	No		
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0	95.0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No		
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0	15.0
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0	60.0
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No		
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No		
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%		
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No		
RTT	RTT - Admitted Care (18-weeks) (%)	=> %	90.0	90.0
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0

76	81	89	71	97	90	80	87	88	99	75	67	62	84	80	37	58	48
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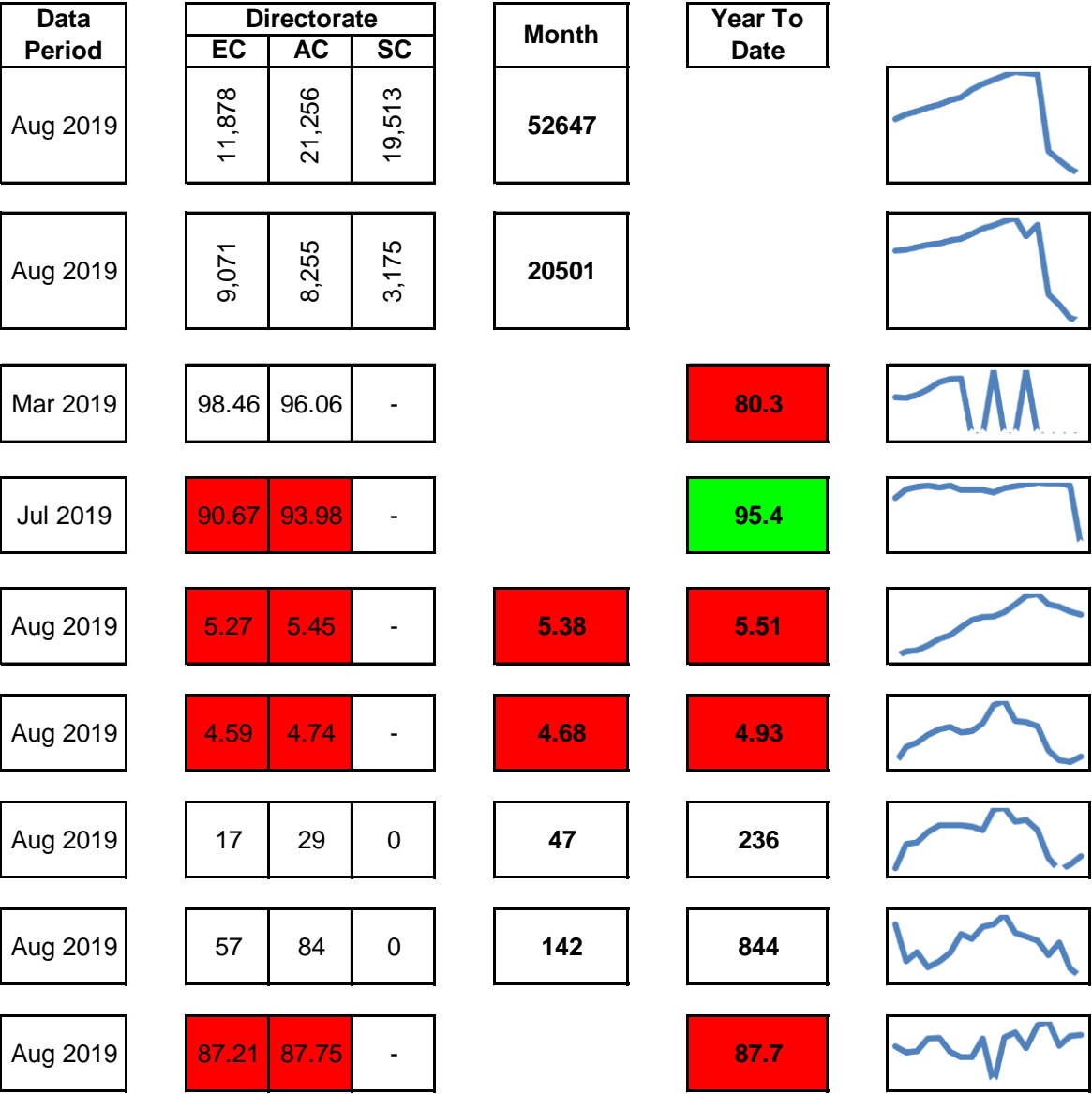
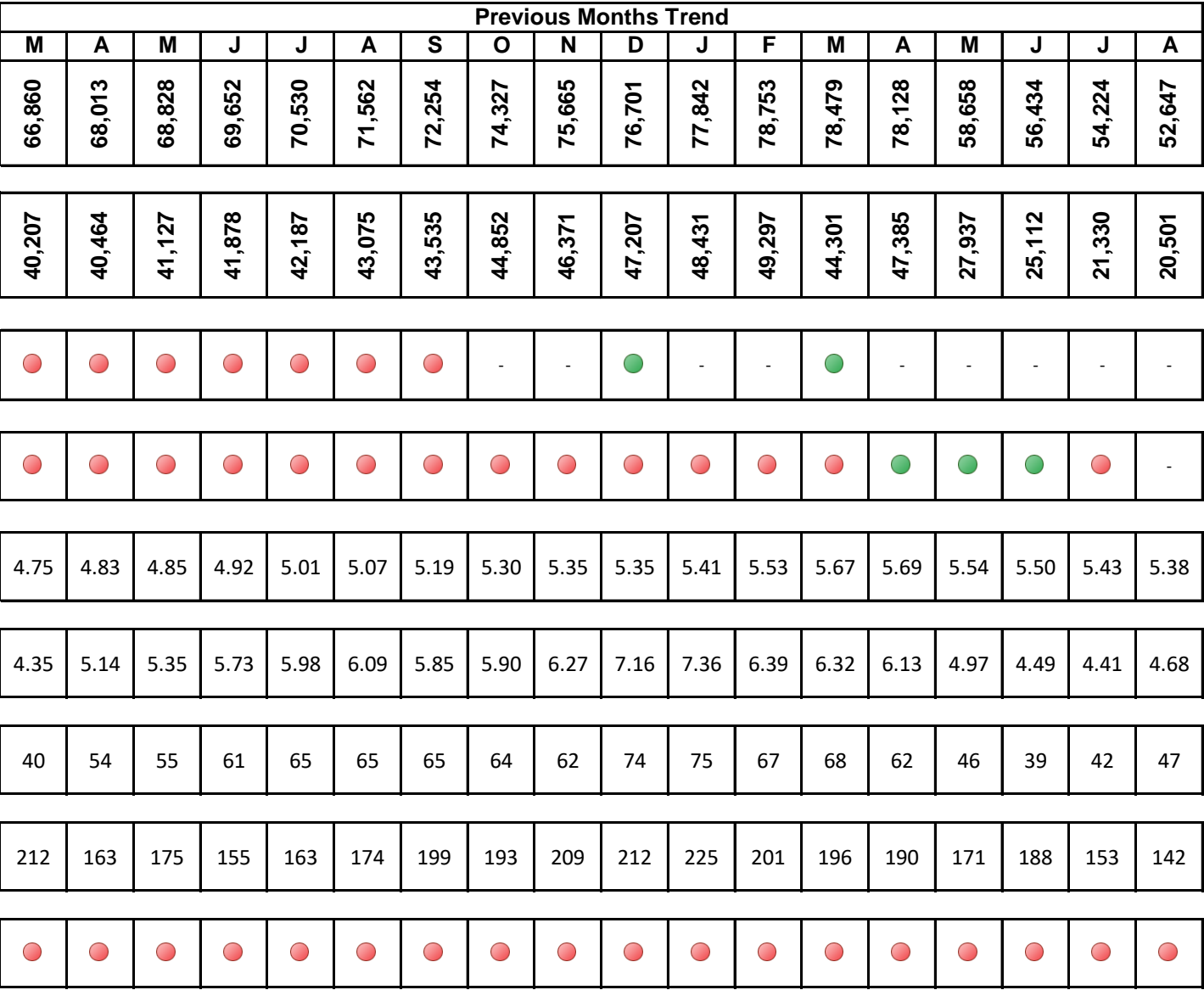
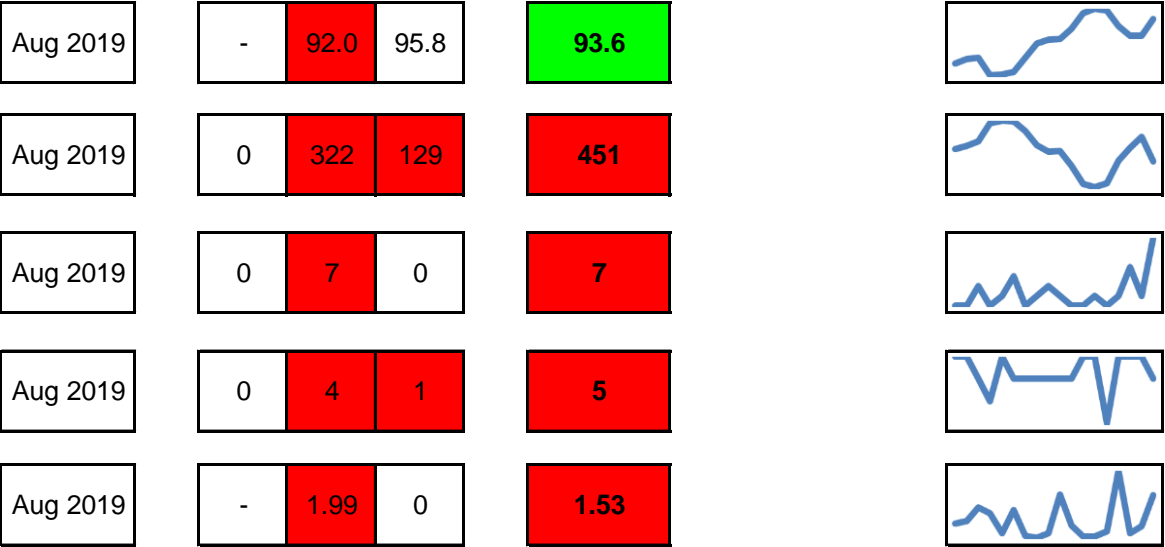
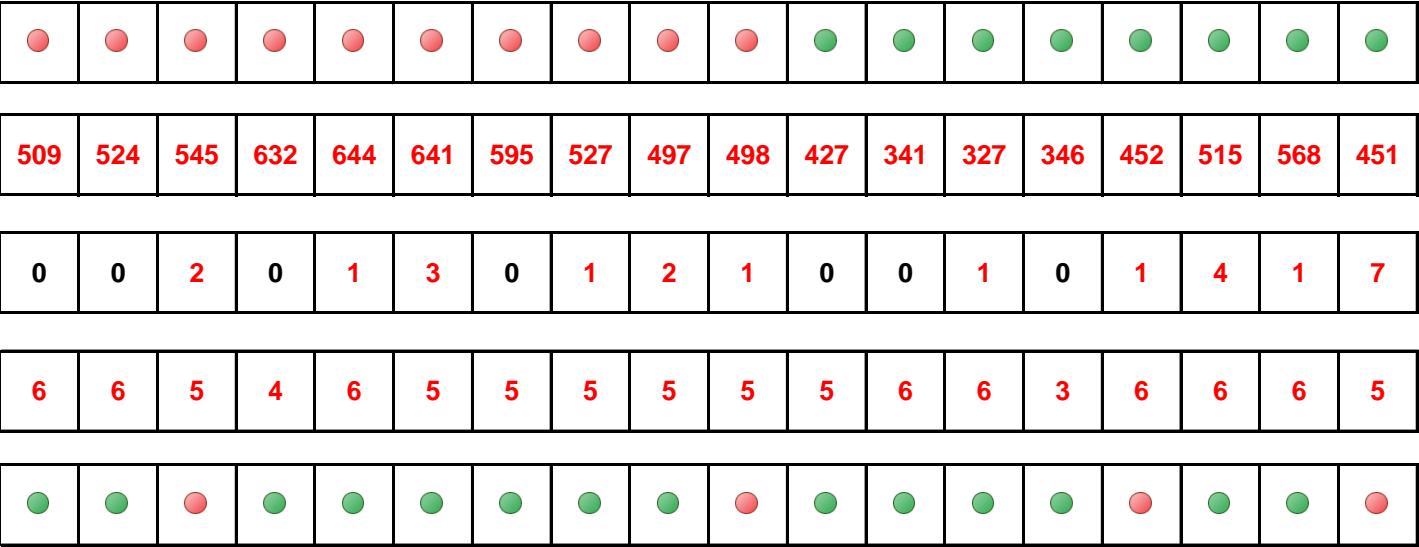
Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
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0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	0	1	1	1	0	0	1	3	1	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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2635	1935	2814	2661	2294	2075	2154	2721	2533	3349	3163	2318	1960	3104	2534	2570	2695	2549
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196	173	219	195	165	116	95	121	159	205	168	160	88	166	119	128	123	162
21	6	6	10	2	8	5	6	7	7	9	8	6	5	4	4	5	9
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4487	4308	4539	4306	4685	4522	4354	4622	4579	4872	4835	4372	4655	4814	4670	4555	4658	4486
-	-	-	-	-	111	111	129	111	107	118	108	94	118	117	112	112	101
24.647	24.23	23.916	24.201	21.496	24.306	20.629	23.798	21.837	18.582	19.384	22.832	22.213	22.153	22.386	20.622	19.24	22.542
134	124.37	117.61	121.87	95.87	117.01	94.66	117.36	110	84.96	99.93	119.14	106.62	106.27	119.09	94.77	91.52	113.55
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Aug 2019	24	24	0	48		
Data Period	Directorate			Month	Year To Date	
Aug 2019	-	-	-	-		
Aug 2019	0.0	0.0	0.0	0	0	
Aug 2019	0.0	0.0	0.0	0	0	
Aug 2019	0.00	0.00	0.00	0.00	0	
Aug 2019	75.8	84.7	Site S/C	80.3	79.9	
Aug 2019	2374	0	175	2549	13452	
Aug 2019	0.0	0.0	Site S/C	0	0	
Aug 2019	13.0	14.0	Site S/C	14	14	
Aug 2019	66.0	54.0	Site S/C	52	62	
Aug 2019	5.7	6.2	Site S/C	5.9	5.7	
Aug 2019	6.3	7.0	Site S/C	6.7	7.2	
Aug 2019	148	14		162	698	
Aug 2019	9	0		9	27	
Aug 2019	0.38	0.00		0.20	0.12	
Aug 2019	2348	2138		4486	23183	
Aug 2019	70	23		101	-	
Aug 2019	37	9		23	21	
Aug 2019	95	13		114	-	
Aug 2019	-	83.6	100.0	90.5		
Aug 2019	-	77.9	87.2	82.4		

