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Sandwell and West Birmingham Hospitals NHS
NHS Trust

Report Title	Integrated Quality & Performance Report - July 2019-20		
Sponsoring Executive	Dave Baker, Director of Partnerships and Innovation		
Report Author	Yasmina Gainer, Head of Performance and Costing		
Meeting	Trust Board	**Date**	5th September 2019

1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on]*

- The Board is asked to note the July overall position and recognise exceptions;
- Discuss and assure itself that persistent red trajectories are delivering and agree revisions to plans if appropriate;

1. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan	X	Public Health Plan	X	People Plan & Education Plan	X
Quality Plan	X	Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other *[specify in the paper]*	

2. Previous consideration *[where has this paper been previously discussed?]*

OMC, PMC, Q&S

3. Recommendation(s)

The Board is asked to:

a.	Note the July 2019 performance.
b.	
c.	

4. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register							
Board Assurance Framework							
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

IQPR Report to the Board: 5th September 2019
July 2019 IQPR

1. New Exceptions in July month

This section focuses on in month variations to targets and unexpected drop in performance.

- A&E delivery is at 81.4% in July below the internal target (81.8% Last Month).
- 1x never Event (retained foreign object (Trocar)) in an Ophthalmology patient; we reported 3x never events in the last three months.
- Late cancellations on the day were at 46 in July (40 LM) above the 20 internal target and above the 0.8% national standard (cancellations against total elective admissions) in the last few months; Theatre 'Perfect Week' will focus on cancellations and recovery target date has been agreed at OMC for August 2019.
- Diagnostic DM01 performance sustains recovery from last months and reports 99.2% in July with Imaging breaches being significantly reduced. DMO1 performance will fail in August due to pressures on Cardiac Imaging but expectations are that this will recover in September.
- RTT delivers at 92.03% for July and is expected to achieve in August. There are 4x specialities below this target. Nil 52 week breaches have been confirmed following query process with the Deputy COO. We are seeing a growing WL (39,115) in July which accounts for c8% growth since March of which c1.8% is due to referral growth indicating therefore potentially a longer pathway management / treatment timeline.
- MRSA screening rates continue to under achieve the new 85% target and will now be moved to being a Persistent Red. The Chief Nurse is looking into the cause of this and the correlation to the Safety Plan.
- MSA performance in July reported 44 breaches (9 LM).
- Serious Incidents (Sis)reported to StEIS (Strategic Executive Information System) in July were at 32, which is almost four times more than any other month in 18mths trend (last month 12). On investigation, 23 out of 32 Sis STEIS reported relate to PUs. The Director of Governance is enquiring as to whether other Trusts have seen a jump in their SIs since the re-categorisation around Pressure Ulcers – we may need to rebase this indicator.
- Our Risk Adjusted Mortality Index (RAMI) jumps from 99 to 107. This is due to a National rebasing. Our weekend RAMI is now lower than in midweek one.
- The 62 day Cancer standard will fail in July. August is tracking at ~83%. We still expect to achieve the standard for Q2 overall. Despite significant volume increases (especially I Dermatology) the 2WW targets will succeed in August.

2. IQPR Persistent Reds

- Now that we have the data of falls per 1000 bed days we can see that we are performing. On this basis falls has been removed from the persistent reds.
- With the removal of falls and the subsequent addition of MRSA screening and ED performance (from next month) there will be are now 18 persistent reds;

- Bed moves has a data quality note against it. Presently it tracks patients inappropriately for their moves (on the system the patient cannot be moved until their VTE assessment has been carried out even if they are physically moved beforehand). Whilst this will be resolved post Unity, P&I and Operations are looking at whether this can be resolved prior to Unity via an alternate route.
- We now have recovery plans and trajectories for the majority of the persistent reds. We are working to have recovery plans with trajectories for them all by 1 October 2019.
- Of the 12 with trajectories we are on trajectory with 5 and behind trajectory with 7 (see tracking planned trajectory column below)

Exec Lead	16	Indicator *Note: Some are grouped (two or more indicators)*	Standard Expected	Delivery of Plan	Revised Recovery Expected	Jul Actual Perf	Tracking Planned Trajectory
Dr DC	1	· Mortality Reviews within 42days	90%	√	Dec-19	85%	√
RG	1	· Mandatory Training (staff % where MT 100% complete)	85%/95%	√	Dec 19/Mar 20	64.4%	X
	1	· Sickness Absence Rate (wards only to 3%, hold the rest)	3%	√	Mar-20	5.8%	X
	1	· Sickness Absence long term cases	<140	√	Apr-20	159	√
RB	1	· Treatment Functions below 92% RTT	0	√	Aug-Nov19	4	X
	1	· Patients Waiting >52 weeks	0	√	Oct-19	0	√
	1	· Open Referrals	30,000	√	Sep-19	54,000	√
	1	· Neck of Femur - to surgery within 36 hours	85%	√	Jul-19	63%	X
	1	· Cancellations (20pm)	20	√	Aug-19	46	X
	1	· Cancellations as %age of elective admissions	0.80%	√	Aug-19	1.1%	X
	1	· Patient Bed Moves	220	√	Nov 19 subject to DQ resolution in month	684	Recast when DQ resolved
	1	· Stroked Ward Admissions (Within 4 hrs)	80%	√	Aug-19	79.1%	√
	1	· Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	5%	√	To be agreed at next OMC	5.1%	No Traj
	1	· Neutropenic Sepsis	100%	√	Jul-19	90.3%	X
PG	1	· Nursing Turnover (Qualified Only)	10.70%	To be agreed by 1 October	TBC	12.3%	No Traj
	1	· FFT Response Target	25%	√	Dec-19	23%	No Traj

Note: Long term sickness showing as 223 on IQPR but Director of People and OD provided assurance of 159. Looking into why the IQPR is reporting differently. We will resolve why this is happening in September.

3. Recommendations

- The Board is asked to note the July overall position and recognise exceptions;
- Discuss and assure itself that persistent red trajectories are delivering and agree revisions to plans if appropriate;

Yasmina Gainer
Head of Performance & Costing
15th August 2019

Sandwell and West Birmingham Hospitals
NHS Trust

Integrated Quality & Performance Report

Month Reported: July 2019

Reported as at: 20/08/2019

PERFORMANCE MANAGEMENT COMMITTEE

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JULY 2019

Infection Control

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.
• 1x C. Diff case reported during the month of July taking year to date cases to 4 vs target of 14 so the trust is continuing to perform very well

MRSA - compliant
•No MRSA Bacteraemia was reported in July; 1x case year to date.
•Annual target 19/20 set at zero.

MRSA Screening - non compliant
• Non-elective patients screening at 79.5% against 85% target • Elective patients screening at 85.3% achieving target of 85%
• Both indicators are expected to deliver immediate milestone target of 85% increasing to 95%

MSSA - compliant
•MSSA Bacteraemia (expressed per 100,000 bed days) showing a rate of 4.2 year to date compared to target of 9.4

Harm Free Care

Safety thermometer - compliant
•The Trust continuous, since June 2018, to report Patient Safety Thermometer based on only 'new harm'; as at July 2019 we report performance at 95.4% against the 95% target

Falls
•x86 falls reported in July with x2 falls resulting in serious harm (defined as death or severe harm);

• Falls therefore per 1,000 bed days rate in July are at 3.9 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.

Pressure Ulcers
• x55 total PUs have been reported in July showing similar position to last month
• Of which 27 PUs reportable in acute setting resulting in a PU /1000 bed days rate of 1.2
•x28 cases reported within the district nursing caseload
•CNO monitors as part of Safety Plan and ward nursing dashboards

WHO Safer Surgery (Audit - brief and debrief - % lists where complete)
• WHO Safer Surgery - Audit - brief and debrief (% lists where complete) is not compliant at 99.8%
• The other two indicators are at 100%
• Indicators in IQPR currently reporting only the main theatre lists; a full review of other areas is in progress currently following outcomes of the data quality review in April19 and actions are in place to address this by end of November at which time the IQPR will report holistically on all areas that are eligible for compliance.

• **1x Never Event** was reported in July, 3x year to date reported events
• **32x serious incidents** reported in July which is significantly higher than other periods reported
• No reported **medication errors** causing serious harm in July

VTE Assessments - compliant
•Compliance at 95.9% in July at Trust level with Medicine group, at 93.9%, below standard of 95%

Obstetrics

C-section rate - non compliant
•The overall Caesarean Section rate for July in month is 30.5% mainly driven by an increase in non-elective C-Sections; year to date at 27.4% above the 25% target; but considered still in line with other trusts
•Elective rates are at 10.7% (historical long term avg trend of 8.8% so trending reasonably well against this) and
• Non-elective rates are 19.7% in July 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.

•Adjusted perinatal mortality rate (per 1,000 births) for July year to date is at 4.92 vs. threshold level of 8 ;
•The indicator represents an in-month position and which, together with the small numbers involved provides for sometimes large variations.

The level of births in July is at 460; lower compared to the same period of last year (488) - we observe a general downward trend in births

• Still birth rate (per 1000 babies) at 6.51 in July
• Zero Neonatal death rate (per 1000 babies) in July

Admissions to Neonatal Critical Care - compliant
• 0.87% admissions to the NCC have occurred in July against the 10% target; 1.64% on a year to date basis vs 10% target

Breastfeeding - compliant
• July month count is at 79.4% achieving the 74% target; over-achieving target routinely

Mortality & Readmissions

Mortality - alerts against Trust HSMR & RAMI (being validated still)
•The Trust overall RAMI for most recent 12-mth cumulative period is 107 (available data is as at Apr19)
•RAMI for weekday and weekend each at 107 and 105 respectively, showing weekend rate slightly up from last month but still lower than in previous periods
•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, but showing reductions against previous months. Trust Board continues to monitor routinely.

• Deaths in Low Risk Diagnosis Groups (RAMI) - month of Apr19 (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 in the right area of the control limits.
• Crude in-month mortality rate for Jun19 month is 1.3% caused by lower deaths in month;
• There were x117 deaths in our hospitals in the month of June, less than last year, same period, which was at 124

Mortality Reviews within 42 Days - not compliant, but consistently improving
•Mortality review rate in May19 at 85% 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.

Emergency Readmissions (in-hospital within 30 days)
• Reported at 7.9 % for June cumulative position; improving against the dip in February and to March, but still on the high side. •
We can split down the total readmissions; where discharge and readmission, are within the same speciality and this is at 3.5%; discharge and readmission in different specialities is at the 4.4%
• Looking at the rolling 12 mths rate this has slightly reduced to 7.9%, but higher than Trust ambition

Stroke Care & Cardiology

Patient Stay on Stroke Ward - compliant
• In July 90.2% of patients spent more than 90% of their time on a stroke ward, which is above the 90% operational threshold in the month; improvement plans are in place to recover the standard are on the face of it working; year to date we are just fractionally below the 90% standard at 89.9%

Admission to Acute Stroke Ward - not compliant but tracking improvement plan
•July admittance to an acute stroke unit within 4 hours is at 79.1% vs national standard of 80% and internal improvement plan of 70%

Scans - compliant

• Pts receiving CT Scan within 24 hrs of presentation delivery in month of July are at 97.9% meeting the 95% standard
• Pts receiving CT Scan within 1hr of presentation is at 70.2% in July against the 50% target; both indicator consistently meet the imaging performance.

Thrombolysis - not compliant
Compliance at 80% in the month of July vs 85% target (4/5 patients thrombolysis within the 1 hr target, 1x patient breaching due to clinical suitability);

Angioplasty - compliant • July Primary Angioplasty Door to balloon time (<90 minutes) was at 93.8% vs target of 80% .
• Primary Angioplasty Call to balloon time (<150 minutes) at 93.3% against a target of 80%.
• Both indicators consistently meet performance targets.

RACP - compliant
RACP performance for July continuous at 100% exceeding the 98% target consistently

TIA Treatments - not compliant
• TIA (High Risk) Treatment <24 Hours from receipt of referral delivery as at July at 87.5% against the target of 70%.
• TIA (Low Risk) Treatment <7 days from receipt of referral delivery at July is 88.4% 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

Cancer standards - compliant
• Reporting always one month in arrears hence IQPR latest reported period is June 2019.
• In June all cancer standards have been met including 62 days at 87.3% vs 85% target, including the 2 weeks (Breast Symptomatic).
• Q1 Trust delivery of the 62 Day target is at 87.9%
• Un-validated position for July is at risk

Patient Waiting times
• x7.5 patients waited longer than the 62 days at the end of June
• 0.5 patient waited more than 104 days at the end of June
• The longest individual patient waiting time for treatment, as at the end of June, was 91 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.

Neutropenic sepsis - not compliant
• The Trust operates a 100% standard against this indicator. Only clinically driven breaches are tolerated.
• In July, 28/31 patients (90.3%) of patients have been treated within the hour, 3 patients (9.7%) of patients failed to receive treatment within prescribed period (within 1hr). There are process improvements identified with those - longest wait over 3hrs for one patient.
• Performance reporting continuous to monitor daily, weekly and monthly tabled at the OMC; all breaches are routinely reviewed in dedicated, quarterly meetings.

Inter-Provider Transfers - not compliant
• 64% of tertiary referrals were met within 38 days requirement in June.

Patient Experience - MSA & Complaints

MSA
• The standard is zero breaches in any given month
• In July we are reporting 44 validated breaches

Friends & Famil y
• IP response rates in July at 23% achieving internal target of 25%.
• The IP 'likely to recommend' rate at 92% against target of 95%
• Outpatient / maternity response and score rates are scheduled for improvement.

Complaints
•The number of complaints received for the month of July is 98 with 3.1 formal complaints per 1000 bed days demonstrating still a higher level than usual but some reduction to last month
•100% of complaints have been acknowledged within agreed timescales
•100% in-month responses have been responded within agreed target time;

Patient Experience - Cancelled Operations

'Cancelled Ops - non compliant
•46 sitrep declared late (on day) cancelations were reported in July; still significantly higher than local target of 20 per month as well as tolerated target of x26 cancellations which would still deliver national standard.
•Cancellations, as a proportion of elective admissions, represent 1.1% in July against the national 0.8% target;

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

Emergency Care

EC 4hr standard - not compliant
• The Trust's performance against the 4-hour EC wait target in July was at 81.4% % against the internal improvement plan 88.5% for the month.
• 3,542 breaches were incurred in July, higher than last month but proportionally less against the July total patient attendances of 19,047 (18,091 last month)

Trolley Waits > 12 hours - compliant •
There were no Trolley Waits > 12 hours was reported in July

WMAS Handovers
• WMAS fineable 30 - 60 minutes delayed handovers at 123 in July.
• only x5 cases were > 60 minutes delayed handovers;

• Handovers >60mins (against all conveyances) calculates at 0.11% (5 cases) vs target of 0.02% against total WMAS conveyances of 4,658

21+LOS - tracking against trajectory
• There were 129 patients in the hospital at July month end whose LOS was at 21 days+
• This equates to 95.8 beds occupied by this LOS patient cohort, tracking well against the NHSI trajectory of 96.7 for July and working towards end of March 2020 reduction to 82 beds.

Fractured NOF - non compliant
•Fractured Neck of Femur Best Practice Tariff (surgery within 36 hours) is at 63% compared to the 85% target
•The performance is variable month on month, often driven by patients conditions are preventing surgical interventions in this 36hr timeframe.

Bed moves after 10pm and before 6am - not compliant
• There were 684 reported bed moves in July 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.

Referral To Treatment

RTT - compliant (but not signed off yet)
• Trust level delivery currently at 92.0% for July compliant with the 92% incomplete standard •
• 4x specialities are below the 92% standard in July
• The patient wait list is at 39,115 in July with 3,118 patients being on the backlog (>18weeks)

52 Week Breaches - no breaches in July

Acute diagnostic waits -compliant
•DM01 performance at 99.2% in July sustaining a second month of delivery following recovery with main breaches now only at 39 CT scans.

Data Completeness

• The Trust's internal assessment of the completion of valid NHS Number Field within inpatient data sets compliant in mnth with 99.1% meeting the operational threshold of 99% ; . OP and A&E datasets deliver to target.
• ED required to improve patient registration performance as this has a direct effect on emergency admissions. Patients who have come through Malling Health will be validated via the Data Quality Department.
• Ethnicity coding is performing for Inpatients at 91% against 90% target, but under-delivering for Outpatients. This is attributed to the capture of data in the Kiosks and revision to capture fields is being considered.

Open Referrals • Open
Referrals, referring to patients in the system without a future waiting list activity, stand at c54,000 as at July 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;

Workforce

PDR & Medical Appraisals -not input 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 95.7% vs 90% standard.

Sickness Rate - not compliant • In-month sickness rate in month for July is at 4.6% and a cumulative rate of 4.83% against target of 3%.
• Ward sickness at 5.8% in July (6.7% in June), showing reduction month on month, but some wards reporting at the tope end above a 15% sickness rate.

