

Integrated Quality & Performance Report

Month Reported: February 2020

Reported as at: 18/03/2020

Quality & Safety Committee (Q&S) Clinical Leadership Executive (CLE) Performance Management Committee (PMC)

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		Operational Performance at a Glance: February 2020
	A&E Performance	• Performance improves in February compared to January, reporting at 74.6%; there were 4,416 4hr breaches in February against 17,367 attendances; • Improvement plans are projecting March performance at 80%, which at this stage in the month seems achievable as we see performance as at 18th March at c79%. However, the COVID-19 impact is not predictable for the remainder of the month. • The EC team continues to focus on the 4-hr delivery and will aim to maintain levels
	Referral to Treatment in 18 weeks (RTT Incomplete)	 RTT for incomplete pathway is at 90.3% as at the end of February against the 92% standard, largely driven by the same under-performing specialities as in previous months. The February patient backlog (patients waiting > 18 weeks) has risen to 3,782 patients and the patient waiting list size, for the same period, is at 39,365. Previously set improvement plans were projecting recovery between March (to 91.1%) and in April to reach 92%; however, impacted by COVID-19, this now be more difficult to achieve Trust guidance remains to control RTT as much as possible and to critically focus on the long-waiting patients to ensure they are seen appropriately.
ISIVE	Diagnostics Waits (% of patients waiting >6 weeks)	 The Trust has continued strong performance and delivers again targets for diagnostic waits (DM01) and in February achieves 99.98% against the 99% DM01 standard; only a very small number of patients waiting above 6 weeks. In March, it is business as usual, and all tests are going ahead despite the COVID-19 impact continuing to deliver DM01 into March. Imaging team continues to strive to achieve also the Board KPIs and delivery is good across those; in February the Inpatient total turnaround time within 24hrs has reached 82% against the 90% trust target, some hot spots are identified and managed which are stopping higher achievement. 92% of all Imaging work is turned around under 4 weeks against the trust target of 95%.
RESPONSIVE	Cancer Performance	 Reporting January, the Trust, continued to deliver most of the cancer standards, but failing a second months running the 62-day standard delivering 79.5% vs 85% target. February position indicates that the 62- day standard has been missed again. We now believe that Q4 delivery will be missed. Most of the February 62-day breaches are in Gynae which delivered the standard at only c32% and significant focus is now on March delivery. 2 week wait times are being met currently on the cancer pathway, but shadow monitoring of the 10 days wait time (replacing the 2 week wait time) is not picking up as expected at this stage. The COO has requested focus on the 10 day waiting time from the groups. Neutropenic sepsis performance has continued to improve in the last few months, since the drop in September associated with Unity implementation, but we see a drop in February to 78%. 38/49 patients were administered the treatment within the prescribed 1hr framework, with 11 patients breaching the 1 hr; most of the breach times are relatively small above the 1hr, however there were 3 breaches which were well above the 1hr timeframe. 2 of these were for clinical reasons, the other was not. The Trust is shadow-monitoring the new 28 day faster diagnosis standard to be implemented from April 2020 and the IQPR will reflect this indicator from February with testing period to complete in March, ready for April go live.
	Cancellations	 There were 60 late cancellations (on the day) due to non-clinical reasons in February; this was impacted mostly by the BTC floods without which the cancellations would have been at 35 and achieving the standard much closer. 28% (17/60) were avoidable cancellations This has resulted in a rate of 1.7% against total admissions in February against the national target of 0.8%. COVID-19 impact is likely to result in higher cancellations for March and going forward, possibly compromising the re-booking of patients within the following 28 days from cancellation (28-day breaches standard).
	Infection Control	• MRSA screening rates have been below standard all year and this is being reviewed with the Infection Control team with possible changes to screening. Against an 85% initial target, Elective care screening achieved 80% and Non Elective screening achieved 84% in January. From February 1st there were screening changes introduced, for all non-elective patients to be admitted, and the Infection Control team are working to re-base the indicator monitoring.
SAFE	Harm Free Care	 Falls continue to report lower figures compared to peer organisation and the Trust falls rate per 1,000 bed days is at 3.94 against the trust target of 5; 84 actual falls have been reported with 1x case of serious harm caused, which is subject to a full investigation. Pressure Ulcers (PUs) have this month increased only very slightly to last month to 65 overall across the acute and community setting, but remain constant to the longer term average; we report 39 acute setting PUs in February, which results overall in a rate of 1.77 against 1,000 occupied bed days; 26 PUs being reported in the acute setting (lowest this year) and 25 in the community setting. VTE assessments are compliant at 96% in February. In February we are reporting 1x Serious medication error being investigated. Who Safer Surgery is subject to ongoing reviews to ensure that all invasive procedures are compliant with the guidance. A report has been submitted to the Executive Quality Committee to support the collection of WHO safer surgery checklist from all relevant areas carrying out invasive procedures.
	Obstetrics	 The overall Caesarean Section rate for February is 29.7% mainly driven by an increase in non-elective C-Sections; year to date at 27.5% slightly above the 25% target; but considered still in line with other trusts nationally and hence within tolerance levels. Elective rates are at 10.7% (over the year the long term avg trend was 11%) Non-elective rates are 18.8% in February against a long term average trend of ~17.3% hence observing an increase of non-elective C Sections. The level of births in February is at 344; the lowest this year, although February is a shorter month, but compared to the same period of last year this was at 399; we observe a general downward trend in births Still birth rate (per 1000 babies) is zero for February Zero Neonatal death rate (per 1000 babies) in February against the 74% target.
CARING	Patient Experience (FFT), Mixed Sex Accommodation (MSA), Complaints, Flu Vaccination	 SWBH has been able to resume MSA reporting post a new EPR implementation. The Mixed Sex accommodation return for February 2020 is declaring 458 Breach Occurrances. Breaches have been authorised to mitigate very long waits / potential safety issues in ED against a very high bed occupancy. There is a robust authorisation processes in place and now we have access to daily data which enables the grip we had before we went live with Unity (new EPR), when we eliminated all but a few breaches which were mainly critical care stepdown delays. Flu vaccination rates of front line staff report at 83% as at the end of February meeting the 80% Feb20 target and concluding the vaccination window.
	Mortality, Readmissions	 Readmissions rates (30 days after discharge) are at 8.1% as at January. Deaths rate in Low Risk Diagnosis groups as at November (latest reportable period) has reduced compared to October 2019, which was raised due to the number of UTI deaths increasing. There were 162 deaths reported in the Trust as at January, which is higher compared to previous months. Our crude in-hospital mortality rate has therefore gone up to 1.7 as at end of January; on a rolling basis the rate is still at 1.4 which is in line with previous months.
EFFECTIVE	Stroke & Cardiology	 Admissions to the stroke ward within the 4 hour timeframe is continuing to under-deliver at 66% in February slightly better than in January against the 80% target. This is subject to a detailed action plan, which will improve to 65% by end of March, but not yet projected achievement of the full standard of 80%. Thrombolysis within 60 minutes has only just missed the 85% target in February and reporting at 83.3%, one patient breaching due to family consent not being in timeframe due to language barriers; implementing improvement plans including learning from the GIRFT Stroke Event. We are unable to report TIA performance at this stage - the service is resuming entry of data as soon as possible; however, worth noting TIA indicators routinely deliver to standards.
	Patient Flow	 There were 174 patients with a length of stay (LOS) of 21+ days as at the end of February, this includes Acute and Community counts. This has increased compared to previous months. This now gives us a long-stay-patient rate of 19.3% and their combined LOS amounted to an equivalent of 124 beds. Neck of Femur performance is at 88% in February meeting the 85% standard; this is showing a significant improvement since the improvement plan was set to achieve 90% for end of March 2020 by using the 'Trauma Consultant of the week' to improve the pathway.
WELL LED	Workforce	 Sickness rate for February is at 5.0% in month and 4.9% on a rolling basis. Open, long term sickness cases have reduced significantly in February to 114 against the 140 target. Ward sickness overall at 6.4% as at February. The Women and Children's Group has moved their sickness to below 4%. Mandatory Training (where staff are at 100% compliance) is at 71.5% in February against the 95% target. Qualified nursing turnover rate is at 12.6% against the internal target of 10.7% Our nursing vacancy rate increases to 12.3% in February against the 11% target.
USE OF RESOURCES	Use of Resources	This has been included in the February IQPR format, but is subject to testing and population of those new indicators against which the trust will monitor itself routinely. The Use of Resources assessment is part of the combined CQC inspection alongside the Trust's rating for Quality. The review is designed to provide an assessment and improve understanding of how effectively and efficiently Trusts are using their resources to provide high quality and sustainable care for patients. The assessment includes an analysis of Trust performance against a selection of initial metrics, using local intelligence, and other evidence. The last Trust rating for Use of Resources was 'Requires Improvement' and the Trust is aiming to achieve a 'Good' rating in the next CQC inspection.
SISAH	Persistent Red Indicators	• We are now monitoring 11x persistent red indicators therefore. Neck of Femur performance goes up to 88% in February the first time since Oct19 meeting the 85% standard.
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Persistent Red Focus & Performance

Exec Lead	<u>11</u>	Indicator Note: Some are grouped (two or more indicators)	Standard Expected		Recovery Expected	Feb-20 Actual Perf	Tracking Planned Monthly Trajectory
Dr DC	1	Mortality Reviews within 42days	90%	٧	Dec-19	83%	x
RG	1	 Mandatory Training (staff % where MT 100% complete) 	95%	٧	Mar-20	71.5%	x
	1	Treatment Functions below 92% RTT	0	٧	Apr20- Jul20	6	x
	1	 Open Referrals (relevant for improvement) 	30,000	v	Sep-19	38,104	v
	1	 Neck of Femur - to surgery within 36 hours 	85%	v	Jul-19	87.9%	v
RB	1	Cancellations (20pm)	20	v	Mar-20	60	x
	1	 Cancellations as %age of elective admissions 	0.80%	v	Mar-20	1.7%	x
	1	 Stroked Ward Admissions (Within 4 hrs) 	80%	v	Mar-20	66.0%	x
	1	Neutropenic Sepsis	100%	v	Jul-19	78.0%	x
PG	1	MRSA Screening (Elective & Non-Elective)	95%	٧	Apr-20	80% Elec / 84% Non-Elec	x
	1	 FFT Response Target (IP, OP, Maternity and A&E) 	25%	v	твс		

Notes

· We report in February 11 ongoing persistent red indicators which are closely monitored against improvement plans.

February performance:

 We can observe some improvements in performance in February in respect of reducing cancellations although still not meeting set standards;

· Neutropenic sepsis has improved significantly in January but we see a small drop in February; this indicator performance has struggled to recover to previous levels since Sept19 Unity implementation. Reviews and daily shared learning practice is in place dedicated to bring this indicator up to required levels.

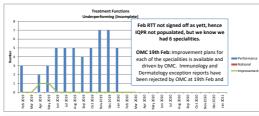
• FFT response rates improvement to 25% is being currently assessed as it appears too high for A&E and Maternity areas. New targets to be agreed in conjunction of introducing the new FFT guidance to go live on 1st Apr2020. Shown here against the 25% response trajectory in the meantime which clearly is not delivering.

Graphs

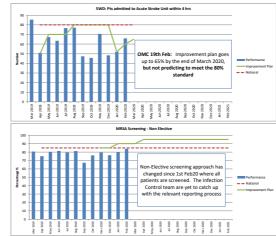
 the graphs are updated for latest available information as agreed in latest OMC (here 19th Feb20), next OMC in March will update further.







