

Integrated Quality & Performance Report

Month Reported: January 2020

Reported as at: 26/02/2020

TRUST BOARD

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		Operational Performance at a Glance: January 2020
	A&E Performance	• Performance increases in January slightly to 73% (72.2% in December); there were 4,819 4hr breaches in January against 18,447 attendances, which were 4% lower than in Decem Improvement plans are taking performance from 80% in Feb to 85% in Mar20
	Referral to Treatment in 18 weeks (RTT Incomplete)	 RTT on the incomplete pathway is reported at 90.7% for January against the 92% national standard, falling slightly below to month's delivery of 91.1%. There were no reported 52 week breaches in the month. Patient backlog is at 3,645 in January, rising compared to last month (backlog means above 18 weeks waiting time); this is against a rising January patient waiting list of 39,374. 5x specialities remain below the national standard of 92% all with improvement plans to achieve 92% over the coming months ranging from April-July, however, a revised forecast is being prepared to model delivery by April. The failing specialities are: Cardiology, Gynae, Dermatology, Ophthalmology and Immunology)
	Diagnostics Waits (% of patients waiting >6 weeks)	• The Trust has continued to deliver targets for diagnostic waits, and in January we report 99.8% against the 99% DM01 standard; with only a small number of patients waiting above weeks. It appears that we have managed to pull back Imaging breaches sustainably with the additional capacity and process improvements in Imaging. This indicator has now been removed from the persistent reds.
RESPONSIVE	Cancer Performance	 Reporting December, the Trust, continued to deliver the cancer standards in general, but failing, unusually, in-month three cancer standards. This included the 62 day standard delivering 81.4% vs 85% target. However, we have managed to secure the quarter 3 performance, delivering all standards in this period, including the 62 Day at exactly 85% against the target. January unvalidated position indicates that the 62 day standard may be missed. Neutropenic sepsis performance has improved to the last few months and reporting at 86% in January following a drop in performance directly related to Unity implementation. 42, patients were administered the treatment within the prescribed 1hr framework, with 7 patients breaching; the breach times are relatively small above the 1hr and a review of how thes are entered into Unity to avoid over-stating the time to administration. The Trust shadow-monitoring the new 28 day faster diagnosis standard to be implemented from April 2020 and the IQPR will reflect this indicator from February.
	Cancellations	• There were 56 late cancellations (on the day) due to non-clinical reasons in January; whilst reducing to last couple of months, this is not in line with internal and external targets. • (29/56) were avoidable cancellations • This has resulted in a rate of 1.3% against total admissions in January against the national target of 0.8%. The main reason for the cancellati are bed pressures in the surgical wards driven by medical outliers.
	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% target, Elective care screening achieved 77% and Non Elective screening achieved 80% in January.
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 4.2 against the trust target of 5; 97 actual falls have been report with one serious harm caused. The falls rate increased compared to previous months where we were observing an average rate of 3.8. Pressure Ulcers have this month increased to last month, but remain constant to the longer term average, and we report 64 total PUs, which results overall in a rate of 1.62 against 1 occupied bed days; with 39 being reported in the acute setting (lowest this year) and 25 in the community setting. VTE assessments are compliant at 96% in January. Who Safer Surgery is subject to ongoing data quality reviews, which is overseen by a dedicated steering group. The currently, reported indicator in the IQPR reports only main the checks and hence is not complete for all eligible procedures.
	Patient Experience (FFT), Mixed Sex Accommodation (MSA), Complaints,	 MSA system (Unity) issues about patients sitting out in AMU and Critical Care have now been resolved and hence from February we should be reporting correctly any potential MSA breaches occurring. In February we resume reporting for MSAs. Patient experience response rates are slowly improving for inpatients and day cases, but more work is required to get other departments to increase their response rates. New FF guidance in place from 1st April, which may need to be reflected in the IQPR together with agreed, revised response targets. Flu vaccination rates of front line staff report at 82% as at the end of January meeting the 80% Feb20 target.
	Mortality, Readmissions	 Readmissions rates (30 days after discharge) are at 8.0% in December. The groups are reviewing patterns routinely and reporting to OMC with improvement plans. Higher Deaths rate in Low Risk Diagnosis groups than previously experienced against the latest available reporting period of October2019; this has been mainly driven by deaths due t Urinary Tract Infections (UTI) and has already been subject to a full action plan, which the medicine group is following through. Clinical effectiveness are planning audits against the act plans.
EFFECTIVE		 Admissions to the stroke ward within the 4 hour timeframe is under-delivering at 52.4% in January against the 80% target. This is subject to a detailed action plan which will improve 65% by end of March. Thrombolysis within 60 minutes has missed the 85% target for the 5 of the last 6 months reporting at 75% in January; 2x patients breaching the 1hr treatment both for clinical reasons Joint reviews with Imaging are being progressed to implement improvement plans including learning from the GIRFT Stroke Event. We are unable to report TIA performance at this stage due to post Unity implementation data quality issues which the service is addressing, however, worth noting TIA indicators routinely deliver to standards and whilst counting presents a current short-term issue the performance is likely to be good.
	Patient Flow	 There were 154 patients with a length of stay (LOS) of 21+ days as at the end of January, this includes Acute and Community count. This gives us a long-stay-patient rate of 17.5% ar their combined LOS amounted to an equivalent of 117 beds. Neck of Femur performance is at 75% in January with an improvement plan to achieve 90% for end of March 2020 by using the 'Trauma Consultant of the week' to improve the path
WELL LED	Workforce	 Sickness rate for January reporting at 5.2%, cumulatively at 4.9% Open, long term sickness cases have reduced to 153 in January against the internal target of 140. Mandatory Training (where staff are at 100% compliance) is at 52.8% in January, being the lowest rate in the last 11 months since the monitoring of this indicator was introduced. Qualified nursing turnover rate is at 12.3% against the internal target of 10.7% Our nursing vacancy rate increases to 12.9% in December against the 11% target.
USE OF RESOURCES	Use of Resources	To be reported for February 2020 as part of the New IQPR format. 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 Use of Resources assessment is used to generate a report by NHSI and a rating, which will be ratified and published by the CQC. The Trust rating for Use of Resources was 'Requires Improvement'.
EMPHASIS	Persistent Red Indicators	 The persistent reds monitored have been revised from 19 to 12 following a review of all indicators at the Performance Management Committee (PMC) and moving some of the indicator a more strategic focus for improvement; 2x indicators are data quality related and hence not part of persistent reds at this stage The Trust has robustly delivered the Diagnostic Waits for the last three months hence this is removed from persistent reds. We are now monitoring 11x persistent red indicators therefore.
TRUST		

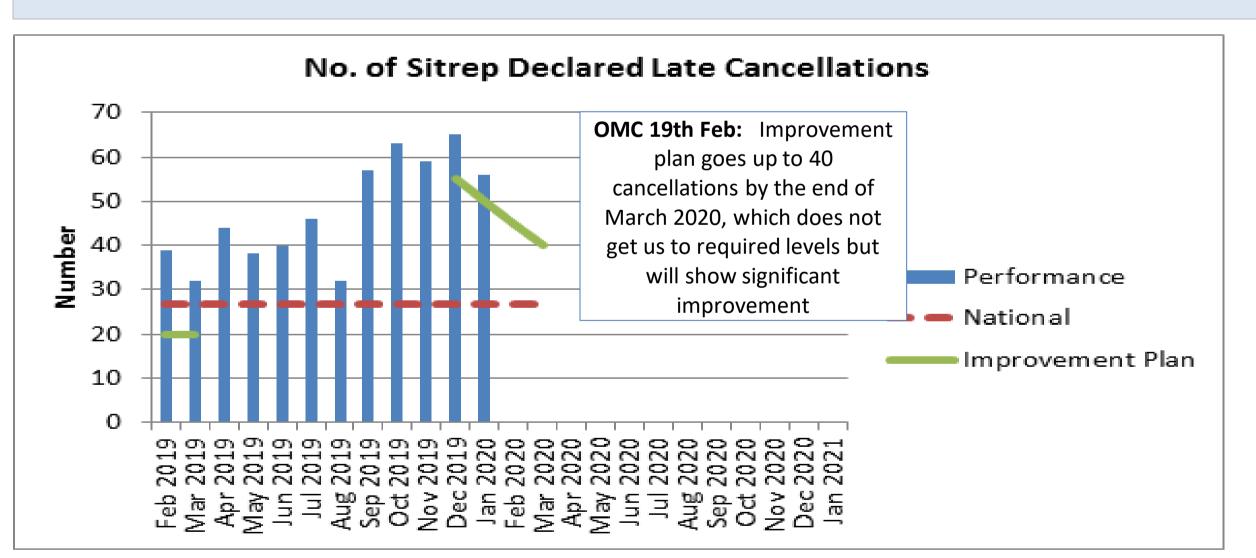
Exec	44	Indicator	Standard	Plan in	Recovery	Jan Actual	Tracking Planned
Lead	11	Note: Some are grouped (two or more indicators)	Expected	Place	Expected	Perf	Monthly Trajectory
Dr DC	1	· Mortality Reviews within 42days	90%	٧	Dec-19	75%	x
RG	1	· Mandatory Training (staff % where MT 100% complete)	85%/95%	٧	Dec 19 / Mar 20	52.8%	X
	1	· Treatment Functions below 92% RTT	0	٧	Dec19-May20	5	X
	1	· Open Referrals (relevant for improvement)	30,000	٧	Sep-19	38,823	V
	1	· Neck of Femur - to surgery within 36 hours	85%	٧	Jul-19	75.0%	x
RB	1	· Cancellations (20pm)	20	٧	Aug-19	56	x
	1	· Cancellations as %age of elective admissions	0.80%	٧	Aug-19	1.3%	x
	1	· Stroked Ward Admissions (Within 4 hrs)	80%	٧	Jan-20	52.4%	x
	1	· Neutropenic Sepsis	100%	٧	Jul-19	86.0%	x
	1	· MRSA Screening (Elective & Non-Elective)	85% / 95%	٧	Apr-20	80% / 77%	X
PG	1	· FFT Response Target (IP, OP, Maternity and A&E)	25%	٧	ТВС	20.5% IP	x

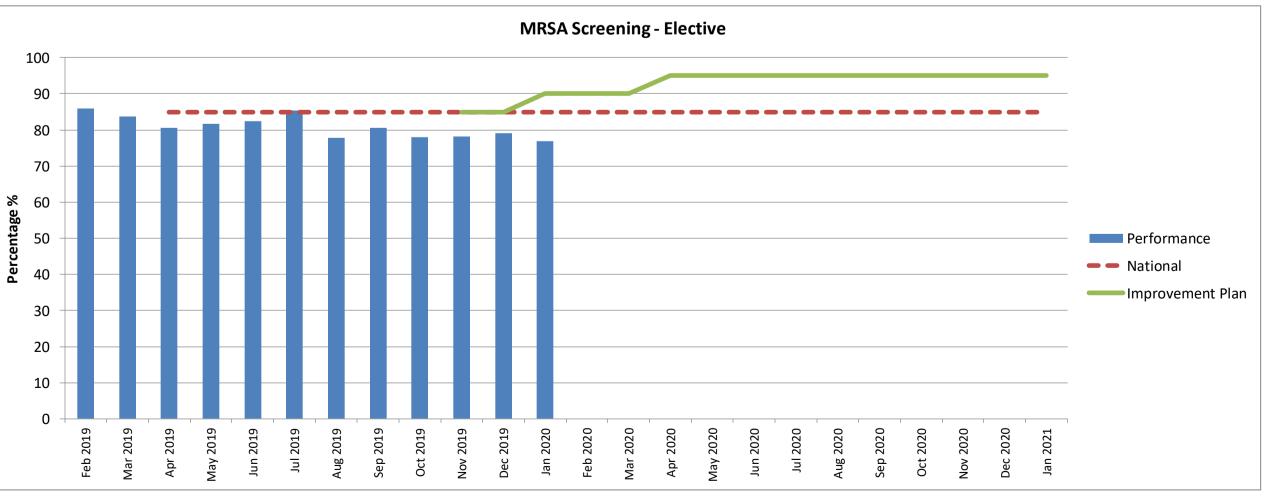
Notes:

- For January the persistent reds have been reviewed by Performance Management Committee (PMC) and a decision to revise the number of items we report in the IQPR.
- We reported previously 19 indicators, which is now reduced to 12
- 5x indicators have been removed from the original 19, to be progressed through specific Board reporting and focus.
- 2x more indicators have been removed until data quality issues have been resolved and underlying performance is clear.
- 1x indicator has delivered for last three month and we can remove Diagnostic Wait Times from the persistent red focus
- The remaining 11 items continue to be reported via the persistent red focus and January position is reported
- <u>January performance</u>: We can observe some improvements in performance in January , with cancellations reducing although still not meeting set standards; neutropenic sepsis has improved significantly from last month to 86% in January;
- **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. Rated here as missing trajectory which will be rebased when new targets are agreed.

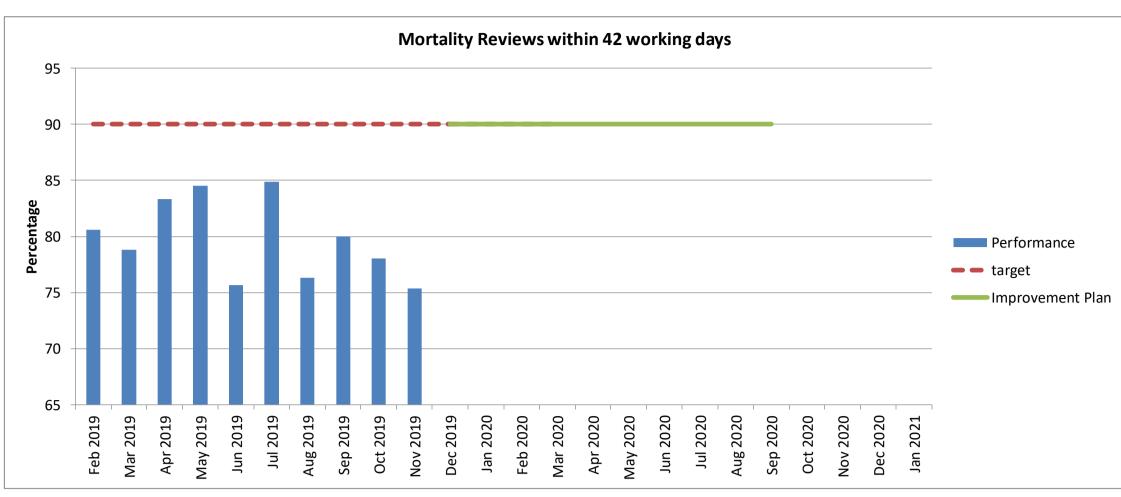
Graphs

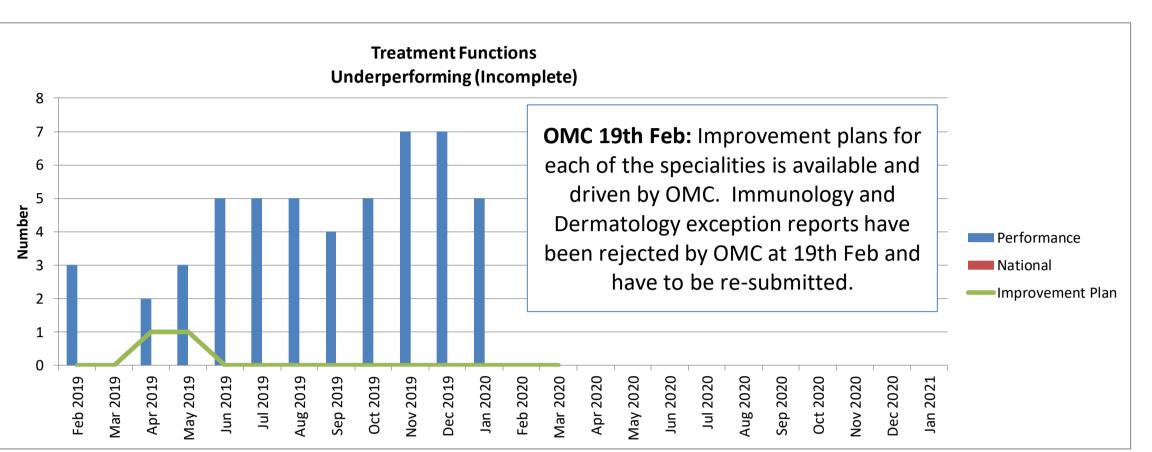
the graphs are updated for latest available information as agreed in latest OMC (here 19th Feb20), however, where incomplete this is due to:

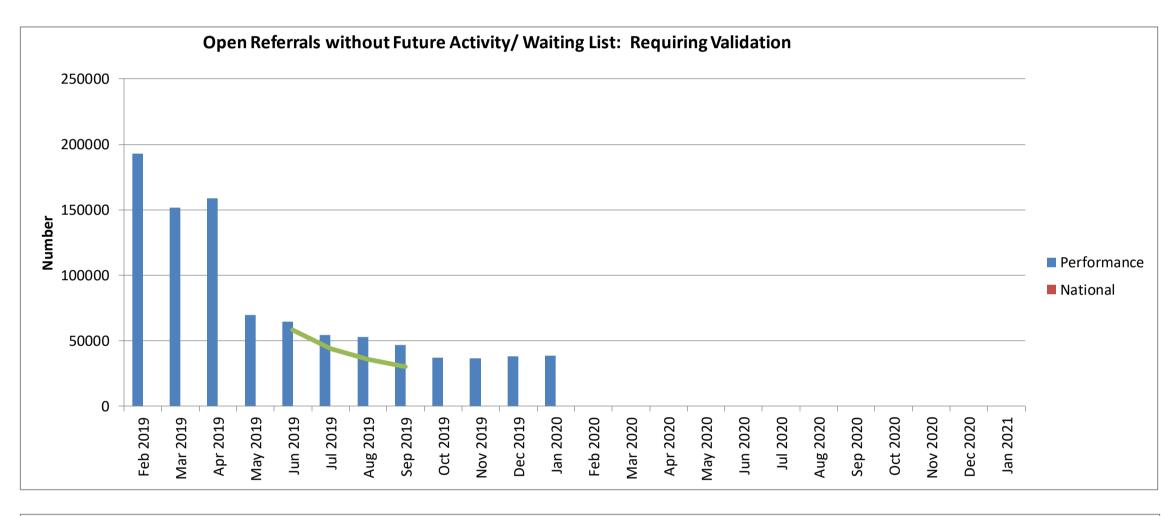


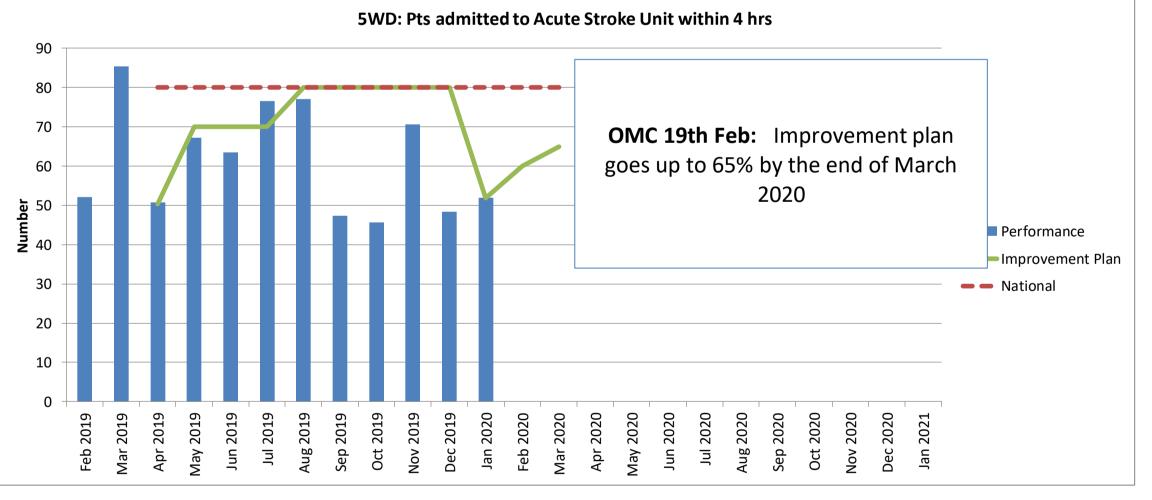


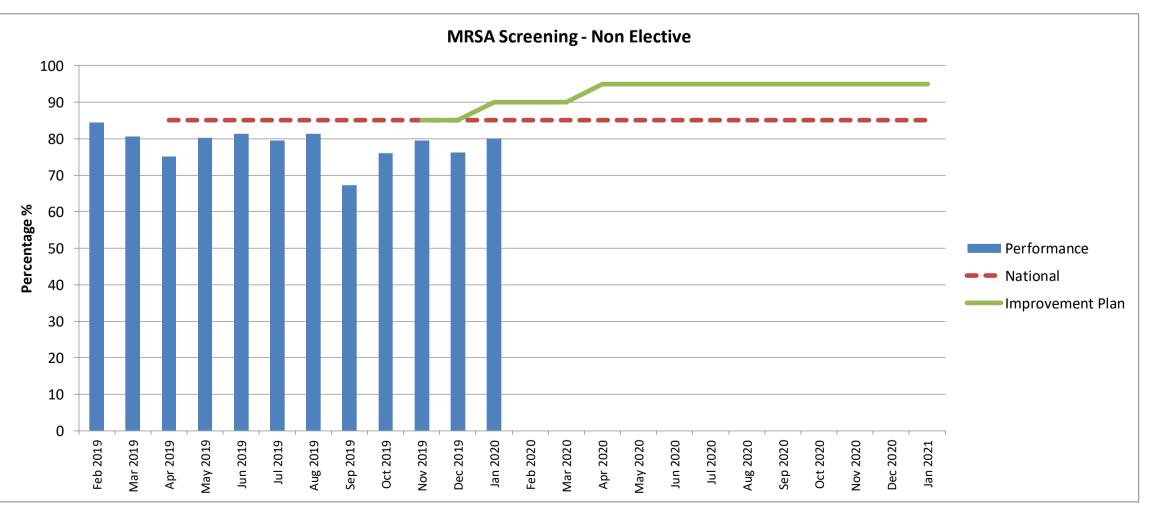
Persistent Red Focus & Performance

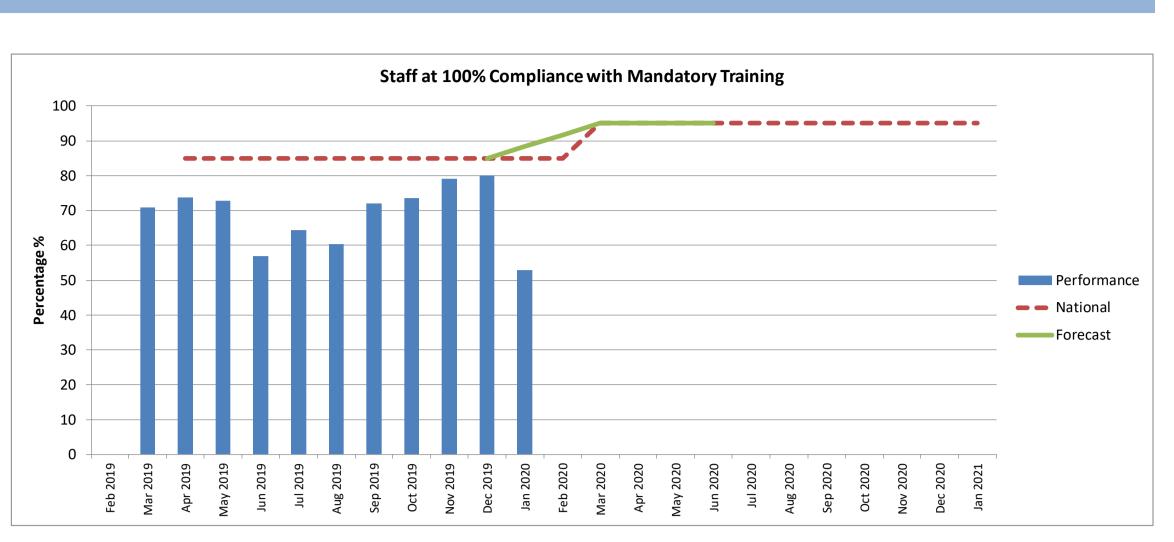


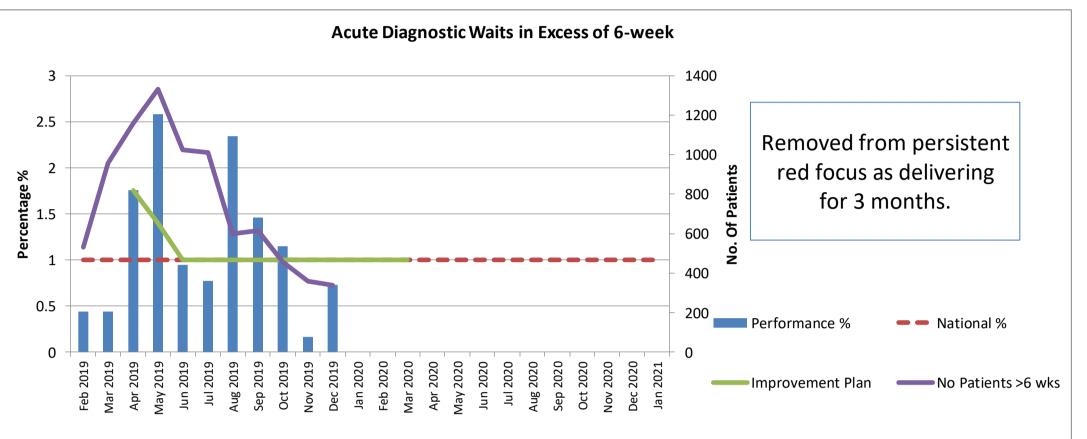


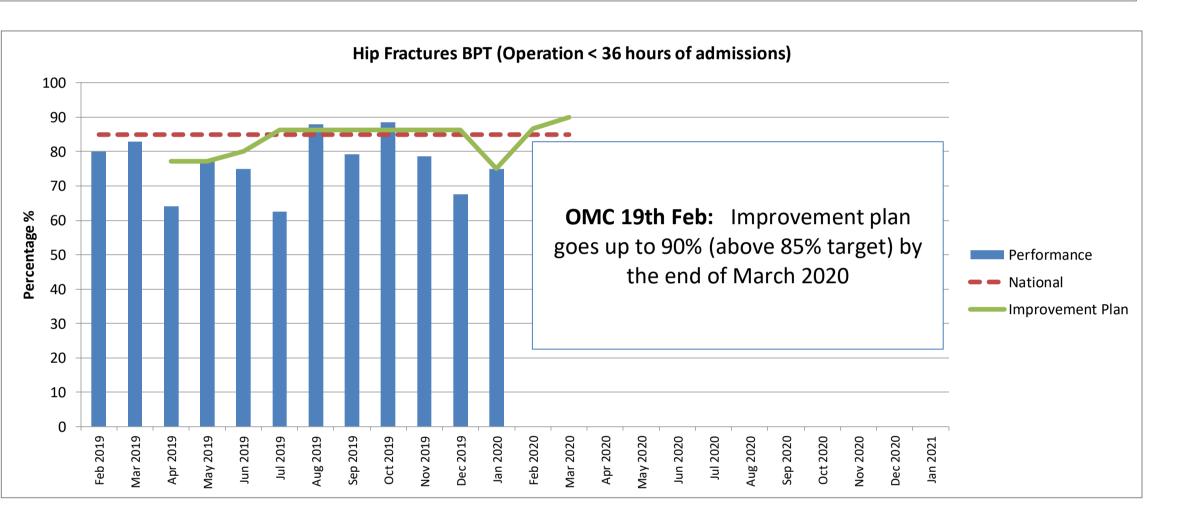


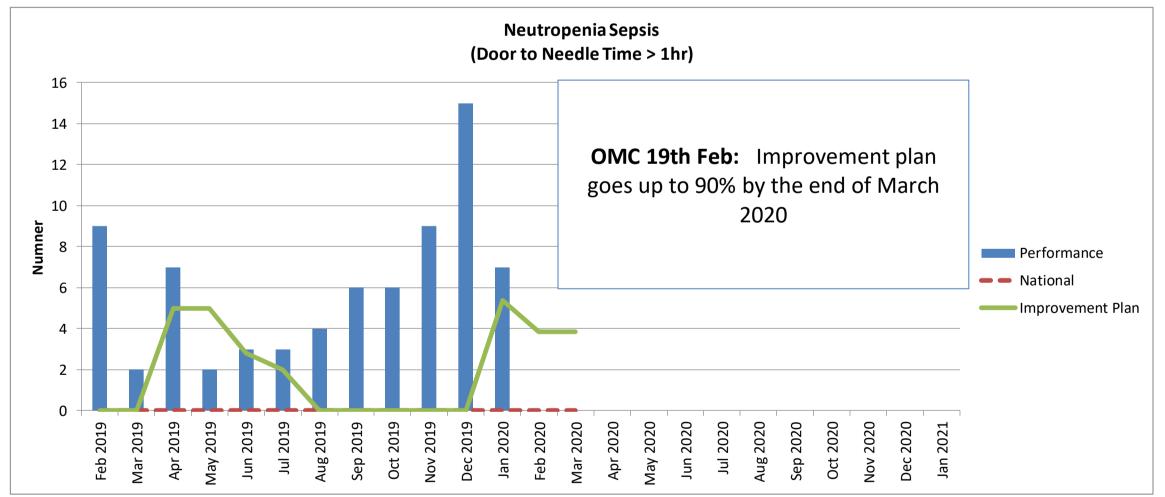


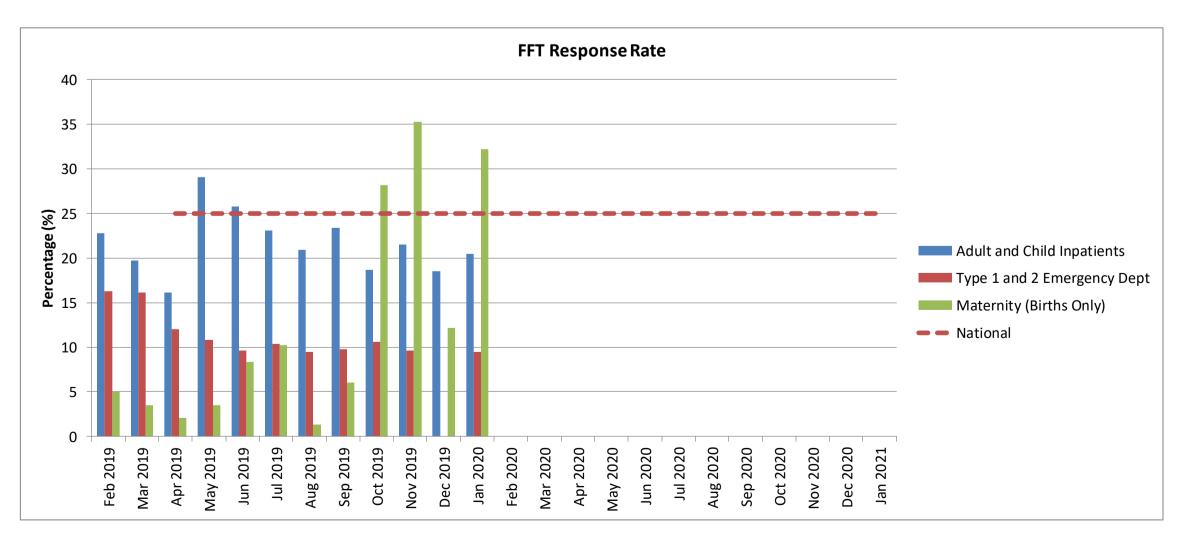








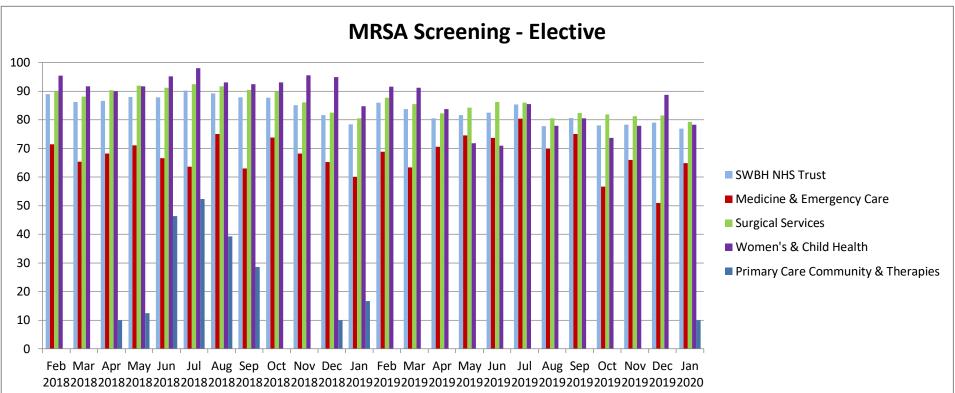


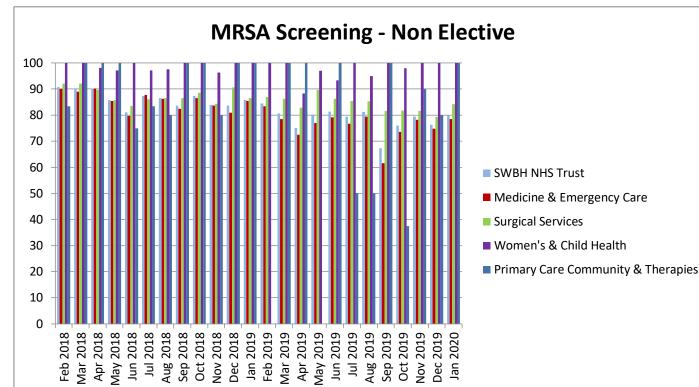


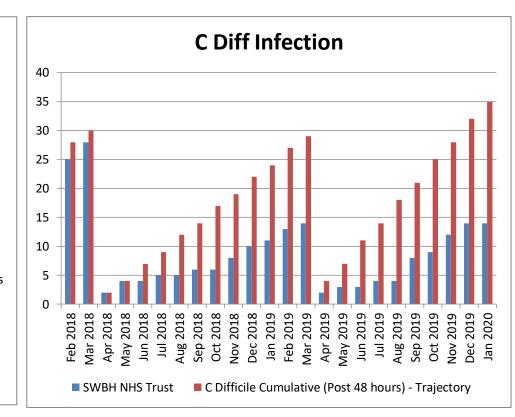
CQC Domain - Safe

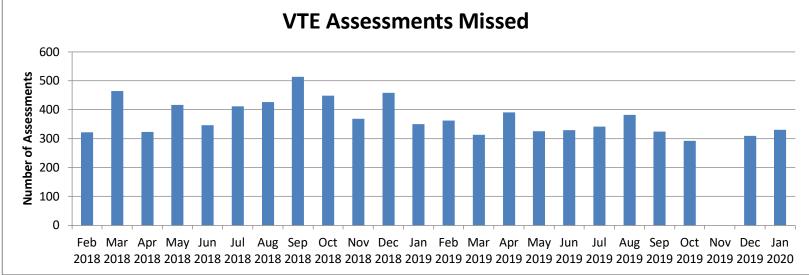
	Kitemark	Reviewed Date	Indicator	Measure		dard Month	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019 2	May J 2019 20	ın Jul 19 201:	Aug 2019	Sep 2019	Oct 2019	Nov 2019 2	Dec Jan 2019 2020	19/20 Year to Date		SS	G W	roup P I	PCC	T CO
	• • • • • •		C. Difficile (Post 48 hours)	<= No	41	3.4	1	0	2	0	2	1	2	1	2	1) 1	2	2	1	3	2 1	15	1	0	0	- -	0	-
ontrol	• • • • • •		MRSA Bacteraemia (Post 48 hours)	<= No	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1 0	2	0	0	0	- -	. 0	-
	• • • • • •		MSSA Bacteraemia (Post 48 Hours) - rate per 100,000 bed days	<= Rate2	9.42	9.42	0.00	5.51	15.65	5.35	0.00	15.39	5.91	5.53	5.48	5.44 0.	00 5.46	5.49	5.65	15.18	0.00	4.76 4.88	5.31	-	-	-			-
tion	• • • • • •		E Coli Bacteraemia (Post 48 Hours) - rate per 100,000 bed days	<= Rate2	94.9	94.9	9.31	5.51	10.44	5.35	15.83	15.39	0.00	16.59	32.90	5.44 17	.68 5.46	10.99	22.58	15.18	5.19	14.27 24.39	15.39	-	-	-			-
Infec	• • • • • •		MRSA Screening - Elective	=> %	85	85	89.2	87.9	87.7	85.1	81.7	78.4	86.0	83.8	80.5	81.6 82	2.5 85.3	77.8	80.6	78.1	78.2	79.1 76.9	79.9	64.9	79.3	78.3	0.0 55	5.6 10.0	-
<u> </u>	• • • • • •		MRSA Screening - Non Elective	=> %	85	85	86.5	83.7	87.3	83.9	83.7	85.8	84.5	80.7	75.1	80.2 8 ⁻	.3 79.	81.3	67.3	76.0	79.5	76.3 80.0	77.7	78.4	84.2	100.0	0.0 -	- 100.0	0 -
	• • • • • •		Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95	99.4	99.1	99.5	99.0	98.4	99.3	98.9	99.0	99.1	96.3 99	0.0 95.4	93.7	94.8	98.5	95.4	99.3 98.9	97.1	-	-	-			-
	• • • • • •		Patient Safety Thermometer - Catheters & UTIs	%	ı	-	0.3	0.3	0.6	0.4	0.3	0.3	0.2	0.6	0.0	0.2	.3 0.1	0.3	0.5	0.5	0.0	0.4 0.0	0.2	-	-	-			-
	• • • • • •		Number of DOLS raised	No	ı	-	40	49	51	40	29	56	25	39	32	30 3	4 26	36	37	34	26	36 33	324	14	13	0		- 6	-
	• • • • • •		Number of DOLS which are 7 day urgent	No	-	-	40	49	51	40	29	56	25	39	32	30 3	4 26	36	37	34	26	36 33	324	14	13	0		6	-
	• • • • • •		Number of delays with LA in assessing for standard DOLS application	No	-	-	7	8	6	9	8	2	0	8	5	5 1	5 6	11	2	4	3	7 6	64	3	2	0		· 1	-
	• • • • •		Number DOLs rolled over from previous month	No	-	-	9	9	0	0	0	1	15	5	5	5	7 0	4	0	1	1	2 0	25	0	0	0		. 0	-
	• • • • • •		Number patients discharged prior to LA assessment targets	No	-	-	11	25	29	18	16	30	21	19	19	22 1	7 11	23	20	22	13	22 18	187	7	9	0		2	-
	• • • • •		Number of DOLs applications the LA disagreed with	No	-	-	2	4	2	5	2	2	4	3	1	1	1 0	2	2	0	1	0 0	8	0	0	0		- 0	-
	• • • • • •		Number patients cognitively improved regained capacity did not require LA assessment	No	-	-	0	0	0	0	0	0	21	0	4	0	4 3	0	0	0	0	0 1	12	1	0	0		- 0	-
	• • • • • •	Apr 19	Falls	No	-	-	87	80	101	110	90	87	83	78	95	89 8	9 86	92	78	68	71	88 97	853	46	20	1	- 1	1 29	-
	• • • • • •	Apr 19	Falls - Death or Severe Harm	<= No	0	0	0	0	5	3	-	2	2	1	4	3	2 2	0	0	4	2	0 1	18	1	0	0	0 0	0	0
e Ca			Falls Per 1000 Occupied Bed Days	<= Rate1	5	5	-	-	-	5.03	-	-	-	-	4.40	4.20 3.	97 3.80	4.32	3.78	2.98	3.22	3.80 4.19	3.86	-	-	-		-	-
Fre	• • • • • •	Apr 19	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	4	10	13	26	42	34	33	23	37	28 2	8 26	28	33	23	14	32 36	285	14	13	-		9	-
arm	• • • • • •	Apr 19	Pressure Ulcers per 1000 Occupied Bed Days	Rate1	-	-	0.23	0.53	0.58	1.17	2.37	1.52	1.59	1.06	1.72	1.37 1.	34 1.16	3 1.27	1.54	0.97	0.61	1.32 1.50	1.27	-	-	-		-	-
Ha	• • • • • •	Apr 19	Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	1	1	7	37	32	45	34	34	36	16 2	4 29	35	27	31	18	25 25	266	Ŀ	-	-		- 25	-
			Pressure Ulcer Present on Admission to SWBH	<= No	0	0	-	-	-	-	-	129	99	96	198	130 1	11 125	87	85	78	95	88 104	1131	·	-	-		-	-
	• • • • • •		Venous Thromboembolism (VTE) Assessments	=> %	95	95	94.3	92.8	94.4	95.3	93.8	95.8	95.1	96.1	95.1	96.0 9	5.7 95.9	95.2	95.6	96.3	-	95.9 96.0	95.8	96.4	98.0	85.9	7.9 100).0 96.5	-
	• • • • • •	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	100.0	- 10	0.0 100.	0 100.0	-	100.0	99.9	99.9	99.9	100.0	99.9	99.7		- 100.0	<u> </u>
	• • • • • •	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 1	100.0 99	100.	0 99.8	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	- 100).0 -	-
	• • • • • •	Apr 19	WHO Safer Surgery - Audit - brief and debrief (% lists where complete)	=> %	100	100	100.0	100.0	0.0	100.0	100.0	100.0	100.0	100.0	99.4	00.0 99	99.8	99.6	100.0	99.7	100.0	99.3 100.0	99.8	100.0	100.0	-	- 100).0 -	-
	• • • • • •		Never Events	<= No	0	0	0	0	2	0	1	0	0	0	0	1	1 1	0	0	0	0	0 0	3	0	0	0	0 0	0	-
	• • • • • •		Medication Errors causing serious harm	<= No	0	0	0	0	0	2	0	0	0	0	0	0	0	0	1	0	0	0 0	1	0	0	0	- 0	0	-
	• • • • • •		Serious Incidents	<= No	0	0	3	1	9	4	6	1	7	6	3	3 1	2 32	12	11	17	11	7 6	114	4	0	0	0 0	2	0
	• • • • • •		Open Central Alert System (CAS) Alerts	No	-	-	15	14	14	15	16	18	20	19	15	15	4 9	8	11	12	10	12 10	106	<u> </u>	-	-			
	• • • • • •		Open Central Alert System (CAS) Alerts beyond deadline date	<= No	0	0	4	4	4	5	5	5	5	8	6	7	6	5	6	7	2	1 1	44	<u> </u>	-		- -		-