Medicine Group

RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0
RTT	RTT - Backlog	<= No	0	0
RTT	Patients Waiting >52 weeks	<= No	0	0
RTT	Treatment Functions Underperforming	<= No	0	0
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0

Section	Indicator	Measure	Trajectory	
			Year	Month
Data Completeness	Open Referrals	No		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Re	No		
Workforce	PDRs - 12 month rolling (%)	=> %	95.0	95.0
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.00	3.00
Workforce	Sickness Absence - In month	<= No	3.00	3.00
Workforce	Sickness Absence - Long Term - In month	No		
Workforce	Sickness Absence - Short Term - In month	No		
Workforce	Mandatory Training (%)	=> %	95.0	95.0



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

Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
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0	0	2	1	1	1	1	0	0	0	0	3	1	0	2	1	0	0
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5.5	7.2	5.8	6.1	7.1	6.8	6.3	5.4	6.2	7.2	4.9	6.3	6.4	5.6	6.0	4.8	4.8	-

Data Period	Directorate					Month	Year To Date	Trend
	GS	SS	TH	An	O			
Aug 2019	1	0	0	0	0	1	1	
Aug 2019	0	0	0	0	0	0	0	
Aug 2019	86.11	76.95	-	0	60.61	80.5		
Aug 2019	83.66	87.65	-	100	86.84	85.3		
Aug 2019	8	0	0	1	0	9	40	
Aug 2019	8	0	0	1	0	9	40	
Aug 2019	1	0	0	0	0	1	5	
Aug 2019	0	0	0	0	0	0	3	
Aug 2019	6	0	0	1	0	7	29	
Aug 2019	0	0	0	0	0	0	2	
Aug 2019	4	4	-	1	-	9	46	
Aug 2019	0	0	0	0	0	0	0	
Aug 2019	3	4	-	1	-	8	31	
Aug 2019	95.26	98.02	-	98.28	98.48	97.0		
Aug 2019	100	100	100	100	100	100.0		
Aug 2019	-	-	100	-	100	100.0		
Aug 2019	-	-	97.67	-	100	99.5		
Aug 2019	0	0	0	0	0	0	2	
Aug 2019	0	0	0	0	0	0	0	
Aug 2019	0	0	0	0	0	0	6	
Jun 2019	86	100	-	-	-	88.9		
Jul 2019						4.8		

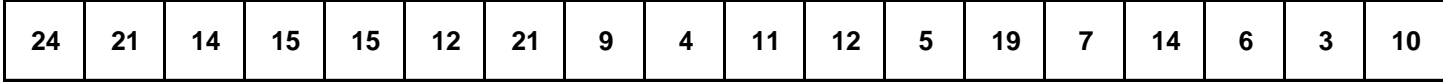
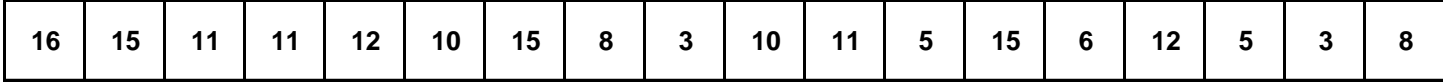
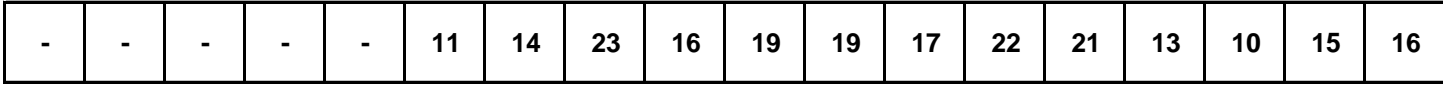
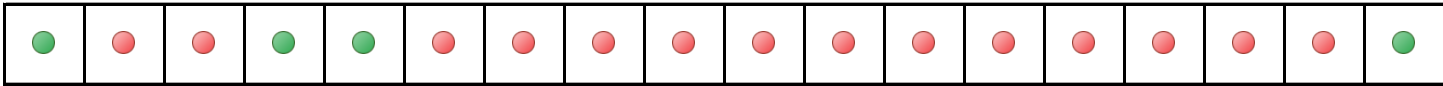
Surgical Services Group

Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			6.28	6.36	6.3	6.28	6.26	6.27	6.3	6.24	6.31	6.39	6.29	6.22	6.3	6.16	6.18	6.07	5.84	-	Jul 2019						6.1		
Section	Indicator	Measure	Trajectory		Previous Months Trend																		Data Period	Directorate					Month	Year To Date	
			Year	Month	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		GS	SS	TH	An	O			
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Jul 2019	97.6	-	-	-	-	97.57		
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0																		-	Jul 2019	98.1	-	-	-	-	98.06		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Jul 2019	98.8	-	-	-	-	98.8		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0																		-	Jul 2019	92.2	-	-	-	-	92.21		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			4	3	9	3	6	4	4	3	5	3	4	4	6	5	4	4	3	-	Jul 2019	-	-	-	-	-	3	16	
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			0	1	2	1	2	1	1	2	1	1	1	1	3	1	4	1	1	-	Jul 2019	0.5	-	0	-	-	0.5	6	
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			90	130	137	119	196	113	161	137	185	136	123	116	175	131	120	111	105	.	Jul 2019	105	-	0	-	-	105		
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	Aug 2019	0	-	0	-	-	0	0	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	0	0	0	-	65	58	33	18	11	9	13	7		Aug 2019	0	0	0	7	0	7	58		
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			32	24	23	27	25	19	24	25	19	12	11	19	18	18	16	18	22	15	Aug 2019	9	2	1	1	2	15	89	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			50	45	47	57	57	65	79	74	71	62	46	52	41	34	26	30	38	26	Aug 2019	13	7	1	2	3	26		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																			Aug 2019	1.28	2.03	-	-	0.93	1.2		
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Aug 2019	0	0	0	0	0	0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	41	24	44	17	13	18	21	22	22	20	22	27	26	38	31	32	39	27	Aug 2019	10	10	0	0	7	27	167	
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	Aug 2019	0	0	0	0	0	0	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	=> %	95.0	95.0	97.5	98.6	98.5	97.9	99.3	98.8	99.2	99.1	99.4	99.7	99.4	98.6	99.7	98.8	98.7	95.9	95.7	98.3	Aug 2019	-	-	-	-	98.31	-	-	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0	179	160	148	110	117	157	89	69	84	82	77	64	56	145	102	94	148	144	Aug 2019	74	49	0	1	20	144	633	
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	Aug 2019	-	-	-	-	0	-	-	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	6.1	4.9	5.5	5.8	5.6	4.3	5.4	5.1	2.2	4.4	2.3	1.7	1.0	2.1	2.1	1.7	2.6	2.2	Aug 2019	-	-	-	-	2.24	-	-	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	1.1	5.0	3.6	4.1	4.3	2.2	4.4	3.1	4.0	3.0	3.3	3.6	4.8	4.8	4.5	5.5	6.7	3.7	Aug 2019	-	-	-	-	3.66	-	-	
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	-	-	-	-	25	0	0	
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	24	21	14	15	15	12	21	9	4	11	12	5	19	7	14	6	3	10	Aug 2019	3.94	5.58	-	0	0.39	9.91	40	

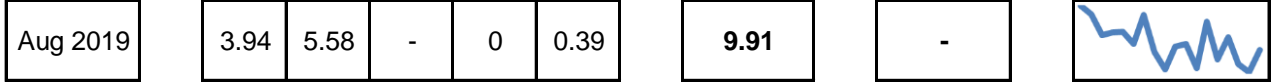
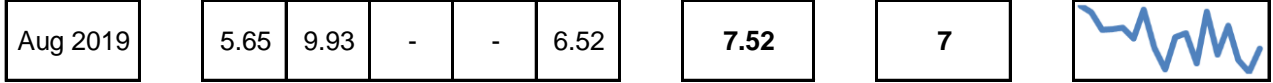
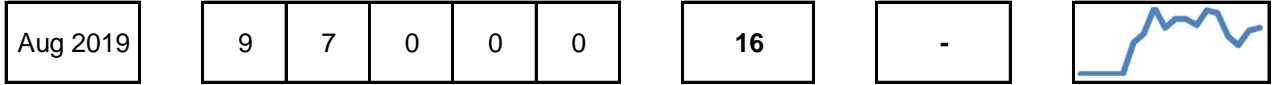
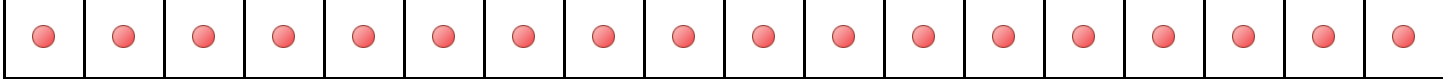
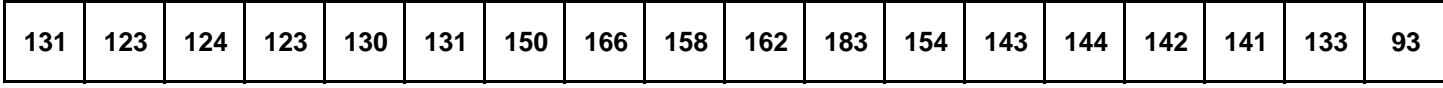
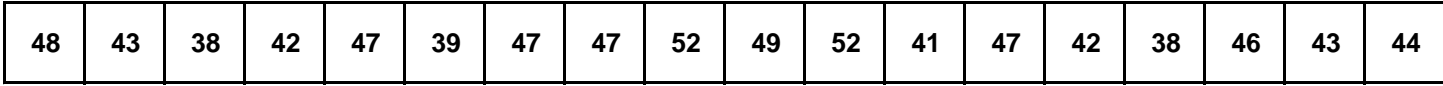
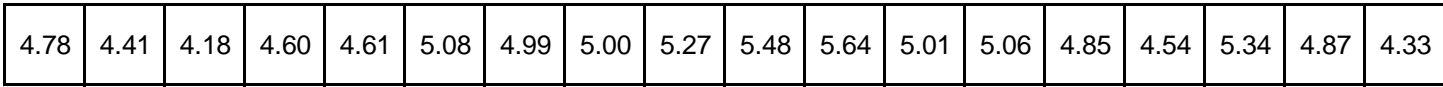
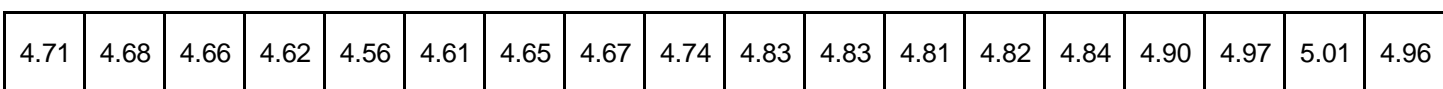
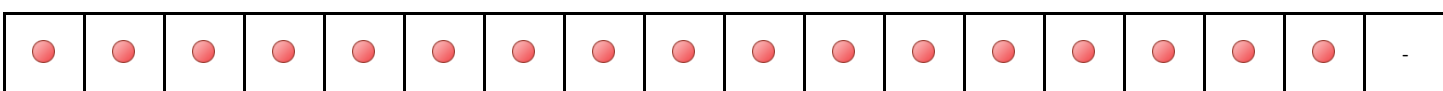
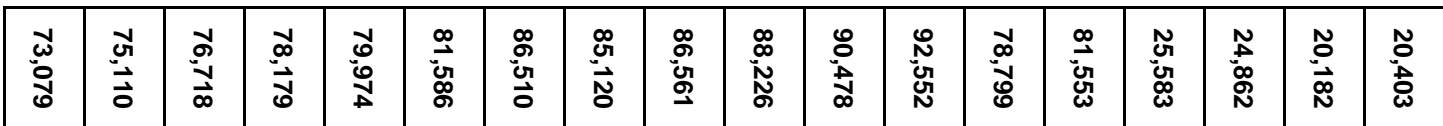
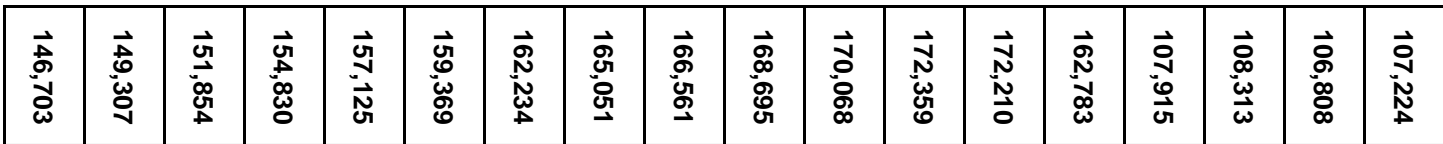
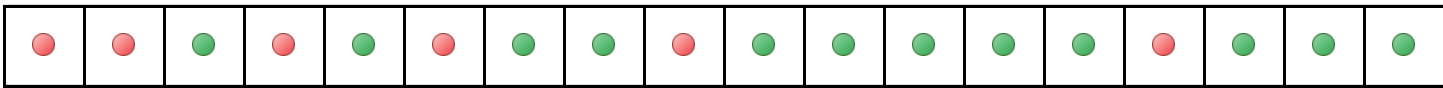
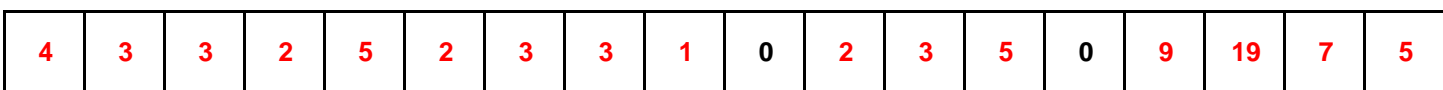
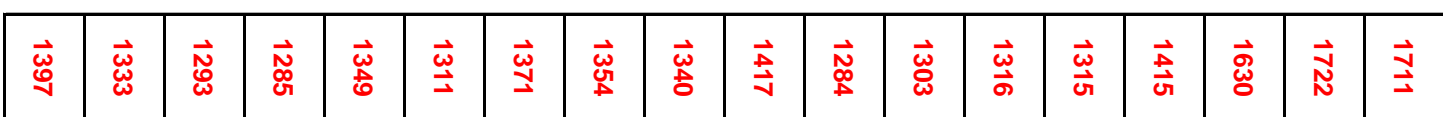
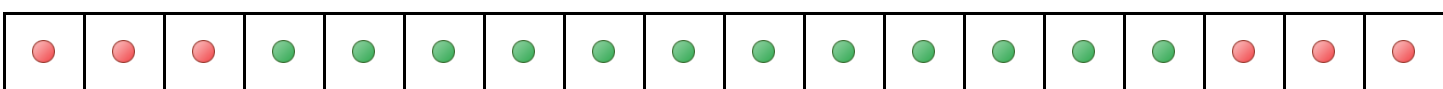
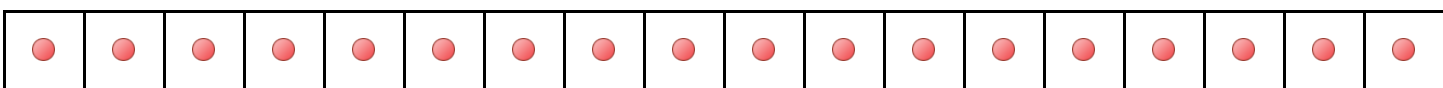
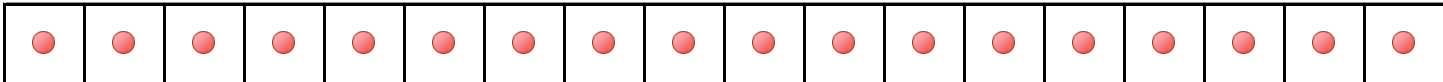
Surgical Services Group

Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions	=> %	85.0	85.0
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No		
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%		
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No		

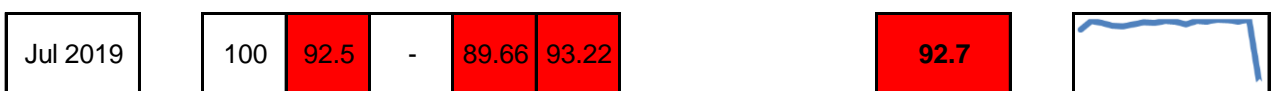
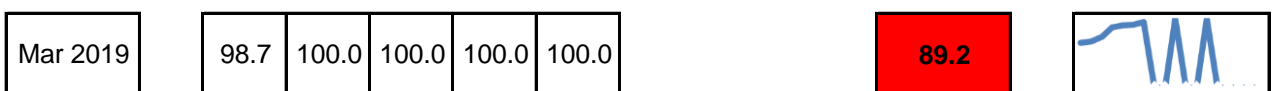
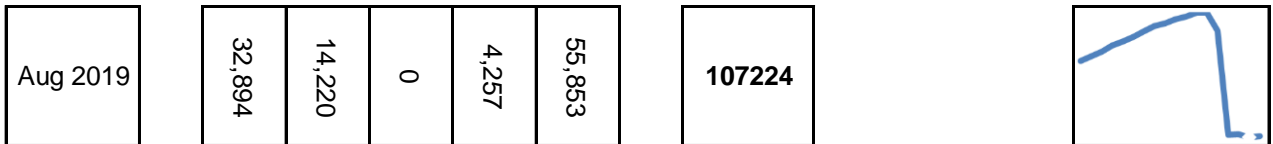
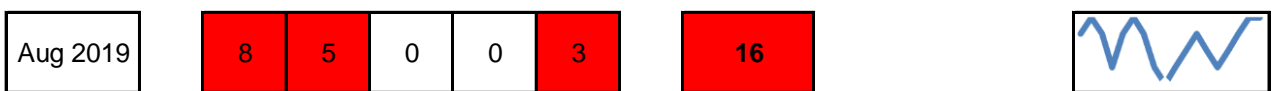
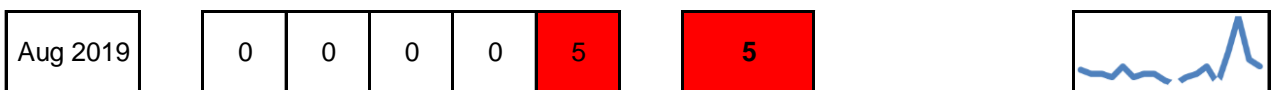
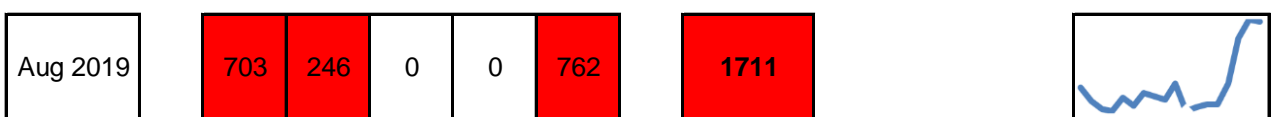
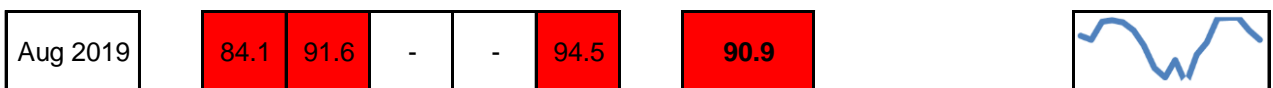
Section	Indicator	Measure	Trajectory	
			Year	Month
RTT	RTT - Admitted Care (18-weeks) (%)	=> %	90.0	90.0
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0
RTT	RTT - Backlog	<= No	0	0
RTT	Patients Waiting >52 weeks	<= No	0	0
RTT	Treatment Functions Underperforming	<= No	0	0
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0
Data Completeness	Open Referrals	No		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Req	No		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.0	3.0
Workforce	Sickness Absence - In Month	<= %	3.0	3.0
Workforce	Sickness Absence - Long Term - In Month	No		
Workforce	Sickness Absence - Short Term - In Month	No		
Workforce	Mandatory Training	=> %	95.0	95.0



Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A



Data Period	Directorate					Month	Year To Date	
	GS	SS	TH	An	O			



Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date	Trend		
			Year	Month	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	A	G				M	P
Patient Safety - Inf Control	C. Difficile	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	0	0	0	<div>0</div>	<div>0</div>	<div></div>	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	0	0	0	<div>0</div>	<div>0</div>	<div></div>	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.00	80.00	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	77.9			<div>77.9</div>		<div></div>	
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80.00	80.00	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	-	95		<div>95.0</div>		<div></div>	
Patient Safety - Harm Free Care	Falls	<= No	0	0	<div>0</div>	<div>0</div>	<div>1</div>	<div>1</div>	<div>1</div>	<div>0</div>	<div>1</div>	<div>4</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>1</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>1</div>	Aug 2019	-	1	-	<div>1</div>	<div>2</div>	<div></div>
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>-</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	Aug 2019	0	0	0	<div>0</div>	<div>0</div>	<div></div>	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= %	0	0	<div>0</div>	<div>0</div>	<div>0</div>	<div>4</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>4</div>	<div>0</div>	<div>2</div>	<div>-</div>	<div>-</div>	Aug 2019	-	-	-	<div>-</div>	<div>3</div>	<div></div>
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	98.6	94.3		<div>95.9</div>		<div></div>	
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	100	100		<div>100.0</div>		<div></div>	
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	-	-		<div>-</div>		<div></div>	
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	-	-		<div>-</div>		<div></div>	
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	0	0	0	<div>0</div>	<div>1</div>	<div></div>	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	0	0	0	<div>0</div>	<div>0</div>	<div></div>	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	0	0	0	<div>0</div>	<div>3</div>	<div></div>	