Nursing Turnover & Vacancy rate (Qualified Nursing only) - not compliant
•The nursing turnover rate is at 12.3% vs the 10.7% internal target.
•The nursing vacancy rate is at a high 16.1% in July below the trust target of 11%

Mandatory Training - not compliant
• **Mandatory Training** at the end of July dropped again slightly, and still below the 95% target at 64.4% measuring staff whose MT is at 100%
• **Health & Safety** related training dropping below standard of 95% and reporting in July at 80.3%

Local Quality Requirements 19/20

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 June we continue to see some continuing under-performance against a few indicators:
• Morning discharges at 17% vs target of 35%;
• Community pressure ulcer assessments recovering the 95% standard and at July reporting 97% • Community falls assessments reporting at 98% in July, close to, but not meeting the standard of 100%.

Indicator Performance : Persistent Red Focus

- The Trust is progressing 16 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

- 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.

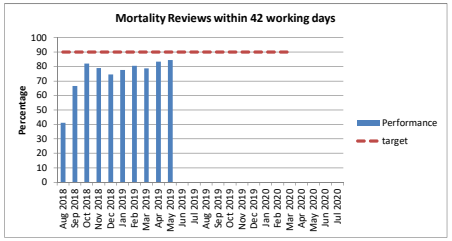
Persistent Reds Performance

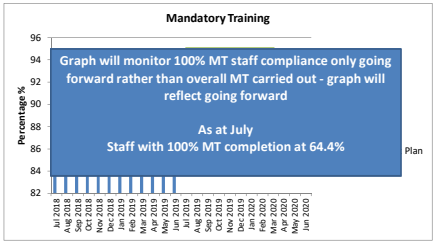
Exec Lead	16	Indicator *Note: Some are grouped (two or more indicators)*	Standard Expected	Delivery of Plan	Revised Recovery Expected	Jul Actual Perf	Tracking Planned Trajectory
RG	1	· Sickness Absence Rate (wards only to 3%, hold the rest)	3%	Workforce Strategy	Mar-20	5.8%	n/a
	1	· Sickness Absence long term cases	<140		Apr-20	223	n/a
	1	· Nursing Turnover (Qualified Only)	10.70%	TBC	TBC	12.3%	n/a
RB	1	· Treatment Functions below 92% RTT	0	√	Aug-Nov19	4	X
	1	· Patients Waiting >52 weeks	0	√	Oct-19	0	√
	1	· Open Referrals	30,000	√	Sep-19	54,000	√
	1	· Neck of Femur - to surgery within 36 hours	85%	√	Jul-19	63%	X
	1	· Cancellations (20pm)	20	√	Aug-19	46	X
		· Cancellations as %age of elective admissions	0.80%	√	Aug-19	1.1%	X
	1	· Patient Bed Moves	220	√	TBC	684	DQ Issues
	1	· Stroked Ward Admissions (Within 4 hrs)	80%	√	Aug-19	79.1%	√
	1	· Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	5%	√	TBC	5.1%	n/a
	1	· Neutropenic Sepsis	100%	√	Jul-19	90.3%	X
PG	1	· Falls - per 1000, occupied bed days rate	5.0	√	delivering	3.8	√
	1	· FFT Response Target	25%	√	TBC	23%	n/a

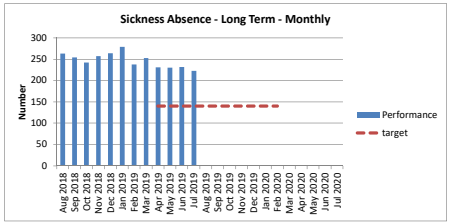
Notes:

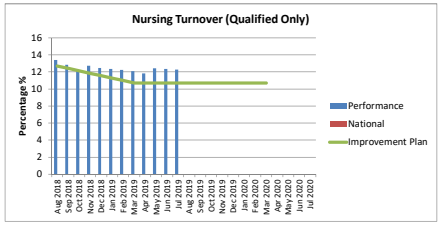
- TBC means that we are yet to work up detailed plans
- FFT response rate target agreed at 25% , but awaiting plan for achievement across all IP, OP and Maternity areas.
- Cancellations on the day reinstated to persistent red focus

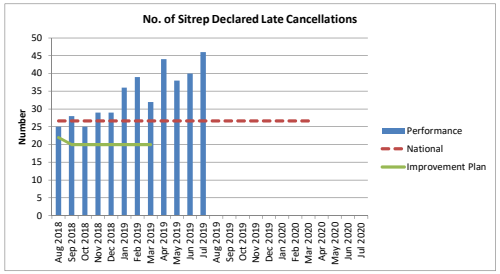
- n/a in table = data not reportable at this stage
- the graphs are updated for latest available information, however where incomplete this is due to :
  - absence of 'improvement lines' means we are lacking stepped trajectory plans
  - mortality is two months behind due to reviews being 42 days behind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

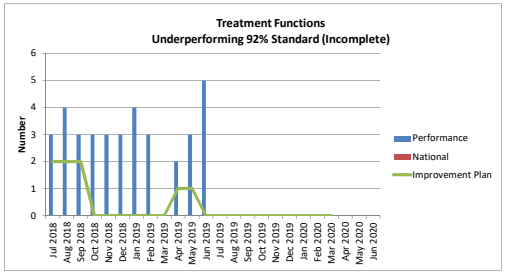


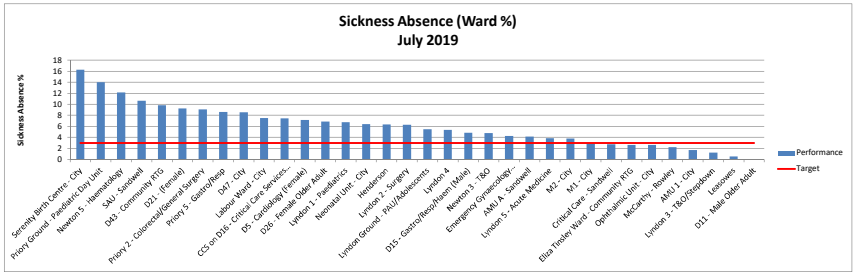


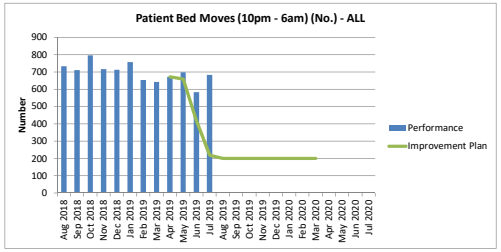


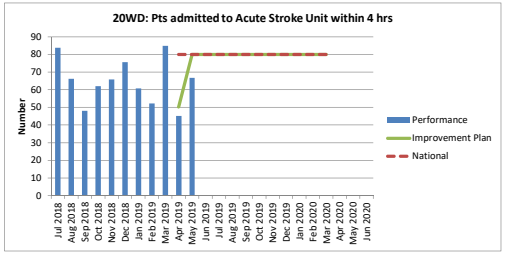


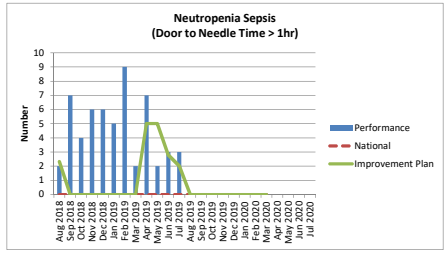


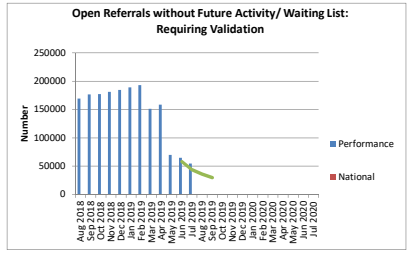












Persistent Red and Improvement Recovery Plans

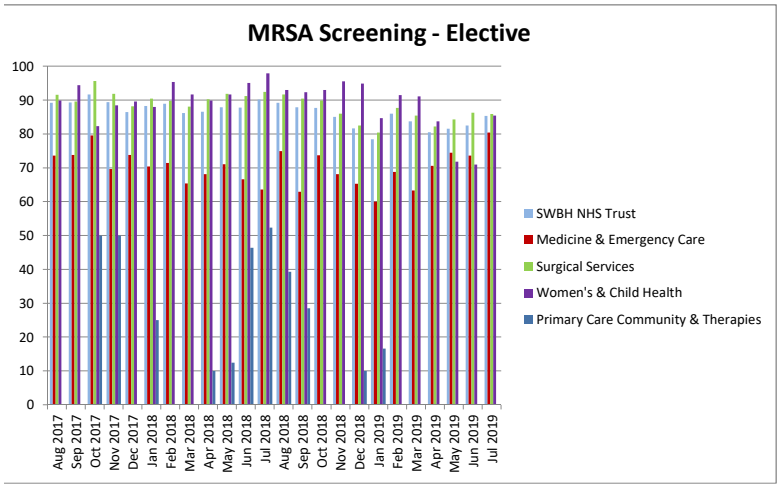
Indicator	Measure	2016-2017 Year	2016-2017 Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Directors' Priority Assessment RESOLVE	IMPROVE	TOLERATE	Lead	Plan In Place Yes / No
WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100	99	99	99	100	100	100	100	100	0	100	100	100	100	100	99	100	100	100	√			Ajai Tyagi	Yes
Neutropenia Sepsis Door to Needle Time Greater Than 1 Hour	<= No	0	0	9	4	3	7	6	4	2	7	4	6	6	5	9	2	7	2	3	3	√			Michelle Harris	Yes
Elective Cancellations at last minute for non-clinical reasons (as a percentage of elective admissions)	<= %	0.80	0.80	1.0	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	√			Tina Robinson	Yes
No. of Sitrep Declared Late Cancellations - Total	<= No	240	20	37	59	30	55	23	18	25	28	25	29	29	36	39	32	44	38	40	46	√				Yes
Emergency Care 4-hour waits	=> %	95	95	80	80	84	80	81	84	83	83	81	81	75	78	82	86	78	83	82	81	√			Phil Holland	Yes
Emergency Care 4-hour breach (numbers)	No	0	0	3377	3582	2745	3746	3418	3001	2999	3013	3354	3383	4435	3963	3006	2629	4106	3213	3288	3542	√			Phil Holland	Yes
Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15	15	14	13	14	14	14	14	14	13	13	15	15	14	13	13	14	14	15	14	√			Michelle Harris	Yes
Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5	5	8	5	5	5	5	5	5	5	5	4	5	5	5	5	5	5	5	5	√			Michelle Harris	Yes
Patients Waiting >52 weeks (Incomplete)	<= No	0	0	3	2	2	2	2	2	1	2	2	0	1	1	1	0	0	5	6	0	√			Liam Kennedy	No
Treatment Functions Underperforming (Incomplete)	<= No	0	0	4	4	4	3	2	3	4	3	3	3	3	4	3	-	2	3	5	5	√			Liam Kennedy	Yes
Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			149221	152201	155865	159396	162765	165731	169514	176924	177132	181139	184452	188892	192794	151428	158635	69739	64564	54518	√			Liam Kennedy	Yes
Mortality Reviews within 42 working days	=> %	90	90	41	44	30	36	46	42	41	67	82	79	75	78	81	79	83	85	-	-		√		Roger Stedman	Yes
Patient Bed Moves (10pm - 6am) (No.) -ALL	No			654	796	570	628	677	655	733	712	797	717	713	757	654	642	672	698	583	684		√		Phil Holland	Yes
Hip Fractures - Best Practice Tarriff - Operation < 36 hours of admission (%)	=> %	85	85	72	85	81	68	91	86	85	81	84	77	83	81	80	83	64	77	75	63		√		Tina Robinson	Yes
Sickness Absence (Rolling 12 Months)	<= %	3	3	4.50	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		√		Raffaela Goodby	Yes
Sickness Absence (Monthly)	<= %	3	3	4.74	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		√		Raffaela Goodby	Yes
Sickness Absence - Long Term (Monthly)	<= No	140	140	230	226	226	224	247	269	263	254	242	257	264	279	238	253	231	230	232	223		√		Raffaela Goodby	Yes
Mandatory Training	=> %	95	95	89	92	91	91	92	92	91	91	90	91	86	91	92	90	91	92	91	91		√		Raffaela Goodby	Yes
Mandatory Training - Health & Safety (% staff)	=> %	95	95	94	95	95	95	95	95	94	93	92	93	94	94	95	96	96	94	71	80		√		Raffaela Goodby	Yes
Nursing Turnover (Qualified Only)	<= %	10.7	10.7	13.4	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		√		Raffaela Goodby	Yes
FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	25	25	10	10	8	7	5	9	8	15	19	29	22	24	23	20	16	29	26	23		√		Paula Gardiner	No
FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95	95	88	88	89	92	92	95	96	90	93	92	92	91	92	91	89	89	92	91		√			No
FFT Response Rate: Type 1 and 2 Emergency Department	=> %	25	25	3.8	7.0	-	-	-	-	10.7	6.3	4.3	6.8	7.8	15.5	16.3	16.1	12.0	10.8	9.6	10.4		√			No
FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95	95	75	74	-	-	-	-	76	73	71	74	73	74	75	75	75	76	73	76		√			No
FFT Response Rate: Type 3 WiU Emergency Department	=> %	25	25	5	#DIV/0!	-	-	-	-	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!		√			No
FFT Score - Outpatients	=> No	95	95	92	90	-	-	-	-	91	90	91	90	92	90	90	91	90	90	89	88		√			No
FFT Score - Maternity Birth	=> No	95	95	94	100	-	-	-	-	90	93	100	100	100	17	95	100	100	94	94	91		√			No
FFT Response Rate - Maternity Birth	=> %	25	25	23	1	-	-	-	-	13	16	8	5	4	17	5	3	2	4	8	10		√			No

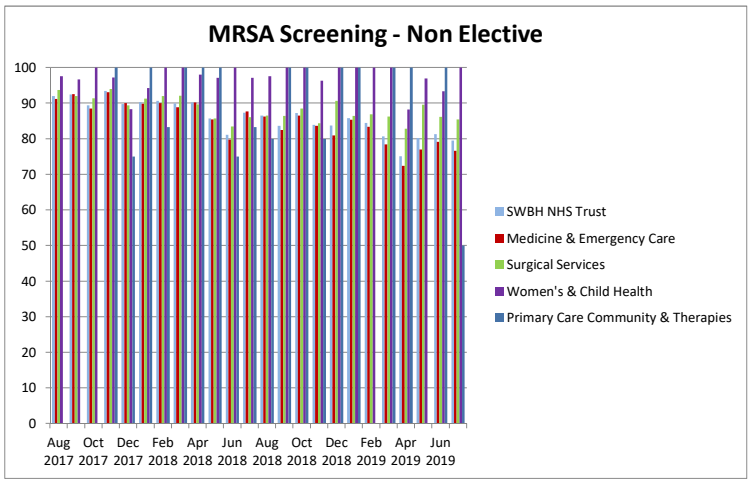
Persistent Red and Improvement Recovery Plans

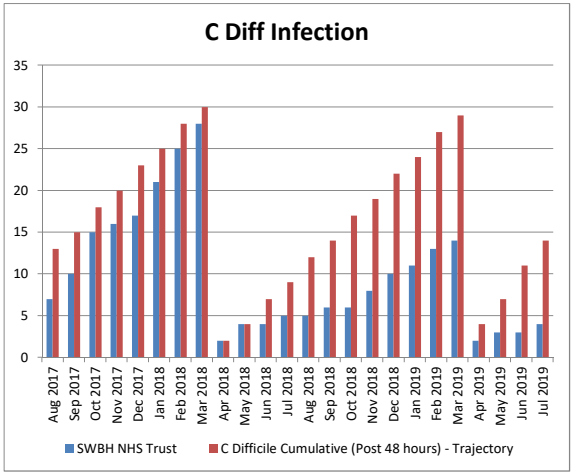
Indicator	Measure	2016-2017 Year	2016-2017 Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		Directors' Priority Assessment RESOLVE	IMPROVE	TOLERATE	Lead	Plan In Place Yes / No
Falls	<= No	804	67	78	112	97	82	66	71	87	80	101	110	90	87	83	78	95	89	89	86				√	Paul Hooton	Yes
Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1.0	1.0	0.56	1.66	2.85	2.28	1.04	1.22	1.45	1.73	3.21	3.81	3.87	1.00	0.44	0.44	1.76	2.58	0.95	0.77					Liam Kennedy	
Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No			531	373	1002	739	1038	1190	1344	1340	-	1237	1294	1861	532	958	1158	1330	1023	1010					Liam Kennedy	
20WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90	90	89.6	92.6	91.5	92.9	98.1	98.1	87.3	94.5	90.4	98.5	98.1	93.8	89.2	93.3	90.9	88.2	-	-						
20WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80	80	77.5	92.9	67.3	69.8	68.0	83.8	66.2	48.1	62.0	65.9	75.6	60.7	52.3	84.9	45.2	66.7	-	-						
20WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85	85	100.0	100.0	100.0	100.0	83.3	33.3	87.5	100.0	85.7	0.0	80.0	25.0	66.7	100.0	66.7	87.5	-	-						