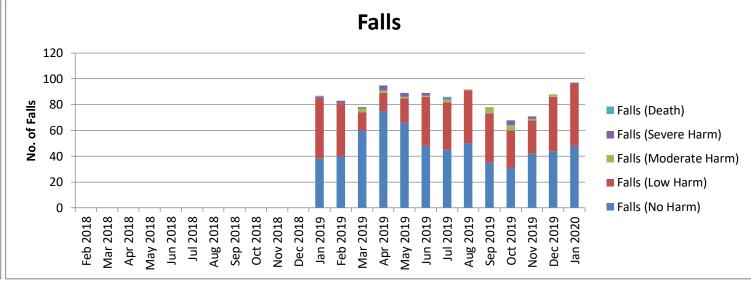
CQC Domain - Safe

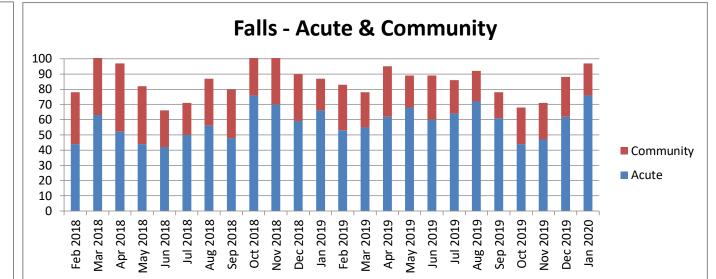


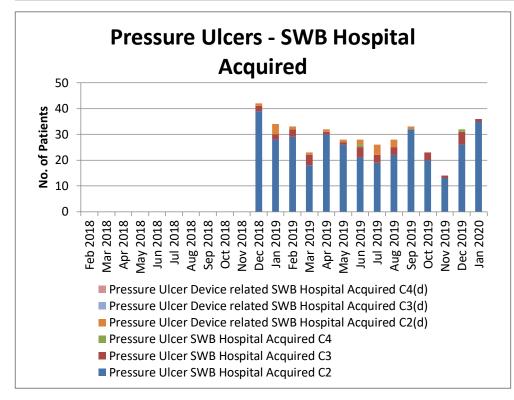


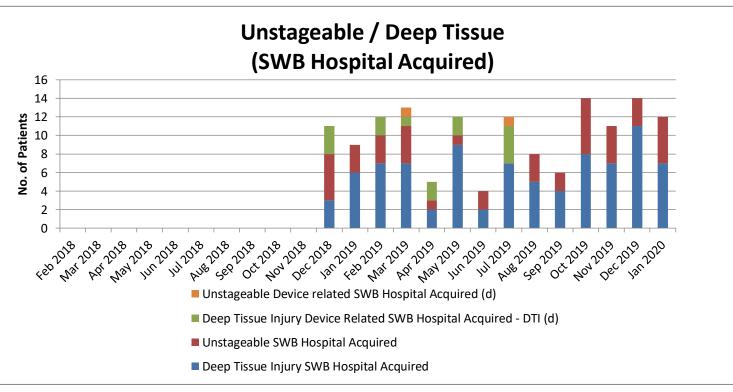


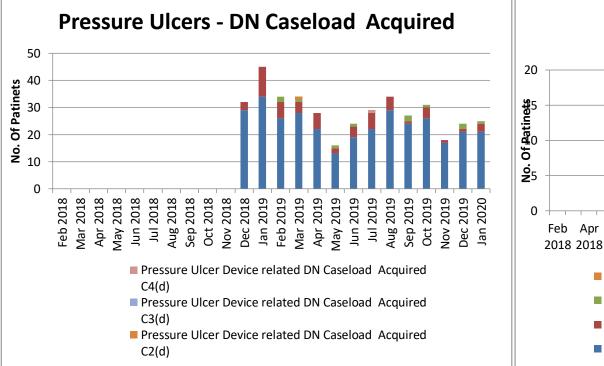


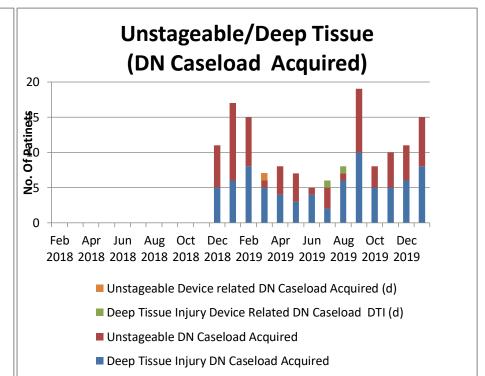






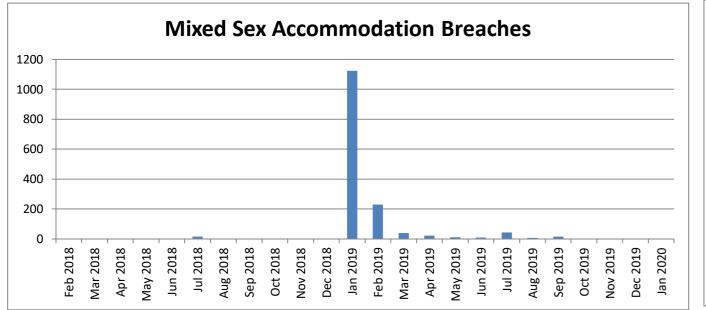


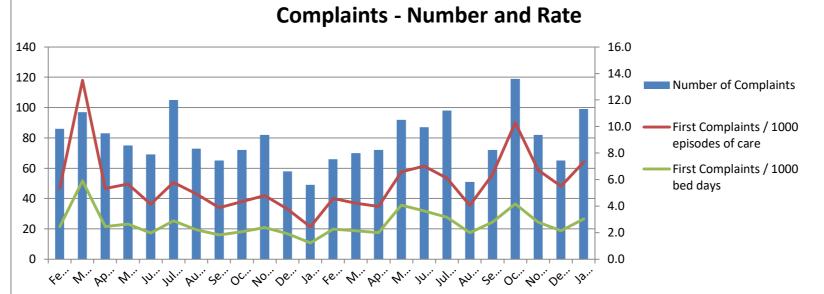


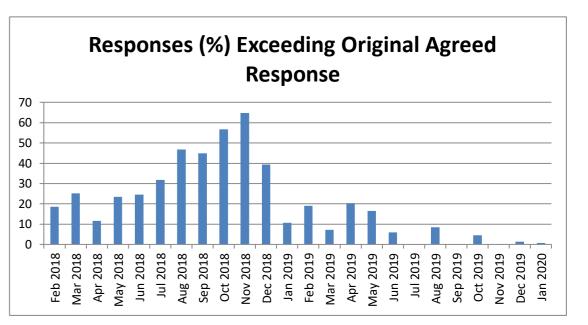


CQC Domain - Caring

	Kitemark	Reviewed Date	Indicator	Measure	Stan Year	dard Month	Aug	Sep	Oct 2018	Nov	Dec	Jan 2010	Feb	Mar	Apr	May	Jun 2019 2	Jul	Aug	Sep	Oct	Nov 2010	Dec	Jan 2020	19/20 Year to Date	М	SS	W	Group		PCCT CO
	• • • • • •	Apr 19	FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	25	25											25.7								21.5	-	-	-	-	-	
	• • • • •	Apr 19	FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95	95	96	90	93	92	92	91	92	91	89	89	92	91	90	89	89	89	86	89	-	-	-	-	-	-	
	• • • • • •	Apr 19	FFT Response Rate: Type 1 and 2 Emergency Department	=> %	25	25	10.7	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	-	9.5	10.2	9.5	-	-	-	-	
	• • • • • •	Apr 19	FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95	95	76	73	71	74	73	74	75	75	75	76	73	76	78	71	71	68	73	75	-	75	-	-	-	-	
	• • • • • •	Apr 19	FFT Score - Outpatients	=> No	95	95	91	90	91	90	92	90	90	91	90	90	89	88	76	87	87	89	89	89	-	-	-	-	-	-	
#	• • • • • •	Apr 19	FFT Score - Maternity Antenatal	=> No	95	95	88	86	94	0	0	0	0	0	0	0	0	0	0	0	90	97	100	75	-	-	-	-	-	-	
	• • • • •	Apr 19	FFT Score - Maternity Postnatal Ward	=> No	95	95	91	0	87	93	100	100	100	0	100	100	0	100	100	100	92	93	0	97	-	-	-	-	-	-	
	• • • • •	Apr 19	FFT Score - Maternity Community	=> No	95	95	0	0	0	0	0	0	0	0	0	0	0	0	0	0	94	0	0	0	-	-	-	-	-	-	
	• • • •	Apr 19	FFT Score - Maternity Birth	=> No	95	95	90	93	100	100	100	17	95	100	100	94	94	91	66	6	94	97	94	95	-	-	-	-	-	-	
	• • •	Apr 19	FFT Response Rate: Maternity Birth	=> %	25	25	12.6	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	13.0	-	-	-	-	-	
MSA	• • • • •		Mixed Sex Accommodation - Breaches (Patients)	<= No	0	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	-	-	73	65	72	82	58	49	66	70	72	92	87	98	51	72	119	82	65	99	837	40	26	11	0	5	11 6
	• • • • • •		No. of Active Complaints in the System (formal and link)	No	-	-	213	208	206	212	210	165	170	151	163	149	121	148	91	121	140	114	92	106	1245	58	30	13	0	5	0 0
laints	• • • • • •		No. of First Formal Complaints received / 1000 bed days	Rate1	-	-	2.22	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	2.95	2.17	4.52	2.82	-	-	24.88 -
npla	• • • • •		No. of First Formal Complaints received / 1000 episodes of care	Rate1	-	-	4.91	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	6.36	7.50	6.89	4.73	-	-	22.94 -
Comp	• • • • •		No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100	92.5	100.0	96.8	96.2	98.3	97.8	100.0	98.4	100.0	2.2	100.0 1	00.0	100.0	100.0	100.0	100.0	100.0	100.0	88.8	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	46.8	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	7.0	0.0	0.0	7.1	-	0.0	0.0 0.0
	• • • • • •		No. of responses sent out	No	-	-	52	57	54	59	47	74	58	95	77	98	97	95	96	61	88	105	76	76	869	31	22	12	0	1	7 3
WKF	• • • • • •	Apr 19	Flu Vaccination Rate	=> %	85	85	-	-	-	83.3	83.7	-	-	-	-	-	-	-	-	-	47.7	62.4	78.1	82.0	67.5	-	-	-	-	-	