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Section	Indicator	Measure	Trajectory		Previous Months Trend														Data Period	Directorate			Month	Year To Date					
			Year	Month	M	A	M	J	J	A	S	O	N	D	J	F	M	A		M	J	J				A	G	M	P
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	26.9	<div></div>	26.9	27.3	<div></div>	
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%			8	10	10	9	9	10	9	9	9	10	8	11	9	9	10	11	11	10	Aug 2019	<div></div>	9.93	<div></div>	9.9	10.0	<div></div>
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%			18	17	18	15	20	17	19	16	17	16	14	17	17	15	16	18	20	17	Aug 2019	<div></div>	16.9	<div></div>	16.9	17.3	<div></div>
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	0	<div></div>	0	0	<div></div>	
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	6	<div></div>	6	16	<div></div>	
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	2	<div></div>	2.0	1.7	<div></div>	
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	8.93	<div></div>	8.9		<div></div>	
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			4.66	5.98	6.16	4.41	2.05	4.17	0.00	7.86	2.23	4.57	2.30	2.51	4.64	0.00	6.25	4.45	6.51	8.93	Aug 2019	<div></div>	8.93		8.93	5.27	<div></div>
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			0.00	1.99	0.00	4.41	4.10	2.08	0.00	0.00	2.23	0.00	0.00	2.51	0.00	0.00	2.08	0.00	0.00	0.00	Aug 2019	<div></div>	0		0.00	0.44	<div></div>
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	92.9	<div></div>	92.9		<div></div>	
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	135	<div></div>	135.1		<div></div>	
Patient Safety - Obstetrics	Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Aug 2019	<div></div>	83.4	<div></div>	83.4		<div></div>	
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	%			1.0	0.8	0.5	0.9	1.5	1.3	1.2	1.7	2.6	1.2	2.1	0.6	0.5	1.8	2.2	1.4	0.9	0.8	Aug 2019	<div></div>	0.76	<div></div>	0.8		<div></div>
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	%			0.7	0.8	0.5	0.6	0.9	1.3	1.2	1.7	2.6	1.2	2.1	0.6	0.5	0.9	1.9	1.0	0.9	0.8	Aug 2019	<div></div>	0.76	<div></div>	0.8		<div></div>
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	%			0.0	0.3	0.2	0.0	0.6	0.5	0.3	0.8	1.5	0.4	1.9	0.0	0.0	0.0	0.6	0.7	0.6	0.0	Aug 2019	<div></div>	0	<div></div>	0.0		<div></div>
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0	N/A	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	N/A	<div></div>	<div></div>	N/A	<div></div>	N/A	<div></div>	N/A	N/A	-	-	Jun 2019	-	-	-	-		<div></div>	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			4.7	4.9	4.4	4.9	4.5	3.7	4.2	4.4	5.1	6.3	4.6	4.8	3.9	4.3	4.0	3.7	9.2	-	Jul 2019	<div></div>	<div></div>	<div></div>	9.2		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.6	4.7	4.7	4.7	4.7	4.6	4.6	4.5	4.6	-	Jul 2019	<div></div>	<div></div>	<div></div>		4.6	<div></div>
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2019	94.2	<div></div>	-	94.2		<div></div>	
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2019	100	<div></div>	<div></div>	100.0		<div></div>	
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	#DIV/0!	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2019	82.6	<div></div>	<div></div>	82.6		<div></div>	

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Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No		
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No		
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No		
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0	0

Section	Indicator	Measure	Trajectory	
			Year	Month
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8
Pt. Experience - Cancellations	28 day breaches	<= No	0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0
Pt. Experience - Cancellations	Urgent Cancelled Operations	No		
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No		
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No		
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%		
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No		
RTT	RTT - Admittted Care (18-weeks)	=> %	90.0	90.0
RTT	RTT - Non Admittted Care (18-weeks)	=> %	95.0	95.0
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0
RTT	RTT - Backlog	<= No	0	0
RTT	Patients Waiting >52 weeks	<= No	0	0
RTT	Treatment Functions Underperforming	<= No	0	0

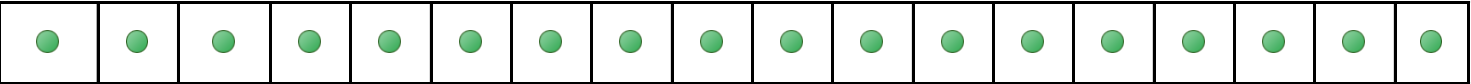
1	0.5	3	3	3	3.5	1.5	0.5	1.5	1.5	2.5	3	3	0.5	2	1.5	2	-
2	0	0	0	1	0.5	0	0	0	0	1	1	3	1	0	0	0.5	-
133	73	89	101	113	105	72	100	86	84	137	177	209	241	97	85	196	-
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0
16	12	6	6	8	9	4	8	9	6	8	10	12	5	18	12	23	4
27	26	19	20	18	26	20	24	20	17	13	14	18	17	26	19	23	6
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
5	6	6	3	1	2	1	2	3	6	11	9	5	6	7	3	5	5
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11	9	23	8	13	16	39	17	65	61	34	11	17	46	20	10	13	7
-	-	-	-	-	0	3	8	4	0	0	0	0	0	0	1	1	1
3	2	2	0	2	4	0	0	10	0	0	0	2	1	4	3	7	1
0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	0
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
90	94	109	135	125	121	146	176	190	199	174	169	142	146	162	201	231	187
1	1	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	1
1	2	1	2	2	2	2	3	3	3	3	3	2	2	2	3	3	3

Jul 2019	2	-	0	2	6	
Jul 2019	0.5	-	0	0.5	1.5	
Jul 2019	196	-	0	196		
Aug 2019	0	-	0	0	0	
Data Period	Directorate			Month	Year To Date	
	G	M	P			
Aug 2019	0			0	0	
Aug 2019	3	1	0	4	62	
Aug 2019	0	0	0	6		
Aug 2019	3.45		-	2.4		
Aug 2019	0			0	0	
Aug 2019	5			5	26	
Aug 2019	0	-	0	0	0	
Aug 2019	6	0	1	7	96	
Aug 2019	1	0	0	1	-	
Aug 2019	0.78	-	-	1	3	
Aug 2019	0.1	-	-	0	-	
Aug 2019	73.4			73.4		
Aug 2019	79.5			79.5		
Aug 2019	91.2			91.2		
Aug 2019	187			187		
Aug 2019	1			1		
Aug 2019	3			3		

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RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1	0.1
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Aug 2019	-			-	
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Section	Indicator	Measure	Trajectory	
			Year	Month

Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A

Data Period	Directorate			Month	Year To Date	
	G	M	P			

Data Completeness	Open Referrals	No		
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37,586	38,615	39,768	40,844	41,619	42,447	42,951	44,208	44,908	45,494	46,043	46,262	31,884	27,992	24,316	23,359	23,153	22,571
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Aug 2019	5,600	9,481	7,490	22571	
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Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		
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22,234	23,118	23,836	24,667	25,292	26,109	26,984	27,469	28,290	28,789	29,439	29,926	9,906	10,961	7,086	6,248	5,887	5,518
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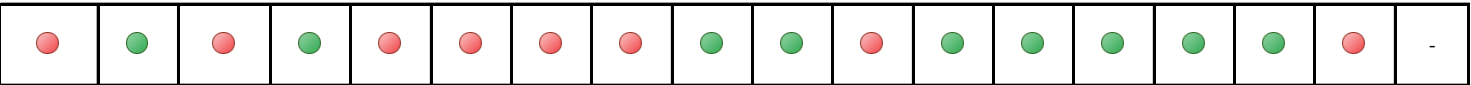
Aug 2019	1,169	4,051	298	5518	
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Workforce	PDRs - 12 month rolling	=> %	95.0	95.0
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Mar 2019	100	98.4	-	87.9	
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Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0
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Jul 2019	86.7	100	100	96.1	
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Workforce	Sickness Absence - 12 month rolling	<= %	3.0	3.0
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4.38	4.32	4.29	4.44	4.51	4.59	4.61	4.66	4.67	4.68	4.77	4.84	4.96	5.06	5.26	5.35	5.34	5.38
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Aug 2019	2.92	6.58	4.61	5.4	5.3	
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Workforce	Sickness Absence - in month	<= %	3.0	3.0
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4.14	3.91	4.29	5.57	5.34	5.04	4.58	4.85	4.69	4.86	6.14	5.70	5.55	5.35	6.06	6.21	5.59	4.96
------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------

Aug 2019	2.21	6.55	3.92	5.0	5.6	
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Workforce	Sickness Absence - Long Term - in month	No		
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35	25	37	40	42	39	37	30	35	31	48	41	41	39	45	47	40	46
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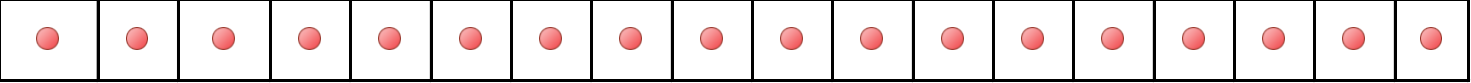
Aug 2019	2	28	16	46.0	217.0	
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Workforce	Sickness Absence - Short Term - in month	No		
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106	95	84	92	85	90	97	134	120	117	135	115	102	97	78	70	87	60
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Aug 2019	4	38	18	60.0	392.0	
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Workforce	Mandatory Training	=> %	95.0	95.0
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Aug 2019	88.9	92	93.3	90.1	
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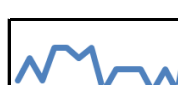
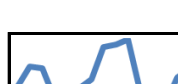