Patient Safety - Infection Control

Data Quality	Reviewed Date	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (From Feb 2018) F M A M J J A S O N D J F M A M J J	Data Period	Group M	Group SS	Group W	Group P	Group I	Group PCCT	Group CO	Month	Year To Date	Trend
			C. Difficile	<= No	41	3.4		Jul 2019	1	0	0			0		1	4	
			MRSA Bacteraemia	<= No	0	0		Jul 2019	0	0	0			0		0	1	
			MSSA Bacteraemia (rate per 100,000 bed days)	<= Rate2	9.42	9.42		Jul 2019								5.5	4.2	
			E Coli Bacteraemia (rate per 100,000 bed days)	<= Rate2	94.9	94.9		Jul 2019								5.5	15.3	
			MRSA Screening - Elective	=> %	85	85		Jul 2019	80	86	85			0		85.3	82.7	
			MRSA Screening - Non Elective	=> %	85	85		Jul 2019	77	85	100			50		79.5	79.0	

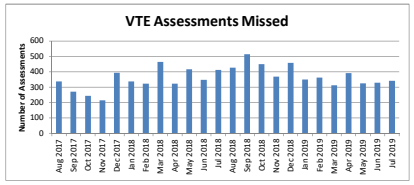


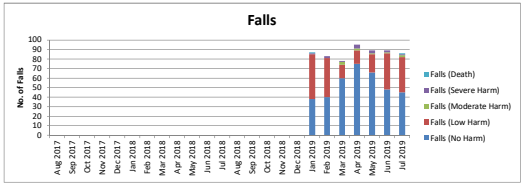


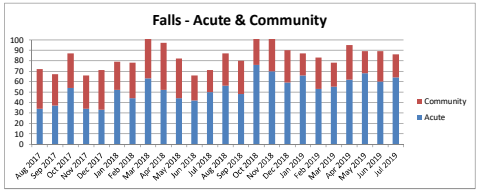


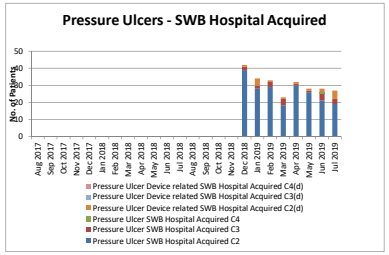
Patient Safety - Harm Free Care

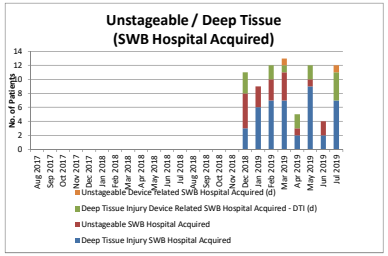
Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
		d	Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95																			Jul 2019								95.4	97.4	
		d	Patient Safety Thermometer - Catheters & UTIs	%			2.0	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	Jul 2019								0.09	0.15	
			Number of DOLS raised	No			30	27	34	59	27	43	40	49	51	40	29	56	25	39	32	30	34	26	Jul 2019	13	7	0	-	-	6		26	122	
			Number of DOLS which are 7 day urgent	No			30	27	34	59	27	43	40	49	51	40	29	56	25	39	32	30	34	26	Jul 2019	13	7	0	-	-	6		26	122	
			Number of delays with LA in assessing for standard DOLS application	No			0	0	2	3	4	4	7	8	6	9	8	2	0	8	5	5	15	6	Jul 2019	2	1	0	-	-	3		6	31	
			Number DOLs rolled over from previous month	No			3	10	4	9	4	7	9	9	0	0	0	1	15	5	5	5	7	0	Jul 2019	0	0	0	-	-	0		0	17	
			Number patients discharged prior to LA assessment targets	No			8	3	4	18	13	11	11	25	29	18	16	30	21	19	19	22	17	11	Jul 2019	8	2	0	-	-	1		11	69	
			Number of DOLs applications the LA disagreed with	No			0	0	0	0	1	6	2	4	2	5	2	2	4	3	1	1	1	0	Jul 2019	0	0	0	-	-	0		0	3	
			Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	0	0	2	2	0	0	0	0	0	0	21	0	4	0	4	3	Jul 2019	0	3	0	-	-	0		3	11	
	Apr-19		Falls	<= No	804	67	78	112	97	82	66	71	87	80	101	110	90	87	83	78	95	89	89	86	Jul 2019	58	6	0	0	0	22	0	86	359	
	Apr-19		Falls - Death or Severe Harm	<= No	0	0	0	1	2	4	2	1	0	0	5	3	-	2	2	1	4	3	2	2	Jul 2019	2	0	0		0	0	0	2	11	
			Falls Per 1000 Occupied Bed Days	Rate1			-	-	-	-	-	-	-	-	-	5.026	-	-	-	-	4.404	4.201	3.967	3.8	Jul 2019								3.8	4.09	
	Apr-19		Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	7	6	8	7	9	11	4	10	13	26	42	34	33	23	37	28	28	27	Jul 2019	6	-	-			6		27	120	
	Apr-19		Pressure Ulcers per 1000 Occupied Bed Days	Rate1			-	-	-	-	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	Jul 2019								1.193	1.4	
	Apr-19		Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	4	4	3	1	1	1	1	1	7	37	32	45	34	34	36	16	24	28	Jul 2019						28		28	104	
			Pressure Ulcer Present on Admission to SWBH	<= No	0	0	-	-	-	-	-	-	-	-	-	-	-	129	99	96	198	130	141	125	Jul 2019								125	594	
		d	Venous Thromboembolism (VTE) Assessments	=> %	95	95																			Jul 2019	93.3	97.4	97.6					95.9	95.6	
	Apr-19		WHO Safer Surgery - Audit - 3 sections (% pts where all sections complete)	=> %	100	100																-			Jul 2019	100.0	100.0	100.0		-			100.0	99.7	
	Apr-19		WHO Safer Surgery - brief (% lists where complete)	=> %	100	100																			Jul 2019	100	100	-		-			100.0	100.0	
	Apr-19		WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100																			Jul 2019	100	100	-		-			99.8	99.8	
		d	Never Events	<= No	0	0	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0	1	1	1	Jul 2019	0	1	0	0	0	0		1	3	
		d	Medication Errors causing serious harm	<= No	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	Jul 2019	0	0	0	-	0	0		0	0	
		d	Serious Incidents	<= No	0	0	5	4	5	9	4	6	3	1	9	4	6	1	7	6	3	3	12	32	Jul 2019	10	5	2	0	0	15	0	32	50	
			Open Central Alert System (CAS) Alerts	<= No			6	5	8	9	14	12	15	14	14	15	16	18	20	19	15	15	4	9	Jul 2019								9	43	
		d	Open Central Alert System (CAS) Alerts beyond deadline date	No	0	0	2	2	2	2	3	2	4	4	4	5	5	5	5	8	6	7	3	6	Jul 2019								6	22	

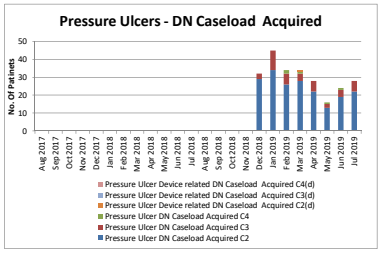


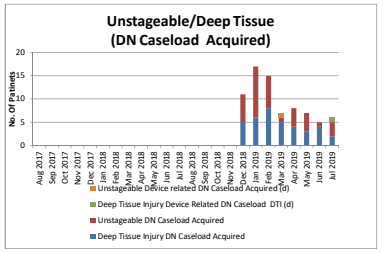






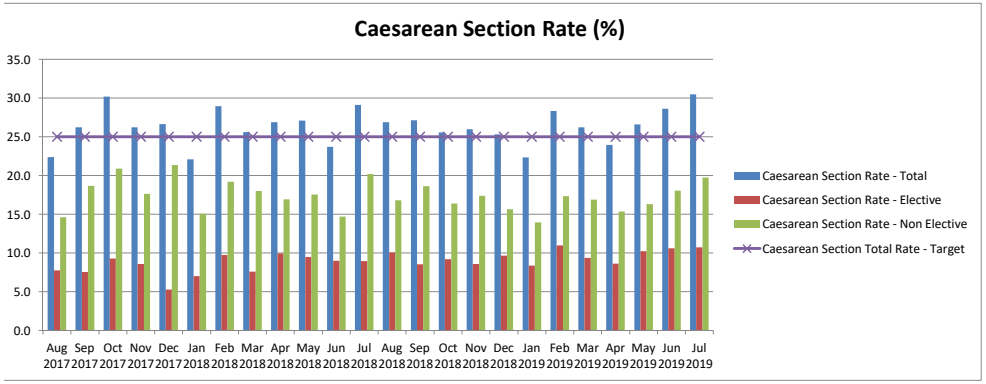


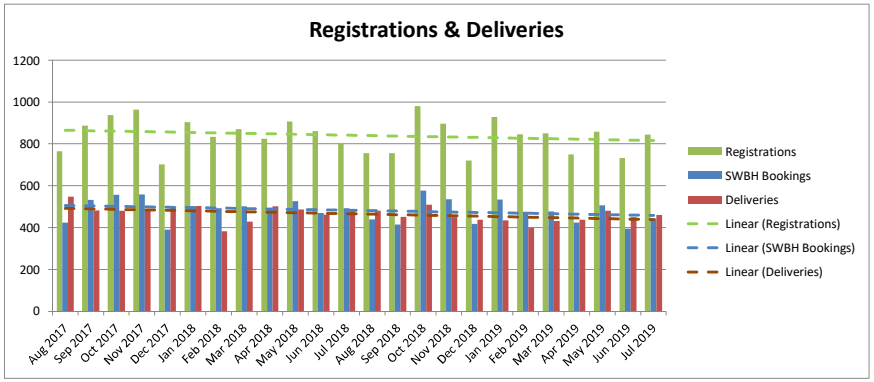




Patient Safety - Obstetrics

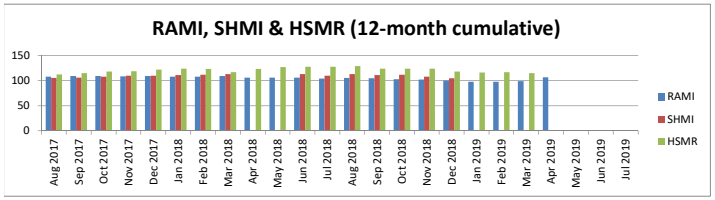
Data Quality	Last review	PAF	Indicator	Measure	Trajectory 2016-2017 Year	Trajectory 2016-2017 Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Month	Year To Date	Trend
			Caesarean Section Rate - Total	<= %	25.0	25.0																			Jul 2019	30.5	27.4	
		•	Caesarean Section Rate - Elective	<= %			10	8	10	10	9	9	10	9	9	9	10	8	11	9	9	10	11	11	Jul 2019	10.7	10.1	
		•	Caesarean Section Rate - Non Elective	<= %			19	18	17	18	15	20	17	19	16	17	16	14	17	17	15	16	18	20	Jul 2019	19.7	17.4	
		•d	Maternal Deaths	<= No	0	0																			Jul 2019	0	0	
			Post Partum Haemorrhage (>2000ml)	<= No	48	4																			Jul 2019	3	10	
			Admissions to Neonatal Intensive Care (Level 3)	<= %	10.0	10.0																			Jul 2019	0.87	1.64	
			Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																			Jul 2019	6.51	4.92	
	Apr-19		Stillbirth Rate (Corrected) (per 1000 babies)	Rate1			2.58	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	Jul 2019	6.51	4.38	
	Apr-19		Neonatal Death Rate (Corrected) (per 1000 babies)	Rate1			2.58	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	Jul 2019	0.00	0.55	
			Early Booking Assessment (<12 + 6 weeks) - SWBH Specific	=> %	85.0	85.0																			Jul 2019	93.1	91.9	
			Early Booking Assessment (<12 + 6 weeks) - National Definition	=> %	90.0	90.0																			Jul 2019	138.3	132.0	
			Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0																			Jul 2019	79.39	77.38	
	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	<= %			1.1	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	Jul 2019	0.88	1.52	
	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	<= %			0.4	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	Jul 2019	0.88	1.18	
	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	<= %			0.0	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	Jul 2019	0.59	0.51	

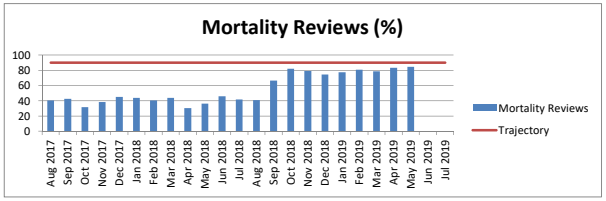


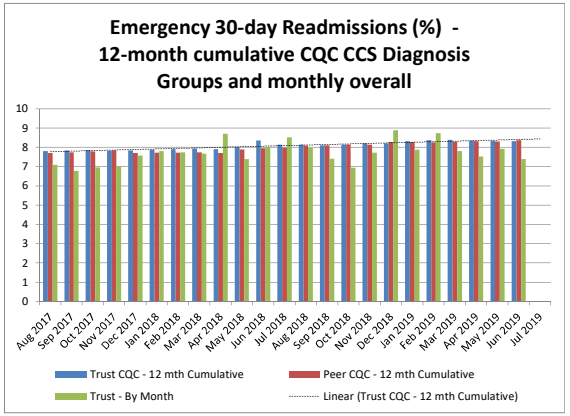


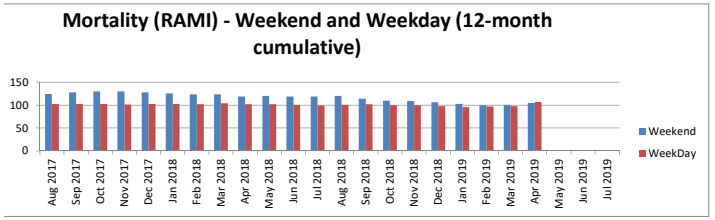
Clinical Effectiveness - Mortality & Readmissions

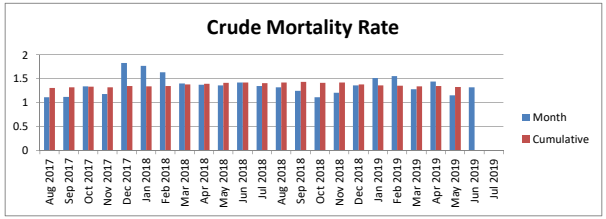
Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
			Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI	108	109	106	106	106	104	105	105	103	102	100	98	98	99	107	-	-	-	Apr 2019									107	
			Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI	102	104	102	102	101	99	101	102	100	100	98	96	97	98	107	-	-	-	Apr 2019									107	
			Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	RAMI	Below Upper CI	Below Upper CI	124	124	119	120	119	119	120	114	110	109	106	103	100	101	105	-	-	-	Apr 2019									105	
			Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	SHMI	Below Upper CI	Below Upper CI	112	113	-	-	113	110	113	111	112	108	105	-	-	-	-	-	-	-	Dec 2018									772	
			Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	HSMR			123	117	123	127	128	128	129	124	124	124	118	116	117	115	-	-	-	-	Mar 2019									1473.0	
			Deaths in Low Risk Diagnosis Groups (RAMI) - month	RAMI	Below Upper CI	Below Upper CI	102	129	76	100	71	84	71	61	98	105	86	108	88	85	98	-	-	-	Apr 2019								98		
			Mortality Reviews within 42 working days	=> %	90	90																			May 2019	82	100	-			-		85	84	
			Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%			1.6	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	-	Jun 2019								1.32		
			Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%			1.3	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	-	-	May 2019									1.34	
			Deaths in the Trust	No			142	143	120	123	127	124	116	106	107	114	122	149	137	121	134	112	117	-	Jun 2019								117	363	
			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			7.7	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	-	Jun 2019								7.38		
			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			7.3	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	-	Jun 2019									7.89	
			Emergency Readmissions (within 30 days) - CQC CCS Diagnosis Groups (12-month cumulative)	%			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	-	Jun 2019	-	-	-			-			8.32	
	Apr-19		Emergency Readmissions (within 30 days) - Same Specialty (exc. Deaths and Stillbirths) month	%			3.6	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	-	Jun 2019									2.57	
	Apr-19		Emergency Readmissions (within 30 days) - Different Specialty (exc. Deaths and Stillbirths) month	%			4.1	4.4	4.7	3.8	4.2	4.8	4.1	4.1	4.3	4.1	4.8	4.3	4.9	4.3	4.5	4.9	4.8	-	Jun 2019									4.81	
	Apr-19		Emergency Readmissions (within 30 days) - Same Specialty (exc. Deaths and Stillbirths) 12-month cumulative	%			3.4	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	-	Jun 2019									3.39	
	Apr-19		Emergency Readmissions (within 30 days) - Different Specialty (exc. Deaths and Stillbirths) 12-month cumulative	%			4.0	4.0	4.1	4.1	4.1	4.2	4.2	4.2	4.3	4.3	4.3	4.3	4.4	4.4	4.4	4.4	4.5	-	Jun 2019									4.49	