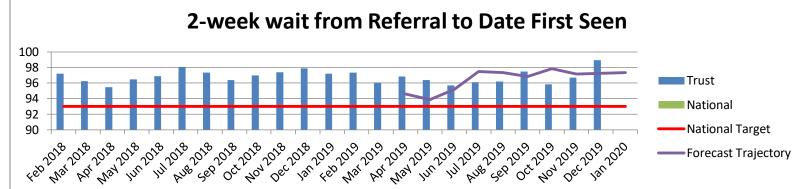


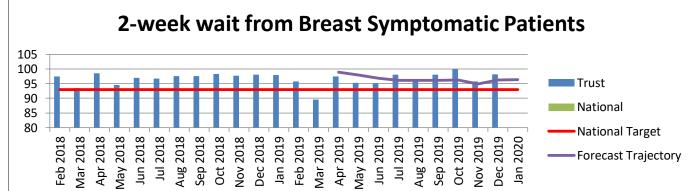


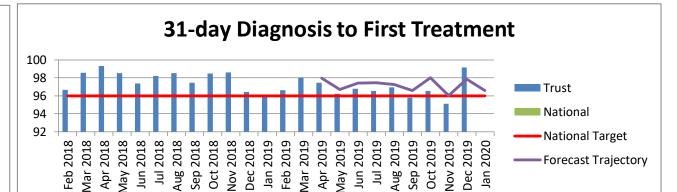
CQC Domain - Responsive

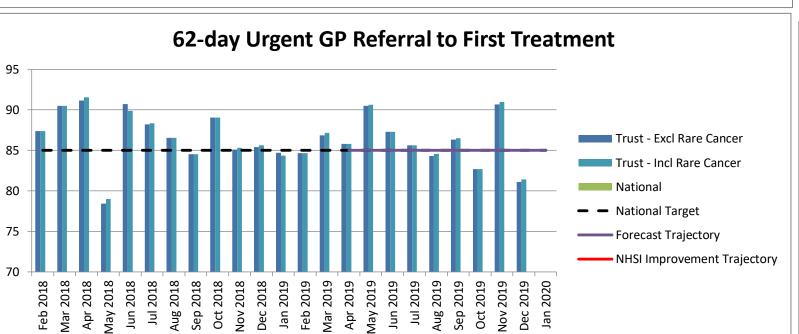
	Kitemark	Reviewed Date	Indicator	Measure	Star Year	ndard Month		Sep Oc 2018 201	t Nov	Dec 2018	Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec J 2019 20	an 020	19/20 Year to Date	М	SS		Group P	$\overline{\top}$	PCCT	CO
			Emergency Care Attendances (Including Malling)	No	-	-		7740 178	i							18091 1						19330 18		184337	-	-	-	-	-	-	-
	• • • • • •		Emergency Care 4-hour waits	=> %	95	95	82.7	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 7	3.0	76.8	-	-	-	-	-	-	-
	• • • • • •	•	Emergency Care 4-hour breach (numbers)	No	-	-	2999 3	3013 335	3383	4435	3963	3006	2629	4106	3213	3288	3542	3252	4764	5215	5199	5375 48	319	42773	-	-	-	-	-	-	-
	• • • • • •	,	Emergency Care Trolley Waits >12 hours	<= No	0	0	0	0 1	0	1	0	0	0	0	0	0	0	0	2	2	1	1	0	6	-	-	-	-	-	-	-
Care	• • • • • •		Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15	15	136	49 6	37	88	50	41	57	74	39	89	45	52	71	185	154	116 1	21	-	-	-	-	-	-	-	-
ncy (• • • • • •		Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	225	238 25	4 245	255	237	269	241	282	264	255	261	208	217	250	263	263 2	254	-	-	-	-	-	-	-	-
ger	• • • • • •		Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5	5	5.4	5.2 5.3	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	3.1	6.6	-	-	-	-	-	-	-
mer	• • • • • •		Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5	5	7.3	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	3.0	8.2	-	-	-	-	-	-	-
╽╙╽	• • • • • •		WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	116	95 12	1 159	205	168	160	88	166	119	128	123	162	238	251	228	279 1	99	1893	-	-	-	-	-	-	-
	• • • • • •		WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	8	5 6	7	7	9	8	6	5	4	4	5	9	33	16	9	12	9	106	-	-	-	-	-	-	-
	• • • • • •		WMAS - Handover Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02	0.2	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	0.2	-	-	-	-	-	-	-
	• • • • • •		WMAS - Emergency Conveyances (total)	No	-	-	4522	1354 462	22 4579	4872	4835	4372	4655	4814	4670	4555	4658	4486	4484	4656	4721	4887 48	348	46779	-	-	-	-	-	-	-
	• • • • •	Apr 19	Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5	2.2	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	2.8	2.2	-	-	-	-	-	-	-
			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	240	20	12	14 16	5 14	13	14	14	15	12	-	14	-	27	17	19	20	16	19	-	-	-	-	-	-	-	-
lo _V	• • • • •	Apr 19	Delayed Transfers of Care (Acute) - Finable Bed Days	<= No	0	0	174	181 20	0 272	275	315	270	211	99	149	239	295	185	127	147	163	180 1	95	1779	-	-	-	-	-	-	-
ent l	• • • • •	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - ALL	No	-	-	733	712 79	7 717	713	757	654	642	672	698	583	684	671	675	867	852	944 9	89	7635	-	-	-	-	-	-	-
atie	• • • • •	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No	-	-	241	240 24	6 227	247	279	241	243	223	228	185	218	233	266	330	310	383 3	554	2730	-	-	-	-	-	-	-
"	• • • • •	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Clinical Transfers	No	-	-	38	47 54	38	55	63	57	63	65	37	30	46	45	52	52	80	66 7	71	544	-	-	-	-	-	-	-
		Apr 19	Hip Fractures Best Practice Tariff (Operation < 36 hours of admissions	=> %	85	85	84.6	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 7	5.0	75.6	-	75.0	-	-	-	-	-
	• • • • •		No. of Sitrep Declared Late Cancellations - Total	<= No	240	20	25	28 25	29	29	36	39	32	44	38	40	46	32	57	63	59	65	56	500	14	35	7	0	-	0	-
	• • • • • •	•	No. of Sitrep Declared Late Cancellations - Avoidable	No	-	-	14	10 9	7	11	18	7	10	16	13	3	16	17	32	40	30	41 2	29	237	0	25	4	0	-	0	-
	• • • • • •		No. of Sitrep Declared Late Cancellations - Unavoidable	No	-	-	11	18 16	3 22	18	18	32	22	28	25	37	30	15	25	23	29	24 2	27	263	14	10	3	0	-	0	-
ons	• • • • •		Elective Admissions Cancelled at last minute for non-clinical reasons (as a percentage of admissions)	<= %	0.8	0.8	0.7	0.8	6 0.8	0.9	0.9	1.0	0.8	1.3	1.0	1.2	1.1	8.0	1.5	1.6	1.5	1.8 1	1.3	1.3	1.6	1.4	3.0	-	-	0.0	-
ellatio	• • • • •		Number of 28 day breaches	<= No	0	0	0	0 0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	-
nce	• • • • • •		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	-	-	-	-
Ca	• • • • • •	•	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	0	2	0	0	0	1	2	1	1	1	2	0	1	1	10	1	0	0	0	-	0	-
	• • • • • •		Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0	61	54 68	55	39	52	56	69	73	64	75	86	67	79	103	92	65 7	73	777	11	56	6	-	-	-	_
	• • • • • •		All Hospital Cancellations, with 7 or less days notice	<= No	0	0	230	193 26	5 238	156	236	230	244	265	262	277	296	204	367	370	376	358 3	47	3122	93	221	33	-	-	-	-
	• • • • • •	Apr 19	2 weeks	=> %	93	93	97.3	96.4 97	0 97.4	97.9	97.2	97.3	96.1	96.8	96.4	95.7	96.1	96.2	97.5	95.8	96.7	99.0	-	96.7	98.5	99.0	100.0	-	-	-	-
	• • • • • •	Apr 19	2 weeks (Breast Symptomatic)	=> %	93	93	97.6	97.6 98	3 97.7	98.0	97.9	95.7	89.5	97.4	95.3	95.1	98.1	95.8	98.0	100.0	95.7	98.1	-	97.1	-	98.2	-	-	-	-	-
	• • • • • •	Apr 19	31 Day (diagnosis to treatment)	=> %	96	96	98.5	97.5 98.	5 98.6	96.4	96.1	96.6	98.1	97.5	96.2	96.8	96.5	96.9	95.8	96.6	95.1	99.2	-	96.7	100.0	98.5	100.0	-	-	-	-
	• • • • • •	Apr 19	31 Day (second/subsequent treatment - surgery)	=> %	94	94	100.0 1	00.0 100	.0 95.5	100.0	100.0	95.0	95.2	100.0	94.7	95.0	96.2	95.2	100.0	93.5	100.0	93.1	-	96.0	-	-	-	-	-	-	-
	• • • • • •	Apr 19	31 Day (second/subsequent treatment - drug)	=> %	98	98	100.0 1	00.0 100	.0 100.0	100.0	100.0	100.0	-	-	100.0	-	-	100.0	100.0	-	100.0	100.0	-	100.0	-	-	-	-	-	-	-
	• • • • •	Apr 19	62 Day (urgent GP referral to treatment) Excl Rare Cancers	=> %	85	85	86.5	84.5	1 85.1	85.4	84.7	84.7	86.9	85.8	90.5	87.3	85.6	84.3	86.3	82.7	90.7	81.1	-	86.1	78.1	84.8	68.8	-	-	-	-
cer	• • • • • •		62 Day (urgent GP referral to treatment) - Inc Rare Cancers	=> %	85	85	86.5	84.5	1 85.3	85.6	84.4	84.7	87.2	85.8	90.6	87.3	85.6	84.6	86.5	82.7	91.0	81.4	-	86.2	78.1	85.2	68.8	-	-	-	-
Cancel	• • • •	Apr 19	62 Day (referral to treat from screening)	=> %	90	90	90.6	92.9 97.	7 96.1	100.0	91.5	91.4	90.0	100.0	98.2	91.7	94.4	100.0	96.9	93.2	94.6	89.7	-	95.6	-	89.7	-	-	-	-	-
	• • • • • •	Apr 19	62 Day (referral to treat from hosp specialist)	=> %	90	90	85.1	85.1 85.	0 80.8	87.1	88.0	89.5	89.0	89.4	83.1	92.9	84.3	80.0	86.4	76.5	81.8	82.3	-	83.9	80.0	88.2	-	-	-	-	-
	• • • • • •		Cancer = Patients Waiting Over 62 days for treatment	No	-	-	11	8 8	11	11	11	9	12	10	7	8	10	11	10	11	6	12	-	83	4	6	3	-	-	0	-
	• • • • • •	,	Cancer - Patients Waiting Over 104 days for treatment	No	-	-	3	1 2	1	3	2	3	7	3	4	1	3	5	3	3	5	6	-	31	3	3	1	-	-	0	-
	• • • • • •		Cancer - Longest wait for treatment (days) - TRUST	No	-	-	146	86 10	4 101	197	137	177	209	241	183	91	196	147	96	171	149	148	-	-	-	-	-	-	-	-	-
	• • • • • •	Apr 19	Neutropenia Sepsis - Door to Needle Time > 1hr	<= No	0	0	2	7 4	6	6	5	9	2	7	2	3	3	4	6	6	9	15	7	62	7	0	0	-	-	0	-
	• • • • • •		IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer	%	-	-	64.7	71.4 68.	8 56.3	53.3	86.7	37.5	66.7	48.0	53.3	63.6	74.1	51.9	65.2	66.7	69.6	35.7	-	59.7	_	-	-	_	_	_	_
			pathway		<u> </u>					1																					

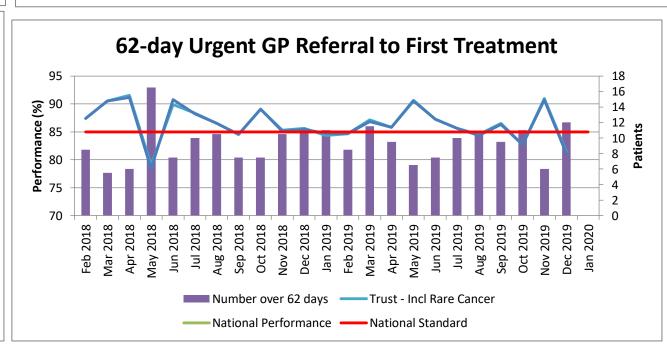
CQC Domain - Responsive Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep 2018 2018 2018 2019 Standard Year Month Indicator Kitemark Measure M SS W P I PCCT CO Date Date 90 RTT - Admittted Care (18-weeks) 78.7 | 80.7 | 78.4 | 79.8 | 80.5 | 79.5 | 79.8 | 78.9 | 81.7 | 83.1 | 80.5 | 77.6 | 80.5 | 80.6 | Apr 19 81.2 95 Apr 19 RTT - Non Admitted Care (18-weeks) 91.0 | 89.0 | 86.5 | 85.5 | 87.9 | 86.1 | 88.7 | 90.2 | 91.7 | 92.5 | 90.7 | 89.6 | 89.2 | 89.8 | 87.3 | 87.3 | 87.2 | 87.0 89.2 67.9 92.7 • • • • => % 92 91.8 91.8 91.8 89.6 88.1 Apr 19 RTT - Incomplete Pathway (18-weeks) => % 35614 36990 37871 37012 36914 34909 34221 7328 | 16860 | 2161 3295 RTT Waiting List - Incomplete No 34888 | 35859 | 36762 | 37231 | 39115 | 38714 | 39634 | 39898 38360 38416 39374 383363 0 Apr 19 2825 2959 RTT - Backlog 2450 | 2710 | 2951 | 3118 | 3082 | 3168 | 601 1382 225 391 2582 2424 2436 3360 3475 3433 3645 31392 Apr 19 No RTT 64 Patients Waiting >52 weeks (All Pathways) <= No 0 0 Patients Waiting >52 weeks (Incomplete) <= No Apr 19 • • • • reatment Functions Underperforming (Admitted, Non-0 0 29 30 29 27 <= No \bullet \bullet \bullet \bullet Admitted,Incomplete Freatment Functions Underperforming (Incomplete) <= No 0 0 9.5 9.7 10.0 9.7 10.3 8.9 10.8 9.9 22.7 8.1 16.5 19.3 RTT Clearance Time (Wks) Ratio 1.2 0.0 Apr 19 Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census) <= % 1344 | 1340 1861 532 958 1158 1330 1023 600 359 338 7917 29 112 878 Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters) No Apr 19