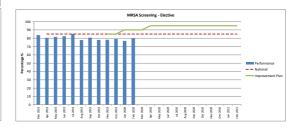










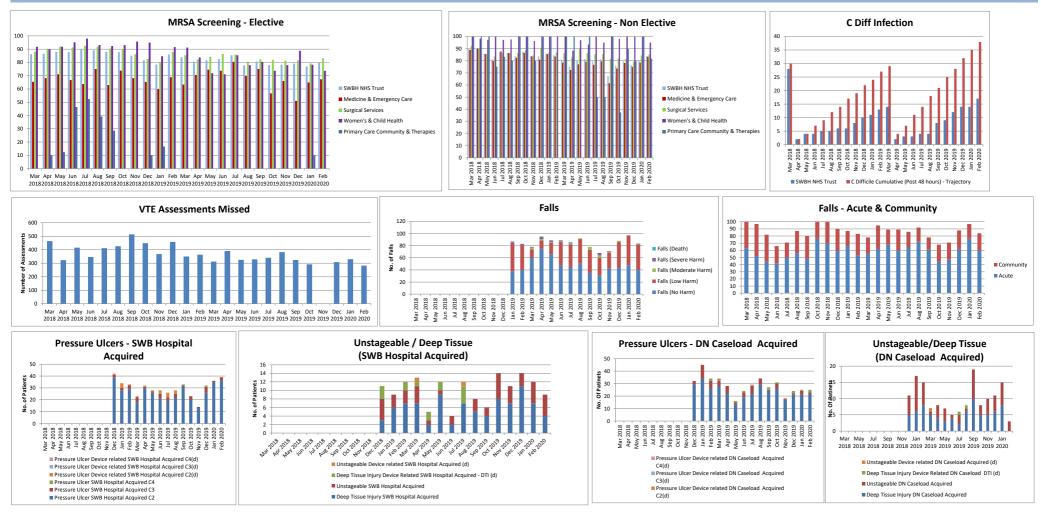


					(CQ	C [Do	m	aiı	n -	S	af	е																	
ſ	Kitemark	Reviewed Date	Indicator	Measure		ndard Month	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May J 2019 20	un J	ul /	Aug S	Sep Oc	t No	v Dec	Jan 2020	Feb	19/20 Year to Date	M	ss		Group		PCCT	co
			C. Difficile (Post 48 hours)	<= No	41	3.4	0	2010	0	2	1	2	1	2	1	0	1	2	2 1	3	2013	1	2	17	2	0	0	<u> </u>	-	0	-
Control	• • • • • • •		MRSA Bacteraemia (Post 48 hours)	<= No	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0 0	0	1	0	0	2	0	0	0	-	· ·	0	-
	• • • • • • •		MSSA Bacteraemia (Post 48 Hours) - rate per 100,000 bed days	<= Rate2	9.42	9.42	5.51	15.65	5.35	0.00	15.39	5.91	5.53	5.48	5.44 0	.00 5.	.46	5.49 5	. <mark>65</mark> 15.	18 0.0	0 4.76	4.88	21.01	6.75	-	-	-	-	-	-	-
Infection	• • • • • • •		E Coli Bacteraemia (Post 48 Hours) - rate per 100,000 bed days	<= Rate2	94.9	94.9	5.51	10.44	5.35	15.83	15.39	0.00	16.59	32.90	5.44 17	.68 5.	46 1	0.99 2	2.58 15.	18 5.1	9 14.2	7 24.3	9 26.26	16.39	-	-	-	-	-	-	-
nfec	• • • • • • •		MRSA Screening - Elective	=> %	85	85	87.9	87.7	85.1	81.7	78.4	86.0	83.8	80.5	81.6 8	2.5 8	5.3	77.8 8	0.6 78	.1 78.	2 79.1	76.9	79.7	79.9	67.4	83.1	73.7	0.0	44.4	0.0	-
-	• • • • • • •		MRSA Screening - Non Elective	=> %	85	85	83.7	87.3	83.9	83.7	85.8	84.5	80.7	75.1	80.2 8	1.3 79	9.5	81.3 6	7.3 76	.0 79.	5 76.3	80.0	83.9	78.3	83.4	85.3	95.0	-	-	81.8	-
	• • • • • • •		Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95	99.1	99.5	99.0	98.4	99.3	98.9	99.0	99.1	96.3 9	9.0 95	5.4	93.7 9	4.8 <mark>98</mark>	.5 95.	4 99.3	98.9	98.7	97.3	-	-	-	-	-	-	-
	• • • • • • •		Patient Safety Thermometer - Catheters & UTIs	%	-	-	0.3	0.6	0.4	0.3	0.3	0.2	0.6	0.0	0.2 0	0.3 0	.1	0.3	0.5 0.	5 0.	0.4	0.0	0.3	0.2	-	-	-	-	-	-	-
	• • • • • • •		Number of DOLS raised	No	-	-	49	51	40	29	56	25	39	32	30 3	34 2	26	36	37 34	4 26	36	33	31	355	17	9	0	-	-	5	-
	•••••		Number of DOLS which are 7 day urgent	No	-	-	49	51	40	29	56	25	39	32	30 3	34 2	26	36	37 34	4 26	36	33	31	355	17	9	0	-	-	5	-
	• • • • • • •		Number of delays with LA in assessing for standard DOLS application	No	-	-	8	6	9	8	2	0	8	5	5	15	6	11	2 4	3	7	6	7	71	4	0	0	-	-	3	-
	• • • • • •		Number DOLs rolled over from previous month	No	-	-	9	0	0	0	1	15	5	5	5	7	0	4	0 1	1	2	0	5	30	2	1	0	-	-	2	-
	• • • • • • •		Number patients discharged prior to LA assessment targets	No	-	-	25	29	18	16	30	21	19	19	22	17 1	11	23	20 23	2 13	3 22	18	18	205	10	6	0	-	-	2	-
	• • • • • • •		Number of DOLs applications the LA disagreed with	No	-	-	4	2	5	2	2	4	3	1	1	1	0	2	2 0	1	0	0	2	10	1	1	0	-	-	0	-
	• • • • • •		Number patients cognitively improved regained capacity did not require LA assessment	No	-	-	0	0	0	0	0	21	0	4	0	4	3	0	0 0	0	0	1	0	12	0	0	0	-	-	0	-
	•••••	Apr 19	Falls	No	-	-	80	101	110	90	87	83	78	95	89	89 E	36	92	78 6	3 71	88	97	84	937	42	8	1	-	-	32	1
	••••••	Apr 19	Falls - Death or Severe Harm	<= No	0	0	0	5	3	-	2	2	1	4	3	2	2	0	0 4	2	0	1	1	19	1	0	0	0	0	0	0
			Falls Per 1000 Occupied Bed Days	<= Rate1	5	5	-	-	5.03	-		-	-	4.40	4.20 3	.97 3.	80	4.32 3	.78 2.9	8 3.2	2 3.80	4.19	3.94	3.87	-	-	-	-	-	-	-
	• • • • • • •	Apr 19	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	10	13	26	42	34	33	23	37	28 :	28 2	26	28	33 23	3 14	32	36	39	324	17	9	1	•	<u> </u>	12	-
Care	• • • • • • •	Apr 19	Pressure Ulcers per 1000 Occupied Bed Days	Rate1	-	-	0.53	0.58	1.17	2.37	1.52	1.59	1.06	1.72	1.37 1	.34 1.	16	1.27 1	.54 0.9	07 0.6	1 1.32	1.50	1.77	1.32	-	-	-	-	-	-	-
Free (• • • • • • •	Apr 19	Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	1	7	37	32	45	34	34	36	16 :	24 2	29	35	27 3	1 18	3 25	25	26	292	-	-	-	-	L -	25	-
Ξ			Pressure Ulcer Present on Admission to SWBH	<= No	0	0	-	-	-	-	129	99	96	198	130 1	41 1:	25	87	85 7	3 95	5 88	104	117	1248	-	-	-	-	-	-	-
Harm	• • • • • • •		Venous Thromboembolism (VTE) Assessments	=> %	95	95	92.8	94.4	95.3	93.8	95.8	95.1	96.1	95.1	96.0 9	5.7 95	5.9	95.2 9	5.6 96	.3 -	95.9	96.0	96.0	95.8	96.4	96.2	92.7	93.6	96.3	98.5	-
		Apr 19	WHO Safer Surgery - Audit - 3 sections (%pts where all sections complete)	=> %	100	100	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	- 10	0.0 10	0.0 1	00.0	- 100	<mark>.0</mark> 99.	9 100.	99.9	99.6	99.8	99.1	100.0	0 100.0	- 1	100.0	100.0	-
		Apr 19	WHO Safer Surgery - brief(% lists where complete)	=> %	100	100	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0 9	9.8 10	0.0	99.8 1	00.0	0.0 100	.0 100.	0 100.0	0 100.0	100.0	100.0	100.0	<mark>0</mark> -	-	100.0	-	-
		Apr 19	WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100	100.0	0.0	100.0	100.0	100.0	100.0	100.0	99.4	100.0 9	9.8 99	9.8	99.6 1	<mark>99 0.00</mark>	.7 100	<mark>.0</mark> 99.3	100.0	99.8	99.8	99.7	100.0	<mark>)</mark> -	-	100.0	-	-
	• • • • • • •		Never Events	<= No	0	0	0	2	0	1	0	0	0	0	1	1	1	0	0 0	0	0	0	0	3	0	0	0	0	0	0	-
	• • • • • • •		Medication Errors causing serious harm	<= No	0	0	0	0	2	0	0	0	0	0	0	0	0	0	1 0	0	0	0	1	2	0	1	0	-	0	0	-
	• • • • • • •		Serious Incidents	<= No	0	0	1	9	4	6	1	7	6	3	3	12 3	32	12	11 1	7 11	7	6	8	122	2	1	0	0	0	5	0
	• • • • • • •		Open Central Alert System (CAS) Alerts	No	-	-	14	14	15	16	18	20	19	15	15	4	9	8	11 1:	2 10) 12	10	9	115	-	-	-	-	<u> </u>	-	-
	•••••		Open Central Alert System (CAS) Alerts beyond deadline date	<= No	0	0	4	4	5	5	5	5	8	6	7	3	6	5	6 7	2	1	1	0	44	-	-	-	-		-	-
			Sepsis - Screened (as % Of Screening Required)	%	-	-																		-	-	-	-	-]	-	-
			Sepsis - Screened Positive (as % Of Screened)	%	-	-	U																	-	-	-	-	-	- 1	-	-
			Sepsis - Treated (as % Of Screened Positive)	%	-	-					Ne	ew Inc	licato	r set up	which	will b	e rep	porting	soon					-	-	-	-	-	-	-	-
			Sepsis - Treated in 1 Hour (as % Of Treated)	%	-	-	Ц																	-	-	-	-	-	-	-	-
			Sepsis - Antibiotic Review Within 72 hrs	%	-	-																		-	-	-	-	-]	-	-

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CQC Domain - Safe



CQC Domain - Caring

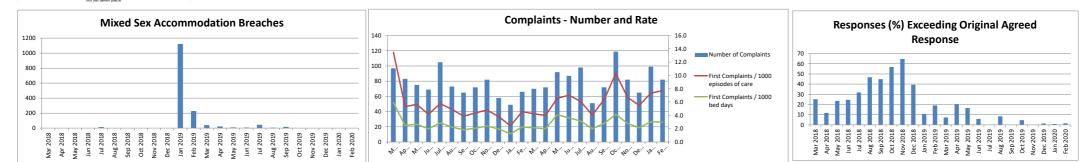
	14 to an and	Reviewed	In Product		Sta	ndard	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	19/20 Year to				Group	<u>,</u>		
	Kitemark	Date	Indicator	Measure	Year	Month	2018	2018	2018	2018	2019	2019	2019	Apr 2019	2019	2019	2019	2019	2019	2019	2019		2020		Date	М	SS	W	P		PCCT	CO
	• • • • • • •	Apr 19	FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	25	25	15.3	19.4	28.5	22.3	24.2	22.8	19.7	16.1	29.0	25.7	23.1	20.9	23.4	18.7	21.5	18.5	20.5	26.2	21.9	-	-	-	-	-	-	-
	••••	Apr 19	FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95	95	90	93	92	92	91	92	91	89	89	92	91	90	89	89	89	86	89	24	-	-	-	-	-	-	_	-
	• • • • • • •	Apr 19	FFT Response Rate: Type 1 and 2 Emergency Department	=> %	25	25	6.3	4.3	6.8	7.8	15.5	16.3	16.1	12.0	10.8	9.6	10.4	9.5	9.8	10.6	9.6	9.1	9.5	9.1	10.0	9.1	-	-	-	-	-	-
	••••	Apr 19	FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95	95	73	71	74	73	74	75	75	75	76	73	76	78	71	71	68	73	75	72	-	72	-	-	-	-	-	-
Ŀ	•••••	Apr 19	FFT Score - Outpatients	=> No	95	95	90	91	90	92	90	90	91	90	90	89	88	76	87	87	89	89	89	89	-	-	-	-	-	-	-	-
Ë	•••••	Apr 19	FFT Score - Maternity Antenatal	=> No	95	95	86	94	0	0	0	0	0	0	0	0	0	0	0	90	97	100	75	83	-	-			-	-	-	-
	•••••	Apr 19	FFT Score - Maternity Postnatal Ward	=> No	95	95	0	87	93	100	100	100	0	100	100	0	100	100	100	92	93	0	97	94	-	-	-	-	-	-	-	-
	•••••	Apr 19	FFT Score - Maternity Community	=> No	95	95	0	0	0	0	0	0	0	0	0	0	0	0	0	94	0	0	0	0	-	-	-	-	-	-	-	-
	•••••	Apr 19	FFT Score - Maternity Birth	=> No	95	95	93	100	100	100	17	95	100	100	94	94	91	66	6	94	97	94	95	97	-	-	-	-	-	-	-	-
	•••••	Apr 19	FFT Response Rate: Maternity Birth	=> %	25	25	16.3	8.4	5.0	3.7	17.1	5.0	3.5	2.1	3.5	8.3	10.2	1.4	6.1	28.2	35.3	12.2	32.2	55.0	16.0	-	-	-	-	-	-	-
MSA	•••••		Mixed Sex Accommodation - Breaches (Patients)	<= No	0	0	0	0	0	-	1123	229	40	22	11	9	44	7	16	-	-	-	-	-	109	9	7	0	-	0	0	-
	• • • • • •		No. of Complaints Received (formal and link)	No	-	-	65	72	82	58	49	66	70	72	92	87	98	51	72	119	82	65	99	82	919	36	32	5	1	1	4	3
	••••		No. of Active Complaints in the System (formal and link)	No	-	-	208	206	212	210	165	170	151	163	149	121	148	91	121	140	114	92	106	142	1387	68	41	14	1	2	11	5
nts	•••••		No. of First Formal Complaints received / 1000 bed days	Rate1	-	-	1.83	2.07	2.39	1.93	1.23	2.26	2.14	2.00	4.08	3.63	3.15	1.98	2.78	4.16	2.78	2.15	3.03	2.99	2.95	2.17	6.16	1.43	-	-	7.71	-
Complaints	•••••		No. of First Formal Complaints received / 1000 episodes of care	Rate1	-	-	3.88	4.34	4.81	3.79	2.42	4.57	4.22	3.98	6.57	7.02	6.10	4.05	6.38	10.31	6.72	5.50	7.33	7.72	6.47	7.68	11.23	2.48	-	-	8.75	-
S	•••••		No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100	100.0	96.8	96.2	98.3	97.8	100.0	98.4	100.0	2.2	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	89.9	100.0	100.0	100.0	-	100.0	100.0	100.0
	•••••		No. of responses which have exceeded their original agreed response date (% of total active complaints)	<= %	0	0	44.9	56.8	64.8	39.4	10.7	19.1	7.2	20.3	16.5	5.9	0.0	8.4	0.0	4.5	0.0	1.3	0.8	1.4	6.6	0.0	4.0	0.0	-	0.0	0.0	0.0
	•••••		No. of responses sent out	No	-	-	57	54	59	47	74	58	95	77	98	97	95	96	61	88	105	76	76	70	939	28	24	5	0	3	5	5
WKF	•••••	Apr 19	Flu Vaccination Rate	=> %	80	80	-	-	83.3	83.7	-	-	-	-	-	-	-	-	-	47.7	62.4	78.1	82.0	83.1	70.7	-	-	-	-	-	-	-

 Data Quality - Kitemark

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Timeliness Audit Source Validation Complete ness Granularity Assessme of Exec Director

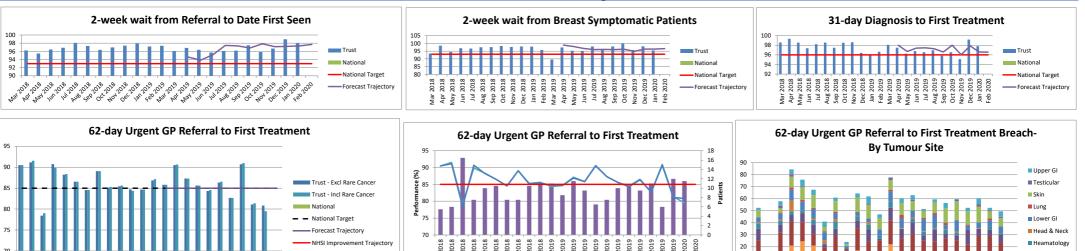
If segment 2 of the Kitemark is Blank this indicates that a formal audit of this indicator has not yet taken place



	Kitemark	Reviewed Date	Indicator	Measure	Star Year	ndard Month	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019		May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019		Feb 2020	19/20 Year to Date	м	SS	w	Group		PCCT	со
		Duto	Emergency Care Attendances (Including Malling)	No	-	-		17819		Î	18042	16949	18592			18091	19047	17657	17973	18445	17868	19330	18477		201704	-	-	-	-	-	-	-
	• • • • • • •		Emergency Care 4-hour waits	=> %	95	95	83.0	81.2	80.6	75.0	78.0	82.3	85.9	78.3	82.7	81.8	81.4	81.6	74.1	71.7	70.9	72.2	73.0	74.6	76.6	-	-	-	-	-	-	-
	• • • • • • •		Emergency Care 4-hour breach (numbers)	No	-	-	3013	3354	3383	4435	3963	3006	2629	4106	3213	3288	3542	3252	4764	5215	5199	5375	4819	4416	47189	-	-	-	-	-	-	-
	• • • • • • •		Emergency Care Trolley Waits >12 hours	<= No	0	0	0	1	0	1	0	0	0	0	0	0	0	0	2	2	1	1	0	0	6	-	-	-	-	-	-	-
Care	• • • • • • •		Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15	15	49	61	37	88	50	41	57	74	39	89	45	52	71	185	154	116	121	62	-	-	-	-	-	-	-	-
	• • • • • • •		Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	238	254	245	255	237	269	241	282	264	255	261	208	217	250	263	263	254	232	-	-	-	-	-	-	-	-
gency	• • • • • •		Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5	5	5.2	5.2	3.6	4.8	4.6	4.9	4.7	5.4	5.2	5.4	5.2	5.6	7.3	7.8	7.9	7.9	8.1	7.5	6.7	-	-	-	-	-	-	-
Emer	• • • • • •		Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5	5	6.6	7.7	6.6	8.6	7.3	7.0	5.9	7.3	6.6	7.1	7.4	6.4	8.8	10.5	10.2	9.5	8.0	7.8	8.2	-	-	-	-	-	-	-
"	• • • • • • •		WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	95	121	159	205	168	160	88	166	119	128	123	162	238	251	228	279	199	242	2135	-	-	-	-	-	-	-
	• • • • • • •		WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	5	6	7	7	9	8	6	5	4	4	5	9	33	16	9	12	9	32	138	-	-	-	-	-	-	-
	• • • • • • •		WMAS - Handover Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02	0.1	0.1	0.2	0.1	0.2	0.2	0.1	0.1	0.1	0.1	0.1	0.2	0.7	0.3	0.2	0.2	0.2	0.7	0.3	-	-	-	-	-	-	-
	• • • • • • •		WMAS - Emergency Conveyances (total)	No	-	-	4354	4622	4579	4872	4835	4372	4655	4814	4670	4555	4658	4486	4484	4656	4721	4887	4848	4522	51301	-	-	-	-	-	-	-
	• • • • • • •	Apr 19	Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5	2.6	2.7	2.4	2.2	1.1		1.6	2.0	-	1.0	-	4.7	3.0	2.8	2.9	2.4	2.8	3.0	2.3	-	-	-	-	-	-	-
			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	240	20	14	16	14	13	14	14	15	12	-	14		27	17	19	20	16	19	20	-	-	-	-	-	-	-	-
Flow	• • • • • •	Apr 19	Delayed Transfers of Care (Acute) - Finable Bed Days	<= No	0	0	181	200	272	275	315	270	211	99	149	239	295	185	127	147	163	180	195	340	2119	-	-	-	-	-	-	-
	• • • • • • •	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - ALL	No	-	-	712	797	717	713	757	654	642	672	698	583	684	671	675	867	852	944	989	860	8495	-	-	-	-	-	-	-
Patient	• • • • • • •	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No	-	-	240	246	227	247	279	241	243	223	228	185	218	233	266	330	310	383	354	358	3088	-	-	-	-	-	-	-
-	• • • • • • •	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Clinical Transfers	No	-	-	47	54	38	55	63	57	63	65	37	30	46	45	52	52	80	66	71	64	608	-	-	-	-	-	-	-
		Apr 19	Hip Fractures Best Practice Tariff (Operation < 36 hours of admissions	=> %	85	85	81.0	84.4	77.1	82.6	81.5	80.0	82.9	64.0	77.1	75.0	62.5	87.9	79.2	88.5	78.6	67.5	75.0	87.9	76.9	-	87.9	-	-	-	-	-
	• • • • • • •		No. of Sitrep Declared Late Cancellations - Total	<= No	240	20	28	25	29	29	36	39	32	44	38	40	46	32	57	63	59	65	56	60	560	5	40	13	0	-	2	-
	•		No. of Sitrep Declared Late Cancellations - Avoidable	No	-	-	10	9	7	11	18	7	10	16	13	3	16	17	32	40	30	41	29	17	254	0	15	0	0	-	2	-
	•		No. of Sitrep Declared Late Cancellations - Unavoidable	No	-	-	18	16	22	18	18	32	22	28	25	37	30	15	25	23	29	24	27	43	306	5	25	13	0	-	0	-
cellations	• • • • • •		Elective Admissions Cancelled at last minute for non-clinical reasons (as a percentage of admissions)	<= %	0.8	0.8	0.8	0.6	0.8	0.9	0.9	1.0	0.8	1.3	1.0	1.2	1.1	0.8	1.5	1.6	1.5	1.8	1.3	1.7	1.3	0.6	2.0	6.0	-	-	0.5	-
ati			Number of 28 day breaches	<= No	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	<u> </u>	0	-
cell	• • • • • • •		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	0	0	0	0	-	-	-	-
Can	• • • • • •		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	0	0	0]	0	-
	• • • • • •		No. of Sitrep Declared Late Cancellations (Pts. >1 occasion)	<= No	0	0	0	0	0	0	2	0	0	0	1	2	1	1	1	2	0	1	1	2	12	1	1	0	0	<u> </u>	0	-
	• • • • • •		Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0	54	68	55	39	52	56	69	73	64	75	86	67	79	103	92	65	73	124	901	8	97	19	-	<u> </u>	-	-
	•••••		All Hospital Cancellations, with 7 or less days notice	<= No	0	0	193	265	238	156	236	230	244	265	262	277	296	204	367	370	376	358	347	584	3706	41	484	59	-	-	-	-