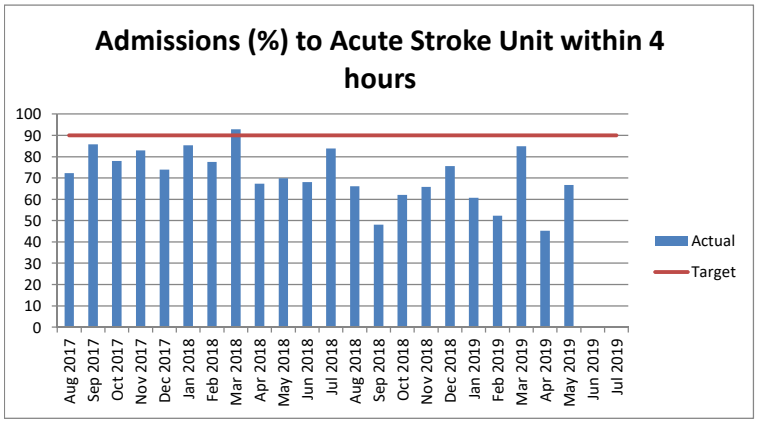


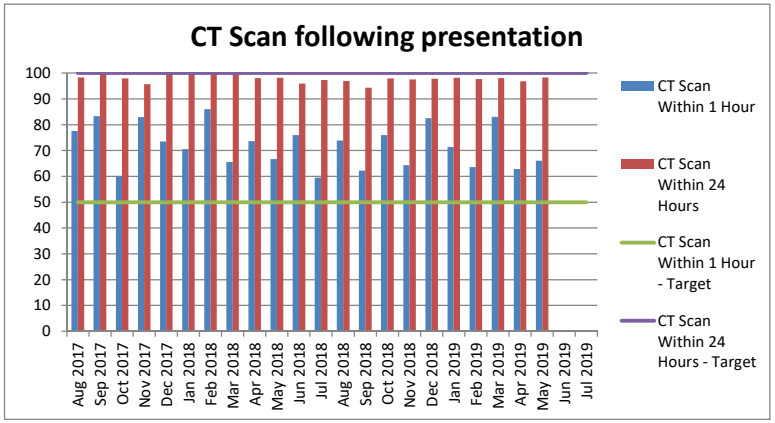


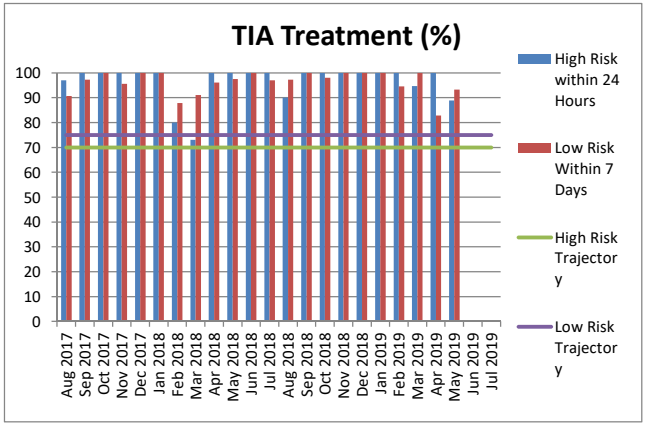


Clinical Effectiveness - Stroke Care & Cardiology

Data Quality	Last review	PAF	Indicator	Measure	Trajectory		Previous Months Trend (Since Feb 2018)																	Data Period	Month	Year To Date	Trend
					Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J				
			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90.0	90.0																		Jul 2019	90.2	89.8	
			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80.0	80.0																		Jul 2019	76.6	63.7	
			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50.0	50.0																		Jul 2019	70.2	66.1	
			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95.0	95.0																		Jul 2019	97.9	98.7	
			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=>	85.0	85.0																		Jul 2019	83.3	82.6	
			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=>	70.0	70.0																		Jul 2019	87.5	83.7	
			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=>	75.0	75.0																		Jul 2019	88.4	84.6	
			Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80.0	80.0																		Jul 2019	93.8	94.2	
			Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80.0	80.0																		Jul 2019	93.3	92.3	
			Rapid Access Chest Pain - seen within 14 days	=> %	98.0	98.0																		Jul 2019	100.0	100.0	



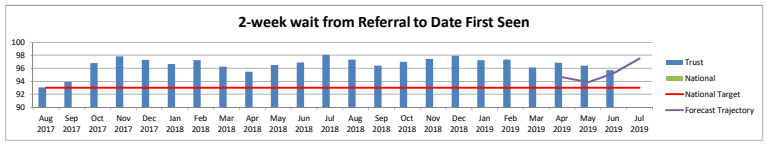


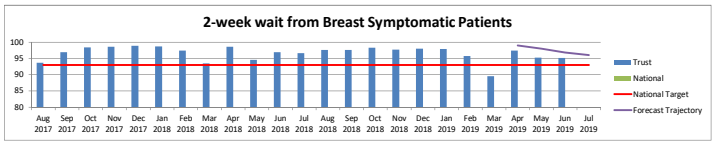


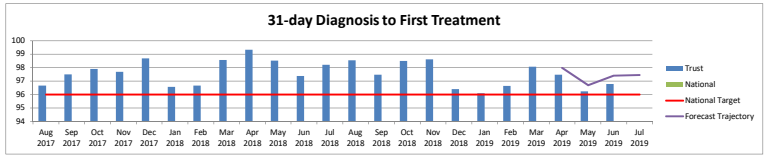
The stroke indicators in the IPR are based on 'patient arrivals' not 'patient discharged' as this monitors pathway performance rather than actual outcomes which may / may not change on discharge.
National SSNAP is based on 'patient discharge' which is more appropriate for outcomes based reporting.
Both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

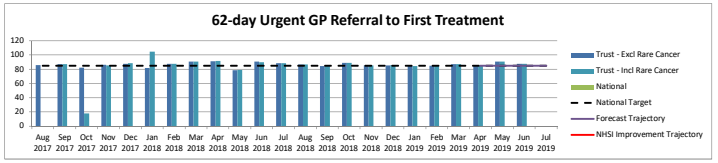
Clinical Effectiveness - Cancer Care

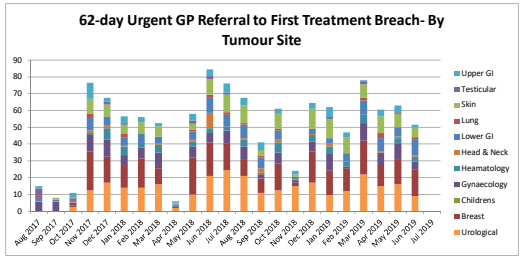
Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
	Apr-19		2 weeks	=> %	93.0	93.0																		-	Jun 2019	92.2	97.0	98.8			-		95.7	96.3	
	Apr-19		2 weeks (Breast Symptomatic)	=> %	93.0	93.0																		-	Jun 2019		-						95.1	96.1	
	Apr-19		31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Jun 2019	89.7	100.0	94.1			-		96.8	96.8	
	Apr-19		31 Day (second/subsequent treatment - surgery)	=> %	94.0	94.0																		-	Jun 2019								95.0	96.6	
	Apr-19		31 Day (second/subsequent treatment - drug)	=> %	98.0	98.0														#####	#####		#####	-	Jun 2019								-	100.0	
			31 Day (second/subsequent treat - radiotherapy)	=> %	94.0	94.0																		-	Jun 2019								-	-	
	Apr-19		62 Day (urgent GP referral to treatment) Excluding Rare Cancer	=> %	85.0	85.0																		-	Jun 2019	85.2	89.9	75.0			-		87.3	87.9	
			62 Day (urgent GP referral to treatment) Including Rare Cancer	=> %	85.0	85.0																		-	Jun 2019	85.2	89.9	75.0			-		87.3	88.0	
	Apr-19		62 Day (referral to treat from screening)	=> %	90.0	90.0																		-	Jun 2019	-	91.3	100.0			-		91.7	96.7	
	Apr-19		62 Day (referral to treat from hosp specialist)	=> %	90.0	90.0																		-	Jun 2019	87.1	100.0	-			-		92.9	88.1	
			Cancer - Patients Waiting over 62 days	No			9	6	6	17	8	10	11	8	8	11	11	11	9	12	10	7	8	-	Jun 2019	2.0	4.0	1.5			0.0		7.5	23.5	
			Cancer - Patients Waiting over 104 days	No			2	3.0	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	-	Jun 2019	0.0	0.5	0.0			0.0		0.5	7.5	
			Cancer - Longest Waiter in days	No			113	280	118	104	112	113	146	86	104	101	197	137	177	209	241	183	91	-	Jun 2019	91	111	85			0		91		
	Apr-19		Neutropenia Sepsis Door to Needle Time Greater Than 1 Hour	<= No	0.0	0.0	9	4	3	7	6	4	2	7	4	6	6	5	9	2	7	2	3	3	Jul 2019	3	-	-			-		3	15	
			IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway	%			0	55	60	67	36	67	65	71	69	56	53	87	38	67	48	53	64	-	Jun 2019	-	-	-			-		64	53	

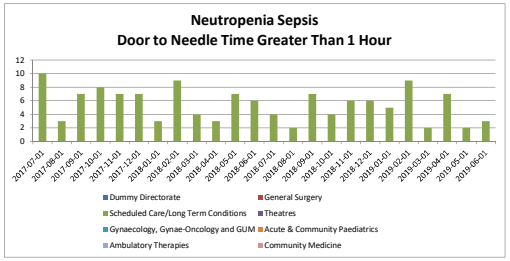


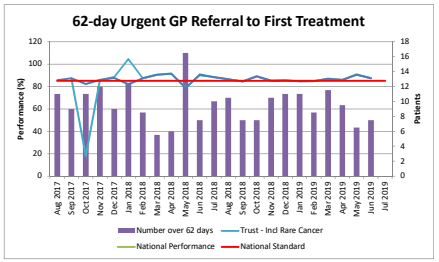






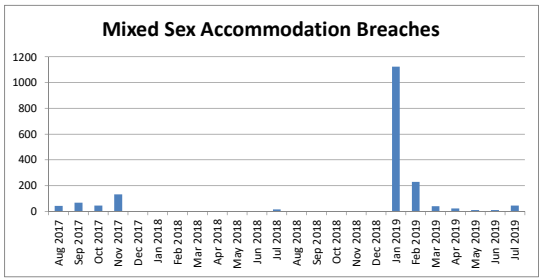


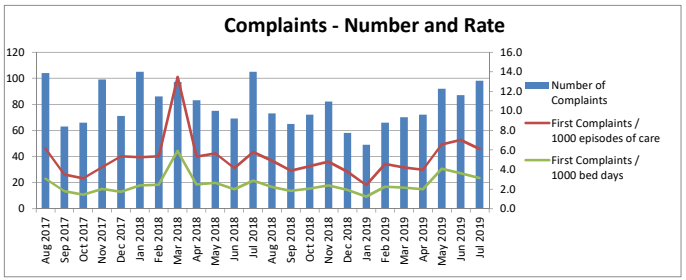


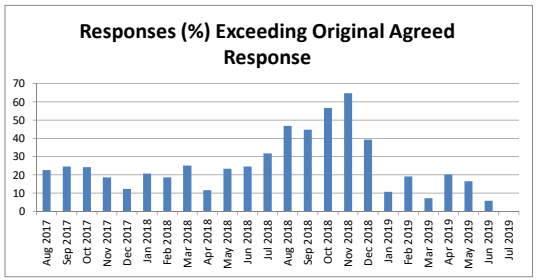


Patient Experience - FFT, Mixed Sex Accommodation & Complaints

Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
	Apr-19	b	FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	25.0	25.0	9.8	10	8.3	7.4	5.4	8.9	8.3	15	19	29	22	24	22.79	20	16	29	26	23	Jul 2019								23	23	
	Apr-19	a	FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95.0	95.0	88	88	89	92	92	95	96	90	93	92	92	91	91.79	91	89	89	92	91	Jul 2019								91		
	Apr-19	b	FFT Response Rate: Type 1 and 2 Emergency Department	=> %	25.0	25.0	3.8	7	-	-	-	-	11	6.3	4.3	6.8	7.8	15	16.26	16	12	11	9.6	10	Jul 2019	10.4							10.4	10.7	
	Apr-19	a	FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95.0	95.0	75	74	-	-	-	-	76	73	71	74	73	74	75.21	75	75	76	73	76	Jul 2019	76							76		
	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	Jul 2019	-							0		
	Apr-19		FFT Score - Outpatients	=> No	95.0	95.0	92	90	-	-	-	-	91	90	91	90	92	90	89.72	91	90	90	89	88	Jul 2019								88		
	Apr-19		FFT Score - Maternity Antenatal	=> No	95.0	95.0	0	100	-	-	-	-	88	86	94	0	0	0	0	0	0	0	0	0	Jul 2019								0		
	Apr-19		FFT Score - Maternity Postnatal Ward	=> No	95.0	95.0	0	100	-	-	-	-	91	0	87	93	100	100	100	0	100	100	0	100	Jul 2019								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	Jul 2019								0		
	Apr-19		FFT Score - Maternity Birth	=> No	95.0	95.0	94	100	-	-	-	-	90	93	100	100	100	17	94.73	100	100	94	94	91	Jul 2019								91		
	Apr-19		FFT Response Rate - Maternity Birth	=> %	25.0	25.0	23	1.2	-	-	-	-	13	16	8.4	5	3.7	17	4.961	3.5	2.1	3.5	8.3	10	Jul 2019								10	6	
		a	Mixed Sex Accommodation Breaches	<= No	0.0	0.0	0	0	0	0	0	15	0	0	0	0	-	###	229	40	22	11	9	44	Jul 2019	31	13	0		0	0		44	86	
			No. of Complaints Received (formal and link)	No			86	97	83	75	69	105	73	65	72	82	58	49	66	70	72	92	87	98	Jul 2019	31	22	23	1	3	8	10	98	349	
			No. of Active Complaints in the System (formal and link)	No			181	183	176	174	164	194	213	208	206	212	210	165	170	151	163	149	121	148	Jul 2019	58	38	23	1	6	17	5	148		
		a	No. of First Formal Complaints received / 1000 bed days	Rate1			2.5	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	Jul 2019	2.08	4.07	4.02			67.16		3.15	3.17	
			No. of First Formal Complaints received / 1000 episodes of care	Rate1			5.3	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	Jul 2019	5.27	5.53	6.38			21.18		6.10	5.92	
			No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100	100	99	100	100	100	93	93	100	97	96	98	98	100	98	100	2.2	100	100	Jul 2019	100	100	100	-	100	100	100	100	71	
			No. of responses which have exceeded their original agreed response date (% of total active complaints)	<= %	0	0	19	25	12	23	25	32	47	45	57	65	39	11	19.08	7.2	20	17	5.9	0	Jul 2019	0	0	0	0	0	0	0	0	13	
			No. of responses sent out	No			65	81	77	65	64	52	52	57	54	59	47	74	58	95	77	98	97	95	Jul 2019	34	17	21	1	5	12	5	95	367	
		e	Access to healthcare for people with Learning Disability (full compliance)	Yes / No	Yes	Yes	UNDER REVIEW																		Jun 2019										

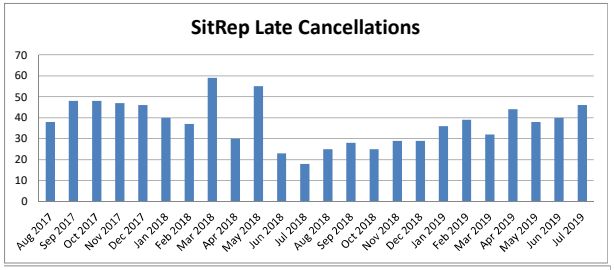


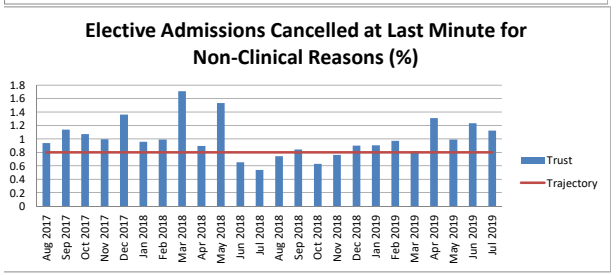


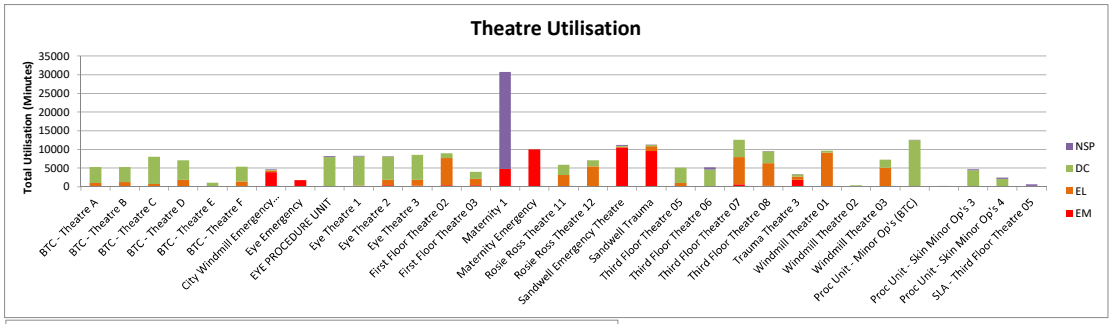


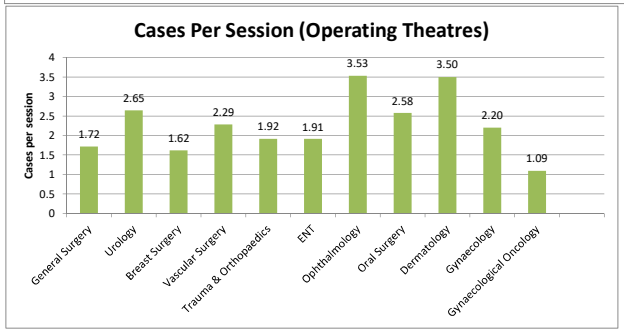
Patient Experience - Cancelled Operations

Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
			No. of Sitrep Declared Late Cancellations - Total	<= No	240	20	37	59	30	55	23	18	25	28	25	29	29	36	39	32	44	38	40	46	Jul 2019	0	39	5			2		46	168	
			No. of Sitrep Declared Late Cancellations - Avoidable	No			10	14	3	12	5	8	14	10	9	7	11	18	7	10	16	13	3	16	Jul 2019	0	16	0			0		16	48	
			No. of Sitrep Declared Late Cancellations - Unavoidable	No			28	45	26	43	18	10	11	18	16	22	18	18	32	22	28	25	37	30	Jul 2019	0	23	5			2		30	120	
		•	Elective Cancellations at last minute for non-clinical reasons (as a percentage of elective admissions)	<= %	0.8	0.8	1.0	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	Jul 2019	-	1.60	2.11			0.54		1.1	1.2	
		•e•	Number of 28 day breaches	<= No	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	Jul 2019	0	0	0			0		0	0	
		•e	No. of second or subsequent urgent operations cancelled	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0	0	0			-		0	0	
			Urgent Cancellations	<= No	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0.0	0.0	0.0			0.0		0	0	
			No. of Sitrep Declared Late Cancellations (Pts. >1 occasion)	<= No	0	0	3	2	0	1	1	0	0	0	0	0	0	2	0	0	0	1	2	1	Jul 2019	0	0	1			0		1	4	
			Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0	59	89	62	42	40	56	61	54	68	55	39	52	56	69	73	64	75	86	Jul 2019	2	78	6			-		86	298	
			All Hospital Cancellations, with 7 or less days notice	<= No	0	0	212	276	224	219	205	245	230	193	265	238	156	236	230	244	265	262	277	296	Jul 2019	14	259	23			-		296	1100	







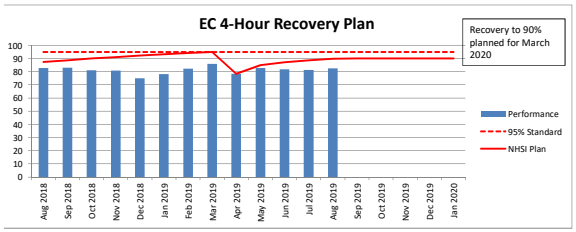


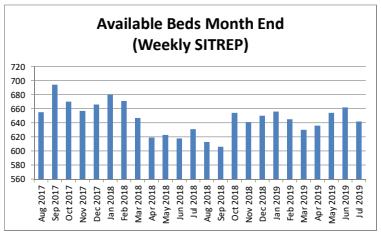
Operating Theatre : Cases Per Session : July 2019

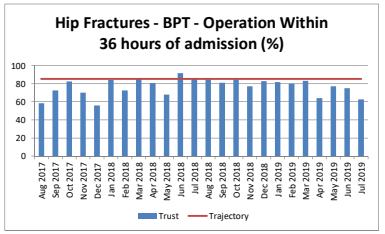
Specialty	Actual	Plan	Variance
General Surgery	1.7	2.1	-0.38
Urology	2.6	2.6	0.05
Breast Surgery	1.6	1.9	-0.28
Vascular Surgery	2.3	2.8	-0.51
Trauma & Orthopaedics	1.9	2.4	-0.48
ENT	1.9	2.5	-0.59
Ophthalmology	3.5	-	-
Oral Surgery	2.6	3.0	-0.42
Dermatology	3.5	-	-
Gynaecology	2.2	-	-
Gynaecological Oncolo	1.1	-	-

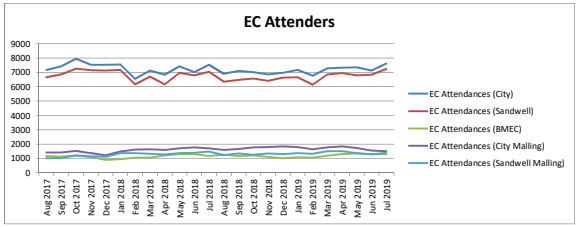
Access To Emergency Care & Patient Flow

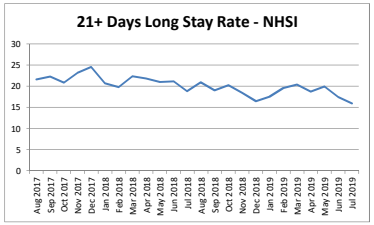
Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (From) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Unit S	Unit C	Unit B	Month	Year To Date	Trend
			Emergency Care Attendances (Including Malling)	No			16738	17818	17075	18766	18238	18923	17333	17740	17819	17502	17753	18042	16948	18592	18908	18541	18091	19047	Jul 2019	8632	9112	1303	19047	74587	
		e	Emergency Care 4-hour waits	=> %	95.00	95.00																			Jul 2019	79.0	81.7	95.7	81.40	81.03	
			Emergency Care 4-hour breach (numbers)	No			3377	3382	2745	3746	3418	3001	2999	3013	3354	3383	4435	3963	3006	2629	4105	3213	3288	3542	Jul 2019	1816	1670	56	3542	14149	
		e	Emergency Care Trolley Waits >12 hours	<= No	0.00	0.00																			Jul 2019	0	0		0	0	
			Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.00	15.00																			Jul 2019	14	14	17	14	14	
			Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60																			Jul 2019	70	64	127	69	59	
			Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0																			Jul 2019	5.32	5.45	2.56	5.16	5.31	
			Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0																			Jul 2019	6.71	8.11	6.73	7.37	7.10	
			WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	160	196	173	219	195	165	116	95	121	159	205	168	140	88	166	119	128	123	Jul 2019	109	14		123	536	
			WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	4	21	6	6	10	2	8	5	6	7	7	9	8	6	5	4	4	5	Jul 2019	5	0		5	18	
			WMAS - Handover Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02																			Jul 2019	0.21	0.00		0.11	0.10	
			WMAS - Emergency Conveyances (total)	No			4681	4487	4308	4539	4306	4685	4522	4354	4622	4579	4872	4835	4372	4655	4814	4670	4555	4658	Jul 2019	2438	2220		4658	18697	
	Apr-19		Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5																			Jul 2019	-	-		-	1	
			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	<10 per site	<10 per site																-	-		Jul 2019	-	-		-		
	Apr-19		Delayed Transfers of Care (Acute) - Finable Bed Days (Birmingham LA only)	<= No	0	0	193	152	176	241	192	263	174	181	200	272	275	315	270	211	99	149	239	295	Jul 2019				295	782	
	Apr-19		Patient Bed Moves (10pm - 6am) (No.) -ALL	No			654	796	570	628	677	655	733	712	797	717	713	757	654	642	672	698	583	684	Jul 2019				684	2637	
	Apr-19		Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No			215	278	244	239	242	232	241	240	246	227	247	279	241	243	223	228	185	218	Jul 2019				218	854	
	Apr-19		Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Transfers for Clinical Reasons	No			48	75	43	26	48	36	38	47	54	38	55	63	57	63	65	37	30	46	Jul 2019				46	178	
	Apr-19		Hip Fractures - Best Practice Tarriff - Operation < 36 hours of admission (%)	=> %	85.0	85.0																			Jul 2019				63	70.4	
	Apr-19		Inpatients Staying 21+ Days At Month End Census - NHSI	No			-	-	-	-	-	-	122	122	146	123	126	137	125	116	139	130	124	129	Jul 2019				129	-	
	Apr-19		21+ Days Long Stay Rate - NHSI	%			19.79	22.37	21.88	20.96	21.12	18.79	20.90	19.05	20.2	18.38	16.47	17.54	19.57	20.38	18.74	19.96	17.45	15.92	Jul 2019				15.915	18.05	
	Apr-19		Estimated Beds - 21+ Days - NHSI	<= No	82.0	82.0	131.6	158	145.5	132.3	137.1	111.7	129.3	115.4	126.7	117	96.05	111.8	124	125.8	113.6	133.4	100.7	95.78	Jul 2019				95.78	-	

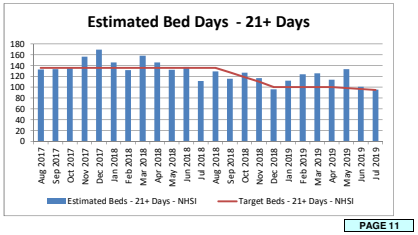






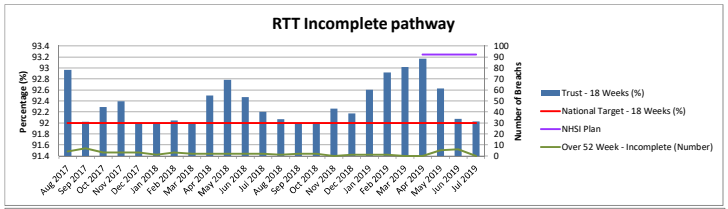


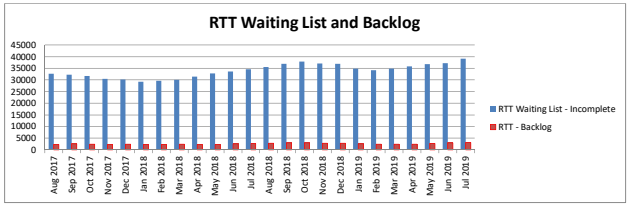


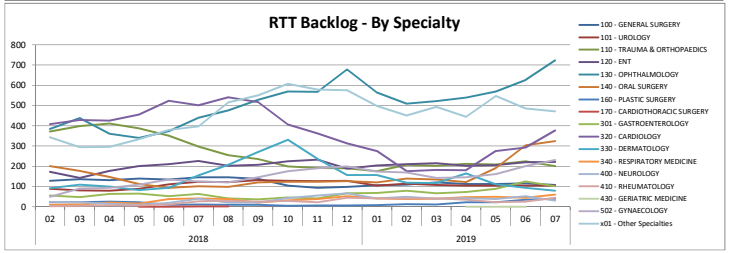


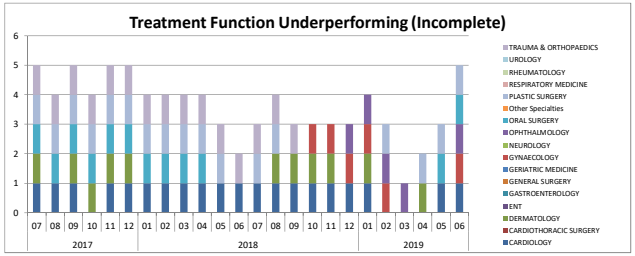
Referral To Treatment

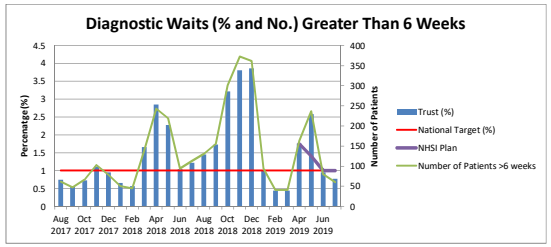
Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
	Apr-19		RTT - Admittted Care (18-weeks)	=> %	90.0	90.0																			Jul 2019	89.6	72.4	81.7			89.9		77.63		
	Apr-19		RTT - Non Admittted Care (18-weeks)	=> %	95.0	95.0																			Jul 2019	81.0	91.9	72.3			89.6		89.64		
	Apr-19		RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0																			Jul 2019	92.2	90.9	90.0			95.6		92.03		
	Apr-19		RTT Waiting List - Incomplete	No			29607	30071	31369	32841	33665	34594	35614	36990	37871	37012	36914	34909	34221	34888	35859	36762	37231	39115	Jul 2019	7294	18840	2308			2822		39115		
	Apr-19		RTT - Backlog	No			2356	2404	2354	2369	2536	2697	2825	2959	3023	2865	2890	2582	2424	2436	2450	2710	2951	3118	Jul 2019	568	1722	231			125		3118		
	Apr-19		Patients Waiting >52 weeks	<= No	0	0	6	5	4	5	4	7	7	3	5	4	1	3	4	6	1	11	24	12	Jul 2019	1	7	0			2		12	48	
	Apr-19		Patients Waiting >52 weeks (Incomplete)	<= No	0	0	3	2	2	2	2	2	1	2	2	0	1	1	1	0	0	5	6	0	Jul 2019	0	0	0			0		0	11	
			Treatment Functions Underperforming (Admitted, Non-Admitted, Incomplete)	<= No	0	0	29	27	27	25	23	27	28	28	27	26	26	28	29	27	23	27	29	30	Jul 2019	6	16	3.0			3.0		30		
			Treatment Functions Underperforming (Incomplete)	<= No	0	0	4	4	4	3	2	3	4	3	3	3	3	4	3	-	2	3	5	5	Jul 2019	1	3	1			0		5		
	Apr-19		Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1.0	1.0																			Jul 2019	0.4	0.6	-		0.9	-		0.77		
	Apr-19		Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No			531	373	1002	739	1038	1190	1344	1340	-	1237	1294	1861	532	958	1158	1330	1023	1010	Jul 2019	115	78	-			797	-	1010		
	Apr-19		Routine Outpatient Appointments with Short Notice(<3Wks)	%			19	18	19	24	21	21	28	22	25	31	35	33	35	35	39	35	35	36	Jul 2019	39	36	41	32	-	28	-	36.3	36.1	
	Apr-19		Routine Outpatient Appointments with Short Notice(<3Wks)	No			1505	1509	1414	2061	1943	1979	2325	1904	2434	3097	3169	3693	3564	3554	3599	3767	3498	3838	Jul 2019	838	2017	591	99	0	290	-	3838	14702	
	Apr-19		Short Notice Inpatient Admission Offers (<3wks)	%			49	51	49	52	57	59	47	49	55	59	52	44	48	46	58	57	56	54	Jul 2019	68	53	65	49	92	38	-	54	56.3	
	Apr-19		Short Notice Inpatient Admission Offers (<3wks)	No			1792	1975	1783	1983	2161	2252	1800	1760	2253	2307	1773	1873	1862	1869	2416	2414	2136	2375	Jul 2019	275	1666	201	29	24	180	-	2375	9341	
			RTT Clearance Time (Wks)	Weeks			-	-	-	-	-	-	-	-	-	9.3	11.6	8.6	8.4	9.1	9.5	9.7	10.0	-	Jun 2019	17.1	9.3	13.2	-	-	11.6	-	10.0	9.7	

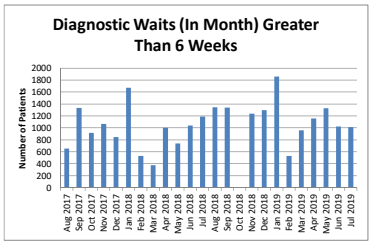








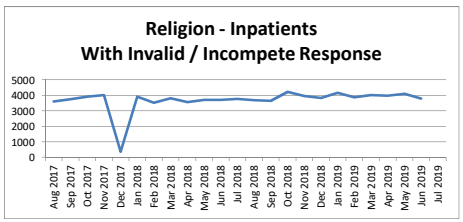


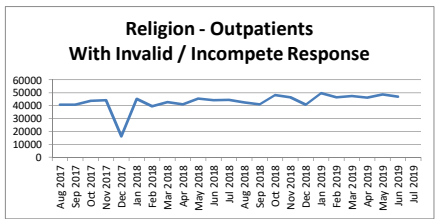


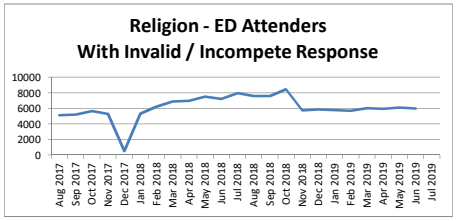
SpecDesc	PTLSize	WeeklyStops	Backlog	Perfo	ClearanceT	MaxBacklog
Cardiology	3034	147	376	0.88	20.64	73
Cardiothroacic	31	0	2	0.94	0	0
Dermatology	1865	126	80	0.96	14.8	63
ENT	3273	189	221	0.93	17.32	94
Gastro	1841	119	101	0.95	15.47	59
General Surgery	2220	301	107	0.95	7.38	150
Geriatrics	59	21	0	1	2.81	10
Gynae	2308	175	231	0.9	13.19	87
Neurology	1094	63	30	0.97	17.37	31
Ophthalmology	7167	1148	723	0.9	6.24	574
Oral Surgery	1431	84	325	0.77	17.04	42
Other Specs	7851	1071	472	0.94	7.33	535
Plastics	201	14	39	0.81	14.36	7
Rhematology	957	77	45	0.95	12.43	38
Thoracic Med	1266	70	61	0.95	18.09	35
Trauma & Orthopae	2980	336	201	0.93	8.87	168
Urology	1537	105	104	0.93	14.64	52
Total	39115	4046			9.67	