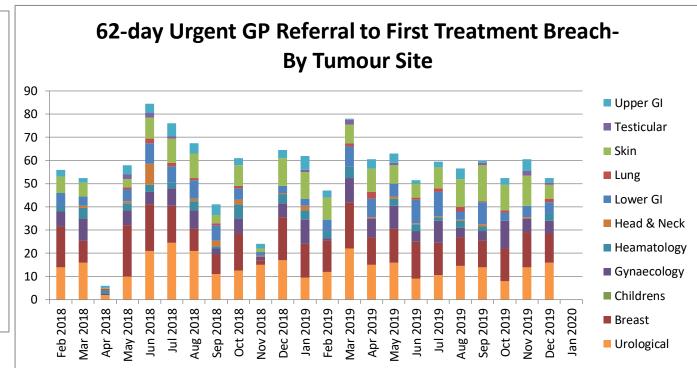


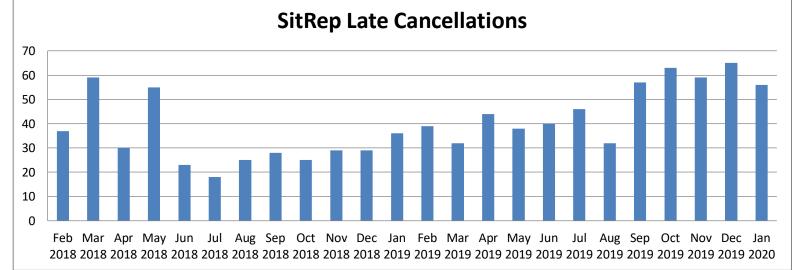


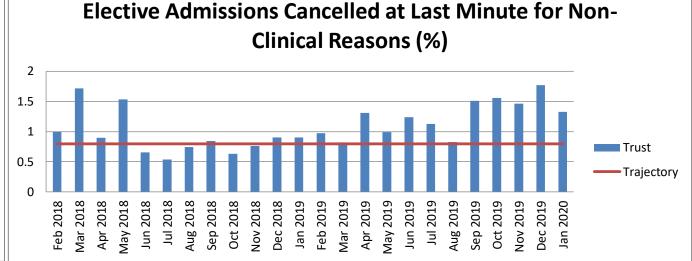


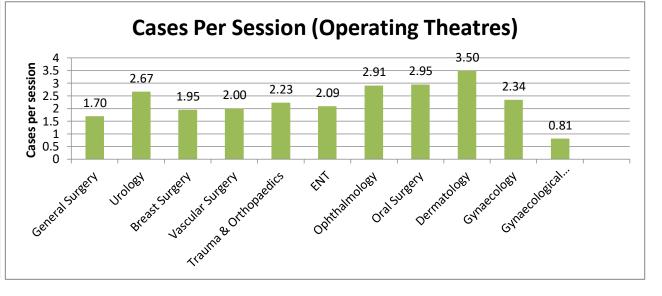




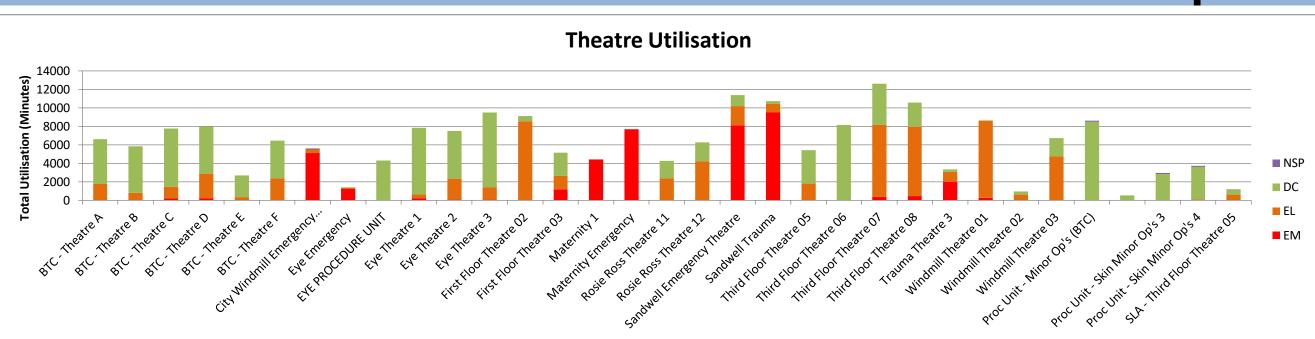


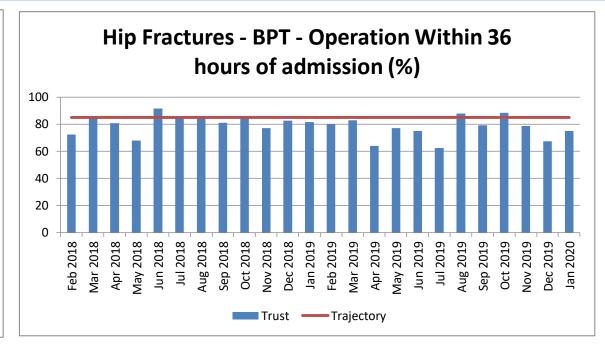


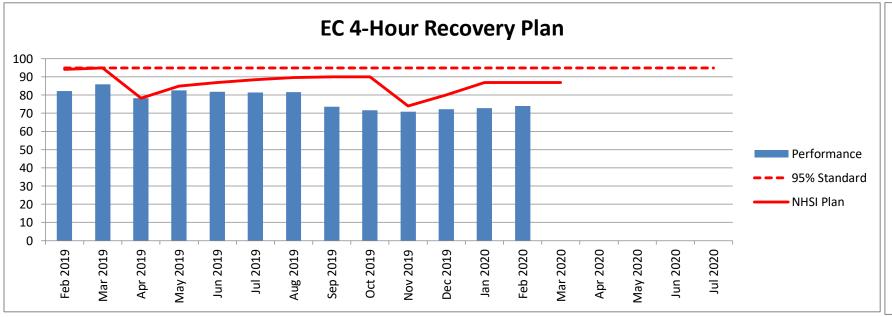


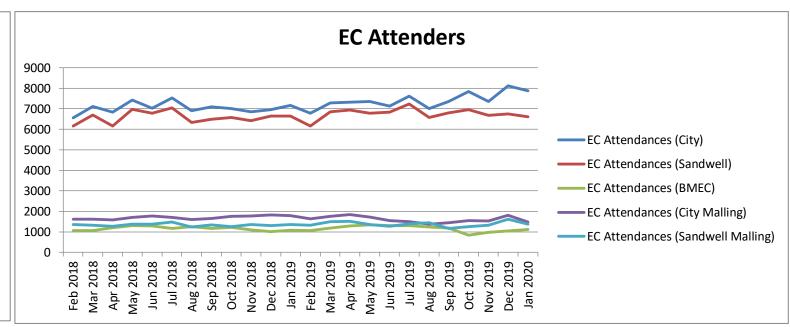


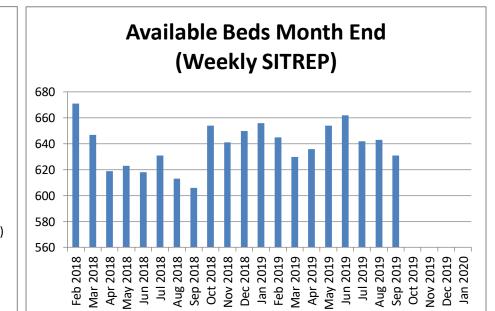
CQC Domain - Responsive

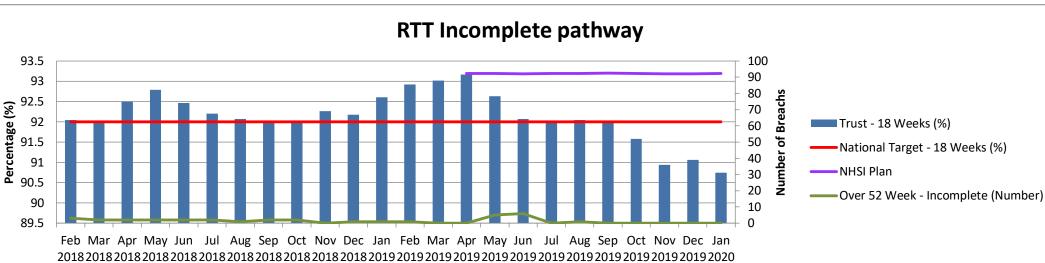


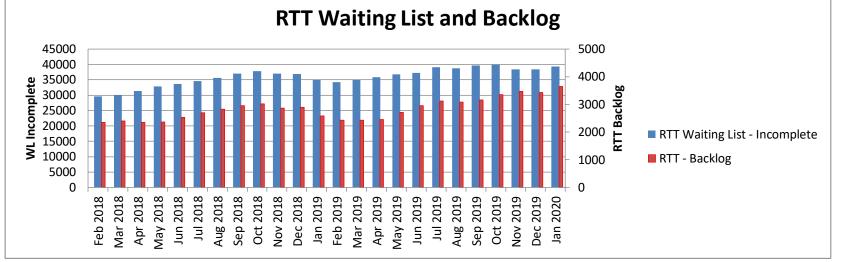


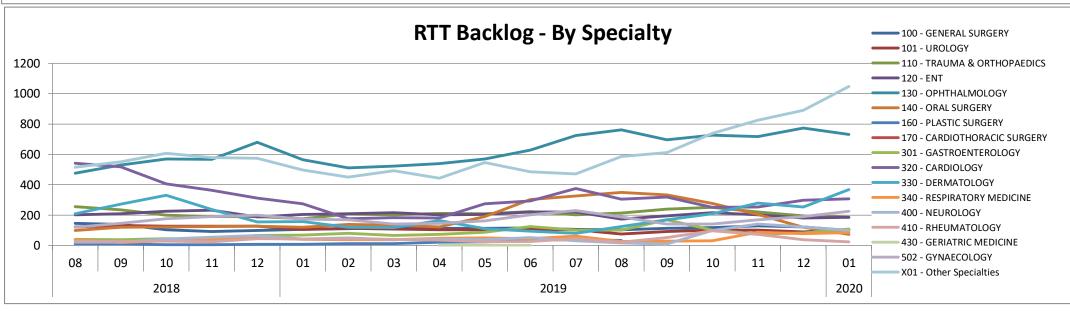


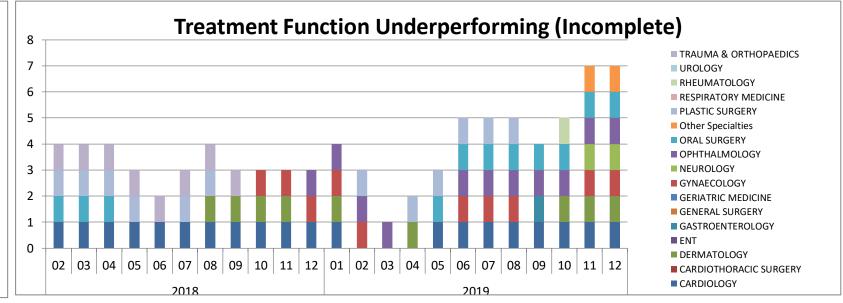


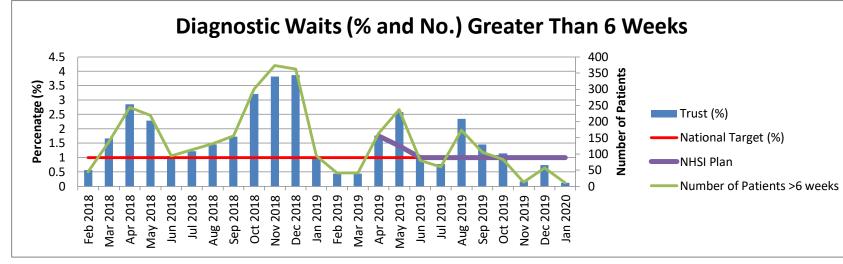


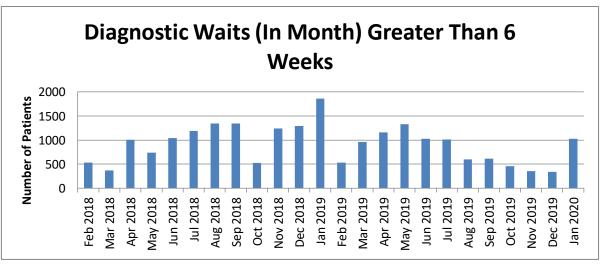






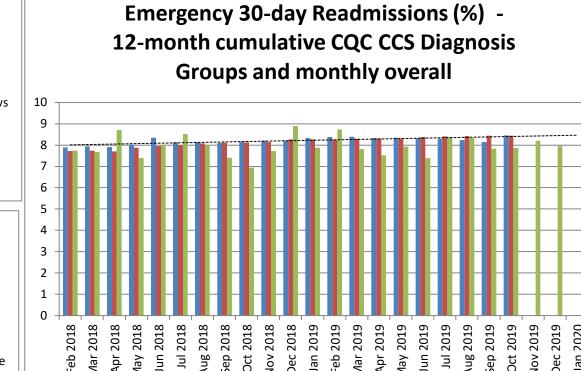






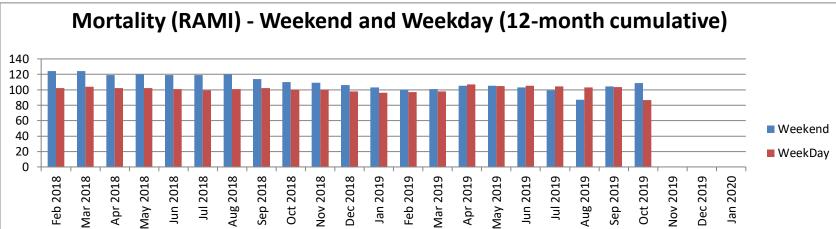
CQC Domain - Effective

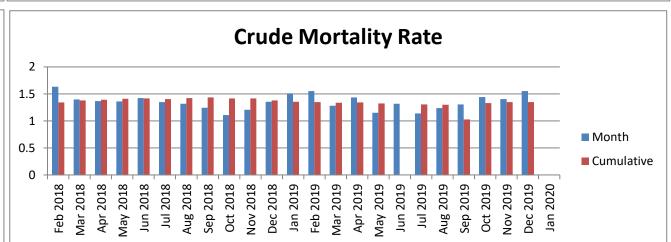
	Kitemark	Reviewed Date	Indicator	Measure	Star Year	ndard Month	Aug 2018	Sep 2018	Oct 2018	Nov 2018		Jan 2019	Feb 2019	Mar 2019	Apr 2019	May 2019	Jun 2019	Jul 2019		Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	19/20 Year to Date	М	SS	l W	Group I P		PCCT	СО
	• • • • • •		Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	No	-	-	105	105	103	102	100	98	98	99	107	105	105	104	103	104	106	-	-	-	-	-	-	-	-	-	_	-
	• • • • • •		Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	No	-	-	101	102	100	100	98	96	97	98	107	105	105	104	103	103	87	-	-	-	-	-	-	-	-	-	-	-
	• • • • • •		Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	No	-	-	120	114	110	109	106	103	100	101	105	105	103	99	87	105	109	-	-	-	-	-	-	-	-	-	-	-
	• • • • • •		Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	No	-	-	113	111	112	108	105	-	-	-	103	105	104	103	103	-	-	-	-	-	-	-	-	-	-	-	_	-
	• • • • • •		Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	No	-	-	129	124	124	124	118	116	117	115	115	105	112	112	113	113	-	-	-	-	-	-	-	-	-	-	_	-
ions	• • • • • •		Deaths in Low Risk Diagnosis Groups (RAMI) - month	No	-	-	71	61	98	105	86	108	88	85	98	-	93	125	85	88	152	-	-	-	-	-	-	-	-	-	_	-
lmiss	• • • • •		Mortality Reviews within 42 working days	=> %	90	90	41.0	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	-	-	79.7	74.1	82.4	-	-	-	100.0	-
ead	• • • • • •		Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%	-,	-	1.3	1.2	1.1	1.2	1.4	1.5	1.6	1.3	1.4	1.2	1.3	1.1	1.2	1.3	1.4	1.4	1.6	-	1.3	-	-	-	-	-	-	-
nd R	• • • • • •		Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%	-	-	1.4	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	-	1.3	-	-	-	-	-	-	-
tality a	• • • • • •		Deaths in The Trust	No	-	-	116	106	107	114	122	149	137	121	134	112	117	109	118	114	133	136	139	-	1112	125	11	2	0	0	1	0
ortal			Avoidable Deaths In the Trust	No	-	-	-	-	-	-	-	-	-	-		1	-	-	0	-	-	-	-	-	0	0	0	0	-	-	0	-
Ĭ	• • • • • •	Apr 19	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%	-	-	8.0	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	-	7.9	13.3	3.7	7.5	1.1	6.7	1.6	-
	• • • • •	Apr 19	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%	-	-	7.7	7.7	7.7	7.8	7.9	7.9	8.0	8.0	7.9	7.9	7.9	7.9	7.9	7.9	8.0	8.1	8.0	-	7.9	12.9	4.9	5.0	0.7	6.0	1.5	-
	• • • • •	Apr 19	Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) month	%	-	-	3.8	3.3	2.7	3.6	4.1	3.6	3.8	3.5	3.0	3.0	2.6	3.5	3.5	3.2	3.0	3.3	2.9	-	3.1	3.8	1.9	5.7	-	-	-	-
	• • • • •	Apr 19	Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) 12-month cumulative	%	-	-	3.5	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	-	3.4	4.0	2.8	3.6	0.1	0.3	-	-
wol	• • • • • •	Apr 19	Inpatients Staying 21+ Days At Month End Census - NHSI	No	-	-	122	122	146	123	126	137	125	116	139	130	124	129	118	152	159	148	156	154	-	128	24	1	0	0	1	-
ent F	• • • • • •		21+ Days Long Stay Rate - NHSI	%	-	-	20.9	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	18.6	20.1	6.6	0.0	0.0	0.0	0.0	-
Pati	• • • • • •		Estimated Beds - 21+ Days - NHSI	No	-	-	129	115	127	117	96	112	124	126	114	133	101	96	125	111	122	128	121	117	-	109	7	0	0	0	0	-
	• • • • • •	Apr 19	Routine Outpatient Appointments with Short Notice(<3Wks)	%	-	-	27.7	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	37.2	38.0	44.5	31.0	18.2	-	22.2	-
- [• • • • • •	Apr 19	Routine Outpatient Appointments with Short Notice(<3Wks)	No	-	-	2325	1904	2434	3097	3169	3693	3564	3554	3599	3767	3498	3838	3034	3711	4512	4735	4029	4571	39294	1065	2741	362	87	0	313	-
R	• • • • • •	Apr 19	Short Notice Inpatient Admission Offers (<3wks)	%	-	-	47.5	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	54.6	53.7	55.8	53.2	29.3	80.0	56.0	-
	• • • • •	Apr 19	Short Notice Inpatient Admission Offers (<3wks)	No	-	-	1800	1760	2253	2307	1773	1873	1862	1869	2416	2414	2136	2375	2150	2142	2313	2388	2087	2242	22663	187	1726	152	12	20	145	-
			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90	90	88.4	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	90.8	84.0	-	-	-	-	-	-
			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80	80	64.7	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	58.8	52.0	-	-	-	-	-	-
o l			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50	50	75.0	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	68.9	94.1	-	1	-	-	-	-
Strok			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95	95	97.1	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	99.1	100.0	-	-	-	-	-	-
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85	85	87.5	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	70.7	75.0	-	-	-	-	-	-
			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=> %	70	70	87.5	100.0	95.7	100.0	100.0	94.1	100.0	94.7	100.0	88.9	64.3	87.5	75.0	-	-	-	-	-	83.0	75.0	-	-	-	-	-	-
			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=> %	75	75	93.3	97.2	98.0	100.0	100.0	97.4	93.8	100.0	73.9	93.3	77.8	88.4	90.9	-	-	-	-	-	85.1	90.9	-	-	-	-	-	-

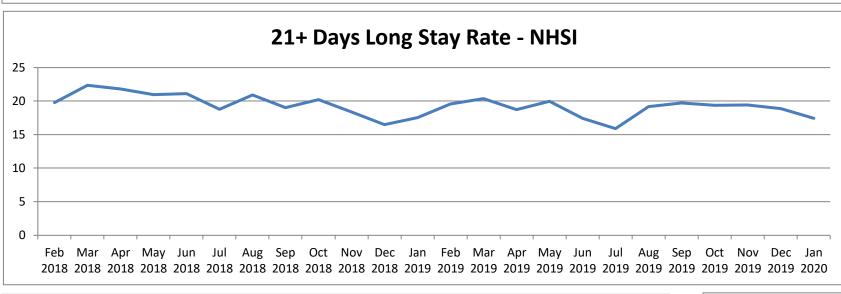


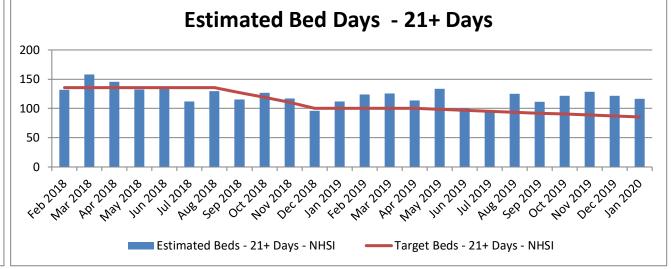
----- Linear (Trust CQC - 12 mth Cumulative)

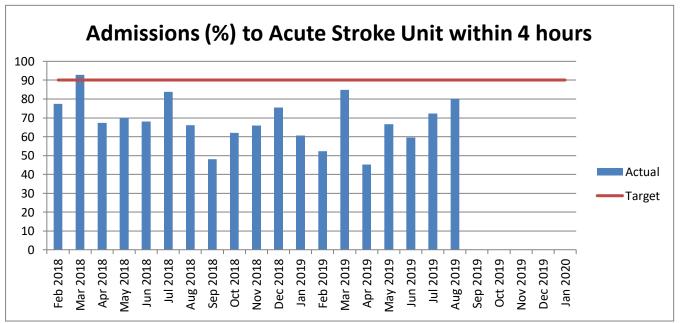
Trust - By Month

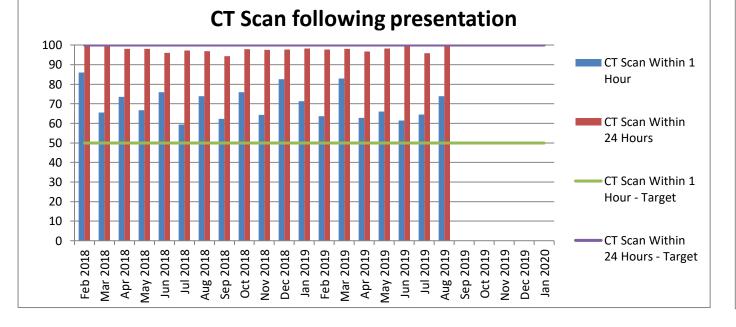


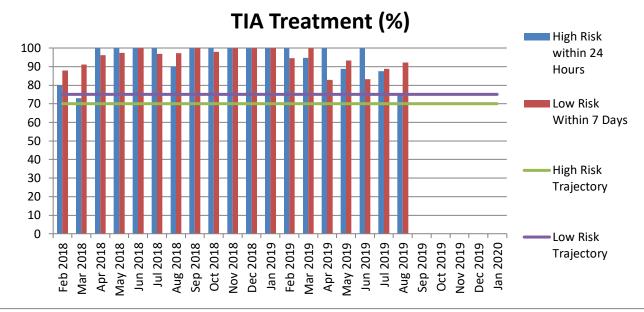








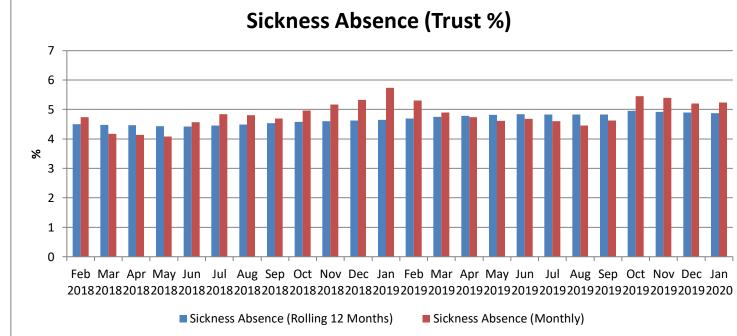


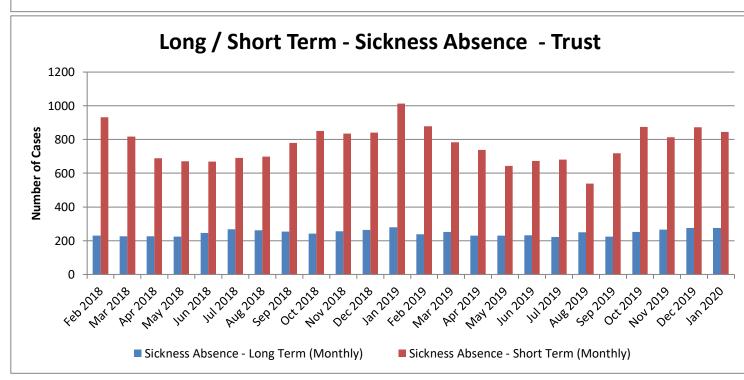


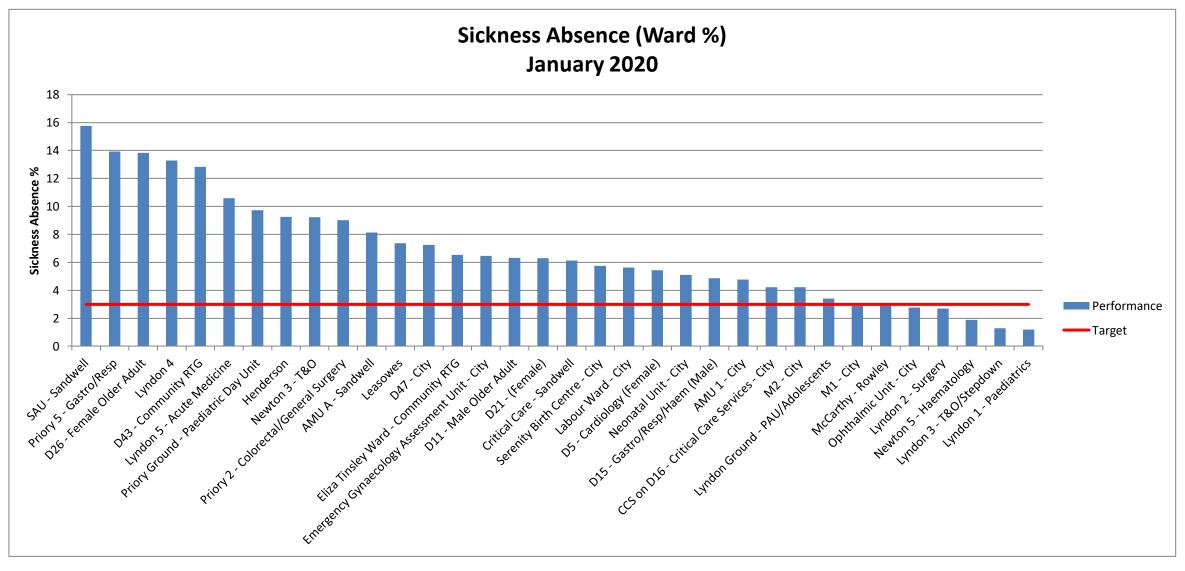
The stroke indicators in the IPR are based on 'patient arrivals' not 'patient discharged' as this monitors pathway performance rather than actual outcomes which may / may not change on discharge. National SSNAP is based on 'patient discharge' which is more appropriate for outcomes based reporting.

CQC Domain - Well Led

	Kitemark	Reviewed	Indicator	Measure	Sta	ndard	Aug			Nov		Jan			Apr	May	Jun	Jul	Aug	Sep			Dec		19/20 Year to			_	Grou		_	
	Michark	Date	maicator	Wicasurc	Year	Month	2018	2018	2018	2018	2018	2019	2019	2019	2019	2019 2	2019	2019	2019	2019	2019	2019	2019	2020	Date	M	SS	W	Р	ı	PCCT	СО
	• • • • • •		PDRs - 12 month rolling	=> %	95	95	90.5	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	90.8	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	-	96.5	93.7	94.7	95.2	100.0	100.0	136.4	0.0
	• • • • • •	Apr 19	Sickness Absence (Rolling 12 Months)	<= %	3	3	4.5	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	5.1	5.2	5.7	0.0	4.0	4.2	4.5
	• • • • • •	Apr 19	Sickness Absence (Monthly)	<= %	3	3	4.8	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	4.9	5.5	5.9	5.3	0.0	3.6	4.8	4.9
			Sickness Absence - Long Term - (Open Cases in the month)	No	-	140	-	-	-	-	-	-	,	,	-	-	-		-	131	156	169	187	153	-	37	42	20	0	2	15	37
	• • • • • •	Apr 19	Sickness Absence - Short Term (Monthly)	No	-	-	698	779	850	836	841	1013	878	784	738	644	674	681	539	719	875	814	872	845	-	195	118	101	11	44	140	100
			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	6.7	7.6	6.4	4.9	-	-	7.9	-
rce	• • • • • •		Mandatory Training - Health & Safety (% staff)	=> %	95	95	93.8	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	87.7	85.0	92.5	91.7	-	97.4	96.0	97.3
rkfo			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	68.6	38.4	50.8	49.2	-	-	59.7	-
Wo			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	39.1	17.5	38.4	50.8	24.1	-	-	59.7	-
			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	6.6	13.9	12.3	11.4	-	-	9.0	-
	• • • • • •	Apr 19	Nursing Turnover (Qualified Only)	<= %	10.7	10.7	13.4	12.8	12.2	12.7	12.5	12.4	12.2	12.1	11.8	12.4	12.3	12.3	11.7	11.5	12.2	12.1	12.6	12.3	12.1	-	-	-	-	-	-	-
	• • • • • •	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	14.9	12.8	19.2	10.8	-	36.7	8.5	1.7
	• • • • • •	Apr 19	WeConnect Staff Satisfaction Score	=> No	4	4					.														23	4	4	4	0	0	4	8
	• • • • • •	Apr 19	WeConnect Staff Satisfaction Response Rate (%)	=> No	35	35								U	NDER F	REVIEW									131	8	20	29	0	0	24	50
	• • • • • •	Apr 19	WeConnect Staff Satisfaction Disengagement Rate	=> %	10	10																			100.0	100.0	100.	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	92.5	100.0	100.	100.0	-	-	100.0	-