					С	QC	; D	om	ai	n -	Re	esp	00	ทร	siv	/e															
	• • • • • • •	Apr 19	2 weeks	=> %	93	93	96.4	97.0 97	.4 97	.9 97.2	97.3	96.1	96.8	96.4	95.7	96.1	96.2 9	7.5	95.8	96.7 9	9.0 98	.0 -	96.8		98.3	97.8	98.5	-	-		-
	• • • • • • •	Apr 19	2 weeks (Breast Symptomatic)	=> %	93	93	97.6	98.3 97	.7 98	.0 97.9	95.7	89.5	97.4	95.3	95.1	98.1	95.8 9	8.0 1	100.0	95.7 9	3.1 95	.5 -	96.9		-	95.5	-	-	-		-
	• • • • • • •	Apr 19	31 Day (diagnosis to treatment)	=> %	96	96	97.5	98.5 98	.6 96	.4 96.1	96.6	98.1	97.5	96.2	96.8	96.5	96.9 9	5.8	96.6	95.1 9	9.2 97	.8 -	96.8		95.1	98.8 1	100.0	-	-		-
	• • • • • • •	Apr 19	31 Day (second/subsequent treatment - surgery)	=> %	94	94	100.0	100.0 95	.5 100	0.0 100.0	95.0	95.2	100.0	94.7	95.0	96.2	95.2 10	0.00	93.5	100.0 9	3.1 10	0.0 -	96.3		-	-	-	-	-		-
	• • • • • • •	Apr 19	31 Day (second/subsequent treatment - drug)	=> %	98	98	100.0	100.0 100	0.0 100	0.0 100.0	0 100.0	-	-	100.0	-	- 1	100.0 10	0.00	-	100.0 10	0.0	-	100.0		-	-	-	-	-		-
	•••••	Apr 19	62 Day (urgent GP referral to treatment) Excl Rare Cancers	=> %	85	85	84.5	89.1 85	.1 85	.4 84.7	84.7	86.9	85.8	90.5	87.3	85.6	84.3 8	6.3	82.7	90.7 8	1.1 80	.8 -	85.6		78.1	83.1	76.5	-	-		-
	•••••		62 Day (urgent GP referral to treatment) - Inc Rare Cancers	=> %	85	85	84.5	89.1 85	.3 85	. <mark>6</mark> 84.4	84.7	87.2	85.8	90.6	87.3	85.6	84.6 8	6.5	82.7	91.0 8	1.4 79	.5 -	85.6		78.1	82.2	70.6	-	-		-
	•••••	Apr 19	62 Day (referral to treat from screening)	=> %	90	90	92.9	97.7 96	.1 100	0.0 91.5	91.4	90.0	100.0	98.2	91.7	94.4 1	100.0 9	6.9	93.2	94.6 8	9.7 91	.5 -	95.2		•	91.1 1	100.0	-	-		-
	• • • • • • •	Apr 19	62 Day (referral to treat from hosp specialist)	=> %	90	90	85.1	85.0 80	.8 87	.1 88.0	89.5	89.0	89.4	83.1	92.9	84.3	80.0 8	6.4	76.5	81.8 8	2.3 87	.5 -	84.3		82.0	96.3 1	100.0	-	-		-
Cancer	•••••		Cancer = Patients Waiting Over 62 days for treatment	No	-	-	8	8 1 [.]	1 1	1 11	9	12	10	7	8	10	11	10	11	6	2 1	2 -	94		4	6	2	-	-	0 -	-
Can	• • • • • • •		Cancer - Patients Waiting Over 104 days for treatment	No	-	-	1	2 1	3	3 2	3	7	3	4	1	3	5	3	3	5	6 7	· -	38		3	4	1	-	-	0 -	-
	• • • • • • •		Cancer - Longest wait for treatment (days) - TRUST	No	-	-	86	104 10	1 19	97 137	177	209	241	183	91	196	147	96	171	149 1	48 16	i9 -	-		-	-	-	-	-		-
	• • • • • • •	Apr 19	Neutropenia Sepsis - Door to Needle Time > 1hr	<= No	0	0	7	4 6	; E	6 5	9	2	7	2	3	3	4	6	6	9	15 7	11	73		11	0	0	-	-	0 ·	-
	•••••		IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway	%	-	-	71.4	68.8 56	.3 53	.3 86.7	37.5	66.7	48.0	53.3	63.6	74.1	51.9 6	5.2	66.7	69.6 3	5.7 69	.6 -	60.8		-	-	-	-	-		-
			Cancer - 28 Day FDS TWW Referral (% of Informed) - Total	%	-	-															85	.2 -	85.2		-	-	-	-	-		-
			Cancer - 28 day FDS TWW breast symptomatic (% of Informed)	%	-	-															99	.4 -	99.4		-	-	-	-	-		-
			Cancer - 28 day FDS screening referral (% of Informed) - Total	%	-	-					REPARA		B CO I				2020	C+ill in	. Tootin	~	77	.8 -	77.8		-	-	-	-	-		-
			Cancer - 28 Day FDS TWW Referral (% of Eligible) - Total	%	-	-			NDICAT	UKS IN F	REPARA	HON FC	IR GU L	IVE DA		151 APP	GL 2020	- 5till ir	resun	9	47	.2 -	47.2		-	-	-	-	-		-
			Cancer - 28 day FDS TWW breast symptomatic (% of Eligible) - Total	%	-	-															10	5.3 -	105.3		-	-	-	-	-		-
			Cancer - 28 day FDS screening referral (% of Eligible) - Total	%	-	-															10	.0 -	100.0		-	-	-	-	-		-
	• • • • • • •	Apr 19	RTT - Admittted Care (18-weeks)	=> %	90	90	80.7	78.4 79	.8 80	.5 79.5	79.8	78.9	81.7	83.1	80.5	77.6	80.5 8	0.6	82.6	81.4 8	2.4 81	.2 -	81.2	-	81.1	80.3	70.1	-	-	74.6	-
	• • • • • • •	Apr 19	RTT - Non Admitted Care (18-weeks)	=> %	95	95	89.0	86.5 85	.5 87	.9 86.1	88.7	90.2	91.7	92.5	90.7	89.6	89.2 8	9.8	87.3	87.3 8	7.2 87	.0 -	89.2		67.9	92.7	89.0	-	-	77.7	-
	• • • • • • •	Apr 19	RTT - Incomplete Pathway (18-weeks)	=> %	92	92	92.0	92.0 92	.3 92	.2 92.6	92.9	93.0	93.2	92.6	92.1	92.0	92.0 9	2.0	91.6	90.9 9	1.1 90	.7 -	91.8		91.8	91.8	89.6	-	-	88.1 -	-
	•••••	Apr 19	RTT Waiting List - Incomplete	No	-	-	36990	37871 370	12 369	914 3490	9 34221	34888	35859	36762	37231	39115 3	8714 39	634 3	39898	88360 38	416 393	374 -	38336	3 7	7328 1	16860	2161	-	- :	3295 0	0
E	•••••	Apr 19	RTT - Backlog	No	-	-	2959	3023 28	65 28	90 2582	2424	2436	2450	2710	2951	3118	3082 3	168 3	3360	3475 3	133 36	45 -	31392		601	1382	225	-	-	391 0	0
RTT	•••••	Apr 19	Patients Waiting >52 weeks (All Pathways)	<= No	0	0	3	5 4	- 1	3	4	6	1	11	24	12	14	0	0	1	0 1	-	64		0	1	0	0	0	0	D
	•••••	Apr 19	Patients Waiting >52 weeks (Incomplete)	<= No	0	0	2	2 0	1	1	1	0	0	5	6	0	1	0	0	0	0 0	-	12		0	0	0	0	0	0 0	D
	•••••		Treatment Functions Underperforming (Admitted, Non- Admitted,Incomplete	<= No	0	0	28	27 20	6 2	6 28	29	27	23	27	29	30	29	27	26	32 :	29 2	в -	-		7	11	3	-	-	4	D
	• • • • • • •		Treatment Functions Underperforming (Incomplete)	<= No	0	0	3	3 3	3	3 4	3	-	2	3	5	5	5	4	5	7	7 E	-	-		1	1	1	-	-	1	0
			RTT Clearance Time (Wks)	Ratio	-	-	-	- 9.	3 11	.6 8.6	8.4	9.1	9.5	9.7	10.0	9.7	10.5 1	0.3	9.6	8.9 1).8 ·	-	9.9		22.7	8.1	16.5	-	-	19.3 -	-
101	•••••	Apr 19	Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1	1	1.7	3.2 3.	8 3.	9 1.0	0.4	0.4	1.8	2.6	0.9	0.8	2.3	1.5	1.1	0.2	.7 0.	1 0.0	1.1		0.0	0.1	-	-	0.0		-
DM01	•••••	Apr 19	Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No	-	-	1340	526 123	37 12	94 1861	532	958	1158	1330	1023	1010	600 6	614	457	359 3	38 10	28 499	8416		54	67	-	-	378		-





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National Performance

2019-11

2019-12:

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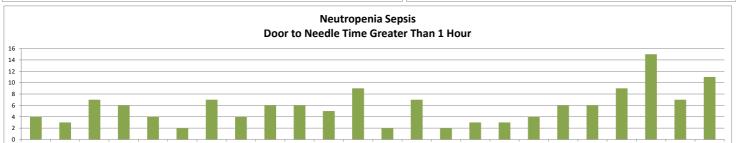
2018 2018

2018 2018 2018

Mar Apr May Jun

National Standard

2020-02



2019-03

Scheduled Care/Long Term Conditions Theatres Gynaecology, Gynae-Oncology and GUM Acute & Community Paediatrics Ambulatory Therapies Community Medicine

2018-12

2013-01

2019-07

2018-10

2018-11:

Mar 2018 Apr 2018 Jun 2018 Jun 2018 Jun 2018 Jun 2018 Aug 2019 Dec 2018 Jun 2019 Jun 2018 Jun 2019 Jun

Dummy Directorate General Surgery

201

Number over 62 days - Trust - Incl Rare Cancer

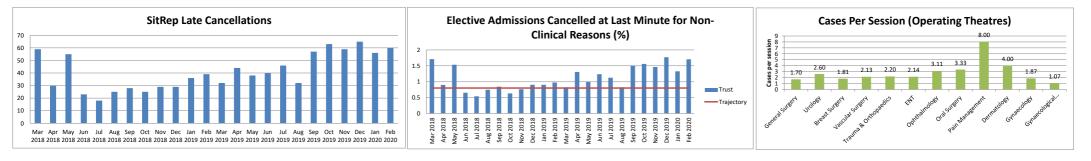
Month	Indicator	TumourSite	Informed In 28 Days	Informed	Eligible	% of Informed	% of Eligible
Jan 2020	Cancer - 28 Day FDS TWW Referral	Breast	231	233	289	99.142	79.93
Jan 2020	Cancer - 28 Day FDS TWW Referral	Colorectal	39	63	297	61.905	13.13
Jan 2020	Cancer - 28 Day FDS TWW Referral	Gynaecology	99	104	153	95.192	64.71
Jan 2020	Cancer - 28 Day FDS TWW Referral	Haematology	9	19	27	47.368	33.33
Jan 2020	Cancer - 28 Day FDS TWW Referral	Head & Neck	56	72	132	77.778	42.42
Jan 2020	Cancer - 28 Day FDS TWW Referral	Lung	12	12	40	100	30
Jan 2020	Cancer - 28 Day FDS TWW Referral	Skin	79	83	186	95.181	42.47
Jan 2020	Cancer - 28 Day FDS TWW Referral	Upper GI	123	167	154	73.653	79.87
Jan 2020	Cancer - 28 Day FDS TWW Referral	Urology	32	45	162	71.111	19.75
Jan 2020	28 day FDS TWW Breast Symptomatic	Breast	158	159	150	99.371	105.3
Jan 2020	Cancer - 28 day FDS screening referral	Breast	12	16	12	75	100
Jan 2020	Cancer - 28 day FDS screening referral	Colorectal	0	0	0	0	(
Jan 2020	Cancer - 28 day FDS screening referral	Gynaecology	2	2	2	100	100

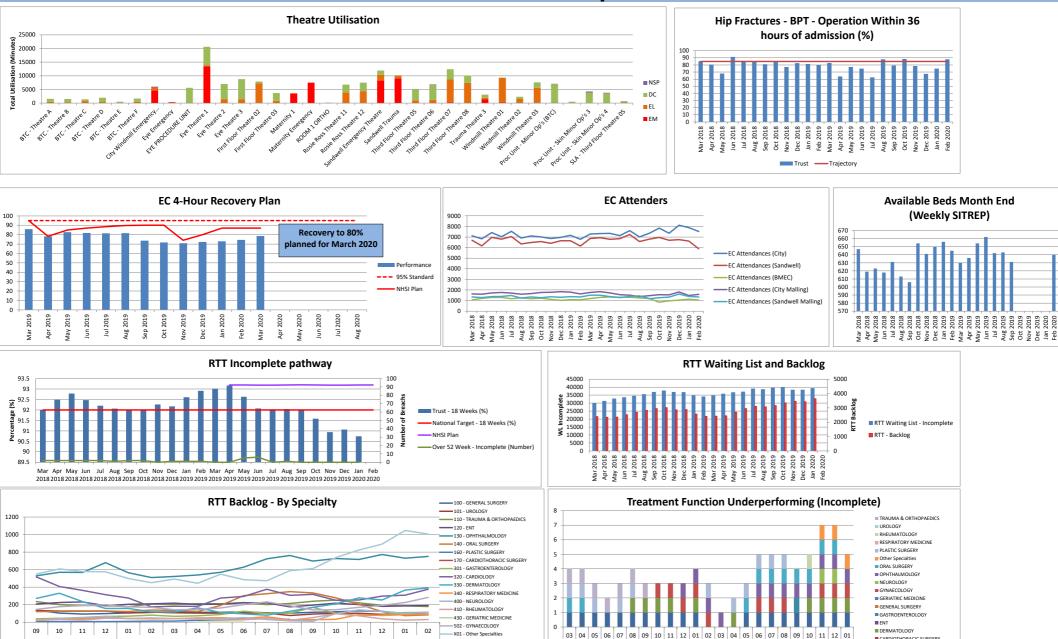
Jul 2018 Aug 2018 Sep 2018 Nov 2018 Dec 2018 Jan 2029 Apr 2019 Jun 2019 Feb 2020 Feb 2020