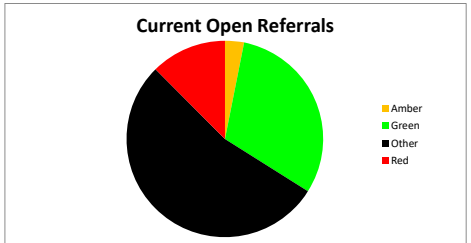
Data Completeness

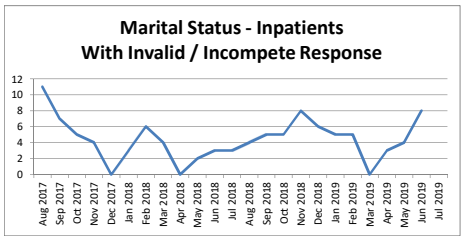
Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
			Data Completeness Community Services	=> %	50.0	50.0																			Jul 2019							61.2	61.2		
			Percentage SUS Records for AE with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0																	-	-	-	Apr 2019								88.0		
			Percentage SUS Records for IP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0																	-	-	-	Apr 2019								98.5		
			Percentage SUS Records for OP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0																	-	-	-	Apr 2019								99.4		
			Completion of Valid NHS Number Field in acute (inpatient) data set submissions to SUS	=> %	99.0	99.0	99.0	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	-	Jun 2019								96.8	97.7	
			Completion of Valid NHS Number Field in acute (outpatient) data set submissions to SUS	=> %	99.0	99.0	99.6	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	-	Jun 2019								99.6	99.6	
			Completion of Valid NHS Number Field in A&E data set submissions to SUS	=> %	95.0	95.0	97.5	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	-	Jun 2019								97.3	97.5	
			Ethnicity Coding - percentage of inpatients with recorded response	=> %	90.0	90.0																		-	Jun 2019								90.8	91.2	
			Ethnicity Coding - percentage of outpatients with recorded response	=> %	90.0	90.0																		-	Jun 2019								91.1	91.8	
			Protected Characteristic - Religion - INPATIENTS with recorded response	%			69.7	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	-	Jun 2019								68.0	68.3	
			Protected Characteristic - Religion - OUTPATIENTS with recorded response	%			52.7	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	-	Jun 2019								50.3	50.4	
			Protected Characteristic - Religion - ED patients with recorded response	%			67.2	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	-	Jun 2019								62.9	63.3	
			Protected Characteristic - Marital Status - INPATIENTS with recorded response	%			99.9	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	-	Jun 2019								99.9	100.0	
			Protected Characteristic - Marital Status - OUTPATIENTS with recorded response	%			39.0	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	-	Jun 2019								37.2	37.4	
			Protected Characteristic - Marital Status - ED patients with recorded response	%			39.6	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	-	Jun 2019								39.5	40.0	
			Maternity - Percentage of invalid fields completed in SUS submission	<= %	15.0	15.0																		-	Jun 2019								7.2	6.9	
			Open Referrals	No			285,192	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	Jul 2019	54,224	106,808	23,153	6,611	308	25,873		216,977		
			Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			######	######	######	######	######	######	######	######	######	######	######	######	######	######	######	69,739	64,564	54,518	Jul 2019	21,330	20,182	5,887	1,514	215	5,011		54518		

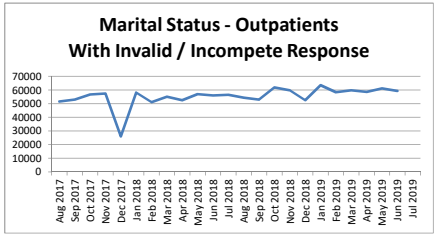


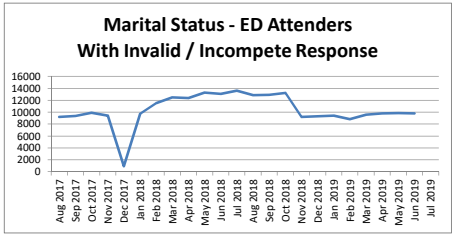








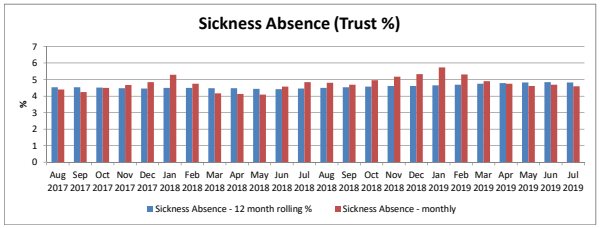


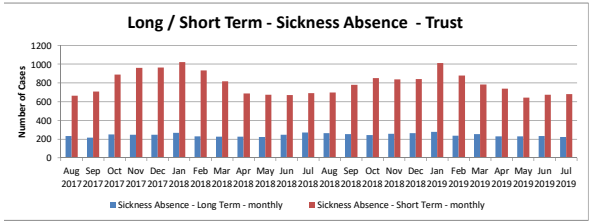


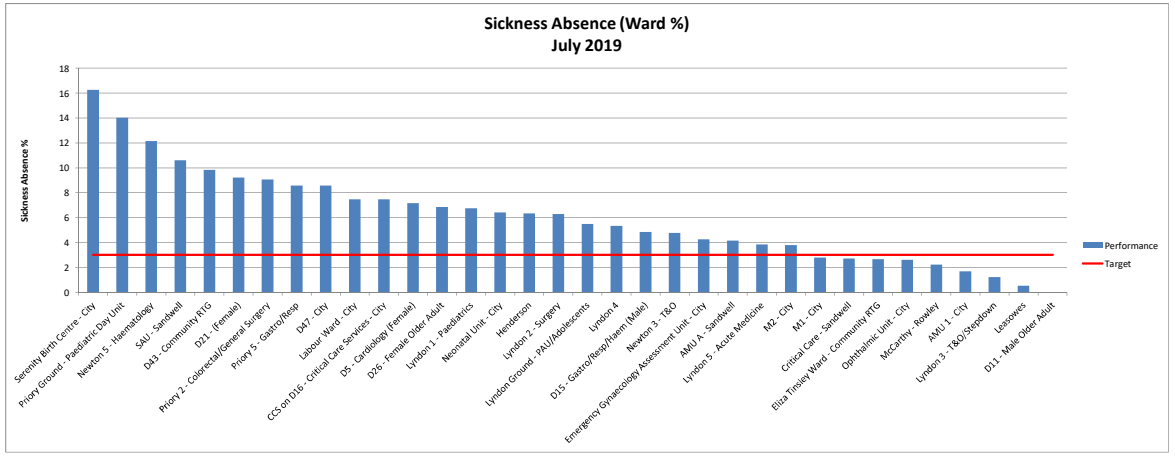
Workforce

2019 4

Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend (since Feb 2018) F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Group M	SS	W	P	I	PCCT	CO	Month	Year To Date	Trend
			PDRs - 12 month rolling	=> %	95.0	95.0			-->	-->		-->	-->		-->	-->		-->	-->		-->	-->	-->	-->	Mar 2019	97.0	99.6	98.7	100.0	97.6	99.9	99.9			
			Medical Appraisal	=> %	90.0	90.0																		-	Jun 2019	95.7	90.5	98.4	100.0	96.4	131.8	100.0	95.7	96.3	
	Apr-19		Sickness Absence (Rolling 12 Months)	<= %	3.00	3.00	4.50	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	Jul 2019	5.4	5.0	5.3	3.4	4.6	4.4	4.2	4.8	4.8	
	Apr-19		Sickness Absence (Monthly)	<= %	3.00	3.00	4.74	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	Jul 2019	4.4	4.9	5.6	0.0	3.5	4.1	4.5	4.6	4.7	
	Apr-19		Sickness Absence - Long Term (Monthly)	<= No	140	140	230	226	226	224	247	269	263	254	242	257	264	279	238	253	231	230	232	223	Jul 2019	42	43	40	5	5	25	32	223	916	
	Apr-19		Sickness Absence - Short Term (Monthly)	No			932	818	688	672	670	691	698	779	850	836	841	1013	878	784	738	644	674	681	Jul 2019	153.0	133	87	4	24	94	82	681	2737	
			Ward Sickness Absence (Monthly)	<= %	3.00	3.00	-	-	-	-	-	-	-	-	-	-	-	8.1	7.3	6.9	6.8	6.6	6.7	5.8	Jul 2019	4.9	6.0	7.2	-	-	5.1	-	5.8	6.5	
			Mandatory Training	=> %	95.0	95.0																			Jul 2019	87.4	90.7	90.1	-	92.8	95.3	93.4	91.2		
			Mandatory Training - Health & Safety (% staff)	=> %	95.0	95.0																			Jul 2019	73.5	78.2	78.7	-	85.3	89.4	82.3	80.3		
			Staff at 100% compliance with mandatory training	%			-	-	-	-	-	-	-	-	-	-	-	-	-	70.82	73.76	72.7	56.825	64.43	Jul 2019	50.1	60.1	59.4	-	-	79.3	-	64.4		
			Staff requiring to complete 1 module to be at 100% compliance with mandatory training	%			-	-	-	-	-	-	-	-	-	-	-	-	-	12.42	13.51	12.85	23.025	18.7	Jul 2019	23.1	22.2	18.2	-	-	13.6	-	18.7		
			Staff requiring to complete 2 modules to be at 100% compliance with mandatory training	%			-	-	-	-	-	-	-	-	-	-	-	-	-	8.077	8.372	6.488	8.4888	7.228	Jul 2019	9.7	7.7	9.9	-	-	3.5	-	7.2		
	Apr-19		Nursing Turnover (Qualified Only)	<= %	10.7	10.7	13.4	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	Jul 2019								12.3	12.2	
	Apr-19		Nursing Vacancy Rate (Qualified)	<= %	11.0	11.0	-	-	-	-	-	-	-	-	-	11.8	12.1	13.0	12.4	10.6	15.2	15.8	15.9	16.1	Jul 2019								16.1	15.8	
	Apr-19		WeConnect Staff Satisfaction Score	=> No	4.0	4.0																			Jan 2019	3.9	3.9	4.0	0.0	0.0	3.8	7.7	23.2		
	Apr-19		WeConnect Staff Satisfaction Response Rate (%)	=> No	35.0	35.0																			Jan 2019								131.3		
	Apr-19		WeConnect Staff Satisfaction Disengagement Rate	=> %	10.0	18.0																			Jan 2019	100.0	100.0	100.0	-	-	100.0	100.0	100.0		
	Apr-19		New Starters Complete Onboarding Process	=> %	100.0	100.0	-	-	-	-	-	-	-	-	-	100	84.21	87.5	82.14	86.89	92.31	77.61	87.5	94.64	Jul 2019	100.0	93.8	100.0	-	-	88.9	-	94.6	88.32	
			Flu Vaccination Rate	=> %	85.0	85.0	-	-	-	-	-	-	-	-	-	83.33	83.7	-	-	-	-	-	-	-	Dec 2018	-	-	-	-	-	-	-	83.7	83.51	







Local Quality Indicators - 2019/2020

Data Quality	Last review	PAF	Indicator	Measure	Trajectory		Previous Months Trend (From Feb 2018)																Data Period	Group							Month	Year To Date	Trend
					Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		M	SS	W	P	I	PCCT	CO			
			Safeguarding Children Level 3 Training	=> %	85	85	90	91	91	92	92	91	90	88	86	84	86	86	86	83	85	87	84	88	Jul 2019								88.4	86.2	
			WHO Safer Surgery - Audit - brief and debrief (% lists where complete) - SQPR	=> %	100	100	99	99	99	100	100	100	100	100	100	100	100	100	100	100	99	100	100	100	Jul 2019	99.8	100	-			100		99.8	99.8	
			Morning Discharges (00:00 to 12:00) - SQPR	=> %	35	35	17	16	15	15	17	17	15	15	16	16	16	20	18	20	19	16	17	17	Jul 2019	15	11.2	21.1			36		16.9	17.1	
			CO Monitoring by 12+6 weeks of pregnancy - SQPR	=> %	90	90	77	76	80	86	82	81	81	74	76	82	85	67	83	86	97	94	94	93	Jul 2019								93.0	94.4	
			Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload	=> %	100	100	78	91	91	94	94	96	95	97	95	91	93	93	95	95	93	97	97	97	Jul 2019								96.7	95.9	
			Community Nursing - Pressure Ulcer Risk Assessment For New community patients at intial assessment	=> %	95	95	81	92	93	94	95	96	95	97	95	92	94	93	95	95	93	97	98	97	Jul 2019								96.9	96.0	

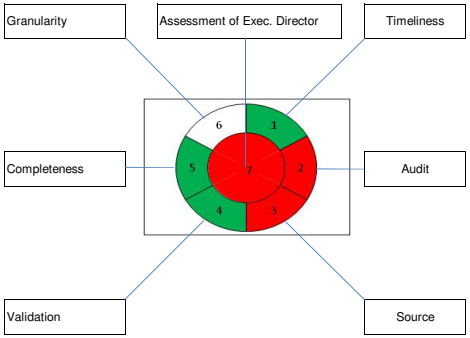
Legend

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

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

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

Data Quality - Kitemark



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

Red	Insufficient
Green	Sufficient
White	Not Yet Assessed

The centre of the indicator is colour coded as follows:

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

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

Medicine Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate EC	AC	SC	Month	Year To Date	Trend
Patient Safety - Inf Control	C. Difficile	<= No	30	3	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	1	0	0	1	4	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0	0	0	0	1	
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	80	80	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	86	85	25	80.4		
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	80	80	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	76	85	80	76.7		
Patient Safety - Harm Free Care	Number of DOLS raised	No			16	20	16	34	14	26	21	26	23	25	15	27	16	28	20	16	21	13	Jul 2019	2	11	0	13	70	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			16	20	16	34	14	26	21	26	23	25	15	27	16	28	20	16	21	13	Jul 2019	2	11	0	13	70	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			0	0	1	3	2	3	5	1	2	7	4	1	0	6	2	4	11	2	Jul 2019	0	2	0	2	19	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			1	6	2	2	2	2	3	5	0	0	0	1	8	3	5	2	4	0	Jul 2019	0	0	0	0	11	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			4	2	3	12	8	10	10	16	13	11	8	13	12	13	11	9	9	8	Jul 2019	1	7	0	8	37	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	0	0	1	3	2	3	2	3	2	1	4	2	1	0	0	0	Jul 2019	0	0	0	0	1	
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	0	0	0	1	0	0	0	0	0	0	12	0	4	0	2	0	Jul 2019	0	0	0	0	-	
Patient Safety - Harm Free Care	Falls	<= No	0	0	35	45	35	32	35	40	43	37	53	58	50	53	43	43	51	60	47	58	Jul 2019	17	40	1	58	216	
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0	0	0	2	1	0	0	0	0	2	-	2	0	1	2	2	1	2	Jul 2019	0	1	1	2	7	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	4	3	4	5	5	6	1	3	7	15	28	20	16	11	14	11	16	8	Jul 2019	-	8	-	8	49	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	92.8	89.0	97.7	93.3		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	●	●	Jul 2019	100.0	100.0	-	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	100	100	-	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	100	100	-	99.8		
Patient Safety - Harm Free Care	Never Events	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0	0	0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	Jul 2019	0	0	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	3	7	0	10	17	
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	May 2019	82	85	76	82		

Medicine Group

Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			12.1	12.5	13.5	11.7	13.0	13.2	12.5	11.5	10.9	11.7	12.8	12.8	14.2	12.1	11.9	12.7	12.3	-	Jun 2019				**12.3**		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			10.4	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	-	Jun 2019					**12.4**	