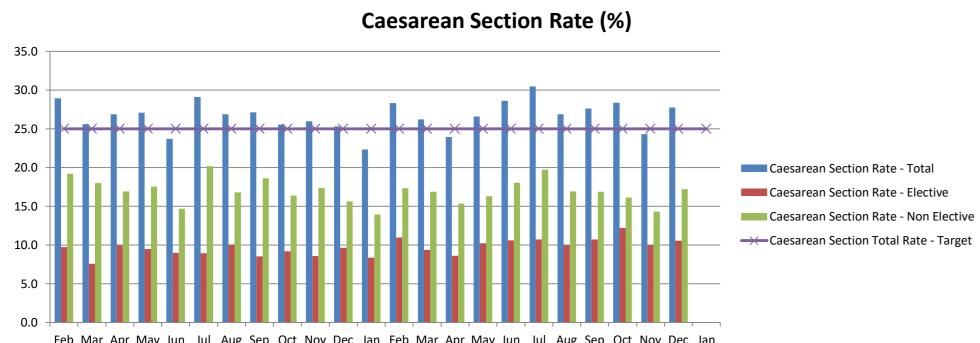


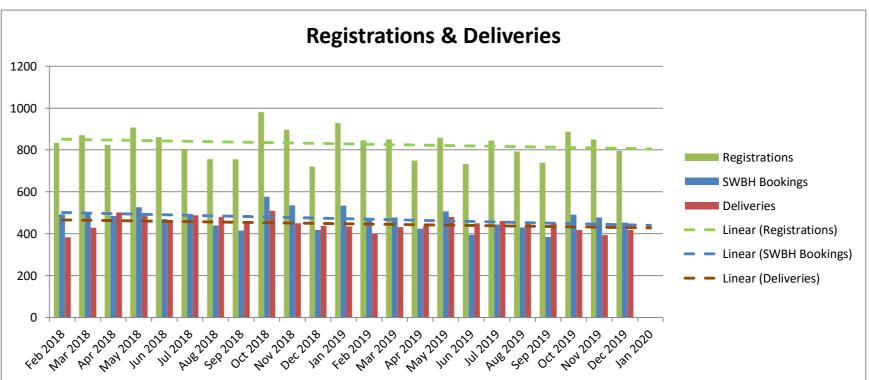




Patient Safety - Obstetrics

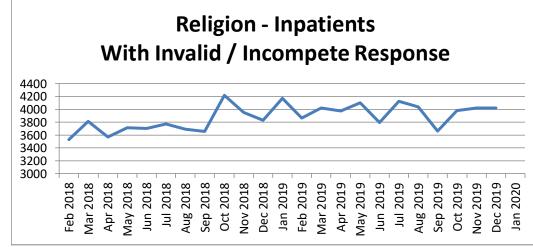
					Traj	ectory																						
Data Quality	Last review	PAF	Indicator	Measure		6-2017 Month	Α	S	0	N		Previ J	ous M F			l (since		2018) A	S	0	N	D	J	Data Period	Me	onth	Year To Date	Trend
			Caesarean Section Rate - Total	<= %	25.0	25.0																	-	Dec 2019	2	27.8	27.2	
		•	Caesarean Section Rate - Elective	<= %			10	9	9	9	10	8	11	9	9	10 1	1 1	1 10	11	12	10	11	-	Dec 2019	1	0.6	10.4	
		•	Caesarean Section Rate - Non Elective	<= %			17	19	16	17	16	14	17	17	15	16 1	8 20) 17	17	16	14	17	-	Dec 2019	1	7.2	16.8	~~~
		•d	Maternal Deaths	<= No	0	0																	-	Dec 2019		0	1	_//_
			Post Partum Haemorrhage (>2000ml)	<= No	48	4													•				-	Dec 2019		1	24	~~~\
			Admissions to Neonatal Intensive Care (Level 3)	<= %	10.0	10.0													•				-	Dec 2019	0).24	1.37	M
			Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																	-	Dec 2019	7	7.18	5.82	/ -///
	Apr-19		Stillbirth Rate (Corrected) (per 1000 babies)	Rate1			4.17	0.00	7.86	2.23	4.57	2.30	2.51	4.64	0.00 6	5.25 4.4	45 6.5	1 8.93	3 2.24	4.80	2.54	4.78	-	Dec 2019	4	1.79	4.56	MM
	Apr-19		Neonatal Death Rate (Corrected) (per 1000 babies)	Rate1			2.08	0.00	0.00	2.23	0.00	0.00	2.51	0.00	0.00 2	2.08 0.0	00 0.0	0.00	0.00	2.40	5.09	2.39	-	Dec 2019	2	2.39	1.27	$\sim\sim$
			Early Booking Assessment (<12 + 6 weeks) - SWBH Specific	=> %	85.0	85.0													•				-	Dec 2019	9)4.4	92.5	
			Early Booking Assessment (<12 + 6 weeks) - National Definition	=> %	90.0	90.0													•				-	Dec 2019	1	47.7	138.8	
			Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0													•				>	Dec 2019	8:	3.78	81.01	V \
	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	<= %			1.3	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	-	Dec 2019	0).47	1.00	^ ✓✓
	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	<= %			1.3	1.2	1.7	2.6	1.2	2.1	0.6	0.5	0.9	1.9 1.	.0 0.	9 0.8	0.3	0.3	1.2	0.5	-	Dec 2019	0).47	0.85	M
	Apr-19	•	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	<= %			0.5	0.3	0.8	1.5	0.4	1.9	0.0	0.0	0.0	0.6 0.	.7 0.	6 0.0	0.0	0.0	0.3	0.0	-	Dec 2019	0	0.00	0.26	M

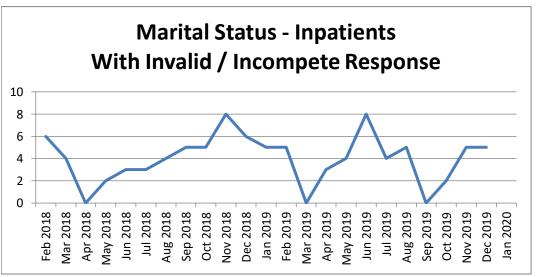


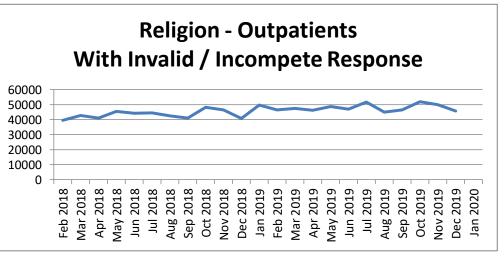


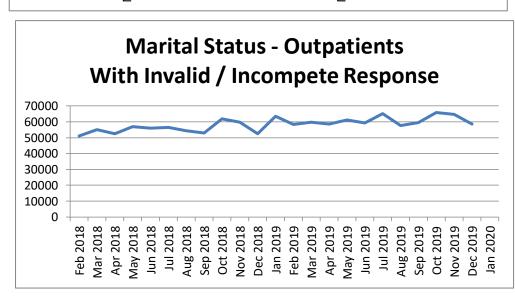
Data Completeness

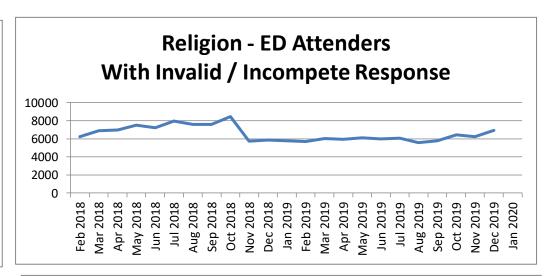
Data Quality Last review	v PAF	Indicator		Γrajectory ar Month	Previous Months Trend (since Aug 2018) A S O N D J F M A M J J A S O N D J	Data Period	Group M SS W P I PCCT CO	Month	Year To Date	Trend
	• 1	Data Completeness Community Services	=> % 50	.0 50.0		Dec 2019	61.2	61.2		
		Percentage SUS Records for AE with valid entries in mandatory fields - provided by HSCIC	=> % 99	.0 99.0		Nov 2019		86.2		
	•	Percentage SUS Records for IP care with valid entries in mandatory fields - provided by HSCIC	=> % 99	0 99.0		Nov 2019		98.5		m
		Percentage SUS Records for OP care with valid entries in mandatory fields - provided by HSCIC	=> % 99	.0 99.0		Nov 2019		99.4		M
		Completion of Valid NHS Number Field in acute (inpatient) data set submissions to SUS	=> % 99	.0 99.0	98.4 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 -	Dec 2019		95.1	97.3	~~~
		Completion of Valid NHS Number Field in acute (outpatient) data set submissions to SUS	=> % 99	.0 99.0	99.8 99.8 99.6 99.7 99.7 99.8 99.6 99.6 99.6 99.6 99.6 99.6 99.6	Dec 2019		99.6	99.6	W
		Completion of Valid NHS Number Field in A&E data set submissions to SUS	=> % 95	.0 95.0	97.6 97.3 97.2 97.6 97.3 97.6 97.6 97.5 97.6 97.6 97.3 97.3 97.2 92.6 82.7 84.4 84.2 -	Dec 2019		84.2	92.4	
		Ethnicity Coding - percentage of inpatients with recorded response	=> % 90	.0 90.0		Dec 2019		87.8	90.7	~~~
		Ethnicity Coding - percentage of outpatients with recorded response	=> % 90	.0 90.0		Dec 2019		91.9	92.3	W
		Protected Characteristic - Religion - INPATIENTS with recorded response	%		67.9 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 -	Dec 2019		65.3	67.1	m
		Protected Characteristic - Religion - OUTPATIENTS with recorded response	%		52.0 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 -	Dec 2019		50.3	50.5	~~~
		Protected Characteristic - Religion - ED patients with recorded response	%		62.8 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 -	Dec 2019		57.0	62.1	***
		Protected Characteristic - Marital Status - INPATIENTS with recorded response	%		100.0 100.0 100.0 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 -	Dec 2019		100.0	100.0	√ /\
		Protected Characteristic - Marital Status - OUTPATIENTS with recorded response	%		38.5 38.6 38.1 37.8 37.2 37.9 37.4 37.1 37.5 37.4 37.2 37.5 37.3 36.8 36.7 36.5 36.5 -	Dec 2019		36.5	37.1	W
		Protected Characteristic - Marital Status - ED patients with recorded response	%		37.0 38.0 37.5 39.9 39.7 40.2 40.0 40.4 40.6 40.0 39.5 39.9 38.4 40.1 40.5 39.8 39.1 -	Dec 2019		39.1	39.8	~~~
		Maternity - Percentage of invalid fields completed in SUS submission	<= % 15	.0 15.0		Dec 2019		7.5	7.1	~~~
	(Open Referrals	No		216,936 216,909 213,645 213,645 213,037 215,389 216,977 221,026 221,026 223,937 331,212 3325,229 334,632 339,632 319,931 314,889	Jan 2020	25,868 516 6,643 24,099 104,786 55,024	216,936		
		Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		38,823 38,047 36,476 37,194 46,595 53,060 54,518 64,564 69,739 ####### ############################	Jan 2020	2,771 357 757 5,048 13,069 16,654	38823		
										7

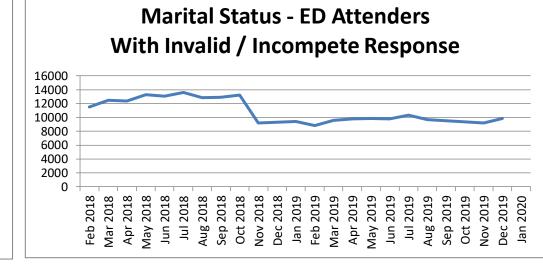


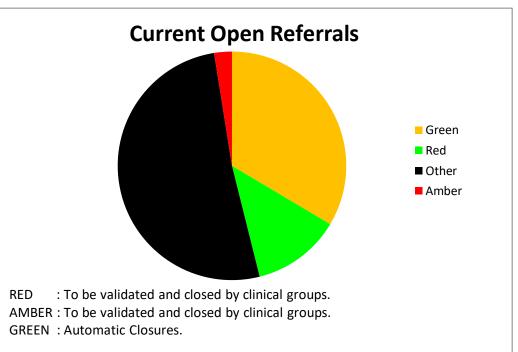












Local Quality Indicators - 2019/2020

Data Quality	Last review	PAF Indicator	Measure	Traje Year	ectory Month	Previous Months Trend (From Aug 2018) Data Group A S O N D J F M A M J J A S O N D J Period M SS W P I PCCT
		Safeguarding Children Level 3 Training	=> %	85	85	90 88 86 <mark>84</mark> 86 86 86 88 85 87 <mark>84</mark> 88 87 85 <mark>84</mark> 88 87 85 84 88 S7 85 84 86 88 Jan 2020
		WHO Safer Surgery - Audit - brief and debrief (% lists where complete) - SQPR	=> %	100	100	100 100 100 100 100 100 100 100 100 99 100 100
		Morning Discharges (00:00 to 12:00) - SQPR	=> %	35	35	15 15 16 16 16 20 18 20 19 16 17 17 17 14 17 15 17 18 Jan 2020 15.7 12 29 29
		ED Diagnosis Coding (Mental Health CQUIN) - SQPR	=> %	85	85	84 84 91 91 92 91 92 91 92 91 92 91 92 91 92 95 55 68 63 61 55 Jan 2020
		CO Monitoring by 12+6 weeks of pregnancy - SQPR	=> %	90	90	81 74 76 82 85 67 83 86 97 94 94 93 93 90 91 92 90 93 Jan 2020
		Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload	=> %	100	100	95 97 95 91 93 93 95 95 95 97 97 97 97 96 93 91 93 - Dec 2019
		Community Nursing - Pressure Ulcer Risk Assessment For New community patients at intial assessment	=> %	95	95	95 97 95 92 94 93 95 95 93 97 98 97 96 96 93 92 93 - Dec 2019

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Trend

Month

Legend

	Data Sources		Indicators which	ch comprise t	he External F	Performance A	Assessment I	Frameworks		
1	Cancer Services		CQC Regula	tory Framew	ork and NHS	Oversight Fra	amework			М
2	Information Department	а	Caring							А
3	Clinical Data Archive	b	Well-led							В
4	Microbiology Informatics	С	Effective							W
5	CHKS	d	Safe							I
6	Healthcare Evaluation Data (HED) Tool	е	Responsive							PCCT
7	Workforce Directorate	f	Finance							СО
8	Nursing and Facilities Directorate									
9	Governance Directorate					Quality - Kit			_	
10	Nurse Bank		Timeliness	2 Audit	Source	4 Validation	Complete ness	6 Granularity	Assessment of Exec Director	
11	West Midlands Ambulance Service		•	•	•	•	•	•	•	
12	Obstetric Department		If segment 2	of the Kitem		this indicates ot yet taken pla		audit of this	indicator has	
13	Operations Directorate		Key	Carro	ont 1 G	I Saza	ont 7	1		
14	Community and Therapies Group		•	Insuf	ent 1-6 ficient	Segm As asset Executive	ssed by			
15	Strategy Directorate		•	Suffi	cient	As asse Executive	ssed by Director]		
16	Surgery B			Not Yet	Assessed	Awaiting ass	essment by]		

17

18

19

20

Women & Child Health

Medicine & Emergency Care Group

Change Team (Information)

Finance Directorate

M Medicine & Emergency Care

A Surgery A

B Surgery B

W Women & Child Health

I Imaging

PCCT Primary Care, Community & Therapies

Corporate

Section	Indicator	Measure	Trajectory Year Month	Previous Months Trend	Data Period	Directorate EC AC SC	Month	Year To Date Trend
Patient Safety - Inf Control	C. Difficile	<= No	30 3		Jan 2020	1 0 0	1	13
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0 0		Jan 2020	0 0 0	0	
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	80 80		Jan 2020	64 86 23	64.9	~~~~
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	80 80		Jan 2020	80 77 58	78.4	
Patient Safety - Harm Free Care	Number of DOLS raised	No		21 26 23 25 15 27 16 28 20 16 21 13 14 24 19 12 25 14	Jan 2020	2 12 0	14	178
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No		21 26 23 25 15 27 16 28 20 16 21 13 14 24 19 12 25 14	Jan 2020	2 12 0	14	178
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No		5 1 2 7 4 1 0 6 2 4 11 2 4 0 4 3 6 3	Jan 2020	0 3 0	3	39
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No		3 5 0 0 1 8 3 5 2 4 0 2 0 1 0 0	Jan 2020	0 0 0	0	14
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No		10 16 13 11 8 13 12 13 11 9 9 8 8 13 12 7 16 7	Jan 2020	1 6 0	7	100
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No		2 3 2 3 2 1 4 2 1 0 0 0 2 2 0 0 0 0	Jan 2020	0 0 0	0	5
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No		0 0 0 0 0 12 0 4 0 2 0 0 0 0 1	Jan 2020	0 1 0	1	-
Patient Safety - Harm Free Care	Falls	<= No	0 0	43 37 53 58 50 53 43 43 51 60 47 58 58 39 30 34 47 46	Jan 2020	16 30 -	46	470
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0 0	0 0 0 2 - 2 0 1 2 2 1 2 0 0 1 0 1	Jan 2020	1 0 0	1	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0 0	1 3 7 15 28 20 16 11 14 11 16 14 12 15 12 3 14 14	Jan 2020	- 14 -	14	125
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0 95.0		Jan 2020	97.7 97.0 92.1	96.4	V
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0 100.0		Jan 2020	100.0 100.0 100.0	100.0	VV
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0 100.0		Jan 2020	100 100 -	100.0	W
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0 100.0		Jan 2020	100 100 -	100.0	V
Patient Safety - Harm Free Care	Never Events	<= No	0 0		Jan 2020	0 0 0	0	0
Patient Safety - Harm Free Care	Medication Errors	<= No	0 0	0 0 0 2 0 0 0 0 0 0 0 0 1 0 0 0	Jan 2020	0 0 0	0	1
Patient Safety - Harm Free Care	Serious Incidents	<= No	0 0		Jan 2020	3 1 0	4	40
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100 98		Nov 2019	72 74 79	74	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%		12.5 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 -	Dec 2019		13.3	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%		12.2 12.3 12.2 12.3 12.3 12.4 12.5 12.5 12.4 12.4 12.4 12.4 12.4 12.4 12.5 12.7 12.9 12.9 -	Dec 2019			12.5

Section	Indicator		Trajectory Year Month	Previous Months Trend	Data Period	Directorate EC AC SC	Month	Year To Date	
Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0 90.0		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	\mathcal{W}
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		Jan 2020	94.1	94.1	94.1	~~~~
Clinical Effect - Stroke & Card	Primary Angioplasty (Call To Balloon Time 150 mins) (%)	=> %	80.0 80.0		Jan 2020	88.2	88.2	89.2	
Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0 98.0		Jan 2020	100.0	100.0	100.0	
Clinical Effect - Cancer	2 weeks	=> %	93.0 93.0		Dec 2019	98.5	98.5		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0 96.0		Dec 2019	100.0	100.0		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0 85.0		Dec 2019	78.1	78.1		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No		3 2 4 4 6.5 4.5 1.5 2.5 4 0.5 2 5 4 2 3.5 1 3.5 -	Dec 2019	3.50	3.50	26	~~~
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No		1.5 0 0 0 2 0 1 1 1 0.5 0 1.5 1.5 2 1 1 2.5 -	Dec 2019	2.50	2.50	11	₩
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No		146 86 104 101 197 91 154 163 168 183 91 149 147 83 141 149 145 -	Dec 2019	145	145		W
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0.0 0.0	2 7 4 6 6 5 9 2 7 2 3 3 4 6 6 9 15 7	Jan 2020	7	7	62	~~^
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0 0.0	0 0 0 0 - 1058 171 7 4 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		27 25 30 29 30 14 24 27 33 47 26 31 24 21 37 31 29 40	Jan 2020	20 20 0	40	319	~~~
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		90 80 87 88 99 75 67 62 84 80 37 58 48 47 54 50 50 58	Jan 2020	27 31 0	58		~~~