Gynaecology

Childrens

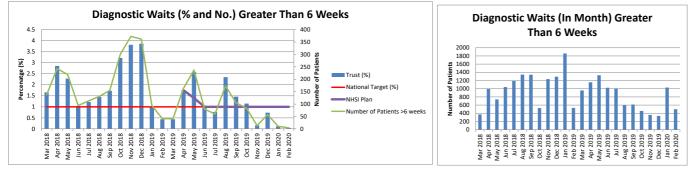
Breast Urological





CARDIOTHORACIC SURGERY

CARDIOLOGY



CQC Domain - Effective

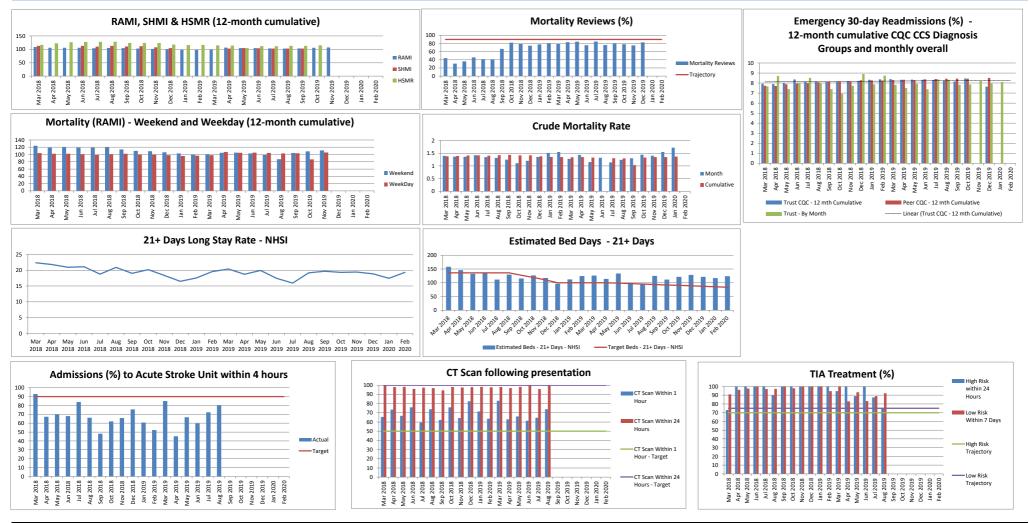
	Kitemark	Reviewed	Indicator	Measure	Sta Year	ndard Month	Sep	Oct 2018	Nov 2018	Dec 2018	Jan	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec	Jan 2020	Feb 2020	19/20 Year to	-			Group		PCCT	
Γ.		Date	Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	No	- rear		2018 105	103	102	100	2019 98	98	99	107	105	105	104	103	2019 104	106	2019 107	2019	-	-	Date -	-		-	-	-	-	-
			Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	No	-	-	102	100	100	98	96	97	98	107	105	105	104	103	103	87	106	-	-	-	-	-	-	-	-	-	-	-
•	• • • • • •		Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	No	-	-	114	110	109	106	103	100	101	105	105	103	99	87	105	109	112	-		-	-	-	-	-	-	-	-	-
•	• • • • • •		Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	No	-	-	111	112	108	105	-	-	-	103	105	104	103	103	103	-	-	-	-	-	-	-	-	-	-	-	-	-
	• • • • • • •		Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	No	-	-	124	124	124	118	116	117	115	115	105	112	112	113	113	115	-	-	-	-	-	-	-	-	-	-	-	-
•	• • • • • • •		Deaths in Low Risk Diagnosis Groups (RAMI) - month	No	-	-	61	98	105	86	108	88	85	98	-	93	125	85	88	152	97	-	-	-	-	-	-	-	-	-	-	-
miss	• • • • • •		Mortality Reviews within 42 working days	=> %	90	90	66.7	82.1	78.9	74.6	77.6	80.6	78.8	83.3	84.5	75.7	84.9	76.3	80.0	78.0	75.4	82.7	-	-	80.1	81.1	100.0	100.0	-	-	100.0	-
Readmission	• • • • • •		Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%	-	-	1.2	1.1	1.2	1.4	1.5	1.6	1.3	1.4	1.2	1.3	1.1	1.2	1.3	1.4	1.4	1.6	1.7	-	1.4	-	-	-	-	-	-	-
and R	• • • • • • •		Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%	-	-	1.4	1.4	1.4	1.4	1.4	1.3	1.3	1.3	1.3	-	1.3	1.3	1.0	1.3	1.3	1.3	1.4	-	1.3	-	-	-	-	-	-	-
	• • • • • •		Deaths in The Trust	No	-	-	106	107	114	122	149	137	121	134	112	117	109	118	114	133	136	139	162	-	1274	147	11	1	0	0	3	0
Mortality			Avoidable Deaths In the Trust	No	-	-	-	•	-	-		-		-			-	0		-	-	-			0	0	0	0	-	-	0	
ž.	•••••	Apr 19	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%	-	-	7.4	6.9	7.7	8.9	7.9	8.7	7.8	7.5	7.9	7.4	8.4	8.3	7.8	7.9	8.2	8.0	8.1	-	7.9	13.8	3.6	7.5	1.4	5.9	2.0	-
•	•••••	Apr 19	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%	-	-	7.7	7.7	7.8	7.9	7.9	8.0	8.0	7.9	7.9	7.9	7.9	7.9	7.9	8.0	8.1	8.0	8.0	-	7.9	13.0	4.8	5.1	0.9	6.2	1.6	-
•	•••••	Apr 19	Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) month	%	-	-	3.3	2.7	3.6	4.1	3.6	3.8	3.5	3.0	3.0	2.6	3.5	3.5	3.2	3.0	3.3	2.9	3.0	-	3.1	3.9	2.2	6.1	-	-	-	-
•	•••••	Apr 19	Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) 12-month cumulative	%	-	-	3.5	3.5	3.5	3.6	3.6	3.6	3.6	3.5	3.5	3.4	3.4	3.3	3.3	3.4	3.3	3.2	3.2	-	3.4	3.9	2.7	3.8	0.1	0.3	-	-
Flow	• • • • • • •	Apr 19	Inpatients Staying 21+ Days At Month End Census - NHSI	No	-	-	122	146	123	126	137	125	116	139	130	124	129	118	152	159	148	156	154	173	-	144	28	1	0	0	0	-
ent F	•••••		21+ Days Long Stay Rate - NHSI	%	-	-	19.0	20.2	18.4	16.5	17.5	19.6	20.4	18.7	20.0	17.5	15.9	19.2	19.7	19.4	19.4	18.9	17.5	19.3	18.7	22.4	5.7	15.5	0.0	0.0	0.0	-
Patient	•••••		Estimated Beds - 21+ Days - NHSI	No	-	-	115	127	117	96	112	124	126	114	133	101	96	125	111	122	128	121	117	124	-	115	6	2	0	0	0	-
•	• • • • • • •	Apr 19	Routine Outpatient Appointments with Short Notice(<3Wks)	%	-	-	22.4	25.4	31.3	35.0	32.6	35.2	34.6	38.6	35.4	34.5	36.3	33.9	37.9	38.6	38.9	39.6	38.0	47.8	38.3	37.9	57.1	33.1	36.3	-	43.0	-
Ŀ	• • • • • • •	Apr 19	Routine Outpatient Appointments with Short Notice(<3Wks)	No	-	-	1904	2434	3097	3169	3693	3564	3554	3599	3767	3498	3838	3034	3711	4512	4735	4029	4571	5310	44604	1008	3279	358	170	0	490	-
RTT	•••••	Apr 19	Short Notice Inpatient Admission Offers (<3wks)	%	-	-	48.5	55.1	58.7	51.7	44.3	47.6	45.5	57.9	57.4	56.1	53.8	54.4	51.4	51.4	53.7	54.8	55.3	56.2	54.7	58.1	55.7	57.4	48.8	96.8	54.5	-
•	•••••	Apr 19	Short Notice Inpatient Admission Offers (<3wks)	No	-	-	1760	2253	2307	1773	1873	1862	1869	2416	2414	2136	2375	2150	2142	2313	2388	2087	2242	2041	24704	172	1497	170	21	30	151	-
			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90	90	94.5	90.4	100.0	97.9	93.2	86.2	93.0	88.5	87.9	92.9	90.2	98.2	88.2	93.7	91.5	96.2	84.0	90.5	90.8	90.5	-	-	-	-	-	-
			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80	80	50.0	61.2	61.9	78.4	60.3	52.1	85.5	50.8	67.3	63.5	76.6	77.1	47.4	45.6	70.6	48.4	52.0	66.0	59.4	66.0	-	-	-	-	-	-
			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50	50	62.7	71.4	63.4	82.4	72.4	64.4	85.5	68.9	66.1	60.3	70.2	73.5	53.4	60.3	73.5	74.6	94.1	88.7	70.7	88.7	-	-	-	-	-	-
			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95	95	94.1	98.0	97.6	98.0	98.3	97.9	98.2	98.4	98.3	100.0	97.9	100.0	96.6	100.0	100.0	100.0	100.0	100.0	99.2	100.0	-	-	-	-	-	-
oke			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85	85	100.0	85.7	0.0	80.0	25.0	66.7	100.0	66.7	85.7	85.7	83.3	60.0	100.0	50.0	66.7	50.0	75.0	83.3	71.9	83.3	-		-	-	-	· 1
Stroke			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=> %	70	70	100.0	95.7	100.0	100.0	94.1	100.0	94.7	100.0	88.9	64.3	87.5	75.0		senio	e to resu	me ren	orting		83.0	75.0	-	-	-	-	-	
			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=> %	75	75	97.2	98.0	100.0	100.0	97.4	93.8	100.0	73.9	93.3	77.8	88.4	90.9		961 AIC	C IO IESL	ше тер	sining		85.1	90.9	-	-	-	-	-	
•	• • • • • •		Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80	80	100.0	93.8	100.0	100.0	100.0	92.3	95.2	95.2	85.7	100.0	93.8	100.0	77.8	100.0	95.7	91.7	94.1	91.7	93.9	91.7	-	-	•]	-	-	-
•	• • • • • •		Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80	80	100.0	100.0	100.0	100.0	100.0	92.3	85.7	95.5	85.7	87.5	93.3	90.9	66.7	100.0	89.5	81.8	88.2	91.7	89.4	91.7	-	-	<u> </u>	-	-	-
	• • • • • • •		Rapid Access Chest Pain - seen within 14 days	=> %	98	98	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	-	-	-	-	-

 Data Quality - Kitemark

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CQC Domain - Effective



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)

CQC Domain - Well Led

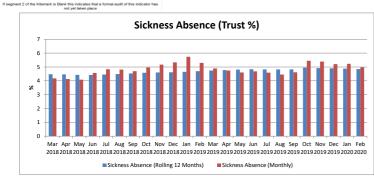
	Kitemark	Reviewed	Indicator	Measure	Sta	ndard	Sep	Oct	Nov	Dec	Jan	Feb 2019	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov			Feb	19/20 Year to				Group			
	Alternark	Date	indicator	measule	Year	Month	2018	2018	2018	2018	2019	2019	2019	2019	2019	2019	2019	2019	2019	2019	2019	2019	2020	2020	Date	М	SS	w	Р	- 1	PCCT	co
	•••••		PDRs - 12 month rolling	=> %	95	95	91.2	-	-	98.8	-	-	98.7	-	-	-	-	-	75.3	78.9	-	-	-	-	77.1	51.6	89.4	85.6	42.9	84.8	88.6	90.5
	•••••		Medical Appraisal	=> %	90	90	90.4	90.1	91.8	91.2	90.0	94.2	94.9	96.6	96.5	95.7	94.9	96.3	99.0	96.4	96.4	96.7	96.2	-	96.5	94.3	94.6	92.1	95.2	96.4	138.1	100.0
	•••••	Apr 19	Sickness Absence (Rolling 12 Months)	<= %	3	3	4.5	4.6	4.6	4.6	4.6	4.7	4.7	4.8	4.8	4.8	4.8	4.8	4.8	5.0	4.9	4.9	4.9	4.9	4.9	5.1	5.3	5.6	0.0	4.0	4.2	4.5
	•••••	Apr 19	Sickness Absence (Monthly)	<= %	3	3	4.7	5.0	5.2	5.3	5.7	5.3	4.9	4.7	4.6	4.7	4.6	4.5	4.6	5.4	5.4	5.2	5.2	5.0	4.9	5.5	5.5	3.9	0.0	3.6	4.8	4.9
			Sickness Absence - Long Term - (Open Cases in the month)	No	-	140	-	-	-	•	-	-	-	-	-		-		131	156	169	187	153	114	-	22	33	9	0	3	17	30
	•••••	Apr 19	Sickness Absence - Short Term (Monthly)	No	-	-	779	850	836	841	1013	878	784	738	644	674	681	539	719	875	814	872	845	779	-	188	148	94	7	34	114	80
			Ward Sickness Absence (Monthly)	<= %	3	3	-	-	•		8.1	7.3	6.9	6.8	6.6	6.7	5.8	5.8	6.7	7.2	7.6	7.0	6.6	6.4	6.7	7.5	6.4	4.5	-	-	7.3	-
a)	•••••		Mandatory Training - Health & Safety (% staff)	=> %	95	95	93.3	91.9	93.3	93.7	93.8	94.7	95.7	95.6	94.0	71.0	80.3	85.3	86.2	89.0	90.4	91.8	92.8	92.7	88.2	88.1	92.6	90.6	-	95.2	94.6	96.4
forc			Staff at 100% compliance with mandatory training	%	-	-	-	-	•			-	70.8	73.8	72.7	56.8	64.4	60.4	72.0	73.6	79.1	80.1	52.8	71.5	68.9	57.3	67.8	66.5	-	-	76.6	-
Workforce			Staff requiring to complete 1 module to be at 100% compliance with mandatory training	%	-	-	-	-	-		-	-	12.4	13.5	12.9	23.0	18.7	22.0	12.7	13.8	10.1	9.4	25.5	15.1	16.0	18.7	16.0	17.0	-	-	15.4	-
>			Staff requiring to complete 2 modules to be at 100% compliance with mandatory training	%	-	-	-	-	•			-	8.1	8.4	6.5	8.5	7.2	7.6	5.7	4.6	3.8	4.0	10.0	5.8	6.6	8.2	7.4	5.8	-	-	4.0	-
			Staff requiring to complete 3 modules to be at 100% compliance with mandatory training	%	-	-	-	-	-	•	-	-	-	-	-		-						11.7	7.6	9.7	15.8	8.7	10.8	-	-	4.1	-
	•••••	Apr 19	Nursing Turnover (Qualified Only)	<= %	10.7	10.7	12.8	12.2	12.7	12.5	12.4	12.2	12.1	11.8	12.4	12.3	12.3	11.7	11.5	12.2	12.1	12.6	12.3	12.6	12.2	-	-	-	-	-	-	-
	•••••	Apr 19	Nursing Vacancy Rate (Qualified)	<= %	11	11	-	-	11.8	12.1	13.0	12.4	10.6	15.2	15.8	15.9	16.1	15.8	14.3	14.6	13.8	14.5	12.9	12.3	14.7	11.9	17.8	11.2	-	36.7	8.4	1.0
		Apr 19	WeConnect Staff Satisfaction Score	=> No	4	4	-	-	-	-	23	-	-	-	-	-	-	-	-	-	-	-	-	-	23	4	4	4	0	0	4	8
		Apr 19	WeConnect Staff Satisfaction Response Rate (%)	=> No	35	35	-	-	-	-	131	-	-	-	-	-	-	-	-	-	-	-	-	-	131	8	20	29	0	0	24	50
		Apr 19	WeConnect Staff Satisfaction Disengagement Rate	=> %	10	10	-	-	-	-	100.0	-	-	-	-	-	-	-	-	-	-	-	-	-	100.0	100.0	100.0	100.0	-	-	100.0	100.0
		Apr 19	New Starters Complete Onboarding Process	=> %	100	100	-	-	100.0	84.2	87.5	82.1	86.9	92.3	77.6	87.5	94.6	87.0	93.5	99.2	100.0	100.0	94.8	100.0	93.4	100.0	100.0	100.0	-	-	100.0	-

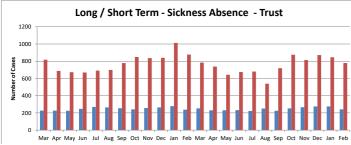
 Data Quality - Kitemark

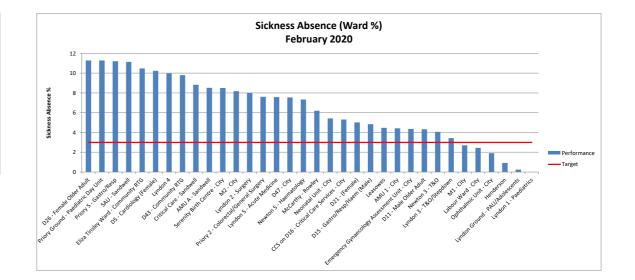
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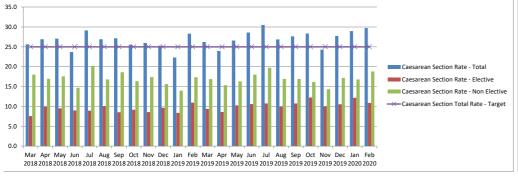


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	Kitemark	Reviewed Date	Indicator	Measure	Sta Year	Indard Month	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb	Mar 2019	Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	19/20 Year to Date	м	SS	w	Group		PCCT	60
es		Duto	Pre-Procedure Elective Bed Days	No	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	· ·	-	-
Services			Pre-Procedure Non-Elective Bed Days	No	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Clinical S			DNA Rate	%	-	-	-	-	-	-	8.4	7.6	7.8	8.1	7.8	7.8	7.9	8.4	8.1	8.1	8.3	8.8	7.7	7.7	8.1	9.9	9.2	11.0	9.0	0.0	9.2	-
Ē			Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%	-	-	7.4	6.9	7.7	8.9	7.9	8.7	7.8	7.5	7.9	7.4	8.4	8.3	7.8	7.9	8.2	8.0	8.1	-	7.9	13.8	3.6	7.5	1.4	5.9	2.0	-
Clinical Support Services			Top 10 Medicines - Delivery of Savings	%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Clin Sup Serv			Pathology Overall Cost Per Test	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
			Staff Retention Rate	%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	86.1	86.1	83.4	85.5	88.7	-	84.8	85.1	88.1
			Sickness Absence (Monthly)	%	-	-	4.7	5.0	5.2	5.3	5.7	5.3	4.9	4.7	4.6	4.7	4.6	4.5	4.6	5.4	5.4	5.2	5.2	5.0	4.9	5.5	5.5	3.9	0.0	3.6	4.8	4.9
æ			Total Pay Cost per WAU	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1901.0	1901.0	-	-	-	-	-	-	-
People			Clinial Staff Pay Cost WAU	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1901.0	1901.0	-	-	-	-	-	-	-
-			Substantive Medical Staff Cost Per WAU	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	770.0	770.0	-	-	-	-	-	-	-
			Substantive Nursing Staff Cost Per WAU	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	901.0	901.0	-	-	-	-	-	-	-
			Professional Technical and Therapies Staff Cost Per WAU	£	-	-	-	-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	230.0	230.0	-	-	-	-	-	-	-
ç,			Total Non-Pay Cost Per WAU	£	-	-	-	-	-	-	-	_	-	-	-	-	-	-	-	-	-	-	-	1458.0	1458.0	-	-	-	-	-	-	-
ervices, Estates es			Finance Cost Per £100m Turnover	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Corporate se Procurement, E Facilitie			HR Cost Per £100m Turnover	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Curer			Estates & Facilities Cost (£ per m2)	£	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Pro			Procurement League Table: Process Efficiency and Price Performance Score (scaled 0 to 100)	No	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- 1	-	-	-	-
			Capital Service Capacity - Value	No	-	-	-	-	-	-	-	- 1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	- 1	-	-	-	-
e			Liquidity (Days) - Value	No	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Finance			Distance From Agency Spend Cap - Value	%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ē			Income and Expenditure (I &E) Margin - Value	%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Ŀ	-	-
			Distance Form Financial Plan - Value	%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-