Medicine Group

Section	Indicator		Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate EC	AC	SC	Month	Year To Date	
Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0	90.0																	-	-	May 2019		88.2		88.2	89.4	
Clinical Effect - Stroke & Card	Pts admitted to Acute Stroke Unit within 4 hrs (%)	=> %	90.0	90.0																	-	-	May 2019		66.7		66.7	55.2	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0																	-	-	May 2019		66.1		66.1	64.5	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.0																	-	-	May 2019		98.3		98.3	97.5	
Clinical Effect - Stroke & Card	Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85.0	85.0																	-	-	May 2019		87.5		87.5	81.8	
Clinical Effect - Stroke & Card	Stroke Admissions - Swallowing assessments (<24h) (%)	=> %	98.0	98.0																		-	Jun 2019		100.0		100.0	100.0	
Clinical Effect - Stroke & Card	TIA (High Risk) Treatment <24 Hours from receipt of referral (%)	=> %	70.0	70.0																	-	-	May 2019		88.9		88.9	96.0	
Clinical Effect - Stroke & Card	TIA (Low Risk) Treatment <7 days from receipt of referral (%)	=> %	75.0	75.0																	-	-	May 2019		93.3		93.3	87.7	
Clinical Effect - Stroke & Card	Primary Angioplasty (Door To Balloon Time 90 mins) (%)	=> %	80.0	80.0																			Jul 2019		93.8		93.8	94.2	
Clinical Effect - Stroke & Card	Primary Angioplasty (Call To Balloon Time 150 mins) (%)	=> %	80.0	80.0																			Jul 2019		93.3		93.3	92.3	
Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0	98.0																			Jul 2019		100.0		100.0	100.0	
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Jun 2019			92.2	92.2		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Jun 2019			89.7	89.7		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0																		-	Jun 2019			85.2	85.2		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			1	1	3	5	2	1	3	2	4	4	6.5	4.5	1.5	2.5	4	0.5	2	-	Jun 2019	-	-	2.00	2.00	7	
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			1	1	1	0	0.5	0	1.5	0	0	0	2	0	1	1	1	0.5	0	-	Jun 2019	-	-	0.00	0.00	2	
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			113	280	118	104	112	103	146	86	104	101	197	91	154	163	168	183	91	-	Jun 2019	-	-	91	91		
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0.0	0.0	9	4	3	7	6	4	2	7	4	6	6	5	9	2	7	2	3	3	Jul 2019	-	-	3	3	15	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0	0.0	0	0	0	0	0	15	0	0	0	0	-	1058	171	7	4	0	0	31	Jul 2019	31	0	0	31	35	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			38	34	36	35	24	55	27	25	30	29	30	14	24	27	33	47	26	31	Jul 2019	16	15	0	31	137	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			78	76	81	89	71	97	90	80	87	88	99	75	67	62	84	80	37	58	Jul 2019	25	33	0	58		

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Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		EC	AC	SC			
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																		Jul 2019	-	-	-	-		
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0.0	0.0	0.0	0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	0	7	0	1	1	1	0	0	1	3	1	0	0	0	0	0	0	0	Jul 2019	0.0	0.0	0.0	0	0	
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0.00	0.00	0.00	0.00	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0	95.0																		Jul 2019	79.0	81.7	Site S/C	80.4	79.8	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			0	2635	1935	2814	2661	2294	2075	2154	2721	2533	3349	3163	2318	1960	3104	2534	2570	2695	Jul 2019	2571	2	122	2695	10903	
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0																		Jul 2019	0.0	0.0	Site S/C	0	0	
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0	15.0																		Jul 2019	14.0	14.0	Site S/C	14	14	
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0	60.0																		Jul 2019	70.0	64.0	Site S/C	61	64	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0																		Jul 2019	5.3	5.5	Site S/C	5.4	5.6	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0																		Jul 2019	6.7	8.1	Site S/C	7.4	7.3	
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	160	196	173	219	195	165	116	95	121	159	205	168	160	88	166	119	128	123	Jul 2019	109	14		123	536	
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	4	21	6	6	10	2	8	5	6	7	7	9	8	6	5	4	4	5	Jul 2019	5	0		5	18	
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02																		Jul 2019	0.21	0.00		0.11	0.10	
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No			4081	4487	4308	4539	4306	4685	4522	4354	4622	4579	4872	4835	4372	4655	4814	4670	4555	4658	Jul 2019	2438	2220		4658	18697	
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			-	-	-	-	-	-	111	111	129	111	107	118	108	94	118	117	112	112	Jul 2019	82	20		112	-	
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			22.798	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	Jul 2019	30	9		19	21	
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			120.53	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	Jul 2019	74	12		92	-	
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0	90.0																		Jul 2019	-	86.6	95.2	89.6		
RTT	RTT - Non Admittted Care (18-weeks) (%)	=> %	95.0	95.0																		Jul 2019	-	80.6	81.5	81.0		
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0																		Jul 2019	-	90.3	94.8	92.2		
RTT	RTT - Backlog	<= No	0	0	497	509	524	545	632	644	641	595	527	497	498	427	341	327	346	452	515	568	Jul 2019	0	406	162	568		

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RTT	Patients Waiting >52 weeks	<= No	0	0	1	0	0	2	0	1	3	0	1	2	1	0	0	1	0	1	4	1	Jul 2019	0	1	0	1	
RTT	Treatment Functions Underperforming	<= No	0	0	6	6	6	5	4	6	5	5	5	5	5	5	6	6	3	6	6	6	Jul 2019	0	5	1	6	
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																			Jul 2019	-	0.54	0	0.41	

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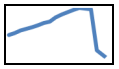
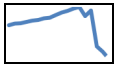
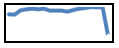
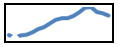
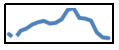
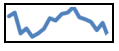
Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate EC	AC	SC	Month	Year To Date	
Data Completeness	Open Referrals	No			65,868	66,860	68,013	68,828	69,652	70,530	71,562	72,254	74,327	75,665	76,701	77,842	78,753	78,479	78,128	58,658	56,434	54,224	Jul 2019	12,060	22,768	19,396	54224		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Re	No			39,394	40,207	40,464	41,127	41,878	42,187	43,075	43,535	44,852	46,371	47,207	48,431	49,297	44,301	47,385	27,937	25,112	21,330	Jul 2019	9,272	8,824	3,234	21330		
Workforce	PDRs - 12 month rolling (%)	=> %	95.0	95.0									-	-		-	-		-	-	-	-	Mar 2019	98.46	96.06	-		80.3	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Jun 2019	93.59	97.67	-		96.3	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.00	3.00	4.84	4.75	4.83	4.85	4.92	5.01	5.07	5.19	5.30	5.35	5.35	5.41	5.53	5.67	5.69	5.54	5.50	5.43	Jul 2019	5.33	5.50	-	5.43	5.54	
Workforce	Sickness Absence - In month	<= No	3.00	3.00	4.80	4.35	5.14	5.35	5.73	5.98	6.09	5.85	5.90	6.27	7.16	7.36	6.39	6.32	6.13	4.97	4.49	4.41	Jul 2019	4.16	4.59	-	4.41	4.99	
Workforce	Sickness Absence - Long Term - In month	No			46	40	54	55	61	65	65	65	64	62	74	75	67	68	62	46	39	42	Jul 2019	16	26	0	42	189	
Workforce	Sickness Absence - Short Term - In month	No			203	212	163	175	155	163	174	199	193	209	212	225	201	196	190	171	188	153	Jul 2019	68	85	0	153	702	
Workforce	Mandatory Training (%)	=> %	95.0	95.0																			Jul 2019	87.04	87.71	-		87.8	

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Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate GS	SS	TH	An	O	Month	Year To Date	Trend
Patient Safety - Inf Control	C. Difficile	<= No	7	1	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0	0	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0	0	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80	80	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	90.09	83.22	-	0	65.52	86.0		
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80	80	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	84.04	87.19	-	85.71	93.33	85.5		
Patient Safety - Harm Free Care	Number of DOLS raised	No			9	4	11	14	8	7	10	9	10	11	8	23	3	8	8	8	8	7	Jul 2019	4	0	0	3	0	7	31	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			9	4	11	14	8	7	10	9	10	11	8	23	3	8	8	8	8	7	Jul 2019	4	0	0	3	0	7	31	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			0	0	1	0	1	1	1	2	1	2	3	0	0	1	2	0	1	1	Jul 2019	1	0	0	0	0	1	4	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			0	0	0	2	1	1	1	1	0	0	0	0	3	1	0	2	1	0	Jul 2019	0	0	0	0	0	0	3	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			3	0	1	5	4	1	1	5	8	5	5	17	5	5	6	8	6	2	Jul 2019	2	0	0	0	0	2	22	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	0	0	0	1	0	0	0	2	0	1	0	1	0	1	1	0	Jul 2019	0	0	0	0	0	0	2	
Patient Safety - Harm Free Care	Falls	<= No	0	0	7	15	16	9	6	9	11	10	17	12	9	11	11	12	11	8	12	6	Jul 2019	4	2	0	0	0	6	37	
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0	1	0	2	0	0	0	0	1	0	-	0	0	0	0	0	0	0	Jul 2019	0	0	0	0	0	0	0	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	2	3	2	2	0	3	2	5	3	7	9	9	7	7	8	8	7	-	Jul 2019	-	-	-	-	-	-	23	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	96.19	98	-	99	98.41	97.4		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	●	●	Jul 2019	100	100	100	100	100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	-	-	100	-	100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	-	-	100	-	100	100.0		
Patient Safety - Harm Free Care	Never Events	<= No	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0	1	0	1	Jul 2019	0	0	0	0	1	1	2	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0	0	0	0	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	2	0	2	1	0	5	6	
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	May 2019	100	100	-	-	-	100.0		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			7.1	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	-	Jun 2019						4.8		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			6.3	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	-	Jun 2019							6.1	

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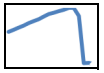
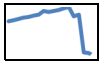
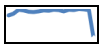
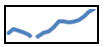
Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate GS	SS	TH	An	O	Month	Year To Date
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Jun 2019	97.0	-	-	-	-	96.95	
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0																		-	Jun 2019	95.1	-	-	-	-	95.12	
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Jun 2019	100.0	-	-	-	-	100	
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0																		-	Jun 2019	89.9	-	-	-	-	89.87	
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			4	4	3	9	3	6	4	4	3	5	3	4	4	6	5	4	4	-	Jun 2019	-	-	-	-	-	4	13
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			1	0	1	2	1	2	1	1	2	1	1	1	1	3	1	4	1	-	Jun 2019	0.5	-	0	-	-	0.5	5
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			112	90	130	137	119	196	113	161	137	185	136	123	116	175	131	120	111	-	Jun 2019	111	-	0	-	-	111	
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	Jul 2019	0	-	0	-	-	0	0
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	-	65	58	33	18	11	9	13	Jul 2019	0	0	0	13	0	13	51
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			25	32	24	23	27	25	19	24	25	19	12	11	19	18	18	16	18	22	Jul 2019	7	5	1	1	8	22	74
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			52	50	45	47	57	57	65	79	74	71	62	46	52	41	34	26	30	38	Jul 2019	11	10	2	4	11	38	
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																			Jul 2019	1.64	1.75	-	-	2.05	1.6	
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0	0	0	0	0	0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	29	41	24	44	17	13	18	21	22	22	20	22	27	26	38	31	32	39	Jul 2019	15	8	0	0	16	39	140
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	Jul 2019	0	0	0	0	0	0	0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	=> %	95.0	95.0	97.8	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	Jul 2019	-	-	-	-	95.7	-	-
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0	0	179	160	148	110	117	157	89	69	84	82	77	64	56	145	102	94	148	Jul 2019	53	38	0	1	56	148	489
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	Jul 2019	-	-	-	-	0	-	-
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	4.6	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	Jul 2019	-	-	-	-	2.56	-	-
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	0.7	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	Jul 2019	-	-	-	-	6.73	-	-
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	-	-	-	-	17	0	0
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	11	24	21	14	15	15	12	21	9	4	11	12	5	19	7	14	6	3	Jul 2019	0.03	3.29	-	0	0	3.32	30
Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions	=> %	85.0	85.0																			Jul 2019						62.5	70.4
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			-	-	-	-	-	-	11	14	23	16	19	19	17	22	21	13	10	15	Jul 2019	10	5	0	0	0	15	-

Surgical Services Group

Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			9	16	15	11	11	12	10	15	8	3	10	11	5	15	6	12	5	3	Jul 2019	0.05	7.14	-	0	0	**2.97**	**7**	
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			**11**	**24**	**21**	**14**	**15**	**15**	**12**	**21**	**9**	**4**	**11**	**12**	**5**	**19**	**7**	**14**	**6**	**3**	Jul 2019	0.03	3.29	-	0	0	**3.32**	**-**	

Surgical Services Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate GS	SS	TH	An	O	Month	Year To Date	
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0	90.0																			Jul 2019	67.8	77.0	-	-	74.9	72.4		
RTT	RTT - Non Admittted Care (18-weeks) (%)	=> %	95.0	95.0																			Jul 2019	87.2	90.8	-	-	94.7	91.9		
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0																			Jul 2019	91.1	92.5	-	-	89.9	90.9		
RTT	RTT - Backlog	<= No	0	0	1370	1397	1333	1293	1285	1349	1311	1371	1354	1340	1417	1284	1303	1316	1315	1415	1630	1722	Jul 2019	759	240	0	0	723	1722		
RTT	Patients Waiting >52 weeks	<= No	0	0	0	4	3	3	2	5	2	3	3	1	0	2	3	5	0	9	19	7	Jul 2019	3	0	0	0	4	7		
RTT	Treatment Functions Underperforming	<= No	0	0	17	15	16	15	13	15	16	15	13	12	13	14	15	14	13	14	15	16	Jul 2019	8	5	0	0	3	16		
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																			Jul 2019	0.6	-	-	-	-	0.59		
Data Completeness	Open Referrals	No			144,613	146,703	149,307	151,854	154,830	157,125	159,369	162,234	165,051	166,561	168,695	170,068	172,359	172,210	162,783	107,915	108,313	106,808	Jul 2019	33,049	13,942	0	4,077	55,740	106808		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Req	No			71,798	73,079	75,110	76,718	78,179	79,974	81,586	86,510	85,120	86,561	88,226	90,478	92,552	78,799	81,553	25,583	24,862	20,182	Jul 2019	7,112	3,379	0	1,956	7,735	20182		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0									-	-		-	-		-	-	-	-	Mar 2019	98.7	100.0	100.0	100.0	100.0		89.2	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Jun 2019	96.08	90	-	83.93	92.06		92.3	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.0	3.0	4.65	4.71	4.68	4.66	4.62	4.56	4.61	4.65	4.67	4.74	4.83	4.83	4.81	4.82	4.84	4.90	4.97	5.01	Jul 2019	4.5	7.2	6.6	4.7	2.4	5.0	4.9	
Workforce	Sickness Absence - In Month	<= %	3.0	3.0	5.21	4.78	4.41	4.18	4.60	4.61	5.08	4.99	5.00	5.27	5.48	5.64	5.01	5.06	4.85	4.54	5.34	4.87	Jul 2019	4.9	5.5	7.4	3.6	2.9	4.9	4.9	
Workforce	Sickness Absence - Long Term - In Month	No			42	48	43	38	42	47	39	47	47	52	49	52	41	47	42	38	46	43	Jul 2019	12.0	10.0	14.0	7.0	0.0	43	169	
Workforce	Sickness Absence - Short Term - In Month	No			160	131	123	124	123	130	131	150	166	158	162	183	154	143	144	142	141	133	Jul 2019	38.0	26.0	36.0	30.0	0.0	133	560	
Workforce	Mandatory Training	=> %	95.0	95.0																			Jul 2019	89.7	88.1	91.1	94.7	89.6		91.0	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		G	M	P			
Patient Safety - Inf Control	C. Difficile	<= No	0	0																			Jul 2019	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0																			Jul 2019	0	0	0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.00	80.00																			Jul 2019	85.4			85.4		
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80.00	80.00																			Jul 2019	-	100		100.0		
Patient Safety - Harm Free Care	Falls	<= No	0	0	0	0	0	1	1	1	0	1	4	0	0	2	1	1	0	0	1	0	Jul 2019	0	0	0	0	1	
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0	0	0	0	0	0	0	0	0	0	-	0	1	0	0	0	0	0	Jul 2019	0	0	0	0	0	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= %	0	0	0	0	0	0	4	0	0	0	0	0	2	0	0	2	4	0	2	-	Jul 2019	-	-	-	-	3	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0																			Jul 2019	98.7	96.7		97.6		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0																			Jul 2019	100	100		100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0											-	-		-	-	-	-	-	Jul 2019	-	-		-		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0											-	-		-	-	-	-	-	Jul 2019	-	-		-		
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Jul 2019	0	0	0	0	1	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0																			Jul 2019	0	0	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0																			Jul 2019	0	2	0	2	3	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		G	M	P			
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0																			Jul 2019		30.5		30.5	27.4	
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%			10	8	10	10	9	9	10	9	9	9	10	8	11	9	9	10	11	11	Jul 2019		10.8		10.8	10.1	
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%			19	18	17	18	15	20	17	19	16	17	16	14	17	17	15	16	18	20	Jul 2019		19.7		19.7	17.4	
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0																			Jul 2019		0		0	0	
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4																			Jul 2019		3		3	10	
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0																			Jul 2019		0.87		0.9	1.6	
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																			Jul 2019		6.51		6.5		
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			2.58	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	Jul 2019		6.51		6.51	4.38	
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			2.58	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	Jul 2019		0		0.00	0.55	
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0																			Jul 2019		93.1		93.1		
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0																			Jul 2019		138		138.3		
Patient Safety - Obstetrics	Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0																			Jul 2019		79.4		79.4		
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	%			1.1	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	Jul 2019		0.88		0.9		
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	%			0.4	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	Jul 2019		0.88		0.9		
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	%			0.0	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	Jul 2019		0.58		0.6		
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0	N/A	N/A						N/A			N/A		N/A	N/A		N/A	-	-	May 2019	-	-	-	-		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			4.4	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	-	Jun 2019				3.7		
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	4.6	4.7	4.7	4.7	4.7	4.6	4.6	4.5	-	Jun 2019					4.5	
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Jun 2019	98.8		-	98.8		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Jun 2019	94.1			94.1		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0											#DIV/0!							-	Jun 2019	75			75.0		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			3.5	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	-	Jun 2019	1.5	-	0	1.5	4	