Section	Indicator	Measure	Trajectory Year Month	Previous Months Trend A S O N Data Directorate Month Month	Year To Date
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non- clinical reasons	<= %	0.8 0.8	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 1.58	
Pt. Experience - Cancellations	28 day breaches	<= No	0 0	0 0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0 0	0 0 1 3 1 0 0 0 0 0 0 5 3 12 5 14 Jan 2020 0.0 14.0 0.0	39
Pt. Experience - Cancellations	Urgent Cancellations	No		0 0	0
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0 95.0	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	75.5
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	15484
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0 0		6
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0 15.0	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	19
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0 60.0	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	69
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0 5.0	Jan 2020 7.8 8.3 Site S/C	6.8
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0 5.0	Jan 2020 7.0 9.7 Site S/C	8.5
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0 0	9	1893
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0 0	8 5 6 7 7 9 8 6 5 4 4 5 9 33 16 9 12 9 Jan 2020 8 1 9	106
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02 0.02	0.19	0.23
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No		22 4 65 6 65 7 88 7 88 88 9 88 88 1	46779
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No		11 11 61 11 62 11 63 81 81 64 81 61 <	-
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%		24.306 26.20 27.20 2	22
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No		100 36 10 10 10 10 10 10 10 10 10 10 10 10 10	-
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0 90.0	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
RTT	RTT - Non Admittted Care (18-weeks) (%)	=> %	95.0 95.0	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	<u> </u>
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0 92.0	91.8	
RTT	RTT - Backlog	<= No	0 0	641 595 527 497 498 427 341 327 346 452 515 568 451 525 483 559 579 601 Jan 2020 0 407 194	
RTT	Patients Waiting >52 weeks	<= No	0 0	3 0 1 2 1 0 0 1 4 1 7 0 0 0 0 Jan 2020 0 0 0 0	
RTT	Treatment Functions Underperforming	<= No	0 0	5 5 5 5 6 6 6 3 6 6 6 5 7 6 9 7 7 Jan 2020 0 4 3	
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0 1.0	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \

Continu	la disetan	Massums	Tra	jectory			_				F	Previou	s Mont	hs Tre	nd		,		_	,		Data	D	irecto	rate	Manth	Year To	
Section	Indicator	Measure	Year	Month	Α	s	0	N	D	J	F	М	A I	и .	J J	Α	S	0	N	D	J	Period	EC	AC	sc	Month	Date	
Data Completeness	Open Referrals	No			71,562	72,254	74,327	75,665	76,701	77,842	78,753	78,479	78,128	36,636 56 434	54,224	52,647	51,785	52,607	52,552	54,131	55,024	Jan 2020	10,331	23,452	21,241	55024		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Re	No			43,075	43,535	44,852	46,371	47,207	48,431	49,297	44,301	47,385	25,112	21,330	20,501	19,410	16,093	15,603	16,166	16,654	Jan 2020	6,491	7,553	2,610	16654		7
Workforce	PDRs - 12 month rolling (%)	=> %	95.0	95.0			-	-		-	-		-			-			-	-	-	Oct 2019	63.26	43.48	3 -		50.0	٦٨٨ ،
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																	-	Dec 2019	89.19	98.53	3 -		94.9	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.00	3.00	5.0	7 5.19	5.30	5.35	5.35	5.41	5.53	5.67	5.69 5.	54 5.5	50 5.4	3 5.38	5.32	5.44	5.41	5.24	5.14	Jan 2020	4.99	5.24	-	5.14	5.41	
Workforce	Sickness Absence - In month	<= No	3.00	3.00	6.0	9 5.8	5 5.90	6.27	7.16	7.36	6.39	6.32	5.13 4.	97 4.4	49 4.4	1 4.68	5.20	5.90	6.05	5.43	5.50	Jan 2020	5.53	5.48	-	5.50	5.28	~
Workforce	Sickness Absence - Long Term - In month	No			65	65	64	62	74	75	67	68	62 4	16 3	9 42	2 47	45	52	59	57	60	Jan 2020	27	32	0	60	509	~/`
Workforce	Sickness Absence - Short Term - In month	No			174	199	193	209	212	225	201	196	190 1	71 18	88 15	3 142	177	209	176	183	195	Jan 2020	78	117	0	195	1784	~~
Workforce	Mandatory Training (%)	=> %	95.0	95.0																		Jan 2020	84.12	86.44	4 -		87.6	~~~

Surgical Services Group

Section	Indicator	Measure	Traject Year N	ory Ionth	Previous Months Trend	Data Period	Directorate GS SS TH An O	Month	Year To Date	Trend
Patient Safety - Inf Control	C. Difficile	<= No	7	1		Jan 2020	0 0 0 0	0	1	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0		Jan 2020	0 0 0 0	0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80	80		Jan 2020	83.96 74.13 - 0 71.88	79.3		M
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80	80		Jan 2020	80.15 91.09 - 100 91.67	84.2		~
Patient Safety - Harm Free Care	Number of DOLS raised	No			10 9 10 11 8 23 3 8 8 8 8 7 9 8 8 8 7 13	Jan 2020	8 0 0 5 0	13	84	-
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			10 9 10 11 8 23 3 8 8 8 8 7 9 8 8 8 7 13	Jan 2020	8 0 0 5 0	13	84	-A
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			1 2 1 2 3 0 0 1 2 0 1 1 2 0 0 2	Jan 2020	2 0 0 0 0	2	9	M^-\
Patient Safety - Harm Free Care	Number DOLs rolled over from previous month	No			1 1 0 0 0 3 1 0 2 1 0 0 0 1 0	Jan 2020	0 0 0 0	0	4	√
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			1 5 8 5 5 17 5 5 6 8 6 2 7 5 6 4 5 9	Jan 2020	4 0 0 5 0	9	58	Mm
Patient Safety - Harm Free Care	Number of DOLs applications the LA disagreed with	No			0 0 0 2 0 1 0 1 0 1 0 0 0 0 0 0 0	Jan 2020	0 0 0 0	0	3	
Patient Safety - Harm Free Care	Falls	<= No	0	0	11 10 17 12 9 11 11 12 11 8 12 6 9 16 9 11 13 20	Jan 2020	11 4 1 2 2	20	115	~~~
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0 0 1 0 - 0 0 0 0 0 0 0 0 1 0 0 0	Jan 2020	0 0 0 0	0	1	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	2 5 3 7 9 9 7 7 8 8 7 6 8 8 7 4 6 13	Jan 2020	6 2 - 5 -	13	75	//
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0		Jan 2020	96.68 99.13 - 98.84 98.94	98.0		V
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	00.0		Jan 2020	99.87 100 99.54 100 99.86	99.9		VV
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	00.0		Jan 2020	100 - 100	100.0		
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	00.0		Jan 2020	100 - 100	100.0		V
Patient Safety - Harm Free Care	Never Events	<= No	0	0	0 0 1 0 1 0 0 0 1 0 1 0 0 0 0	Jan 2020	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 0	Jan 2020	0 0 0 0	0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0		Jan 2020	0 0 0 0	0	11	M
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98.0		Nov 2019	80 100	82.4		~~~
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			6.8 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 -	Dec 2019		3.7		my
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			6.27 6.3 6.24 6.31 6.39 6.29 6.22 6.3 6.16 6.18 6.07 5.84 5.63 5.48 5.32 5.13 4.87 -	Dec 2019			5.6	

Surgical Services Group

Section	Indicator	Measure	Traj Year	ectory Month		A \$	S	0 1	N C) J	F	Pre M	vious N A	_	s Tren	J	Α	S	0	N	D .	J	Data Period	G	Dire	ctorate TH An O	Month	Year T	
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																			Dec 2019	99	9.0 -		98.98		
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0																			Dec 2019	98	3.2 -		98.15		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																			Dec 2019	98	3.5 -		98.53		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0																			Dec 2019	84	- 4.8		84.81		
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No				4	4	3	5 3	3 4	4	6	5	4	4	3	6	5	4	4	6		Dec 2019	-			6	40	my
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No				1	1	2	1 1	1	1	3	1	4	1	1	3	1	1	4	3		Dec 2019	2.	.5 -	0	2.5	16	_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No			-	113	161	137	185	123	116	175	131	120	1111	105	168	167	137	202	239		Dec 2019	23	39 -	0	239		my
If linical Littact (lancar	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)	Jan 2020	() -	0	0	0	
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	•	0	0	0	0 -	65	5 58	33	18	11	9	13	7	7	-	-	-		Sep 2019	(0	0 7 0	7	65	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			1	19 2	24 2	25 1	9 1	2 11	19	18	18	16	18	22	15	22	42	28	19 2	6	Jan 2020	1	6 2	1 3 4	26	226	~~ \
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			6	55 7	79 7	74 7	71 6	2 46	5 52	41	34	26	30	38	26	33	41	32	19 3	0	Jan 2020	1	7 4	1 6 2	30		~~
	Elective Admissions Cancelled at last minute for non- clinical reasons	<= %	0.8	0.8																			Jan 2020	2.0	64 0.84	- 0.49	1.36		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)	Jan 2020	(0	0 0 0	0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	1	18 2	21 2	22 2	22 2	0 22	2 27	26	38	31	32	39	27	42	55	32	54 3	5	Jan 2020	2	7 4	0 0 4	35	385	
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)	Jan 2020	(0	0 0 0	0	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	=> %	95.0	95.0	98	8.8 99	9.2 9	9.1 99	9.4 99	.7 99.	4 98.	6 99.7	98.8	98.	7 95.	95.7	98.3	93.2	90.3	93.3	96.4 95	5.8	Jan 2020			- 95.75	-	-	~
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0	15	57 8	39 6	69 8	84 8	2 77	64	56	145	102	2 94	148	144	165	88	72	41 4	8	Jan 2020	(0	0 0 48	48	1047	M
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		Jan 2020	_		0	-	-	
	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0	4	.3 5	5.4 5	5.1 2	2.2 4.	4 2.3	3 1.7	7 1.0	2.1	2.1	1.7	2.6	2.2	6.3	5.2	7.2	9.9 8	.3	Jan 2020			8.29	-	-	~~~
	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0	2	2.2 4	1.4 3	3.1 4	.0 3.	0 3.3	3.6	6 4.8	4.8	4.5	5 5.5	6.7	3.7	3.5	6.4	5.9	0.7 2	.1	Jan 2020			- 2.14	-	-	\sim
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)	Nov 2018	-		72	0	0	
	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	1	12 2	21	9	4 1	1 12	2 5	19	7	14	6	3	10	7	12	12	6	7	Jan 2020	2.4	42 4.48	- 0 0.35	7.25	84	M
Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions	=> %	85.0	85.0								0											Jan 2020				75.0	75.6	~~~
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			1	11 1	14 2	23 1	16 1	9 19	17	22	21	13	10	15	16	23	21	17	25 2	4	Jan 2020	Ś	9 10	0 0 5	24	-	MV
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			1	10 1	15	8	3 1	0 11	5	15	6	12	5	3	8	6	10	9	5	7	Jan 2020	4.2	22 9.61	- 0 5.64	6.57	7	////
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			1	12 2	21	9	4 1	1 12	2 5	19	7	14	6	3	10	7	12	12	6	,	Jan 2020	2.4	42 4.48	- 0 0.35	7.25	-	M

Surgical Services Group

Section	Indicator	Measure	Tra Year	jectory Month		A	s o	N	D	J	F	Previ	ous Mo	onths T	rend	J	Α	S	0	N	D J	Data Period	Directorate GS SS TH An	0	Month	Year To Date	
RTT	RTT - Admittted Care (18-weeks) (%)	=> %	90.0	90.0																		Jan 2020	84.9 81.0	74.4	80.3		M
RTT	RTT - Non Admittted Care (18-weeks) (%)	=> %	95.0	95.0																		Jan 2020	88.4 93.4	95.3	92.7		\\\\
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0																		Jan 2020	93.8 92.5	89.5	91.8		~/
RTT	RTT - Backlog	<= No	0	0	1311		1354	1340	1417	1284	1303	1316	1315	1415	1630	1722	1711	1668	1690	1573	1382	Jan 2020	466 186 0 0	730	1382		$ \sim $
RTT	Patients Waiting >52 weeks	<= No	0	0	2	2	3 3	1	0	2	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	10	6 1	15 13	12	13	14	15	14	13	14	15	16	16	13	12	13 1	2 11	Jan 2020	7 2 0 0	2	11		\
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0																		Jan 2020	0.1	-	0.08		1_
Data Completeness	Open Referrals	No			159,369		165,051	166,561	168,695	170,068	172,359	172,210	162,783	107,915	108,313	106,808	107,224	104,317	105,170	105,645	104,786	Jan 2020	4,505 0 14,499 31,291	54,491	104786		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requ	No No			81,586		85,120 86 510	86,561	88,226	90,478	92,552	78,799	81,553	25,583	24,862	20,182	20,403	16,396	12,243	12,318	13,069	Jan 2020	1,361 0 3,164 4,617	3,927	13069		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0			-	-		-	-		-	-	-	-	-			-		Oct 2019	88.3 89.4 93.0 96.5	81.8		89.2	111
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																	-	Dec 2019	98 93.02 - 90.91	96.61		93.8	
Workforce	Sickness Absence - 12 month rolling (%)	<= %	3.0	3.0	4.6	61 4	.65 4.6	7 4.74	4 4.83	4.83	4.81	4.82	4.84	4.90	4.97	5.01	4.96	4.92	5.09	5.12 5.	18 5.23	Jan 2020	4.8 6.6 7.6 4.7	2.6	5.2	5.0	~~
Workforce	Sickness Absence - In Month	<= %	3.0	3.0	5.0	08 4	.99 5.0	0 5.27	7 5.48	5.64	5.01	5.06	4.85	4.54	5.34	4.87	4.33	4.37	6.30	6.27 5.	90 5.93	Jan 2020	5.6 5.5 9.5 6.1	2.7	5.9	5.3	~~/
Workforce	Sickness Absence - Long Term - In Month	No			3:	9 4	17 47	52	49	52	41	47	42	38	46	43	44	39	47	58 5	63	Jan 2020	17.0 12.0 20.0 12.0	0.0	63	475	~~~
Workforce	Sickness Absence - Short Term - In Month	No			13	31 1	50 16	6 158	162	183	154	143	144	142	141	133	93	133	181	174 1	71 118	Jan 2020	38.0 25.0 27.0 27.0	0.0	118	1430	~~\
Workforce	Mandatory Training	=> %	95.0	95.0																		Jan 2020	87.2 88.0 93.2 92.8	90.6		91.3	1

Section	Indicator	Measure	Tra	jectory Month	F	A	6 1									Trend	_		1.6				Data	Directorate	-	Month	Year To	Trend
		1	rear	Wonth	L	Α	S	0	N	D	J	<u> F</u>	M	A	M	J	J	A	S	0] N	D J	Period	G M P	_ _		Date	
Patient Safety - Inf Control	C. Difficile	<= No	0	0		•							•		•			•					Jan 2020	0 0 0		0	0	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0			•							•									Jan 2020	0 0 0		0	0	
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	80.00	80.00			•							•									Jan 2020	78.3		78.3		~\w
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	80.00	80.00								•		•						•			Jan 2020	- 100		100.0		~
Patient Safety - Harm Free Care	Falls	<= No	0	0		0	1	4	0	0	2	1	1	0	0	1	0	1	-	1	-	- 1	Jan 2020	1		1	4	/
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0		0	0	0	0	-	0	1	0	0	0	0	0	0	0	0	0	0 0	Jan 2020	0 0 0		0	0	
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= %	0	0		0	0	0	0	2	0	0	2	4	0	2	-	-	-	-	-	2 -	Jan 2020			-	4	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0								•		•							-		Jan 2020	97.3 78.5		85.9		7
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0									•	•	-				-				Jan 2020	100 99.2		99.7		VV
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0			•			-	-	•	-	-	-	-	-	-	-	•	-		Jan 2020			-		_\
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0						-	-		-	-	-	-	-	-	-		-		Jan 2020	- -		-		W_ L
Patient Safety - Harm Free Care	Never Events	<= No	0	0			•							•	•								Jan 2020	0 0 0		0	1	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0		•	•					•		•	•							•	Jan 2020	0 0 0		0	0	
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0					•													•	Jan 2020	0 0 0		0	7	\

Section	Indicator	Measure	Tra Year	jectory Month		Α	S	0	N	D ,	I F		vious I	Months M	Trend	J	Α	S	0	N	D	J	Data Period	Directorate G M P	Month	Year To Date	
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0									•									-	Dec 2019	27.8	27.8	27.2	
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%				10	9	9	9	10 8	3 1 ⁻	1 9	9	10	11	11	10	11	12	10	11	-	Dec 2019	10.6	10.6	10.4	
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%				17	19	16 1	17	16 1	4 17	7 17	15	16	18	20	17	17	16	14	17	-	Dec 2019	17.2	17.2	16.8	~~~
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0																		-	Dec 2019	0	0	1	_/_/_
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4																		-	Dec 2019	1	1	24	M
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0																		-	Dec 2019	0.24	0.2	1.4	M
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0																		-	Dec 2019	7.18	7.2		/ ~//\
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			4	1.17 0	0.00 7	7.86 2.	.23	1.57 2.3	30 2.5	51 4.6	4 0.00	6.25	4.45	6.51	8.93	2.24	4.80	2.54	4.78	-	Dec 2019	4.78	4.78	4.56	mym
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			2	2.08 0	0.00	0.00 2.	.23	0.00	00 2.5	51 0.00	0.00	2.08	0.00	0.00	0.00	0.00	2.40	5.09	2.39	-	Dec 2019	2.39	2.39	1.27	Λ
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0																		-	Dec 2019	94.4	94.4		
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0																		-	Dec 2019	148	147.7		\sim
Patient Safety - Obstetrics	Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0																		-	Dec 2019	83.8	83.8		
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	%				1.3 1	1.2	1.7 2	2.6	1.2 2	1 0.0	6 0.5	1.8	2.2	1.4	0.9	0.8	0.3	0.3	1.2	0.5	-	Dec 2019	0.47	0.5		M
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	%				1.3 1	1.2	1.7 2	2.6	1.2 2.	1 0.0	6 0.5	0.9	1.9	1.0	0.9	0.8	0.3	0.3	1.2	0.5	-	Dec 2019	0.47	0.5		M~~
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	%			(0.5	0.3	0.8 1	1.5	0.4 1	9 0.0	0.0	0.0	0.6	0.7	0.6	0.0	0.0	0.0	0.3	0.0	-	Dec 2019	0	0.0		M
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0		<u> </u>	N/A			N/A	N/	A N/A		N/A	N/A	N/A	N/A			N/A	-	-	Nov 2019		-		W_ _
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			[3.7	4.2	4.4 5	5.1	6.3 4.	6 4.8	8 3.9	4.3	4.0	3.7	9.2	9.4	6.2	7.9	7.1	7.5	-	Dec 2019		7.5		~~~
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			[4.6	4.6	4.6 4	1.6	4.7 4.	7 4.	7 4.7	4.6	4.6	4.5	4.6	4.8	4.9	5.0	5.1	5.0	-	Dec 2019			4.7	
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0																		-	Dec 2019	100 -	100.0		
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0																		-	Dec 2019	100	100.0		
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0					#[DIV/0!												-	Dec 2019	68.8	68.8		\mathcal{M}
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			[;	3.5 1	1.5	0.5 1	1.5	1.5 2	5 3	3	0.5	2	1.5	2	1	3	3.5	1.5	2.5	-	Dec 2019	2.5 - 0	2.5	17.5	VM
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No				0.5	0	0	0	0 1	1	3	1	0	0	0.5	0.5	0	1	0	1	-	Dec 2019	1 - 0	1	4	_/
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No			1	105	72	100 8	86	84 13	37 17	7 209	9 241	97	85	196	109	96	171	104	148	-	Dec 2019	148 - 0	148		~\\\\
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	Jan 2020	0 - 0	0	0	