Patient Safety - Obstetrics

					Traje	ctory																		
Data Quality	Last review	PAF	Indicator	Measure	2016 Year	-2017 Month	E	S	O N	DJ	Prev F	vious N M	Ionths T A M		nce Sep J /	2018) A S	0	N	D J	F	Data Period	Month	Year To Date	Trend
\bigcirc			Caesarean Section Rate - Total	<= %	25.0	25.0		•		•	۰	٠	•	۲	•	•	٠	٠			Feb 2020	29.7	27.5	\sim
\bigcirc		•	Caesarean Section Rate - Elective	<= %				9	99	10 8	11	9	9 10) 11	11 1	0 11	12	10	11 1:	2 11	Feb 2020	10.9	10.6	~~~~
Ø		•	Caesarean Section Rate - Non Elective	<= %				19 ⁻	16 17	16 14	17	17	15 16	6 18	20 1	7 17	16	14	17 13	7 19	Feb 2020	18.8	17.0	$\sim\sim\sim$
Ó		•d	Maternal Deaths	<= No	0	0		•		• •	۰	٠	•	•	•	•	٠	٠			Feb 2020	0	1	
			Post Partum Haemorrhage (>2000ml)	<= No	48	4		•		• •	۰	٠	•	•	•		٠	٠			Feb 2020	3	31	\sim
¢			Admissions to Neonatal Intensive Care (Level 3)	<= %	10.0	10.0		•		• •	۰	٠	• •	٠	•	•	٠	٠			Feb 2020	2.33	1.41	ww
			Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0		•		• •	٠	٠	•	٠	•		٠	٠			Feb 2020	0.00	5.36	\mathcal{M}
\bigcirc	Apr-19		Stillbirth Rate (Corrected) (per 1000 babies)	Rate1				0.00 7	.86 2.23	4.57 2.30	0 2.51	4.64	0.00 6.2	5 4.45	6.51 8.9	93 2.24	4.80	2.54	.78 -	0.00	Feb 2020	0.00	4.19	mm
	Apr-19		Neonatal Death Rate (Corrected) (per 1000 babies)	Rate1				0.00 0	.00 2.23	0.00 0.00	0 2.51	0.00	0.00 2.0	8 0.00	0.00 0.0	0.00	2.40	5.09 2	.39 -	0.00	Feb 2020	0.00	1.16	\sim
			Early Booking Assessment (<12 + 6 weeks) - SWBH Specific	=> %	85.0	85.0		•		• •	٠	٠	•	٠	•	•	٠	•			Feb 2020	91.4	92.4	\sim
			Early Booking Assessment (<12 + 6 weeks) - National Definition	=> %	90.0	90.0		•		• •	٠	٠	•	٠	•	•	٠	•			Feb 2020	164.5	144.9	\sim
			Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0		•		• •	۰	٠	•		•	•	٠	٠			Feb 2020	79.94	81.26	/
\bigcirc	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 085 or 086) (%) -	<= %				1.2 1	.7 2.6	1.2 2.1	0.6	0.5	1.8 2.2	2 1.4	0.9 0.	.8 0.3	0.3	1.2 (0.5 1.	1 0.0	Feb 2020	0.00	0.91	\sim
\bigcirc	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 085 or 086 Not 0864) (%)	<= %				1.2 1	.7 2.6	1.2 2.1	0.6	0.5	0.9 1.9	9 1.0	0.9 0.	.8 0.3	0.3	1.2 (0.5 0.	8 0.0	Feb 2020	0.00	0.77	m
\bigcirc	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 085) (%)	<= %				0.3 0	0.8 1.5	0.4 1.9	0.0	0.0	0.0 0.0	6 0.7	0.6 0.	.0 0.0	0.0	0.3	0.0 0.	5 0.0	Feb 2020	0.00	0.27	M

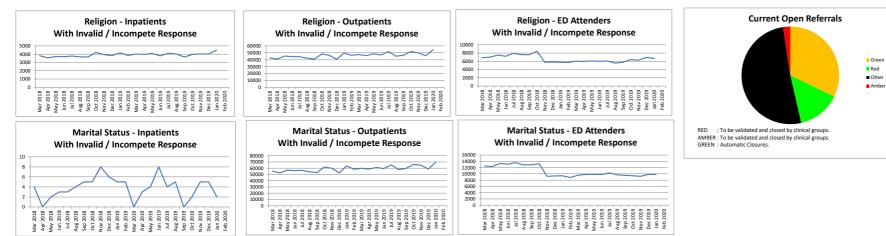






Data Completeness

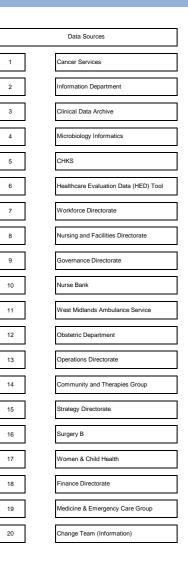
Data Quality	Last review	PAF	Indicator	Measure		Month	Previous Months Trend (since Sep 2018) S O N D J F M A M J J A S O N D J F	Data Period	Group M SS W P I PCCT CO	Month	Year To Date	Trend
\bigcirc		•	Data Completeness Community Services	=> %	50.0	50.0		Jan 2020	61	61.2		$ \longrightarrow $
C		•	Percentage SUS Records for AE with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0		Dec 2019		86.3		
C		•	Percentage SUS Records for IP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0		Dec 2019		98.5		\sim
C		•	Percentage SUS Records for OP care with valid entries in mandatory fields - provided by HSCIC	=> %	99.0	99.0	• •	Dec 2019		99.4		\sim
C			Completion of Valid NHS Number Field in acute (inpatient) data set submissions to SUS	=> %	99.0	99.0	98.5 97.7 98.2 97.9 97.3 97.2 97.5 98.2 98.1 96.8 98.7 97.9 96.8 97.2 96.2 95.1 95.7	Jan 2020		95.7	97.1	$\sim \sim$
C			Completion of Valid NHS Number Field in acute (outpatient) data set submissions to SUS	=> %	99.0	99.0	99.8 99.6 99.7 99.7 99.7 99.8 99.6 99.6 99.7 99.8 99.6 99.7 99.8 99.6 99.6 99.6 99.6 99.6 99.6 99.6	Jan 2020		99.5	99.6	m
C			Completion of Valid NHS Number Field in A&E data set submissions to SUS	=> %	95.0	95.0	97.3 97.2 97.6 97.3 97.6 97.6 97.5 97.6 97.6 97.3 97.3 97.3 97.2 92.6 82.7 84.4 84.2 86.0 -	Jan 2020		86.0	91.7	\sim
0			Ethnicity Coding - percentage of inpatients with recorded response	=> %	90.0	90.0		Jan 2020		87.4	90.4	m
\bigcirc			Ethnicity Coding - percentage of outpatients with recorded response	=> %	90.0	90.0		Jan 2020		89.8	92.0	\sim
\bigcirc			Protected Characteristic - Religion - INPATIENTS with recorded response	%			68.1 67.0 68.9 68.5 68.9 67.2 68.4 68.6 68.2 68.0 67.7 66.8 67.7 65.7 65.9 65.3 62.9 -	Jan 2020		62.9	66.7	~~~~
\bigcirc			Protected Characteristic - Religion - OUTPATIENTS with recorded response	%			52.3 51.7 51.6 51.2 51.5 50.1 50.1 50.7 50.2 50.3 50.4 51.1 50.6 50.3 50.9 50.3 50.0 -	Jan 2020		50.0	50.5	m
\bigcirc			Protected Characteristic - Religion - ED patients with recorded response	%			63.5 60.1 62.5 62.3 63.2 61.2 62.6 64.0 62.8 62.9 64.7 64.6 63.7 59.2 59.1 57.0 57.7 -	Jan 2020		57.7	61.6	m
\bigcirc			Protected Characteristic - Marital Status - INPATIENTS with recorded response	%			100.0 100.0 99.9 100.0 100.0 100.0 100.0 100.0 100.0 99.9 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 -	Jan 2020		100.0	100.0	$\sim \sim \sim$
\bigcirc			Protected Characteristic - Marital Status - OUTPATIENTS with recorded response	%			38.6 38.1 37.8 37.2 37.9 37.4 37.5 37.4 37.2 37.5 37.3 36.8 36.7 36.5 36.4 -	Jan 2020		36.4	37.0	m
0			Protected Characteristic - Marital Status - ED patients with recorded response	%			38.0 37.5 39.9 39.7 40.2 40.0 40.6 40.0 39.5 39.9 38.4 40.1 40.5 39.8 39.1 38.3 -	Jan 2020		38.3	39.6	\sum
0			Maternity - Percentage of invalid fields completed in SUS submission	<= %	15.0	15.0		Jan 2020		7.6	7.1	\sim
C	_		Open Referrals	No			217,529 216,936 213,645 213,037 210,947 210,947 210,947 221,026 223,937 221,026 223,937 331,212 332,5229 334,632 334,632 332,652 332,652	Feb 2020	26.083 526 6.599 24.479 104.619 55.223	217,529		\mathbb{L}
0			Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			38,104 38,823 38,047 36,476 46,595 53,060 54,518 69,739 158,635 151,428 151,428 151,428 151,428 151,428 151,428 151,428	Feb 2020	2,797 366 737 5,068 12,672 16,294	38104		Z
			Future Appts Where the Referral is Closed	No			236 246 279 283 342 290 229 229 229 223 223 223 223 223 223 223	Feb 2020	63 63	236		\sim



Local Quality Indicators - 2019/2020

Data Quality	Last review	PAF	Indicator	Measure	Trajectory Year Month	Previous Months Trend (From Sep 2018) S O N D J F M A M J J A S O N D J F	Data Period	Group M SS W P I PCCT CO	Month	Year To Date Trend
			Safeguarding Children Level 3 Training	=> %	85 85	88 86 84 86 86 86 83 85 87 84 88 87 85 84 88 86 88 90	Feb 2020		89.8	86.2
			WHO Safer Surgery - Audit - brief and debrief (% lists where complete) - SQPR	=> %	100 100	100 100 100 100 100 100 100 99 100 100 1	Feb 2020	99.7 100	99.8	MM 8.ee
			Morning Discharges (00:00 to 12:00) - SQPR	=> %	35 35	15 16 16 16 20 18 20 19 16 17 17 17 14 17 15 17 18 16	Feb 2020	12.4 13.9 20.4 26	15.6	16.7
			ED Diagnosis Coding (Mental Health CQUIN) - SQPR	=> %	85 85	84 91 92 91 92 91 92 91 91 92 92 75 68 63 61 55 5	Feb 2020		5.3	71.9
			CO Monitoring by 12+6 weeks of pregnancy - SQPR	=> %	90 90	74 76 82 85 67 83 86 97 94 94 93 93 90 91 92 90 93 94	Feb 2020		93.8	92.7
			Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload	=> %	100 100	97 95 91 93 93 95 95 93 97 97 97 97 96 93 91 93 95 -	Jan 2020		95.3	95.0
			Community Nursing - Pressure Ulcer Risk Assessment For New community patients at intial assessment	=> %	95 95	97 95 92 94 93 95 95 93 97 98 97 96 96 93 92 93 96 -	Jan 2020		95.6	95.1

Legend



Ir	dicators which comprise the External Performance Assessment Frameworks
	CQC Regulatory Framework and NHS Oversight Framework
а	Caring
b	Well-led
с	Effective
d	Safe
е	Responsive
f	Finance

	Groups
м	Medicine & Emergency Care
А	Surgery A
В	Surgery B
w	Women & Child Health
I	Imaging
PCCT	Primary Care, Community & Therapies
со	Corporate

		Data C	uality - Ki	temark		
1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Complete ness	Granularity	Assessment of Exec Director
•	•	•	•	•	•	•

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

Key		
-	Segment 1-6	Segment 7
•	Insufficient	As assessed by Executive Director
•	Sufficient	As assessed by Executive Director
•	Not Yet Assessed	Awaiting assessment by Executive Director

Section	Indicator	Measure	Trajectory Year Month	Previous Months Trend Data Directorate S O N D J F M A M J J A S O N D J F Month	Year To Date	Trend
Patient Safety - Inf Control	C. Difficile	<= No	30 3	• •	15	WV ~~v
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0 0	• •	2	
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	80 80	• •		$\sim\sim$
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	80 80	• •		$\sim \sim \sim$
Patient Safety - Harm Free Care	Number of DOLS raised	No		26 23 25 15 27 16 28 20 16 21 13 14 24 19 12 25 14 17 Feb 2020 5 12 0 17	195	Www
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No		26 23 25 15 27 16 28 20 16 21 13 14 24 19 12 25 14 17 Feb 2020 5 12 0 17	195	Www
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No		1 2 7 4 1 0 6 2 4 11 2 4 0 4 3 6 3 4 Feb 2020 1 3 0	43	m
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No		5 0 0 1 8 3 5 2 4 0 2 0 1 0 0 2 Feb 2020 1 1 1 0 2 2 1 1 0 2 1<	16	M
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No		16 13 11 8 13 12 13 11 9 9 8 8 13 12 7 16 7 10 Feb 2020 2 8 0 10	110	\mathcal{M}
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No		3 2 3 2 1 4 2 1 0 0 2 2 0 0 0 1	6	\sim
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No		0 0 0 12 0 4 0 2 0 0 0 0 1 0 Feb 2020 0		_h
Patient Safety - Harm Free Care	Falls	<= No	0 0	37 53 58 50 53 43 43 51 60 47 58 58 39 30 34 47 46 42 Feb 2020 7 35 - 42	512	\sim
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0 0	0 2 - 2 0 1 2 2 1 2 0 0 1 0 1 1 Feb 2020 0 1 0 1 1 Feb 2020 0 1 0 1 1 1 0	10	MM~
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0 0	3 7 15 28 20 16 11 14 11 16 14 12 15 12 3 14 14 17 Feb 2020 4 13 -	142	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0 95.0	Image: Structure Image: Structure <td< td=""><td></td><td>V</td></td<>		V
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0 100.0	• •		VV
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0 100.0	• •		W
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0 100.0	• •		V
Patient Safety - Harm Free Care	Never Events	<= No	0 0	• •	0	۸
Patient Safety - Harm Free Care	Medication Errors	<= No	0 0	0 0 2 0 0 0 0 0 0 1 0	1	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0 0	• •	42	\sim
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100 98	• •		
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%		11.5 10.9 11.7 12.8 12.8 14.2 12.1 11.9 12.7 12.3 13.0 12.9 12.6 13.3 14.1 13.3 13.8 - Jan 2020	Ī	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%		12.3 12.3 12.4 12.4 12.5 12.4 12.4 12.4 12.4 12.5 12.7 12.9 13.0 - Jan 2020	12.6	

Section	Indicator		Trajectory Year Month	} E	S O	NC	D l	FM		Months Tr		s c	D N 1	D J F	Data Period	Directorate EC AC S	SC SC	Month	Year To Date	
Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0 90.0		• •	• •	•	•	•		• •				Aug 2019	98.3		98.3	92.6	
Clinical Effect - Stroke & Card	Pts admitted to Acute Stroke Unit within 4 hrs (%)	=> %	90.0 90.0		•	• •		•	•		•				Aug 2019	80.0		80.0	63.4	~~
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0 50.0		• •	•		•	•		• •				Aug 2019	73.9		73.9	65.4	~~
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0 100.0		•	• •	•	•	•		•				Aug 2019	100.0		100.0	98.2	
Clinical Effect - Stroke & Card	Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85.0 85.0		• •	•		•	•		•				Aug 2019	60.0		60.0	79.3	\mathbb{M}
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		• •	•		•	•	•	• •				Aug 2019	75.0		75.0	91.9	
Clinical Effect - Stroke & Card	TIA (Low Risk) Treatment <7 days from receipt of referral (%)	=> %	75.0 75.0		•	•		•	•		• •				Aug 2019	92.3		92.3	87.8	
Clinical Effect - Stroke & Card	Primary Angioplasty (Door To Balloon Time 90 mins) (%)	=> %	80.0 80.0		• •	• •		•	•		• •	•			Feb 2020	91.7		91.7	93.9	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Clinical Effect - Stroke & Card	Primary Angioplasty (Call To Balloon Time 150 mins) (%)	=> %	80.0 80.0		•	•		•	•	•	• •	•		• • •	Feb 2020	91.7		91.7	89.4	~~~~
Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0 98.0		• •	•		•	•		• •	•		• • •	Feb 2020	100.0		100.0	100.0	
Clinical Effect - Cancer	2 weeks	=> %	93.0 93.0		• •	•		•	•	•	• •	•		• • -	Jan 2020	9	B.3	98.3		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0 96.0		•	•		•	•	•	•	•			Jan 2020	9	5.1	95.1		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0 85.0		•	•		•	•		•	•			Jan 2020	7	8.1	78.1		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			2 4	4 6.	.5 4.5	1.5 2.5	4 0.	52	5 4	2 3.	.5 1 3	5 3.5 -	Jan 2020	3	.50	3.50	29	\sim
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			0 0	0 2	2 0	1 1	1 0.	5 0	1.5 1.5	2 1	1 1 2	5 2.5 -	Jan 2020	2	.50	2.50	14	$\sim \sim$
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No		4	86 104	101 19	97 91	154 163	168 18	3 91 [.]	149 147	83 14	41 149 14	15 133 -	Jan 2020	1	33	133		m
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0.0 0.0		7 4	6 6	6 5	92	7 2	2 3	3 4	6 6	691	5 7 11	Feb 2020		1	11	73	mr
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0 0.0		0 0	0 -	1058	171 7	4 0	0 0	31 0	9 -			Sep 2019	9 0	0	9	44	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			25 30	29 3	60 14	24 27	33 4	7 26	31 24	21 3	37 31 2	9 40 36	Feb 2020	15 21	0	36	355	\sim
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			80 87	88 9	9 75	67 62	84 8	0 37	58 48	47 5	54 50 5	0 58 68	Feb 2020	31 37	0	68		~~