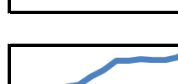
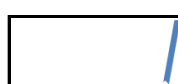
Women & Child Health Group

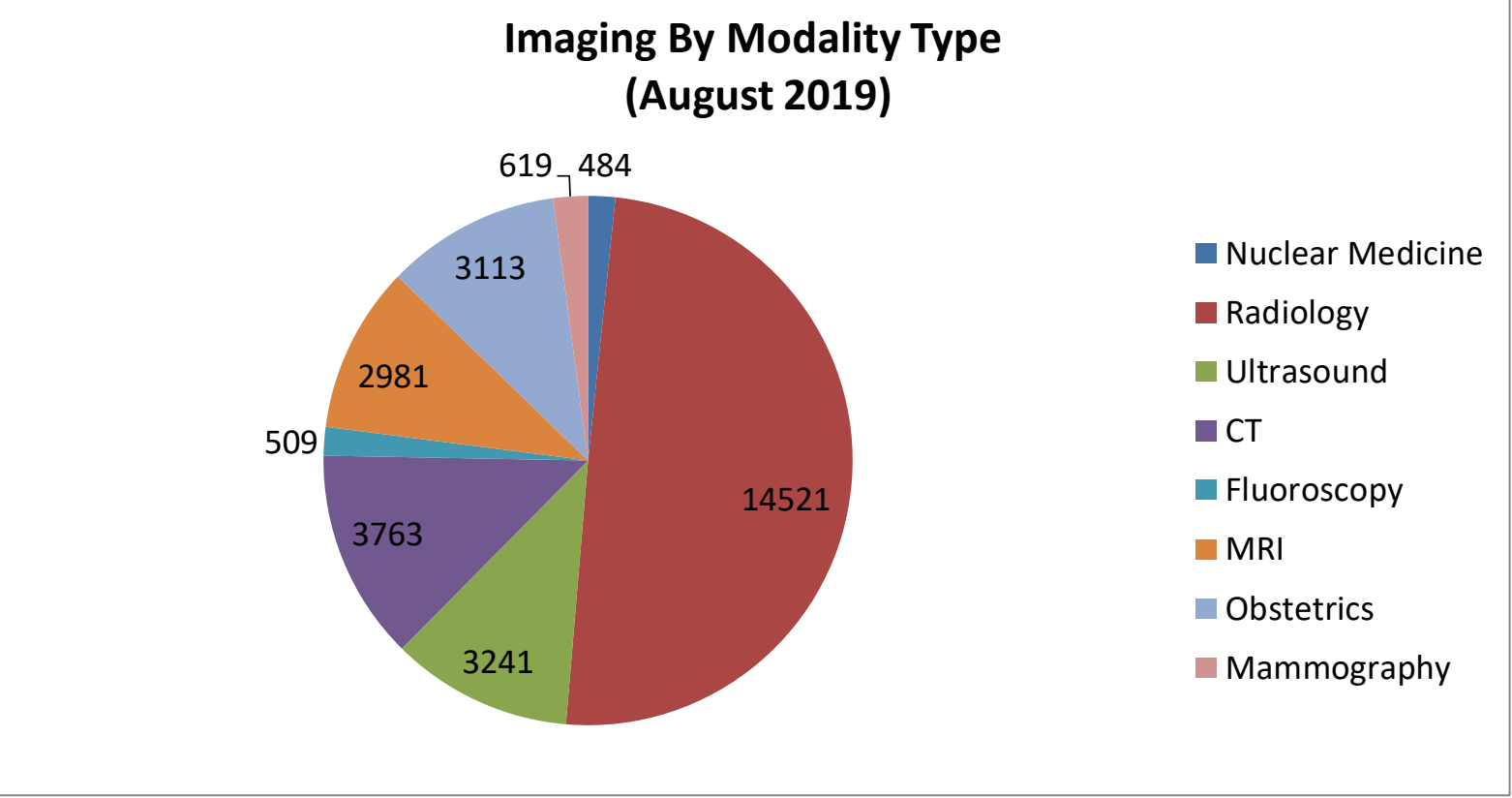
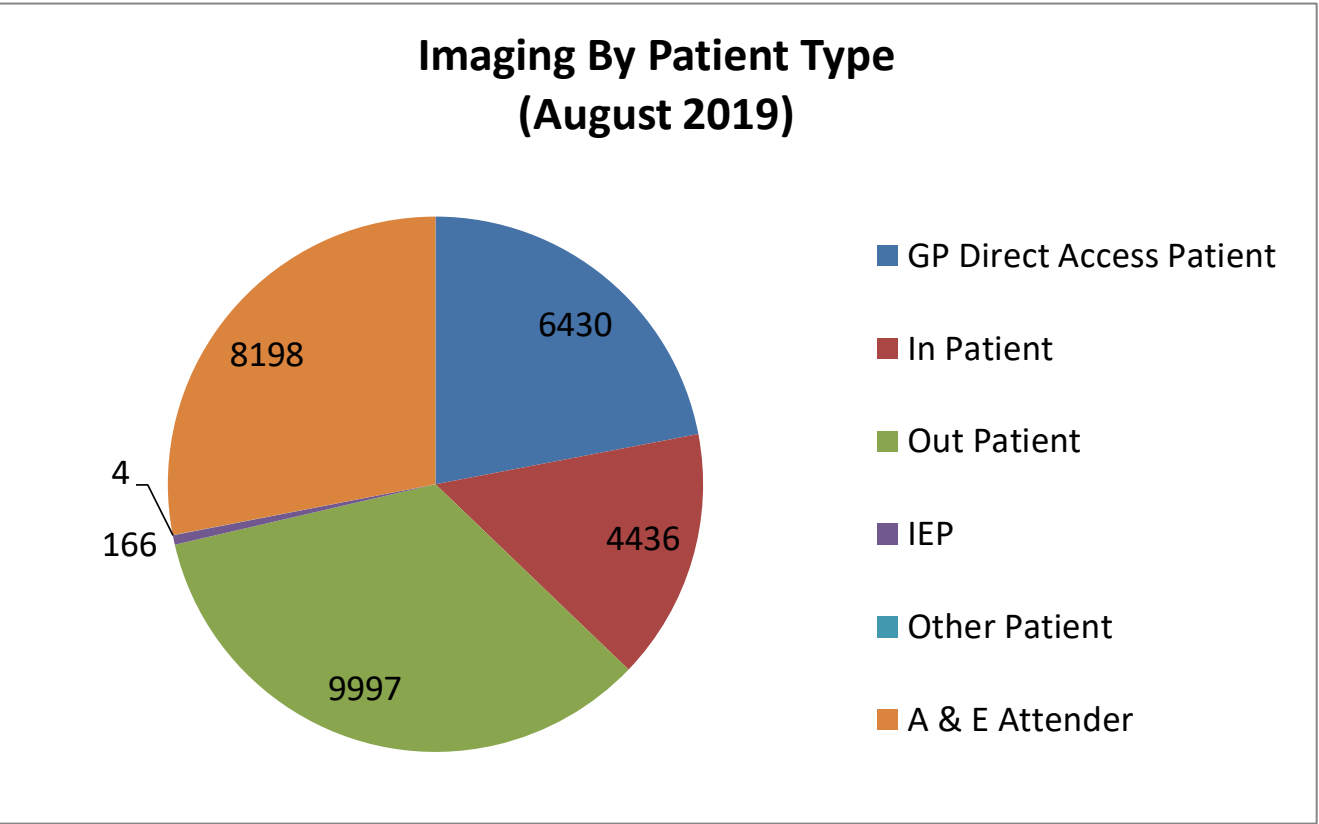
Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date			
			Year	Month	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J		J	A	G				M	P
WCH Group Only	HV (C1) - No. of mothers who receive a face to face AN contact with a HV at =>28 weeks of pregnancy	No			292	383	362	338	-->	-->	-->	984	-->	-->	934	-->	-->	978	-->	-->	1045	-->	Jul 2019			1045	1045	2023	
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	88.79	88.1	89.32	90.8	92	-->	-->	91.4	-->	-->	90	-->	-->	91.4	-->	-->	92.4	-->	Jul 2019			92.4	92.36	91.87	
WCH Group Only	HV (C3) - % of births that receive a face to face new birth visit by a HV >days	%			6.609	6.74	7.031	6.11	5.98	-->	-->	6.62	-->	-->	8.21	-->	-->	6.09	-->	-->	7.64	-->	Jul 2019			7.64	7.64	6.89	
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	93.81	95.1	94.04	95.3	93.5	-->	-->	96.1	-->	-->	96.1	-->	-->	96.4	-->	-->	96.1	-->	Jul 2019			96.1	96.12	96.27	
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			97.14	96	97.51	96.4	97.8	-->	-->	96.9	-->	-->	96.7	-->	-->	96.7	-->	-->	96	-->	Jul 2019			96	95.95	96.34	
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	93.58	95.5	94.4	93	91.4	-->	-->	94.6	-->	-->	94.1	-->	-->	94.8	-->	-->	95.8	-->	Jul 2019			95.8	95.76	95.27	
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			92.66	94.8	93.13	91.2	91.2	-->	-->	94.2	-->	-->	93.7	-->	-->	94.5	-->	-->	98.6	-->	Jul 2019			98.6	98.59	96.4	
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards witha HV presence	=> No	100	100	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	4	-->	Jul 2019			4	4	4	
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	99.06	100	99.44	99.7	99.7	-->	-->	99.7	-->	-->	99.5	-->	-->	99.9	-->	-->	99.9	-->	Jul 2019			99.9	99.89	99.9	
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100	99.06	100	99.44	99.1	99.5	-->	-->	99.6	-->	-->	99.5	-->	-->	99.8	-->	-->	99.9	-->	Jul 2019			99.9	99.89	99.84	
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			22.57	23.4	21.51	36.5	40.2	-->	-->	41.6	-->	-->	41.6	-->	-->	40.3	-->	-->	44.1	-->	Jul 2019			44.1	44.09	42.09	
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	
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			336	357	375	355	354	-->	-->	1069	-->	-->	99.5	-->	-->	99.4	-->	-->	1071	-->	Jul 2019			1071	1071	1170.4	
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	99.41	99.7	99.73	100	99.7	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	99.4	-->	Jul 2019			99.4	99.44	99.44	
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			99	326	364	209	13	-->	-->	23	-->	-->	2.6	-->	-->	1.8	-->	-->	0.21	-->	Jul 2019			0.21	0.21	2.01	
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	29.73	98.5	97.85	58.7	3.33	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	2.2	-->	Jul 2019			2.2	2.2	2.2	
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			225	52	15	12	7	-->	-->	26	-->	-->	3.3	-->	-->	2.2	-->	-->	3.6	-->	Jul 2019			3.6	3.6	5.8	