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Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			**0**	**2**	**0**	**0**	**0**	**1**	**0.5**	**0**	**0**	**0**	**0**	**1**	**1**	**3**	**1**	**0**	**0**	**-**	Jun 2019	0	-	0	**0**	**1**	
Clinical Effect - Cancer	Cancer - Oldest wait for treatment	No			**99**	**133**	**73**	**89**	**101**	**113**	**105**	**72**	**100**	**86**	**84**	**137**	**177**	**209**	**241**	**97**	**85**	**-**	Jun 2019	85	-	0	**85**		
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**	Jul 2019	0	-	0	**0**	**0**	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		G	M	P			
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	Jul 2019	0			0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			7	16	12	6	6	8	9	4	8	9	6	8	10	12	5	18	12	23	Jul 2019	12	6	5	23	58	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			23	27	26	19	20	18	26	20	24	20	17	13	14	18	17	26	19	23	Jul 2019	0	0	0	23		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8																			Jul 2019	2.84		-	2.1		
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	Jul 2019	0			0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	8	5	6	6	3	1	2	1	2	3	6	11	9	5	6	7	3	5	Jul 2019	5			5	21	
Pt. Experience - Cancellations	Urgent Cancelled Operations	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Jul 2019	0	-	0	0	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			0	11	9	23	8	13	16	39	17	65	61	34	11	17	46	20	10	13	Jul 2019	6	0	7	13	89	
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			-	-	-	-	-	-	0	3	8	4	0	0	0	0	0	0	1	1	Jul 2019	1	0	0	1	-	
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			1	3	2	2	0	2	4	0	0	10	0	0	0	2	1	4	3	7	Jul 2019	7	-	0	7	4	
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	1	Jul 2019	0.94	-	0	1	-	
RTT	RTT - Admittted Care (18-weeks)	=> %	90.0	90.0																			Jul 2019	81.7			81.7		
RTT	RTT - Non Admittted Care (18-weeks)	=> %	95.0	95.0																			Jul 2019	72.3			72.3		
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0																			Jul 2019	90			90.0		
RTT	RTT - Backlog	<= No	0	0	50	90	94	109	135	125	121	146	176	190	199	174	169	142	146	162	201	231	Jul 2019	231			231		
RTT	Patients Waiting >52 weeks	<= No	0	0	5	1	1	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0	Jul 2019	0			0		
RTT	Treatment Functions Underperforming	<= No	0	0	2	1	2	1	2	2	2	2	3	3	3	3	3	2	2	2	3	3	Jul 2019	3			3		
RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1	0.1																			Jul 2019	-			-		

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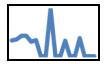
Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		G	M	P			
Data Completeness	Open Referrals	No			36,730	37,586	38,615	39,768	40,844	41,619	42,447	42,951	44,208	44,908	45,494	46,043	46,262	31,884	27,992	24,316	23,359	23,153	Jul 2019	6,204	9,313	7,636	23153		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			21,365	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	Jul 2019	1,510	3,840	537	5887		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0									-	-		-	-		-	-	-	-	Mar 2019	100	98.4	-		87.9	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																		-	Jun 2019	96.6	100	100		96.8	
Workforce	Sickness Absence - 12 month rolling	<= %	3.0	3.0	4.36	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	Jul 2019	2.89	6.5	4.63	5.3	5.3	
Workforce	Sickness Absence - in month	<= %	3.0	3.0	5.20	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	Jul 2019	2.87	7	4.77	5.6	5.8	
Workforce	Sickness Absence - Long Term - in month	No			35	35	25	37	40	42	39	37	30	35	31	48	41	41	39	45	47	40	Jul 2019	2	22	16	40.0	171.0	
Workforce	Sickness Absence - Short Term - in month	No			127	106	95	84	92	85	90	97	134	120	117	135	115	102	97	78	70	87	Jul 2019	6	56	25	87.0	332.0	
Workforce	Mandatory Training	=> %	95.0	95.0																			Jul 2019	88.8	89.5	91.3		89.6	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate			Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		G	M	P			
WCH Group Only	HV (C1) - No. of mothers who receive a face to face AN contact with a HV at =>28 weeks of pregancy	No			321	292	383	362	338	-->	-->	-->	984	-->	-->	934	-->	-->	978	-->	-->	-->	Apr 2019			978	978	978	
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	81	88.8	88.1	89.3	90.8	92	-->	-->	91.4	-->	-->	90	-->	-->	91.4	-->	-->	-->	Apr 2019			91.4	91.36	91.36	
WCH Group Only	HV (C3) - % of births that receive a face to face new birth visit by a HV >days	%			9.35	6.61	6.74	7.03	6.11	5.98	-->	-->	6.62	-->	-->	8.21	-->	-->	6.09	-->	-->	-->	Apr 2019			6.09	6.09	6.09	
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	93.6	93.8	95.1	94	95.3	93.5	-->	-->	96.1	-->	-->	96.1	-->	-->	96.4	-->	-->	-->	Apr 2019			96.4	96.44	96.44	
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			97.3	97.1	96	97.5	96.4	97.8	-->	-->	96.9	-->	-->	96.7	-->	-->	96.7	-->	-->	-->	Apr 2019			96.7	96.71	96.71	
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	92.8	93.6	95.5	94.4	93	91.4	-->	-->	94.6	-->	-->	94.1	-->	-->	94.8	-->	-->	-->	Apr 2019			94.8	94.83	94.83	
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			92	92.7	94.8	93.1	91.2	91.2	-->	-->	94.2	-->	-->	93.7	-->	-->	94.5	-->	-->	-->	Apr 2019			94.5	94.5	94.5	
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards witha HV presence	=> No	100	100	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Sep 2017			1	1	1	
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	97.6	99.1	100	99.4	99.7	99.7	-->	-->	99.7	-->	-->	99.5	-->	-->	99.9	-->	-->	-->	Apr 2019			99.9	99.9	99.9	
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100	98.3	99.1	100	99.4	99.1	99.5	-->	-->	99.6	-->	-->	99.5	-->	-->	99.8	-->	-->	-->	Apr 2019			99.8	99.8	99.8	
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			38.5	22.6	23.4	21.5	36.5	40.2	-->	-->	41.6	-->	-->	41.6	-->	-->	40.3	-->	-->	-->	Apr 2019			40.3	40.31	40.31	
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			290	336	357	375	355	354	-->	-->	1069	-->	-->	99.5	-->	-->	99.4	-->	-->	-->	Apr 2019			99.4	99.4	99.4	
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	98.3	99.4	99.7	99.7	100	99.7	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jul 2018			99.7	99.72	99.79	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 6 - 8 week developmental check	No			94	99	326	364	209	13	-->	-->	23	-->	-->	2.6	-->	-->	1.8	-->	-->	-->	Apr 2019			1.8	1.8	1.8	
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	31.2	29.7	98.5	97.8	58.7	3.33	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jul 2018			3.33	3.33	62.94	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	No			305	225	52	15	12	7	-->	-->	26	-->	-->	3.3	-->	-->	2.2	-->	-->	-->	Apr 2019			2.2	2.2	2.2	
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	=> %	100	100	89.4	60.5	14.7	3.89	3.26	1.86	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jul 2018			1.86	1.86	5.79	

Women & Child Health Group

WCH Group Only	HV - movers into provider <1 year of age to be checked =<14 d following notification to HV service	No			64	68	82	82	58	65	-->	-->	192	-->	-->	61.9	-->	-->	73.5	-->	-->	-->	Apr 2019			73.5	73.5	73.5	
WCH Group Only	HV - all untested babies <1 year of age will be offered NBBS screening & results to HV.	Y/N			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan-00						

Imaging Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate DR	IR	NM	BS	Month	Year To Date	Trend
Patient Safety - Harm Free Care	Never Events	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0	0	0	0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0	0	0	0	0	0	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	<= No	0	0	1.0	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	-	Jun 2019					7.14	-	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	=> %	0	0	20.0	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	-	Jun 2019					-	5.07	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	May 2019			66.1		66.1	64.46	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.00	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	-	May 2019			98.31		98.31	97.52	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			2	1	3	1	4	4	3	4	0	2	2	2	0	2	0	6	5	3	Jul 2019	3	0	0	0	3	14	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			4	2	3	2	6	5	9	9	3	5	5	4	4	4	3	6	11	6	Jul 2019	6	0	0	0	6		
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	0.94				0.94		
Data Completeness	Open Referrals	No			749	774	790	806	819	851	872	904	909	922	927	932	940	948	977	268	295	308	Jul 2019	305	3	0	0	308		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			659	679	706	722	739	769	786	819	831	845	849	865	867	865	901	186	178	215	Jul 2019	213	2	0	0	215		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	●	●	●	●	●	●	●	●	-	-	●	-	-	●	-	-	-	-	Mar 2019	98.6	100	70.8	100	-	78.7	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	Jun 2019	96.2	-	100	-	-	94.2	
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	3.67	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	Jul 2019	5.5	2.6	2.0	3.5	4.62	4.72	
Workforce	Sickness Absence - in month	<= %	3.00	3.00	3.95	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	Jul 2019	4.2	2.3	2.0	2.4	3.53	4.26	
Workforce	Sickness Absence - Long Term - in month	No			8	11	5	6	14	14	9	10	11	14	14	10	7	6	10	10	7	5	Jul 2019	3	0	0	1	5	32	
Workforce	Sickness Absence - Short Term - in month	No			38	41	38	33	25	22	28	39	37	31	31	39	27	30	34	19	26	24	Jul 2019	8	0	1	7	24	103	
Workforce	Mandatory Training	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	92	92.7	95.4	94.5	92.8	92.5	

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate					Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		AT	IB	IC	CT	CM			
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.0	80.0																		Jul 2019	-	-	-	-	0	0		
Patient Safety - Harm Free Care	Number of DOLS raised	No			5	3	7	11	5	10	9	14	18	4	6	6	6	3	4	6	5	6	Jul 2019	0	6	0	-	0	6	21	
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			5	3	7	11	5	10	9	14	18	4	6	6	6	3	4	6	5	6	Jul 2019	0	6	0	-	0	6	21	
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			0	0	0	0	1	0	1	5	3	0	1	1	0	1	1	1	3	3	Jul 2019	0	3	0	-	0	3	8	
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			2	4	2	5	1	4	5	3	0	0	0	0	4	1	0	1	2	0	Jul 2019	0	0	0	-	0	0	3	
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			1	1	0	1	1	0	0	4	8	2	3	0	4	1	2	5	2	1	Jul 2019	0	1	0	-	0	1	10	
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	0	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0	Jul 2019	0	0	0	-	0	0	0	
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	1	0	Jul 2019	0	0	0	-	0	0	1	
Patient Safety - Harm Free Care	Falls	<= No	0	0	34	49	45	38	24	21	31	32	25	40	31	21	28	22	33	21	29	22	Jul 2019	0	22	0	-	0	22	105	
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0	0	2	0	1	1	0	0	4	1	-	0	1	0	2	1	1	0	Jul 2019	0	0	0	-	0	0	4	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	2	0	4	0	4	4	2	4	6	8	8	10	20	8	26	18	8	12	Jul 2019	-	4	2	-	-	6	32	
Patient Safety - Harm Free Care	Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	4	4	3	1	1	1	1	1	7	37	32	45	34	34	36	16	24	28	Jul 2019	-	-	28	-	-	28	104	
Patient Safety - Harm Free Care	Never Events	<= No	0	0																			Jul 2019	0	0	0	-	0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0																			Jul 2019	0	0	0	-	0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0																			Jul 2019	0	3	12	-	0	15	24	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	Jul 2019	0	0	0	-	0	0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			5	5	3	5	3	7	6	4	5	10	5	9	6	7	14	4	13	8	Jul 2019	1	1	2	-	4	8	39	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			11	10	10	9	7	9	12	11	13	16	16	19	23	16	22	5	20	17	Jul 2019	2	4	2	-	9	17		

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate					Month	Year To Date	
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		AT	IB	IC	CT	CM			
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	●	●	●	●	●	●	●	●	-	-	●	-	-	●	-	-	-	-	Mar 2019	100	100	100	-	99		89.2	
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	4.11	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	Jul 2019	3.58	4.79	4.6	-	4.4	4.39	4.37	
Workforce	Sickness Absence - in month	<= %	3.00	3.00	4.47	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	Jul 2019	3.98	3.83	4	-	4.9	4.08	3.91	
Workforce	Sickness Absence - Long Term - in month	No			32	32	29	26	25	34	37	33	34	42	35	37	29	33	25	31	25	25	Jul 2019	4	-	-	-	-	25	106	
Workforce	Sickness Absence - Short Term - in month	No			133	103	91	85	97	105	85	97	118	112	104	163	147	102	101	79	86	94	Jul 2019	16	38	27	0	13	94	360	
Workforce	Mandatory Training	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	Jul 2019	97.3	93.8	97	-	93		95.5	

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory Year	Trajectory Month	Previous Months Trend F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	Data Period	Directorate AT	IB	IC	CT	CM	Month	Year To Date
Community & Therapies Group Only	DVT numbers	=> No	730	61	35	58	54	69	57	-	-	-	7	7	7	3	25	12	20	38	43	55	Jul 2019						55	156
Community & Therapies Group Only	Adults Therapy DNA rate OP services	<= %	9	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Aug 2017						8.0	8.2
Community & Therapies Group Only	Therapy DNA rate Paediatric Therapy services	<= %	9	9	11.2	-	-	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	Jul 2019						9.1	10.2
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9	9	11.5	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	Jul 2019						8.7	9.0
Community & Therapies Group Only	STEIS	<= No	0	0	2	-	0	0	0	1	-	0	0	-	-	-	-	-	-	-	-	-	Oct 2018						0	1
Community & Therapies Group Only	Green Stream Community Rehab response time for treatment (days)	<= No	15.0	15.0	19.6	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	Jul 2019						19	79.75
Community & Therapies Group Only	DNA/No Access Visits	%			1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Jul 2019						0.84	
Community & Therapies Group Only	Baseline Observations for DN	=> %	95	95	76.4	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	96.5	Jul 2019						96.48	95.4
Community & Therapies Group Only	Falls Assessments - DN Intial Assessments only	=> %	95	95	77.9	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	96.7	Jul 2019						96.69	
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Intial Assessments only	=> %	95	95	81.5	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	96.9	Jul 2019						96.89	
Community & Therapies Group Only	MUST Assessments - DN Intial Assessments only	=> %	95	95	76.6	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	96.7	Jul 2019						96.69	
Community & Therapies Group Only	Dementia Assessments - DN Intial Assessments only	=> %	95	95	70.2	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	94.1	Jul 2019						94.14	
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%			94	96	94	95	94	95	95	95	95	95	94	96	95	96	-	95	1	-	Jun 2019						0.98	
Community & Therapies Group Only	Making Every Contact (MECC) - DN Intial Assessments only	=> %	95	95	76.8	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	96.5	Jul 2019						96.48	95.67
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No			2	0	4	0	4	4	2	4	6	8	8	10	20	8	26	18	8	12	Jul 2019						6	32
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No			3	2	3	0	1	1	0	1	5	26	-	-	-	-	-	-	-	-	Nov 2018						26	37
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No			1	2	0	0	0	0	1	0	2	11	-	-	-	-	-	-	-	-	Nov 2018						11	14
Community & Therapies Group Only	Avoidable Grade 4 Pressure Ulcers (DN caseload acquired)	No			0	0	0	1	0	0	0	0	0	0	-	-	-	-	-	-	-	-	Nov 2018						0	1

Corporate Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate							Month	Year To Date	Trend
			Year	Month	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		SG	F	W	M	E	N	O			
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			8	8	5	5	4	6	5	4	4	13	3	5	5	4	2	1	12	10	Jul 2019	3	1	0	0	3	1	2	10	25	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			11	15	11	8	2	7	8	8	5	12	11	8	8	9	2	6	4	5	Jul 2019	2	0	0	0	0	0	3	5		
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																		-	Jun 2019			95					100.0	95	
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	4.70	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	Jul 2019	4.01	2.22	2.93	3.09	2.98	4.72	5.40	4.21	4.21	
Workforce	Sickness Absence - in month	<= %	3.00	3.00	4.37	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	Jul 2019	3.75	2.27	1.09	3.71	4.15	6.54	4.86	4.47	4.05	
Workforce	Sickness Absence - Long Term - in month	No			2	2	2	30	26	28	33	26	26	25	29	27	28	28	20	25	32	32	Jul 2019	3.00	0.00	3.00	6.00	0.00	20.00	0.00	32.00	109.00	
Workforce	Sickness Absence - Short Term - in month	No			11	12	4	61	76	79	54	70	86	93	84	120	112	86	79	57	65	82	Jul 2019	9.00	0.00	10.00	9.00	0.00	54.00	0.00	82.00	283.00	
Workforce	Mandatory Training	=> %	95.0	95.0																			Jul 2019	90	97	97	96	97	-	91	93.4	94	