Section	Indicator	Measure	Traj Year	jectory Month	s	0	N	D	J	F		Previou A			rend J	A	S (N D	J	F	Data Period		irectora AC		Month] [Year To Date	
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non- clinical reasons	<= %	0.8	0.8		•	٠	٠	٠	٠	٠	•	•	•	•					٠	٠	Feb 2020	-	3.11	-	0.62			~M
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	Feb 2020	0.0	0.0	0.0	0		0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	0	1	3	1	0	0	0	0	0	0	0	0	5 3	3 1	2 5	14	5	Feb 2020	0.0	5.0	0.0	5		44	$\sim M$
Pt. Experience - Cancellations	Urgent Cancellations	No			0	0	0	0	0	0	0	0	0	0	0 (0	0 0) (D O	0	0	Feb 2020	0.00	0.00	0.00	0.00	ן נ	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0	95.0		•	٠	٠	٠	•	٠	٠	•	•	•					٠	٠	Feb 2020	72.9	73.2	Site S/C	73.1		75.3	\sim
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			2154	2721	2533	3349	3163	2318	1960	3104	2534	2570	2695	6467	2032		• •	0	0	Feb 2020	0	0	0	0] [15484	\sim
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0		•	٠	۲	٠	٠	٠	•	٠	•	•					٠		Feb 2020	0.0	0.0	Site S/C	0		6	<u></u>
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0	15.0			٠	٠	٠	٠	٠	•	•	•	•					۰	٠	Feb 2020	23.0	31.0	Site S/C	27		20	~
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0	60.0	•	۲	۲	۲	٠	٠	٠	•	•	•	•					۲	٠	Feb 2020	75.0	78.0	Site S/C	76		70	~~~~
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	•	۰	٠	٠	٠	۲		•	•	•	•					۲	۲	Feb 2020	7.7	7.7	Site S/C	7.7		6.9	\sim
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	•	۰	۲	۲	٠	۲	٠	•	•	•	•					۲	۲	Feb 2020	6.6	9.3	Site S/C	8.1		8.5	\sim
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	95	121	159	205	168	160	88	166	119	128	123	701	238 251	900	279 279	199	242	Feb 2020	172	70		242		2135	\sim
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	5	6	7	7	9	8	6	5	4	4	5 9	9	33 1	6 9	9 12	2 9	32	Feb 2020	8	24		32		138	\sim
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02	•	۰	۲	۲	٠	۲	•	•	•	•	•					۲	۲	Feb 2020	0.35	1.08		0.71		0.27	\sim
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No			4354	4622	4579	4872	4835	4372	4655	4814	4670	4555	4658	4486	4484 AGEC	0004	4/21	4848	4522	Feb 2020	2291	2231		4522] [51301	\sim
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			111	129	111	107	118	108	5 6	118	117	112	112	101	128	701	130	128	144	Feb 2020	89	36		144] [-	\sim
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			20.629	23.798	21.837	18.582	19.384	22.832	22.213	22.153		20.622	19.24	242.22	23.638 21 00F	V 30 1C	22.148	20.107	22.379	Feb 2020	30	15		22		22	\sim
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			94.66	117.36	110	84.96	99.93	119.14	106.62	106.27	119.09	94.77	91.52	44.EII	104.16	111 0	114.81	109.36	115.27	Feb 2020	87	21		115		-	\mathcal{M}
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0	90.0	•	•	٠	٠	٠	•	٠	•	٠	•	•					۲	-	Jan 2020	-	79.9	86.7	81.1			
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0	•	۰	۲	۲	۲	۲	٠	•	٠	•	•		•		•	۲	-	Jan 2020	-	53.4	78.9	67.9			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0	•	۰	۲	۲	٠		•	•	•	•	•					۰	-	Jan 2020	-	90.0	94.1	91.8			
RTT	RTT - Backlog	<= No	0	0	59	5 527	497	498	427	341	327	346	452 5	515	568 4	51 5	i25 48	33 55	59 57	9 601	-	Jan 2020	0	407	194	601			$\sim \sim $
RTT	Patients Waiting >52 weeks	<= No	0	0	0	1	2	1	0	0	1	0	1	4	1 7	7	0 0) (0 0	0	-	Jan 2020	0	0	0	0			\sim
RTT	Treatment Functions Underperforming	<= No	0	0	5	5	5	5	5	6	6	3	6	6	6 5	5	7 6	5 9	9 7	7	-	Jan 2020	0	4	3	7			-~~~\
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0		•	٠	٠	٠		٠	•	•	•	•		•			۰	٠	Feb 2020	_	0	0	0.00			M

Section	Indicator	Measure	Tra	jectory								Previ	ious Mor	nths T	rend						Data	Directorate	Ιſ	Month	Year To	
Section	Indicator	weasure	Year	Month	S	(D N	D	J	F	М	Α	М	J	J A	S	0	Ν	DJ	F	Period	EC AC SC		Month	Date	
Data Completeness	Open Referrals	No			72,254	200 12	75.665	76,701	77,842	78,753	78,479	78,128		56,434	54,224 52,647	51,785	52,607	52,552	54,131 55,024	55,223	Feb 2020	10,188 23,597 21,438		55223		7_
Data Completeness	Open Referrals without Future Activity/ Waiting List: Req	No			43,535	11 05 0	46.371	47,207	48,431	49,297	44,301	47,385	27,937	25,112	21,330 20,501	19,410	16,093	15,603	16,166 16,654	16,294	Feb 2020	6,289 7,428 2,577		16294		7
Workforce	PDRs - 12 month rolling (%)	=> %	95.0	95.0	۲			۰	-	-	٠	-	-	-		۲	۲	-		-	Oct 2019	63.26 43.48 -			50.0	MA ^
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	۲			۲	۲	۲	۲	٠	٠	•	• •	۰	۲	۲	• •	-	Jan 2020	91.89 97.01 -			94.9	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.00	3.00	5.1	9 5.	30 5.3	5 5.3	5 5.41	5.53	5.67	5.69	5.54	5.50	5.43 5.3	8 5.3	2 5.44	5.41	5.24 5.14	\$ 5.06	Feb 2020	4.87 5.20 -		5.06	5.37	\sim
Workforce	Sickness Absence - In month	<= No	3.00	3.00	5.8	5 5.	90 6.2	7 7.1	5 7.36	6.39	6.32	6.13	4.97	4.49	4.41 4.6	8 5.2	0 5.90	6.05	5.43 5.50	5.54	Feb 2020	4.87 6.01 -		5.54	5.30	\sim
Workforce	Sickness Absence - Long Term - In month	No			65	6	4 62	2 74	75	67	68	62	46	39	42 47	45	52	59	57 60	47	Feb 2020	16 30 0		47	556	\sim
Workforce	Sickness Absence - Short Term - In month	No			199	9 19	93 20	9 212	225	201	196	190	171	188	153 142	2 177	7 209	176	183 195	188	Feb 2020	78 110 0	[188	1972	$\sim \sim$
Workforce	Mandatory Training (%)	=> %	95.0	95.0	۲			۰	۲	۲	۲	۲	٠	•	• •	۲	٠	٠	• •	-	Jan 2020	84.12 86.44 -			87.6	

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Section	Indicator	Measure	Tra Year	jectory Month	S	0	N	D	J	FN			ths Tren		S	0 N	D	JF	Data Period	G	Direct S SS TI	orate H An O	Month	Year To Date	Trend
Patient Safety - Inf Control	C. Difficile	<= No	7	1	٠	٠	٠	٠	٠	•		٠	• •	٠	٠	• •	۰	•	Feb 2020	C	0 0	0 0	0	1	_/_/_
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	۲	•	٠	٠	٠	•	•	٠	• •	٠	٠	• •	۰	• •	Feb 2020	C	0 0	0 0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80	80	۲	٠	٠	۰	٠	•		٠	• •	٠	٠	• •	۰	•	Feb 2020	88.	86 78.19 -	0 58.62	83.1		\sim
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80	80	۲	۰	٠	٠	٠	•		٠	• •	٠	٠	• •	۲	•	Feb 2020	81.	32 92.55 -	100 91.67	85.3		\sim
Patient Safety - Harm Free Care	Number of DOLS raised	No			9	10	11	8	23	3 8	3 8	8	8 7	9	8	8 8	7	13 9	Feb 2020	g	0 0	0 0	9	93	- /
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			9	10	11	8	23	3 8	8 8	8	8 7	9	8	8 8	7	13 9	Feb 2020	g	0 0	0 0	9	93	- /
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			2	1	2	3	0	0 1	2	0	1 1	1	2	0 0	0	2 0	Feb 2020	0	0 0	0 0	0	9	11-11
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			1	0	0	0	0	3 1	0	2	1 0	0	0	0 0	1	0 1	Feb 2020	1	0 0	0 0	1	5	<u></u>
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			5	8	5	5	17	5 5	5 6	8	6 2	7	5	6 4	5	96	Feb 2020	6	0 0	0 0	6	64	\sim
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0	0	2	0	1	0 1	0	1	1 0	0	0	0 1	0	0 1	Feb 2020	1	0 0	0 0	1	4	M
Patient Safety - Harm Free Care	Falls	<= No	0	0	10	17	12	9	11	11 1	2 11	8	12 6	9	16	9 11	13	20 8	Feb 2020	з	2 1	- 2	8	123	\sim
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0	1	0	-	0	0 0	0 0	0	0 0	0	0	1 0	0	0 0	Feb 2020	C	0 0	0 0	0	1	Λ
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	5	3	7	9	9	7 7	8	8	7 6	8	8	7 4	6	13 9	Feb 2020	1	6 -	2 -	9	84	$\sim\sim$
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	۰	۰	٠	۰	٠	•		۰	• •	۰	٠	• .	۲	• •	Feb 2020	95.	89 99.13 -	99.24 93.57	96.2		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	۲	٠	٠	۰	٠	•		-	• •	٠	-	•	۰	•	Feb 2020	10	0 100 10	0 100 100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	۰	۰	٠	٠	٠	•		٠	• •	۰	۲	• •	۲	• •	Feb 2020	-	- 10	0 - 100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	۲	٠	٠	٠	٠	•		٠	• •	٠	٠	•	۲	• •	Feb 2020	-	- 10	0 - 100	100.0		V
Patient Safety - Harm Free Care	Never Events	<= No	0	0	0	1	0	1	0	0 () 0	1	0 1	0	0	0 0	0	0 0	Feb 2020	C	0 0	0 0	0	2	M_M
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 1	Feb 2020	1	0 0	0 0	1	1	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	۲	۰	٠	٠	٠	•		٠	• •	٠	٠	•	٠	• •	Feb 2020	1	0 0	0 0	1	12	mM
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98.0	۲	٠	٠	۰	۲	•	•	٠	•	۲	٠	• •	۰		Dec 2019	10	0 100 -	100 -	100.0		\sim
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			6.3	5.4	6.2	7.2	4.9	6.3 6.	4 5.6	6.0	4.8 4.8	4.5	4.6	3.7 4.1	3.7	3.6 -	Jan 2020				3.6		m
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			6.3	6.24	6.31	6.39	6.29	6.22 6.	.3 6.16	6.18	6.07 5.8	4 5.63	5.48	5.32 5.13	3 4.87	4.75 -	Jan 2020					5.5	

Surgical Services Group

Section	Indicator	Measure		ectory Month	S	0	N	D	J	F				IS Trend		S	0	N	DJ	F	Data Period	GS	Direct SS T	orate H An C	-	Month	Year To Date	
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	۰	٠	٠	۲	•	•	•				٠	٠	•	•	•	-	Jan 2020	97.8				97.79		
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0	٠	٠	۰	٠	•	•	•				٠	٠	•	•	•	-	Jan 2020	95.5				95.48		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	۲	٠	٠	٠	٠	•	•				۲	۲	•	•		-	Jan 2020	98.8				98.77		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	٠	۰	۰	۰	٠	•	•				۰	۰	•	•		-	Jan 2020	83.1				83.1		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			4	3	5	3	4	4	6	5	4 4	3	6	5	4	4	6 6	-	Jan 2020	-				6	46	\sim
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			1	2	1	1	1	1	3	1	4 1	1	3	1	1	4	34	-	Jan 2020	4	- C			4	20	~~M
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No			161	137	185	136	123	116	175	131	111	105	168	167	137	202	204	•	Jan 2020	204	- 0			204		\sim
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	Feb 2020	0	- 0			0	0	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	-	65	58	33 1	18 1	11 9	13	7	7	-	-		-	Sep 2019	0	0 0	7 0		7	65	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			24	25	19	12	11	19	18 1	18 1	16 18	3 22	15	22	42	28 1	9 26	32	Feb 2020	14	6 C) 1 1	1	32	258	$\sim\sim$
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			79	74	71	62	46	52	41 3	34 2	26 30	38	26	33	41	32 1	9 30	41	Feb 2020	22	7 1	6 5		41		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non- clinical reasons	<= %	0.8	0.8	۲	٠	٠	٠	٠	•	•				٠	۲	•	•		٠	Feb 2020	2.55	2.86 -	0.76 1.	2	2.03		~~~W
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	Feb 2020	0	0 0	0 0		0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	21	22	22	20	22	27	26	38 3	31 32	2 39	27	42	55	32 5	54 35	40	Feb 2020	20	11 0	1 8		40	425	
Pt. Experience - Cancellations	Urgent Cancellations	<= No	0	0	0	0	0	0	0	0	0	0	0 0	0	0	0	0	0	0 0	0	Feb 2020	0	0 0	0 0		0	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	=> %	95.0	95.0	99.2	99.1	99.4	99.7	99.4	98.6	99.7 9	8.8 98	8.7 95	.9 95.7	98.3	93.2	90.3 9	93.3 96	6.4 95.8	98.0	Feb 2020	-		- 97.	97	-	-	\sim
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0	89	69	84	82	77	64	56 1	45 1	02 94	4 148	144	165	88	72 4	11 48	21	Feb 2020	0	0 0	0 2	1	21	1068	~~~
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	Feb 2020	-		- 0		-	-	
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	5.4	5.1	2.2	4.4	2.3	1.7	1.0 2	2.1 2	2.1 1.	7 2.6	2.2	6.3	5.2	7.2 9	.9 8.3	4.1	Feb 2020	-		- 4.0)7	-	-	\sim
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	4.4	3.1	4.0	3.0	3.3	3.6	4.8 4	1.8 4	1.5 5.	5 6.7	3.7	3.5	6.4	5.9 0	.7 2.1	2.7	Feb 2020	-		- 2.7	'1	-	-	m
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			- 8		0	0	
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	21	9	4	11	12	5	19	7 1	14 6	3	10	7	12	12	6 7	6	Feb 2020	2	4.07 -	- o c		6.07	90	h
Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions	=> %	85.0	85.0	۲	۲	۲	۲	٠	•	•			•	٠	٠	•	•		٠	Feb 2020					87.9	76.9	$\sim \sim \sim$
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			14	23	16	19	19	17	22 2	21 1	13 10	D 15	16	23	21	17 2	25 24	28	Feb 2020	14	10 0	0 4		28	-	\sim
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			15	8	3	10	11	5	15	6 1	12 5	3	8	6	10	9	5 7	6	Feb 2020	3.58	9.24 -	0 0		5.74	7	Wm
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			21	9	4	11	12	5	19	7 1	14 6	3	10	7	12	12	67	6	Feb 2020	2	4.07 -	0 0		6.07	-	Mm