Imaging Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Patient Safety - Harm Free Care	Never Events	<= No	0	0
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	<= No	0	0
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	=> %	0	0
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.00
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0
Data Completeness	Open Referrals	No		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00
Workforce	Sickness Absence - in month	<= %	3.00	3.00
Workforce	Sickness Absence - Long Term - in month	No		
Workforce	Sickness Absence - Short Term - in month	No		
Workforce	Mandatory Training	=> %	95.0	95.0
Workforce	Imaging - Total Scans	No		
KPIs	Imaging - A&E Turnaround Time <=1hr	=> %	100.0	100.0
KPIs	Imaging - Inpatient Turnaround Time <=24hr	=> %	100.0	100.0
KPIs	Imaging - Urgent Other(GP 5) Turnround Time <=5d	=> %	90.0	90.0
KPIs	Imaging - 2 Week Wait Turnaround Time <=14d	=> %	100.0	100.0

Previous Months Trend																		
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	
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2.0	3.0	-	1.0	1.0	1.0	1.0	2.0	1.0	1.0	1.0	-	2.0	2.0	3.0	2.0	-	-	
21.0	23.0	21.0	20.0	19.0	16.0	15.0	15.0	15.0	15.0	15.0	14.0	14.0	13.0	16.0	17.0	16.0	-	
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1	3	1	4	4	3	4	0	2	2	2	0	2	0	6	5	3	2	
2	3	2	6	5	9	9	3	5	5	4	4	4	3	6	11	6	3	
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774	790	806	819	851	872	904	909	922	927	932	940	948	977	268	295	308	350	
679	706	722	739	769	786	819	831	845	849	865	867	865	901	186	178	215	233	
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3.77	3.67	3.54	2.89	3.78	3.84	4.09	4.27	4.55	4.56	4.60	4.59	4.59	4.66	4.88	4.71	4.62	4.68	
4.75	3.28	3.07	4.33	4.88	4.27	5.48	5.41	7.08	5.75	4.30	4.14	4.12	4.56	5.06	3.86	3.53	4.82	
11	5	6	14	14	9	10	11	14	14	10	7	6	10	10	7	5	8	
41	38	33	25	22	28	39	37	31	31	39	27	30	34	19	26	24	19	
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-	-	-	-	-	-	-	-	-	-	-	-	-	30,262	32,017	29,982	32,665	29,248	
-	-	-	-	-	-	-	-	-	-	-	-	-	8	10	10	10	11	
-	-	-	-	-	-	-	-	-	-	-	-	-	65	65	69	67	69	
-	-	-	-	-	-	-	-	-	-	-	-	-	76	69	65	66	70	
-	-	-	-	-	-	-	-	-	-	-	-	-	74	80	77	83	65	

Data Period	Directorate				Month	Year To Date	Trend
	DR	IR	NM	BS			
Aug 2019	0	0	0	0	0	0	
Aug 2019	0	0	0	0	0	0	
Jul 2019					-	-	
Jul 2019					-	5.15	
May 2019			66.1		66.1	64.46	
May 2019			98.3		98.31	97.52	
Aug 2019	2	0	0	0	2	16	
Aug 2019	3	0	0	0	3		
Aug 2019	3.27				3.27		
Aug 2019	344	6	0	0	350		
Aug 2019	228	5	0	0	233		
Mar 2019	98.6	100	70.8	100	-	78.7	
Jul 2019	100	-	50	-	-	94.7	
Aug 2019	5.6	2.6	1.9	3.4	4.68	4.71	
Aug 2019	6.8	3.0	0.0	0.9	4.82	4.37	
Aug 2019	6	0	0	0	8	40	
Aug 2019	10	1	0	1	19	122	
Aug 2019	92.3	92	97.4	96.7	93.5	92.7	
Aug 2019					29248	154174	
Aug 2019					10.6	9.5	
Aug 2019					68.8	66.9	
Aug 2019					69.8	69.4	
Aug 2019					65.1	76.1	



Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.0	80.0
Patient Safety - Harm Free Care	Number of DOLS raised	No		
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No		
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No		
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No		
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No		
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No		
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No		
Patient Safety - Harm Free Care	Falls	<= No	0	0
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0
Patient Safety - Harm Free Care	Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0
Patient Safety - Harm Free Care	Never Events	<= No	0	0
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		


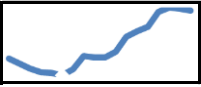
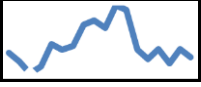
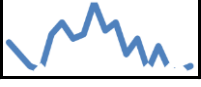



Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
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3	7	11	5	10	9	14	18	4	6	6	6	3	4	6	5	6	13
3	7	11	5	10	9	14	18	4	6	6	6	3	4	6	5	6	13
0	0	0	1	0	1	5	3	0	1	1	0	1	1	1	3	3	6
4	2	5	1	4	5	3	0	0	0	0	4	1	0	1	2	0	2
1	0	1	1	0	0	4	8	2	3	0	4	1	2	5	2	1	8
0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	1	0	0
49	45	38	24	21	31	32	25	40	31	21	28	22	33	21	29	22	24
0	2	0	1	1	0	0	4	1	-	0	1	0	2	1	1	0	0
0	4	0	4	4	2	4	6	8	8	10	20	8	26	18	8	12	16
4	3	1	1	1	1	1	7	37	32	45	34	34	36	16	24	28	34
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0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0
5	3	5	3	7	6	4	5	10	5	9	6	7	14	4	13	8	6
10	10	9	7	9	12	11	13	16	16	19	23	16	22	5	20	17	7

Data Period	Directorate					Month	Year To Date	Trend
	AT	IB	IC	CT	CM			
Aug 2019	-	-	-	-	-	-		
Aug 2019	0	13	0	-	0	13	34	
Aug 2019	0	13	0	-	0	13	34	
Aug 2019	0	6	0	-	0	6	14	
Aug 2019	0	2	0	-	0	2	5	
Aug 2019	0	8	0	-	0	8	18	
Aug 2019	0	0	0	-	0	0	0	
Aug 2019	0	0	0	-	0	0	1	
Aug 2019	1	21	2	-	-	24	129	
Aug 2019	0	0	0	-	0	0	4	
Aug 2019	-	7	1	-	-	8	40	
Aug 2019	-	-	34	-	-	34	138	
Aug 2019	0	0	0	-	0	0	0	
Aug 2019	0	0	0	-	0	0	0	
Aug 2019	0	0	7	-	0	7	31	
Aug 2019	0	0	0	-	0	0	0	
Aug 2019	2	2	1	-	1	6	45	
Aug 2019	1	1	3	-	2	7		

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00
Workforce	Sickness Absence - in month	<= %	3.00	3.00
Workforce	Sickness Absence - Long Term - in month	No		
Workforce	Sickness Absence - Short Term - in month	No		
Workforce	Mandatory Training	=> %	95.0	95.0



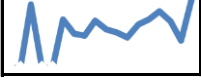
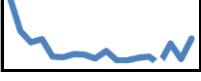













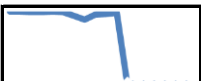
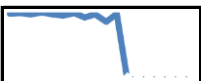
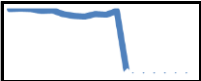

Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-	-	<div></div>	-	-	<div></div>	-	-	-	-	-
4.13	4.11	4.08	4.06	4.06	4.05	4.08	4.15	4.14	4.14	4.17	4.25	4.27	4.30	4.37	4.40	4.39	4.38
3.96	3.71	3.38	3.57	4.22	4.06	4.17	4.79	4.91	4.69	5.33	5.21	4.06	3.79	4.08	3.67	4.08	3.84
32	29	26	25	34	37	33	34	42	35	37	29	33	25	31	25	25	26
103	91	85	97	105	85	97	118	112	104	163	147	102	101	79	86	94	78
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