Surgical Services Group

Section	Indicator	Measure	Tra Year	jectory Month	S	s	0	N	D,	JF	- N	Pre 1 A		Months J		Α	s	0	NC	D J F	Data Period	GS	Directo SS TH	arate An O	Month	Year To Date	
RTT	RTT - Admitted Care (18-weeks) (%)	=> %	90.0	90.0	•			•				•	۲	۲	٠	۲	٠	•		• • -	Jan 2020	84.	9 81.0 -	- 74.4	80.3		/
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0	•			•				•	۲	۲	۲	۲	٠	•		• • -	Jan 2020	88.	4 93.4 -	- 95.3	92.7		
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0				•				•	۰	۲	۲	۲	٠	•			Jan 2020	93.	8 92.5 -	- 89.5	91.8		
RTT	RTT - Backlog	<= No	0	0	1371	1371	1354	1340	1417	1284	1316	1315	1415	1630	1722	1711	1668	1690	1573	- 1382	Jan 2020	46	6 186 0	0 730	1382		\sim
RTT	Patients Waiting >52 weeks	<= No	0	0	3	3	3	1	0	2 3	3 5	0	9	19	7	5	0	0	1 (0 1 -	Jan 2020	0	0 0	0 1	1		~~^.·
RTT	Treatment Functions Underperforming	<= No	0	0	1	15	13	12	13 1	14 1	5 14	4 13	14	15	16	16	13	12 1	13 1	2 11 -	Jan 2020	7	2 0	0 2	11		\sim
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0		•		•					۲	۰	٠	٠	٠	•		• • •	Feb 2020	0.			0.14		M.
Data Completeness	Open Referrals	No			162,234	162,234	165,051	166,561	168.695	170.068	172,210	162,783	107,915	108,313	106,808	107,224	104,317	105,170	105,645	104,619 104,786	Feb 2020	31,685	0 13,835	54,505 4,594	104619		1_
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requi	No			86,510	86,510	85,120	86,561	90,470 88.226	90.478	78,799	81,553	25,583	24,862	20,182	20,403	16,396	12,243	12,040	12,672 13,069	Feb 2020	4,527	0 2,924	3,855	12672		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	•		-	. 0			•	-	-	-	-	-	٠	•			Oct 2019	88.	3 89.4 93.0	96.5 81.8		89.2	V VV
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	•			•				•	۰	۰	٠	۲	•	•		• • -	Jan 2020	97.9	96 92.68 -	92.59 94.83		93.9	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.0	3.0	4.6	.65 4	.67 4	.74 4	.83 4.	.83 4.8	31 4.8	32 4.84	4.90	4.97	5.01	4.96	4.92	5.09 5.	.12 5.	18 5.23 5.26	Feb 2020	4.8	8 6.5 8.0	4.5 2.6	5.3	5.1	\sim
Workforce	Sickness Absence - In Month	<= %	3.0	3.0	4.9	.99 5	.00 5	i.27 5	.48 5.	.64 5.0	01 5.0	6 4.85	5 4.54	4 5.34	4.87	4.33	4.37	6.30 6.	.27 5.9	90 5.93 5.53	Feb 2020	4.8	3 4.8 10.9	5 4.7 <mark>2.9</mark>	5.5	5.3	~~~~
Workforce	Sickness Absence - Long Term - In Month	No			47	47	47	52	49 5	52 4	1 4	7 42	38	46	43	44	39	47 5	58 5	5 63 50	Feb 2020	14.	0 8.0 17.0	9.0 0.0	50	525	~~~^
Workforce	Sickness Absence - Short Term - In Month	No			15	50 1	1 66 1	158 1	62 18	83 15	54 14	3 144	142	141	133	93	133	181 1	74 17	71 118 148	Feb 2020	44.	0 34.0 35.0	33.0 0.0	148	1578	\sim
Workforce	Mandatory Training	=> %	95.0	95.0	•			•				•	۲	۲	٠	۲	٠	•		• • .	Jan 2020	87.	2 88.0 93.1	92.8 90.6		91.3	

Section	Indicator	Measure Ye	Trajectory ear Month	s	0	N	D	J	F			Months	s Trend		S	0	N	DJF	-	Data Period	Directorate G M P	Month	Year To Date	Trend
	· 	· ·									-	-			1				_					
Patient Safety - Inf Control	C. Difficile	<= No (0 0	۰	۰	•	۲	•					۰	۰	۰	۲	•		<u>'</u>	Feb 2020	0 0 0	0	0	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No (0 0	٠	•	•	•	•		•			٠	٠	٠	٠	•	• • •)	Feb 2020	0 0 0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> % 80	.00 80.00	•	٠	•	•	•				•	٠	۲	٠	٠	•			Feb 2020	74	73.7		\mathcal{M}
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> % 80	.00 80.00	٠	٠	٠	•	•					٠	۲	٠	٠	•)	Feb 2020	- 95	95.0		· Mu
Patient Safety - Harm Free Care	Falls	<= No (0 0	1	4	0	0	2	1	1 (0 0	1	0	1	-	1	-	- 1 1		Feb 2020	- 1 -	1	5	h
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No (0 0	0	0	0	-	0	1	0 0	0 0	0	0	0	0	0	0	0 0 0		Feb 2020	0 0 0	0	0	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= %	0 0	0	0	0	2	0	0	2	4 0	2	-	-	-	-	-	2 - 2		Feb 2020	1	1	5	N
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> % 95	5.0 95.0	•	•	•	•	•					۰	٠	٠	٠	- (• • •		Feb 2020	97 91	92.7		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> % 10	0.0 100.0		٠	٠	•	•				٠	٠	٠	-	٠	•			Feb 2020	100 100	100.0		VV
	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> % 10	0.0 100.0	٠	٠	•	-	. (-		-	-	-	-	٠	-			Feb 2020		-		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> % 10	0.0 100.0	•	٠	٠	-	. (-		-	-	-	-	٠	-			Feb 2020		-		W_
Patient Safety - Harm Free Care	Never Events	<= No (0 0	٠	•		•	•				•	٠	٠	٠	٠	•			Feb 2020	0 0 0	0	1	
Patient Safety - Harm Free Care	Medication Errors	<= No (0 0	٠	•	•	•	•					٠	٠	٠	٠	•)	Feb 2020	0 0 0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No (0 0	۲	٠	•	•	•				•	۲	٠	۲	٠	•)	Feb 2020	0 0 0	0	7	$\sim \sim$

Section	Indicator	Measure	Traje Year	ectory Month	S	0	N	D	J	F		Previou: A			d A	S	0	N D J F	Data Period]	Directorate G M P	Month	Year To Date	
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0	۲	۲	٠	۲	٠	٠	۲	•		•	۲	۲	۲	• • • •	Feb 2020	þ	30	29.7	27.5	\mathcal{M}
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%			9	9	9	10	8	11	9	9	10 1	1 11	10	11	12	10 11 12 11	Feb 2020	þ	11	10.9	10.6	~~~~
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%			19	16	17	16	14	17	17	15	16 1	8 20	17	17	16	14 17 17 19	Feb 2020	D	19	18.8	17.0	$\sim\sim$
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0	٠	٠	٠	٠	٠	•	•	•		•	٠	٠	٠	• • • •	Feb 2020	D	0	0	1	
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4	۰	٠	٠	٠	٠	•	•	•		•	۲	٠	٠	• • • •	Feb 2020	þ	3	3	31	\sim
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0	٠	٠	٠	٠	٠	٠	•	•			٠	٠	٠	• • • •	Feb 2020	D	2.3	2.3	1.4	\sim
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0	۰	۰	٠	٠	٠	•	•	•			٠	٠	٠	• • . •	Feb 2020	þ	0	0.0		M
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			0.00	7.86	2.23	4.57	2.30	2.51	4.64	0.00 6	25 4.4	45 6.53	1 8.93	2.24	4.80	2.54 4.78 - 0.0	Feb 2020	D	0	0.00	4.19	mm
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			0.00	0.00	2.23	0.00	0.00	2.51	0.00	0.00 2	08 0.0	0.00	0.00	0.00	2.40	5.09 2.39 - 0.0	Feb 2020	þ	0	0.00	1.16	Λ
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0	۰	٠	٠	٠	٠	•	•	•			٠	٠	٠	• • • •	Feb 2020	D	91	91.4		M
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0	٠	٠	٠	٠	٠	•	•	•		•	٠	٠	٠	• • • •	Feb 2020	þ	165	164.5		\sim
Patient Safety - Obstetrics	Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0	۲	۲	۲	٠	٠	٠	•	•		•	۲	٠	۲	• • • •	Feb 2020	D	80	79.9		\sim
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	%			1.2	1.7	2.6	1.2	2.1	0.6	0.5	1.8 2	.2 1.	4 0.9	0.8	0.3	0.3	1.2 0.5 1.1 0.0	Feb 2020	D	0	0.0		$\mathcal{M}_{\mathcal{M}}$
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 085 or 086 Not 0864) (%)	%			1.2	1.7	2.6	1.2	2.1	0.6	0.5	0.9 1	.9 1.	0 0.9	0.8	0.3	0.3	1.2 0.5 0.8 0.0	Feb 2020	D	0	0.0		m
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	%			0.3	0.8	1.5	0.4	1.9	0.0	0.0	0.0	.6 0.	7 0.6	0.0	0.0	0.0	0.3 0.0 0.5 0.0	Feb 2020	D	0	0.0		M
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0	N/A	•	۲	N/A	٠	N/A	N/A	•	I/A N/	A N/A	N/A	٠	٠	N/A 🔍	Dec 2019	9	100	100.0		₩_₩
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			4.2	4.4	5.1	6.3	4.6	4.8	3.9	4.3	.0 3.	7 9.2	9.4	6.2	7.9	7.1 7.5 7.5 -	Jan 2020	D		7.5		\sim
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			4.6	4.6	4.6	4.7	4.7	4.7	4.7	4.6	.6 4.	5 4.6	4.8	4.9	5.0	5.1 5.0 5.1 -	Jan 2020	D			4.8	
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	٠	٠	٠	٠	٠		•	•		•	٠	٠	٠	• • • .	Jan 2020	D	98 -	98.5		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	٠	۲	٠	٠	٠	٠	•	•			۲	٠	٠	• • • .	Jan 2020	D	100	100.0		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	۲	٠	٠	#DIV/0!	٠	٠	٠	•		•	۲	۲	۲	• • • -	Jan 2020	D	76	76.5		W
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			1.5	i 0.5	1.5	1.5	2.5	3	3	0.5	2 1.	.5 2	1	3	3.5	1.5 2.5 2 -	Jan 2020	D	2 - 0	2	19.5	rm
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			0	0	0	0	1	1	3	1	0 0	0 0.5	ō 0.5	0	1	0 1 0.5 -	Jan 2020	D	0.5 - 0	0.5	4.5	_ / _
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No			72	100	86	84	137	177	209	241	97 8	5 196	6 109	96	171	104 148 169 -	Jan 2020)	169 - 0	169		M
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 0	Feb 2020	D	0 - 0	0	0	

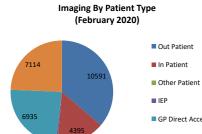
Section	Indicator	Measure	Trajectory Year Mont	ì	S	0	1 (N D		JF	М		vious M			Α	S	0	N [[D J F	Data Period	Directo G M		Month		ar To ate	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0 0		0	0) () -	(0 0	0	0	0	0	0	0	0	-	- -		Sep 2019	0		0		0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			4	8	g	6	٤	3 10	12	2 5	18	12	23	4	17	19 1	LO 6	5 11 5	Feb 2020	2 3	0	5	1	30	\sim
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			20) 24	1 2	0 17	1	3 14	18	3 17	26	19	23	6	22	25 1	12 1	3 13 14	Feb 2020	0 0	0	14			M
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non- clinical reasons	<= %	0.8 0.8		٠	•				•	۲	•	۲	۲	۲	۲	٠	•			Feb 2020	8.9		6.0			\mathcal{M}
Pt. Experience - Cancellations	28 day breaches	<= No	0 0		0	0		0 0	(0 0	1	0	0	0	0	0	0	0	0 0	0 0	Feb 2020	0		0		0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0 0		1	2		6	1	19	5	6	7	3	5	5	10	5	8 6	6 7 13	Feb 2020	13		13		75	M
Pt. Experience - Cancellations	Urgent Cancellations	No			0	0		0 0	(0 0	0	0	0	0	0	0	0	0	0 0	0 0 0	Feb 2020	0 -	0	0		0	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			39	9 17	76	5 61	3	4 11	17	7 46	6 20	10	13	7	20	0	0 0	0 0	Feb 2020	0 0	0	0	1	16	M_{-}
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			3	8	. 4	4 0	(0 0	0	0	0	1	1	1	1	3	1 1	1 1 1	Feb 2020	1 0	0	1		-	∕~
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			0	0	1	0 0	(0 0	2	1	4	3	7	1	0	4 2	23 7	7 0 16	Feb 2020	16 -	0	16		7	n
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			0	0	1	0	(0 0	0	0	0	0	1	0	0	0	5 1	0 2	Feb 2020	2.5 -	0	2		-	\sim
RTT	RTT - Admittted Care (18-weeks)	=> %	90.0 90.0		۲			•		•	۲	•	۲	۲	۲	۲	٠	•			Jan 2020	70		70.1			J
RTT	RTT - Non Admittted Care (18-weeks)	=> %	95.0 95.0		۰	•		•		•	٠	•	۲	۲	۲	۲	٠	•		• • .	Jan 2020	89		89.0			\neg
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0 92.0		۰	•				•	٠		٠	۰	٠	۲	•	•		• • -	Jan 2020	90		89.6			
RTT	RTT - Backlog	<= No	0 0		14	6 17	6 19	0 19	9 17	4 169	143	2 14	6 162	201	231	187	141	142 1	69 19	91 225 -	Jan 2020	225		225			$\sim \gamma$
RTT	Patients Waiting >52 weeks	<= No	0 0		0	1	C	0	C	0	0	0	0	0	0	1	0	0	0 0	0 -	Jan 2020	0		0			<u>_\</u>
RTT	Treatment Functions Underperforming	<= No	0 0		2	3	3	3	3	3	2	2	2	3	3	3	2	2	3 3	3 3 -	Jan 2020	3		3			\sim
RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1 0.1		۰					•	٠		٠	۰	٠	٠	٠	•		• • •	Feb 2020	-		-			

Section	Indicator	Measure	Trajecto Year M	ory Ionth	S	0	N	D	J	F	F M	Previou A	IS Mon M	ths Tre	nd J A	S	0	N	DJF	Data Period	Directorate G M P	м	onth	Year To Date	
Data Completeness	Open Referrals	No			42,951	44,208	44,908	45,494	46,043	46,262	31,884	27,992	24,316	23,359	22,571	22,333	22,687	22,895	24,479 24,099 23,733	Feb 2020	7,867 10,446 6,166	24	4479		7_
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			26,984	27,469	28,290	28,789	29,439	29,926	9,906	10,961	7,086	6,248	5,518 5,887	5,139	4,857	4,788	5,068 5,048 5,150	Feb 2020	303 3,410 1,355	5	068		1_
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	۲	-	-	٠	-	-	٠	-	-	-		۰	٠	-		Oct 2019	87 82 94			82.4	V VV
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	۲	۲	٠	٠	٠	٠	٠	٠				٠	٠		• • .	Jan 2020	93 82 96			95.9	
Workforce	Sickness Absence - 12 month rolling	<= %	3.0	3.0	4.61	4.66	4.67	4.68	4.77	4.84	4.96	5.06	5.26 5	.35 5.	34 5.3	8 5.47	5.69	5.72 5	.79 5.71 5.57	Feb 2020	3.8 6.5 5		5.6	5.5	
Workforce	Sickness Absence - in month	<= %	3.0	3.0	4.58	4.85	4.69	4.86	6.14	5.70	5.55	5.35	5.06 6	.21 5.	59 4.9	6 5.24	6.00	6.56 6	.09 5.26 3.92	Feb 2020	3 4.1 4		3.9	5.6	\sim
Workforce	Sickness Absence - Long Term - in month	No			37	30	35	31	48	41	41	39	45	47 4	0 46	6 41	44	45	52 45 31	Feb 2020	3 14 14	3	31.0	475.0	m.
Workforce	Sickness Absence - Short Term - in month	No			97	134	120	117	135	115	102	97	78	70 8	7 60	98	98	106	103 101 94	Feb 2020	9 51 34	9	94.0	992.0	\sim
Workforce	Mandatory Training	=> %	95.0	95.0	۲	۲	٠	٠	۲	٠	٠	٠	•			۲	۰	٠	••.	Jan 2020	88 86 95			90.6	