Data Period	Directorate					Month	Year To Date	
	AT	IB	IC	CT	CM			
Mar 2019	100	100	100	-	99		89.2	
Aug 2019	3.61	4.72	4.7	-	4.3	4.38	4.37	
Aug 2019	3.42	3.81	4.5	-	3.4	3.84	3.89	
Aug 2019	3	-	-	-	-	26	132	
Aug 2019	10	40	25	0	3	78	438	
Aug 2019	97.9	94.8	98	-	91		95.5	

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Community & Therapies Group Only	DVT numbers	=> No	730	61
Community & Therapies Group Only	Adults Therapy DNA rate OP services	<= %	9	9
Community & Therapies Group Only	Therapy DNA rate Paediatric Therapy services	<= %	9	9
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9	9
Community & Therapies Group Only	STEIS	<= No	0	0
Community & Therapies Group Only	Green Stream Community Rehab response time for treatment (days)	<= No	15.0	15.0
Community & Therapies Group Only	DNA/No Access Visits	%		
Community & Therapies Group Only	Baseline Observations for DN	=> %	95	95
Community & Therapies Group Only	Falls Assessments - DN Intial Assessments only	=> %	95	95
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Intial Assessments only	=> %	95	95
Community & Therapies Group Only	MUST Assessments - DN Intial Assessments only	=> %	95	95
Community & Therapies Group Only	Dementia Assessments - DN Intial Assessments only	=> %	95	95
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%		
Community & Therapies Group Only	Making Every Contact (MECC) - DN Intial Assessments only	=> %	95	95
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No		
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No		
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No		
Community & Therapies Group Only	Avoidable Grade 4 Pressure Ulcers (DN caseload acquired)	No		
Community & Therapies Group Only	Bed occupancy for Intermediate Care : D43	%		
Community & Therapies Group Only	Bed occupancy for Intermediate Care : D47	%		
Community & Therapies Group Only	Bed occupancy for Intermediate Care : Eliza Tinsley	%		

Previous Months Trend																	
M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A
58	54	69	57	-	-	-	7	7	7	3	25	12	20	38	43	55	43
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
-	-	14.3	-	-	11	7.69	7.35	10.6	8.72	8.03	6.94	9.85	10.9	12.7	10.4	6.19	15.4
14.3	11.2	10.2	10.5	8.89	8.85	9.13	9.05	8.75	9.43	8.56	8.56	8.78	8.92	8.23	10.1	8.7	10.5
-	0	0	0	1	-	0	0	-	-	-	-	-	-	-	-	-	-
21.5	25.6	22.9	22.4	26.1	22.5	20.1	17.9	17.4	20	17.4	20.6	20.3	24	21.8	15	19	22.5
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	-
87.5	91.2	94.2	94.2	96.8	94.9	96.4	92.4	91.2	92.1	93.8	96.4	95.8	91.2	97.7	96.8	95.7	96.1
90.6	92.6	93.8	95	97.1	96.1	97.2	94.2	91.8	93.1	94.4	96.2	96.6	93	97.5	96.5	96.1	96.8
92.2	94.5	94.4	95.8	96.9	96.1	97	94	92.1	93.5	94.4	96.4	96.4	93.2	97.5	96.8	96.5	96.3
90.2	92.8	93.6	94.8	96.2	95.2	97.6	93	90.5	92.6	94.2	95.7	95.8	92.6	97.2	96.8	96.3	96.3
88.6	85.9	91.9	93.3	93.5	94.8	90.4	91.8	86	89.8	91.8	92.3	93.2	91.3	95.4	91.6	94.2	90.5
96	94	95	94	95	95	95	95	95	94	96	95	96	-	95	1	94	-
90	93.2	94	94.8	95.9	96.3	95.8	93.6	91	93.1	94.6	96.7	95.8	92.4	97.5	96.8	96.3	96.5
0	4	0	4	4	2	4	6	8	8	10	20	8	26	18	8	12	16
2	3	0	1	1	0	1	5	26	-	-	-	-	-	-	-	-	-
2	0	0	0	0	1	0	2	11	-	-	-	-	-	-	-	-	-
0	0	1	0	0	0	0	0	0	-	-	-	-	-	-	-	-	-
93	93	92	93	93	93	88	83	89	90	92	-	-	-	-	-	-	-
87	88	86	89	86	84	88	82	86	76	87	-	-	-	-	-	-	-
93	94	93	91	92	86	84	83	86	85	90	-	-	-	-	-	-	-

Data Period	Directorate					Month	Year To Date	
	AT	IB	IC	CT	CM			
Aug 2019						43	199	
Aug 2017						8.0	8.2	
Aug 2019						13.9	10.4	
Aug 2019						10.5	9.3	
Oct 2018						0	1	
Aug 2019						22.45	102.2	
Jul 2019						0.84		
Aug 2019						96.1	95.38	
Aug 2019						96.75		
Aug 2019						96.32		
Aug 2019						96.32		
Aug 2019						90.53		
Jul 2019						94.45		
Aug 2019						96.54	95.81	
Aug 2019						8	40	
Nov 2018						26	37	
Nov 2018						11	14	
Nov 2018						0	1	
Jan 2019						91.76	90.49	
Jan 2019						87.1	85.16	
Jan 2019						90.32	88.45	

Primary Care, Community & Therapies Group

Community & Therapies Group Only	Bed occupancy for Intermediate Care : Henderson	%			86	87	85	86	87	84	88	85	90	85	93	-	-	-	-	-	-	Jan 2019	<div></div>	93.15	87.04	<div></div>
Community & Therapies Group Only	Bed occupancy for Intermediate Care : Leasowes	%			89	89	81	87	87	87	86	89	91	82	87	-	-	-	-	-	-	Jan 2019	<div></div>	87.26	86.67	<div></div>
Community & Therapies Group Only	Bed occupancy for Intermediate Care : McCarthy	%			94	93	93	91	92	93	85	72	86	78	86	-	-	-	-	-	-	Jan 2019	<div></div>	85.69	86.63	<div></div>
Community & Therapies Group Only	Average LOS for OBI : D43	Days			10	10	10	11	9	12	9	12	9	8	8	-	-	-	-	-	-	Jan 2019	<div></div>	7.74		<div></div>
Community & Therapies Group Only	Average LOS for OBI : D47	Days			15	25	20	24	19	17	24	16	16	13	13	-	-	-	-	-	-	Jan 2019	<div></div>	13.39		<div></div>
Community & Therapies Group Only	Average LOS for OBI : Eliza Tinsley	Days			10	12	15	15	12	11	12	15	10	10	13	-	-	-	-	-	-	Jan 2019	<div></div>	12.95		<div></div>
Community & Therapies Group Only	Average LOS for OBI : Henderson	Days			20	20	18	16	18	21	16	15	17	14	18	-	-	-	-	-	-	Jan 2019	<div></div>	17.92		<div></div>
Community & Therapies Group Only	Average LOS for OBI : Leasowes	Days			21	22	19	21	17	23	23	16	23	20	18	-	-	-	-	-	-	Jan 2019	<div></div>	17.68		<div></div>
Community & Therapies Group Only	Average LOS for OBI : McCarthy	Days			13	15	10	14	12	17	10	17	14	10	9	-	-	-	-	-	-	Jan 2019	<div></div>	9.29		<div></div>

Corporate Group

Section	Indicator	Measure	Trajectory			Previous Months Trend																		Data Period	Directorate							Month	Year To Date	Trend
			Year	Month		M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		SG	F	W	M	E	N	O			
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No				8	5	5	4	6	5	4	4	13	3	5	5	4	2	1	12	10	0	Aug 2019	0	0	0	0	0	0	0	0	25	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No				15	11	8	2	7	8	8	5	12	11	8	8	9	2	6	4	5	1	Aug 2019	0	0	0	0	0	1	0	1		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0									-	-		-	-		-	-	-	-	-	Mar 2019	100	100	100	99	100	-	100	87.1		
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																			-	Jul 2019			95				100.0	96		
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00		4.62	4.59	4.49	4.42	4.40	4.40	4.38	4.35	4.25	4.22	4.21	4.23	4.21	4.21	4.21	4.22	4.21	4.26	Aug 2019	4.15	2.17	2.95	3.02	3.13	4.85	5.34	4.26	4.22	
Workforce	Sickness Absence - in month	<= %	3.00	3.00		3.93	3.86	3.72	3.94	4.46	4.22	3.82	4.35	4.26	4.21	4.67	4.64	3.81	3.71	3.80	4.21	4.47	4.42	Aug 2019	4.60	3.08	1.95	2.84	2.83	5.56	5.35	4.42	4.13	
Workforce	Sickness Absence - Long Term - in month	No				2	2	30	26	28	33	26	26	25	29	27	28	28	20	25	32	32	40	Aug 2019	4.00	0.00	2.00	10.00	0.00	24.00	0.00	40.00	149.00	
Workforce	Sickness Absence - Short Term - in month	No				12	4	61	76	79	54	70	86	93	84	120	112	86	79	57	65	82	54	Aug 2019	3.00	0.00	7.00	10.00	0.00	34.00	0.00	54.00	337.00	
Workforce	Mandatory Training	=> %	95.0	95.0																			Aug 2019	93	98	98	87	99	-	92	93.7	94		