Section	Indicator	Measure	Traj	ectory Month						гет		Previous A M				•	0.1.1			Ξ	Data Period	Direct G N		Month	Year To Date	
			rear	Month					J		ini i	~ "				3					Fenou				Date	
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			:	> 984	4>	>	934	>	>	978>	>	1045	>	>	928:	>	>	>	Oct 2019		928	928	2951	
WCH Group Only	HV (C2) - % of births that receive a face to face new birth visit by a HV =<14 days $% \left(1+\frac{1}{2}\right) =0$	=> %	95.0	95.0	:	> 91.4	4>	>	90	>	>	91.4>	>	92.4	>	>	90.9:	>	>>	>	Oct 2019		91	90.95	91.55	
WCH Group Only	$\rm HV$ (C3) - % of births that receive a face to face new birth visit by a $\rm HV$ >days	%			;	> 6.6	2>	>	8.21	->	>	6.09>	>	7.64	>	>	7.38:	>	·>>	>	Oct 2019		7.4	7.38	7.06	MM/
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	;	> 96.	1>	>	96.1	>	>	96.4	>	96.1	>	>	97.3:	>	>	>	Oct 2019		97	97.3	96.62	
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			;	> 96.9	9>	>	96.7	>	>	96.7>	>	96	>	>	95.1:	>	>>	>	Oct 2019		95	95.05	95.89	
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	;	> 94.0	6>	>	94.1	>	>	94.8>	>	95.8	>	>	96.6:	>	>	>	Oct 2019		97	96.63	95.72	
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			:	> 94.2	2>	>	93.7	>	>	94.5>	>	98.6	>	>	98.4:	>	>	>	Oct 2019		98	98.39	97.06	
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards witha HV presence	=> No	100	100	:	>>	>	>	>	>	>	>>	>	4	>	>	>;	>	>	>	Jul 2019		4	4	4	
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	:	> 99.	7>	>	99.5	>	>	99.9>	>	99.9	>	>	99.7:	>	·>>	>	Oct 2019		100	99.72	99.83	
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100		> 99.0	6>	>	99.5	>	>	99.8>	>	99.9	>	>	99.7:	>	»>	>	Oct 2019		100	99.72	99.8	
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			:	> 41.0	6>	>	41.6	>	>	40.3>	>	44.1	>	>	45.1:	>	»>	>	Oct 2019		45	45.15	43.17	
WCH Group Only	HV - % HV staff who have completed mandatory training at L1,2 or 3 in child protection in last 3 years	=> %	95.0	95.0	:	>>	>	>	>	>	>	>>	>	>	>	>	>;	>	»>	>	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			;	> 106	9>	>	99.5	>	>	99.4>	>	1071	>	>	1125:	>	·>>	>	Oct 2019		###	1125	2295.4	M
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 10 - 14 day developmental check	=> %	100	100	:	>>	>	>	>	>	>	>;	>	99.4	>	>	>;	>	» ->	>	Jul 2019		99	99.44	99.44	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 6 - 8 week developmental check	No			:	> 23	>	>	2.6	>	>	1.8>	>	0.21	>	>	21:	>	»>	>	Oct 2019		21	21	23.01	L_L
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	:	>>	>	>	>	>	>	>>	>	2.2	>	>	>;	>	»>	>	Jul 2019		2.2	2.2	2.2	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	No			:	> 26	>	>	3.3	>	>	2.2>	>	3.6	>	>	28:	>	»>	>	Oct 2019		28	28	33.8	hul
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	;	>>	>	>	>	>	>	>;	>	3.6	>	>	>;	>	>	>	Jul 2019		3.6	3.6	3.6	
WCH Group Only	HV - movers into provider <1 year of age to be checked =<14 d following notification to HV service	No			:	> 192	2>	>	61.9	>	>	73.5>	>	255	>	>	196:	>	»>	>	Oct 2019		196	196	524.5	M
WCH Group Only	HV - all untested babies <1 year of age will be offered NBBS screening & results to HV.	Y/N			:	>>	>	>	>	>	>	>>	>	>	>	>	>;	>	>	>	Jan-00					

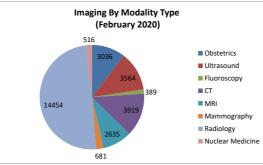
Imaging Group

Section	Indicator	Measure	Trajectory Year Month	Previous Months Trend S O N D J F M A M J J A S O N D J F	Data Period	Directorate DR IR NM BS	Month	Year To Date	Trend
Patient Safety - Harm Free Care	Never Events	<= No	0 0		Feb 2020	0 0 0 0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No	0 0		Feb 2020	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 1.0 1.0 - 2.0 2.0 3.0 2.0 - 1.0 1.0 4.0 1.0 1.0 -	Jan 2020		5.88	-	$\sim \sim \sim$
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	=> %	0 0	15.0 15.0 15.0 15.0 15.0 15.0 14.0 14.0 13.0 16.0 17.0 16.0 16.0 15.0 18.0 18.0 18.0 -	Jan 2020			5.47	/
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0 50.0	• •	Aug 2019	73.9	73.91	65.44	
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0 100.00		Aug 2019	100	100	98.16	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		4 0 2 2 2 0 2 0 6 5 3 2 0 1 3 3 5 1	Feb 2020	0 1 0 0	1	29	$\nabla \nabla $
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		9 3 5 5 4 4 4 3 6 11 6 3 1 2 3 2 5 2	Feb 2020	1 1 0 0	2		hackson hard a matrix a matr
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0 1.0		Feb 2020	0.03	0.03		M.
Data Completeness	Open Referrals	No		526 516 396 396 338 336 336 336 336 336 336 336 336 33	Feb 2020	0 0 22 504	526		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		366 357 321 304 225 224 224 223 225 224 224 224 223 225 224 224 223 201 178 865 5865 865 865 865 865 865	Feb 2020	0 0 11 355	366		7_
Workforce	PDRs - 12 month rolling	=> %	95.0 95.0	$\bullet \cdot \bullet \bullet \bullet \bullet \bullet \bullet \bullet \bullet $	Oct 2019	79.8 100 88.9 97.9		72.8	<u>۸۸ ۸</u>
Workforce	Medical Appraisal and Revalidation	=> %	95.0 95.0		Jan 2020	96.2 - 100 -		97.6	
Workforce	Sickness Absence - 12 month rolling	<= %	3.00 3.00	4.09 4.27 4.55 4.56 4.60 4.59 4.59 4.66 4.88 4.71 4.62 4.68 4.60 4.52 4.24 4.07 4.03 3.99	Feb 2020	4.6 2.2 1.8 3.2	3.99	4.45	$\sim\sim$
Workforce	Sickness Absence - in month	<= %	3.00 3.00	5.48 5.41 7.08 5.75 4.30 4.14 4.12 4.56 5.06 3.86 3.53 4.82 4.46 4.20 4.12 3.57 3.64 3.57	Feb 2020	3.9 1.1 0.0 4.4	3.57	4.12	\sim
Workforce	Sickness Absence - Long Term - in month	No		10 11 14 14 10 7 6 10 10 7 5 8 9 10 7 7 5 5	Feb 2020	2 0 0 1	5	83	\sim
Workforce	Sickness Absence - Short Term - in month	No		39 37 31 39 27 30 34 19 26 24 19 24 33 25 33 44 34	Feb 2020	14 1 0 10	34	315	\sim
Workforce	Mandatory Training	=> %	95.0 95.0		Jan 2020	92.9 94.6 93.3 92.7	93.0	93.6	1
Workforce	Imaging - Total Scans	No		29,181 32,388 28,573 31,286 29,463 32,665 29,982 33,2017 33,0,262 - - - -	Feb 2020		29181	334552	
Board KPI	Imaging - Inpatient Turnaround Time <=24hr	=> %	90.0 90.0 65 65 69 67 77 77 79 82	Feb 2020		82.1	72.1	
Board KPI	Imaging - Urgent Other(GP 5) Turnround Time <=5d	=> %	90.0 90.0 76 69 65 66 70 71 77 75 72 74	Feb 2020		73.8	71.5	
Board KPI	Imaging - All Imaging Work Reported in less than 4 weeks (request to report)	=> %	95.0 95.0	- - - - - - - - 88 90 90 88 92	Feb 2020		91.8	89.7	/



156_3

GP Direct Access Patient
A & E Attender



Primary Care, Community & Therapies Group

Section	Indicator	Measure Tra Year	jectory Month	Previous Months Trend	A S O N D J F	Data Period	Directorate	Month	Year To Date	Trend
Patient Safety - Inf Control	MRSA Screening - Elective	=> % 80.0	80.0	• • • • • • • • •	• • • • • • •	Feb 2020	0	0		
Patient Safety - Harm Free Care	Number of DOLS raised	No		18 4 6 6 6 3 4 6 5 6	13 5 7 6 4 6 5	Feb 2020	0 5 0 - 0	5	67	1~~~
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No		18 4 6 6 6 3 4 6 5 6	13 5 7 6 4 6 5	Feb 2020	0 5 0 - 0	5	67	Lum
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No		3 0 1 1 0 1 1 3 3	6 0 0 0 1 1 3	Feb 2020	0 3 0 - 0	3	19	$\sim \sim \sim$
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No		0 0 0 0 4 1 0 1 2 0	2 0 0 1 1 0 2	Feb 2020	0 2 0 - 0	2	9	\mathbf{M}
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No		8 2 3 0 4 1 2 5 2 1	8 2 4 2 1 2 2	Feb 2020	0 2 0 - 0	2	31	huh
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No		0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	Feb 2020	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 4 0 0 1 0	0 0 0 0 0 0 0	Feb 2020	0 0 0 - 0	0	1	
Patient Safety - Harm Free Care	Falls	<= No 0	0	25 40 31 21 28 22 33 21 29 22	24 23 28 26 28 29 32	Feb 2020	1 30 1	32	295	Mm~
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No 0	0	4 1 - 0 1 0 2 1 1 0	0 0 3 1 0 0 0	Feb 2020	0 0 0 - 0	0	8	h
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No 0	0	6 8 8 10 20 8 26 18 8 12	16 20 8 14 22 18 24	Feb 2020	- 10 2	12	93	<u></u>
Patient Safety - Harm Free Care	Pressure Ulcer DN Caseload Acquired - Total	<= No 0	0	7 37 32 45 34 34 36 16 24 29	34 27 31 18 24 25 25	Feb 2020	25	25	289	\mathcal{M}
Patient Safety - Harm Free Care	Never Events	<= No 0	0		• • • • • • •	Feb 2020	0 0 0 - 0	0	0	
Patient Safety - Harm Free Care	Medication Errors	<= No 0	0		• • • • • • •	Feb 2020	0 0 0 - 0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No 0	0	• • • • • • • • •	• • • • • • •	Feb 2020	0 1 4 - 0	5	61	\sim
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No 0	0	0 0 - 0 0 0 0 0 0	0 0	Sep 2019	0 0 0 - 0	0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		5 10 5 9 6 7 14 4 13 8	6 9 14 8 5 11 4	Feb 2020	0 1 1 - 2	4	96	\mathcal{M}
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		13 16 16 19 23 16 22 5 20 17	7 14 15 13 7 0 11	Feb 2020	1 3 1 - 6	11		~~~~

Primary Care, Community & Therapies Group

Section	Indicator	Measure		jectory Month		S O N D	JF	Previ M A	ious Months M J	rend J A	S O	N	D J F	Data Period	Directorate AT IB IC CT CM	Month	Year To Date	
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	•	• •		•			• •	-		Oct 2019	97.2 88.3 97 - 59		88.0	۸۸ ۸۱
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	4	4.08 4.15 4.14 4.14	4.17 4.25	4.27 4.30	4.37 4.40	4.39 4.38	4.33 4.36	4.23 4	.24 4.19 4.17	Feb 2020	2.98 4.57 4.6 - 4.4	4.17	4.3	\sim
Workforce	Sickness Absence - in month	<= %	3.00	3.00	4	4.17 4.79 4.91 4.69	5.33 5.21	4.06 3.79	4.08 3.67	4.08 3.84	3.57 4.13	4.07 4	.78 4.82 4.82	Feb 2020	2.62 4.86 6.4 - 5.3	4.82	4.16	\sim
Workforce	Sickness Absence - Long Term - in month	No			:	33 34 42 35	37 29	33 25	31 25	25 26	23 27	23 3	32 30 31	Feb 2020	3	31	298	mar
Workforce	Sickness Absence - Short Term - in month	No			9	97 118 112 104	163 147	102 101	79 86	94 78	93 135	121 1	21 140 114	Feb 2020	25 37 37 0 15	114	1162	\sim
Workforce	Mandatory Training	=> %	95.0	95.0		• • • •	•	•	• •	•	•	•	•••	Jan 2020	95.9 93.3 94 - 91		95.4	

Primary Care, Community & Therapies Group

Castian	In Proton	Measure	Trajectory	1 [Previous Months Trend	Data	Directorate		Year To	
Section	Indicator	Weasure	Year Month		S O N D J F M A M J J A S O N D J F	Period	AT IB IC CT CM	Month	Date	
Community & Therapies Group Only	DVT numbers	=> No	730 61		- 7 7 7 7 3 25 12 20 38 43 55 43 27 25 29 19 21 14	Feb 2020		14	334	\sim
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	9.	1.95 13.7 10.7 10.6 12.8 11.2 9.76 6.87 7.84 12 11.5 12.7 11.6	Sep 2019		10.8	11.1	\sim
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9 9	9.	9.13 9.05 8.75 9.43 8.56 8.76 8.92 8.23 10.1 8.7 10.5 9.59 9.67 9.01 10.6 9.49 -	Jan 2020		9.5	9.5	J
Community & Therapies Group Only	STEIS	<= No	0 0		0 0	Oct 2018		0	1	
Community & Therapies Group Only	Green Stream Community Rehab response time for treatment (days)	<= No	15.0 15.0	20	20.1 17.9 17.4 20 17.4 20.6 20.3 24 21.8 15 19 22.5 21.7 19.4 20.7 19.4 13.3	Feb 2020		13.34	216.32	$\sim\sim$
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 1 1	Jan 2020		1.09		~~~/
Community & Therapies Group Only	Baseline Observations for DN	=> %	95 95	96	96.4 92.4 91.2 92.1 93.8 96.4 95.8 91.2 97.7 96.8 95.7 97.3 95 93.7 92.1 93.6 94.7 -	Jan 2020		94.68	94.75	
Community & Therapies Group Only	Falls Assessments - DN Intial Assessments only	=> %	95 95	97	97.2 94.2 91.8 93.1 94.4 96.2 96.6 93 97.5 96.5 96.1 97.7 95.9 93.1 91.4 93.4 95.3 -	Jan 2020		95.34		
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Intial Assessments only	=> %	95 95	9	97 94 92.1 93.5 94.4 96.4 96.4 93.2 97.5 96.8 96.5 97.3 95.6 93.3 92.3 93.4 95.6 -	Jan 2020		95.57		
Community & Therapies Group Only	MUST Assessments - DN Intial Assessments only	=> %	95 95	97	97.6 93 90.5 92.6 94.2 95.7 95.8 92.6 97.2 96.8 96.3 97.7 95.4 93.1 91.4 93.6 94.9 -	Jan 2020		94.9		
Community & Therapies Group Only	Dementia Assessments - DN Intial Assessments only	=> %	95 95	90	00.4 91.8 86 89.8 91.8 92.3 93.2 91.3 95.4 91.6 94.2 93.3 93.7 88.8 87 90.9 89.7 -	Jan 2020		89.74		
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%		9	95 95 95 94 96 95 96 - 95 1 94 95 95 - 95	Dec 2019		94.65		W W
Community & Therapies Group Only	Making Every Contact (MECC) - DN Intial Assessments only	=> %	95 95	95	93.6 91 93.1 94.6 96.7 95.8 92.4 97.5 96.8 96.3 97.1 95.2 93.1 90.6 92.4 94.7 -	Jan 2020		94.68	94.6	
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No		4	4 6 8 8 10 20 8 26 18 8 12 16 20 8 14 22 18 24	Feb 2020		12	93	
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No			1 5 26	Nov 2018		26	37	٨
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No		(0 2 11	Nov 2018		11	14	٨
Community & Therapies Group Only	Avoidable Grade 4 Pressure Ulcers (DN caseload acquired)	No			0 0 0	Nov 2018		0	1	

Corporate Group

Section	Indicator	Measure	Traje Year	ectory Month	S	0	N	D	J	F	М	Previ A	ous Mo M	onths Ti J	rend J	A	S	0 1	N D	J	F	Data Period	S		Directorate	N O	Month	Year To Date	Tren	nd
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			4	4	13	3	5	5	4	2	1	12	10	0	3	6 2	2 3	6	3	Feb 2020	1	0 0	0 0	0 2	3	48	\sim	m
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			8	5	12	11	8	8	9	2	6	4	5	1	4	3 4	1	0	5	Feb 2020	1	0 0	0 1	1 2	5		s	m
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	۲	-	-	•	-	-	٠	-		-	-	-	•			-	-	Oct 2019	7	96 94	89 94	97 89		89.2	۸۸/	Λ
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	۲	٠	۲	٠	۲	٠	۲	٠	•	۲		٠	•			٠	-	Jan 2020		95			100.0	94	\sim	Ν
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	4.38	4.35	4.25	4.22	4.21	4.23	4.21	4.21	4.21	4.22	4.21	4.26	4.32 4	.47 4.4	41 4.4	3 4.47 4	1.51	Feb 2020	3.7	9 1.92 2.96	3.23 3.5	3 5.37 5.69	4.51	4.34	<u> </u>	$\mathcal{\mathcal{M}}$
Workforce	Sickness Absence - in month	<= %	3.00	3.00	3.82	4.35	4.26	4.21	4.67	4.64	3.81	3.71	3.80	4.21	4.47	4.42	4.68 5	.03 4.4	48 4.4	6 4.91 4	1.89	Feb 2020	3.3	4 0.37 5.32	1.63 4.1	8 6.55 5.82	4.89	4.47	\sim	~~
Workforce	Sickness Absence - Long Term - in month	No			26	26	25	29	27	28	28	20	25	32	32	40	33	35 32	2 27	27	33	Feb 2020	2.0	0 0.00 6.00	3.00 0.0	0 22.00 0.00	33.00	336.00	/	\sim
Workforce	Sickness Absence - Short Term - in month	No			70	86	93	84	120	112	86	79	57	65	82	54	92 9	90 84	4 10	B 100 8	80	Feb 2020	13.	0 0.00 13.0	0 15.00 0.0	0 39.00 0.00	80.00	891.00	\sim	\sim
Workforce	Mandatory Training	=> %	95.0	95.0	۲	٠	۲	٠	۲	۲	۲	٠	٠	٠	•	۲	•			۲	-	Jan 2020	9:	97 97	96 96	- 93	94.3	94		\neg