Section	Indicator	Measure	Tra Year	jectory Month	A	. S	Ι ο	N	D	J	F	Previo M	us Mo	nths Tre	end J	J	A	S 0	N	D J	Data Period	Directorate G M F	— □	Month	Year To Date	
			I						1							-										
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0 -	-	-	Sep 2019	0		0	0	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			9	4	8	9	6	8	10	12	5	18	12	23	4 1	17 19	10	6 11	Jan 2020	2 9 0		11	125	~
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			26	5 20	24	20	17	13	14	18	17	26	19	23	6 2	22 25	12	13 13	Jan 2020	0 0 0		13		M
	Elective Admissions Cancelled at last minute for non- clinical reasons	<= %	0.8	0.8																•	Jan 2020	4.14		3.0		M
Pt. Experience - Cancellations	28 day breaches	<= No	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0 0	0	0 0	Jan 2020	0		0	0	
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	2	1	2	3	6	11	9	5	6	7	3	5	5	10 5	8	6 7	Jan 2020	7		7	62	MM
Pt. Experience - Cancellations	Urgent Cancellations	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0 0	0	0 0	Jan 2020	0 - 0		0	0	
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			16	39	17	65	61	34	11	17	46	20	10	13	7 2	20 0	0	0 0	Jan 2020	0 0 0		0	116	M
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			0	3	8	4	0	0	0	0	0	0	1	1	1	1 3	1	1 1	Jan 2020	1 0 0		1	-	/
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			4	0	0	10	0	0	0	2	1	4	3	7	1	0 4	23	7 0	Jan 2020	0		0	6	hm
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			1	0	0	1	0	0	0	0	0	0	0	1	0	0 0	5	1 0	Jan 2020	0 - 0		0	-	لسد
RTT	RTT - Admittted Care (18-weeks)	=> %	90.0	90.0																	Jan 2020	70.1		70.1		My
RTT	RTT - Non Admittted Care (18-weeks)	=> %	95.0	95.0																	Jan 2020	89		89.0		
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0																	Jan 2020	89.6		89.6		\sim
RTT	RTT - Backlog	<= No	0	0	12	1 146	176	190	199	174	169	142	146	162 2	201	231 1	87 1	41 142	2 169	191 225	Jan 2020	225		225		///
RTT	Patients Waiting >52 weeks	<= No	0	0	1	0	1	0	0	0	0	0	0	0	0	0	1	0 0	0	0 0	Jan 2020	0		0		N \
RTT	Treatment Functions Underperforming	<= No	0	0	2	2	3	3	3	3	3	2	2	2	3	3	3	2 2	3	3 3	Jan 2020	3		3		$\int \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \! \!$
RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1	0.1																	Jan 2020	-		-		

Coation	Indicator	Manageria	Traj	ectory
Section	Indicator	Measure	Year	Month
Data Completeness	Open Referrals	No		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		
Vorkforce	PDRs - 12 month rolling	=> %	95.0	95.0
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling	<= %	3.0	3.0
Workforce	Sickness Absence - in month	<= %	3.0	3.0
Workforce	Sickness Absence - Long Term - in month	No		
Workforce	Sickness Absence - Short Term - in month	No		
Workforce	Mandatory Training	=> %	95.0	95.0

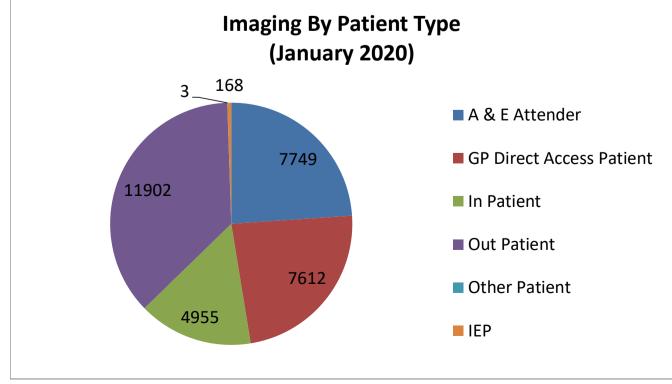
										_												
							Previ	ous M	onths ⁻	Trend								1	Data	Directorate		Year To
Α	S	0	N	D	J	F	M	Α	M	J	J	Α	S	0	N	D	J		Period	G M P	Month	Date
42,447	42,951	44,208	44,908	45,494	46,043	46,262	31,884	27,992	24,316	23,359	23,153	22,571	22,333	22,687	22,895	23,733	24,099		Jan 2020	7,790 10,392 5,917	24099	
26,109	26,984	27,469	28,290	28,789	29,439	29,926	9,906	10,961	7,086	6,248	5,887	5,518	5,139	4,857	4,788	5,150	5,048		Jan 2020	280 3,490 1,278	5048	
		-	-		-	-		-	-	-	-	-			-	-	-		Oct 2019	86.7 82.3 94.4		82.4
																	-		Dec 2019	100 100 87.5		96.4
4.59	4.61	4.66	4.67	4.68	4.77	4.84	4.96	5.06	5.26	5.35	5.34	5.38	5.47	5.69	5.72	5.79	5.71		Jan 2020	3.84 6.7 5.09	5.7	5.5
5.04	4.58	4.85	4.69	4.86	6.14	5.70	5.55	5.35	6.06	6.21	5.59	4.96	5.24	6.00	6.56	6.09	5.26		Jan 2020	5.12 5.63 4.89	5.3	5.7
39	37	30	35	31	48	41	41	39	45	47	40	46	41	44	45	52	45		Jan 2020	5 18 22	45.0	444.0
90	97	134	120	117	135	115	102	97	78	70	87	60	98	98	106	103	101		Jan 2020	8 63 30	101.0	898.0
																			Jan 2020	87.6 86.4 95.4		90.6

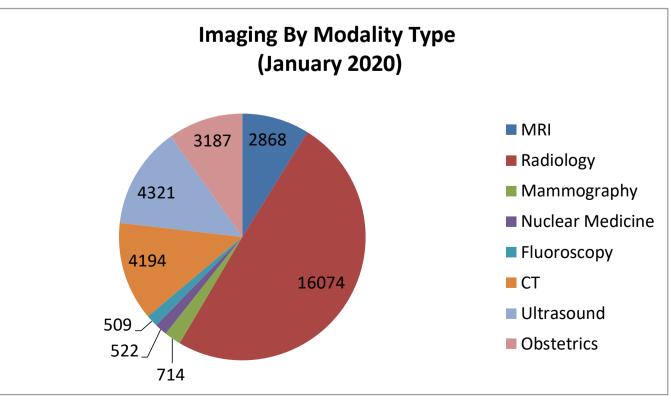
Section	Indicator	Measure	Traj Year	ectory Month	Α	S	0	N
WCH Group Only	HV (C1) - No. of mothers who receive a face to face AN contact with a HV at =>28 weeks of pregancy	No			>	>	984	>
WCH Group Only	HV (C2) - % of births that receive a face to face new birth visit by a HV =<14 days	=> %	95.0	95.0	>	>	91.4	>
WCH Group Only	HV (C3) - % of births that receive a face to face new birth visit by a HV >days	%			>	>	6.62	>
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	>	>	96.1	>
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			>	>	96.9	>
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	>	>	94.6	>
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			>	>	94.2	>
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards witha HV presence	=> No	100	100	>	>	>	>
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	>	>	99.7	>
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100	>	>	99.6	>
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			>	>	41.6	>
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	>	>	>	>
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			>	>	1069	>
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	>	>	>	>
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	>
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	>	>	>	>
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	>
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	>	>	>	>
WCH Group Only	HV - movers into provider <1 year of age to be checked =<14 d following notification to HV service	No			>	>	192	>
WCH Group Only	HV - all untested babies <1 year of age will be offered NBBS screening & results to HV.	Y/N			>	>	>	>

							D		(1									Data	_	D'accide		_		г	Van Ta	
Α	S	0	N	D	J	F	Previ	ous Mo	M	J rena	J	Α	S	0	N	D	J	Data Period	┢	Directo G M	P		Month		Year To Date	
>	>	984	>	>	934	>	>	978	>	>	1045	>	>	928	>	>	>	Oct 2019			928		928		2951	
>	>	91.4	>	>	90	>	>	91.4	>	>	92.4	>	>	90.9	>	>	>	Oct 2019	Ī		91		90.95		91.55	
>	>	6.62	>	>	8.21	>	>	6.09	>	>	7.64	>	>	7.38	>	>	>	Oct 2019			7.38		7.38		7.06	
>	>	96.1	>	>	96.1	>	>	96.4	>	>	96.1	>	>	97.3	>	>	>	Oct 2019			97.3		97.3		96.62	
>	>	96.9	>	>	96.7	>	>	96.7	>	>	96	>	>	95.1	>	>	>	Oct 2019			95.1		95.05		95.89	
>	>	94.6	>	>	94.1	>	>	94.8	>	>	95.8	>	>	96.6	>	>	>	Oct 2019			96.6		96.63		95.72	
>	>	94.2	>	>	93.7	>	>	94.5	>	>	98.6	>	>	98.4	>	>	>	Oct 2019			98.4		98.39		97.06	
>	>	>	>	>	>	>	>	>	>	>	4	>	>	>	>	>	>	Jul 2019			4		4		4	
>	>	99.7	>	>	99.5	>	>	99.9	>	>	99.9	>	>	99.7	>	>	>	Oct 2019			99.7		99.72		99.83	
>	>	99.6	>	>	99.5	>	>	99.8	>	>	99.9	>	>	99.7	>	>	>	Oct 2019			99.7		99.72		99.8	
>	>	41.6	>	>	41.6	>	>	40.3	>	>	44.1	>	>	45.1	>	>	>	Oct 2019			45.2		45.15		43.17	
>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	Feb 2017			-		100		100	
>	>	1069	>	>	99.5	>	>	99.4	>	>	1071	>	>	1125	>	>	>	Oct 2019			1125		1125		2295.4	1/
>	>	>	>	>	>	>	>	>	>	>	99.4	>	>	>	>	>	>	Jul 2019			99.4		99.44		99.44	
>	>	23	>	>	2.6	>	>	1.8	>	>	0.21	>	>	21	>	>	>	Oct 2019			21		21		23.01	11
>	>	>	>	>	>	>	>	>	>	>	2.2	>	>	>	>	>	>	Jul 2019			2.2		2.2		2.2	
>	>	26	>	>	3.3	>	>	2.2	>	>	3.6	>	>	28	>	>	>	Oct 2019			28		28		33.8	11
>	>	>	>	>	>	>	>	>	>	>	3.6	>	>	>	>	>	>	Jul 2019			3.6		3.6	ļ	3.6	
>	>	192	>	>	61.9	>	>	73.5	>	>	255	>	>	196	>	>	>	Oct 2019			196		196	Į	524.5	<u>\\\\\</u>
>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	>	Jan-00								

Imaging Group

Section	Indicator	Measure	Trajectory Year Month	h	AS	s c	D N	D	J	F		ous Mon			A	S O	N	D J	Da Per			Directorate IR NM BS	Month	· [Year To Date	Tren	ıd
Patient Safety - Harm Free Care	Never Events	<= No	0 0		•			•		•	•	•			•		•	• •	Jan :	2020	0	0 0 0	0		0		
Patient Safety - Harm Free Care	Medication Errors	<= No	0 0		•			•		•		•			•	•	•	• •	Jan :	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 1.0	.0 2.	.0 1.0	1.0	1.0	-	2.0 2	2.0 3.0	2.0	-	1.0	1.0 1.0	4.0	1.0 -	Dec	2019			6.67		-	^	/_/
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	=> %	0 0		16.0 15.	5.0 15	5.0 15.0	0 15.0	15.0	14.0	14.0 13	3.0 16.0	0 17.0	16.0	16.0	6.0 15.0	0 18.	0 18.0 -	Dec	2019			-		5.39		~
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0 50.0														-		Aug	2019		73.91	73.91		65.44	~~~	1
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	0													-		Aug	2019		100	100		98.16		1
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			3 4	4 (2	2	2	0	2	0 6	5	3	2	0 1	3	3 5	Jan :	2020	5	0 0 0	5		28	1~~	\ /
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			9 9	9 3	3 5	5	4	4	4	3 6	11	6	3	1 2	3	2 5	Jan :	2020	5	0 0 0	5			_/	\~
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0 1.0					•		•							•	• •	Jan :	2020	0.02		0.02			✓ ✓	√
Data Completeness	Open Referrals	No			904 872	804	922	927	932	940	948	268 977	295	308	350	396	449	516 486	Jan :	2020	500	16 0	516				
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			819 786	837	845	849	865	867	865	901	178	215	233	255	304	357 321	Jan :	2020	348	9 0 0	357				_
Workforce	PDRs - 12 month rolling	=> %	95.0 95.0			-		•	-	-			-	-	-		-		Oct	2019	79.8	100 88.9 97.9	-		72.8	$\mathcal{I}_{\mathcal{A}}$	
Workforce	Medical Appraisal and Revalidation	=> %	95.0 95.0					•		•		•			•		•	-	Dec	2019	100	- 100 -	-	[97.7		
Workforce	Sickness Absence - 12 month rolling	<= %	3.00 3.00		3.84 4.09	09 4.2	27 4.5	5 4.56	4.60	4.59	4.59 4.	.66 4.88	3 4.71	4.62	4.68	4.52	2 4.2	4 4.07 4.0	Jan :	2020	4.7	2.3 2.1 3.1	4.03		4.50	<i></i>	~
Workforce	Sickness Absence - in month	<= %	3.00 3.00		4.27 5.48	48 5.4	41 7.08	8 5.75	4.30	4.14	4.12 4.	.56 5.00	3.86	3.53	4.82	.46 4.20	0 4.1	2 3.57 3.6	4 Jan	2020	4.1	4.1 0.0 3.6	3.64		4.17	△	~
Workforce	Sickness Absence - Long Term - in month	No			9 10	0 1	1 14	14	10	7	6 1	10 10	7	5	8	9 10	7	7 5	Jan 2	2020	2	0 0 1	5		78	$\sqrt{}$	\
Workforce	Sickness Absence - Short Term - in month	No			28 39	9 3	7 31	31	39	27	30 3	34 19	26	24	19	24 33	25	33 44	Jan :	2020	27	1 0 7	44		281	M,	
Workforce	Mandatory Training	=> %	95.0 95.0							•							•	•	Jan :	2020	92.9	94.6 93.3 92.7	93.0		93.6	- ~~	<u></u>
Workforce	Imaging - Total Scans	No									-	32,017	29,982	32,665	29,248	31,286 29,463	29,477	32,398 28,573	Jan :	2020			32398		305371		~~
Board KPI	Imaging - Inpatient Turnaround Time <=24hr	=> %	90.0 90.0					-	-	-	- 6	65	69	67	69	67 77	77	77 79	Jan :	2020			79.1		71.0		
Board KPI	Imaging - Urgent Other(GP 5) Turnround Time <=5d	=> %	90.0 90.0					-	-	-	- 7	76 69	65	66	70	71 77	75	72 72	Jan :	2020			71.8		71.3		
Board KPI	Imaging - All Imaging Work Reported in less than 4 weeks (request to report)	=> %	95.0 95.0				-	-	-	-	-	- -	-	-	-	- 88	90	90 88	Jan :	2020			88.5		89.2		
								_	_	D B.4																	





Primary Care, Community & Therapies Group

Section Indicator	Measure Trajectory Year Month	Previous Months Trend A S O N D J F M A M J J A S O N D J	Data Period	Directorate AT IB IC CT CM	Month Year To Date	Trend
Patient Safety - Inf Control MRSA Screening - Elective	=> % 80.0 80.0		Jan 2020	10	10	
Patient Safety - Harm Free Care Number of DOLS raised	No	9 14 18 4 6 6 6 3 4 6 5 6 13 5 7 6 4 6	Jan 2020	0 6 0 - 0	6 62	Luh
Patient Safety - Harm Free Care Number of DOLS which are 7 day urgent	No	9 14 18 4 6 6 6 3 4 6 5 6 13 5 7 6 4 6	Jan 2020	0 6 0 - 0	6 62	Luh
Patient Safety - Harm Number of delays with LA in assessing for standard DOLS application	No	1 5 3 0 1 1 0 1 1 3 3 6 0 0 1 1	Jan 2020	0 1 0 - 0	1 16	\ _
Patient Safety - Harm Free Care Number DOLs rolled over from previous month	No	5 3 0 0 0 4 1 0 1 2 0 2 0 0 1 1 0	Jan 2020	0 0 0 - 0	0 7	<u></u>
Patient Safety - Harm Number patients discharged prior to LA assessment targets	No	0 4 8 2 3 0 4 1 2 5 2 1 8 2 4 2 1 2	Jan 2020	0 2 0 - 0	2 29	Anh
Patient Safety - Harm Free Care Number of DOLs applications the LA disagreed with	No	0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jan 2020	0 0 0 - 0	0 0	^
Patient Safety - Harm Number patients cognitively improved regained capacity did not require LA assessment	No No	0 0 0 0 0 4 0 0 1 0 0 0 0 0 0	Jan 2020	0 0 0 - 0	0 1	
Patient Safety - Harm Falls	<= No 0 0	31 32 25 40 31 21 28 22 33 21 29 22 24 23 28 26 28 29	Jan 2020	2 26 1	29 263	Mm~
Patient Safety - Harm Falls - Death or Severe Harm	<= No 0 0	0 0 4 1 - 0 1 0 2 1 1 0 0 0 3 1 0 0	Jan 2020	0 0 0 - 0	0 8	1
Patient Safety - Harm Free Care Pressure Ulcer SWB Hospital Acquired - Total	<= No 0 0	2 4 6 8 8 10 20 8 26 18 8 12 16 20 8 14 22 18	Jan 2020	- 9	9 81	_MV
Patient Safety - Harm Free Care Pressure Ulcer DN Caseload Acquired - Total	<= No 0 0	1 1 7 37 32 45 34 34 36 16 24 29 34 27 31 18 24 25	Jan 2020	25	25 264	~~~
Patient Safety - Harm Free Care Never Events	<= No 0 0		Jan 2020	0 0 0 - 0	0	
Patient Safety - Harm Free Care Medication Errors	<= No 0 0		Jan 2020	0 0 0 - 0	0	
Patient Safety - Harm Free Care Serious Incidents	<= No 0 0		Jan 2020	0 0 2 - 0	2 56	~~~
Pt. Experience - FFT,MSA,Comp Mixed Sex Accommodation Breaches	<= No 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Sep 2019	0 0 0 - 0	0	
Pt. Experience - FFT,MSA,Comp No. of Complaints Received (formal and link)	No	6 4 5 10 5 9 6 7 14 4 13 8 6 9 14 8 5 11	Jan 2020	2 5 1 - 3	11 92	MW
Pt. Experience - No. of Active Complaints in the System (formal and link) FFT,MSA,Comp	No	12 11 13 16 16 19 23 16 22 5 20 17 7 14 15 13 7 0	Jan 2020	0 0 0 - 0	0	~M

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Traj	ectory
Section	Indicator	Wieasure	Year	Month
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00
Workforce	Sickness Absence - in month	<= %	3.00	3.00
Workforce	Sickness Absence - Long Term - in month	No		
vvoikioice	Sickless Absence - Long Term - III month	INO		
Workforce	Sickness Absence - Short Term - in month	No		
Workforce	Mandatory Training	=> %	95.0	95.0

								ıs Mon		end				_			
Α	S	0	N	D	J	F	M	Α	M	J	J	Α	S	0	N	D	J
		-	-		-	-		-	-	-	-	-			-	-	-
4.05	4.08	4.15	4.14	4.14	4.17	4.25	4.27	4.30	4.37	4.40	4.39	4.38	4.33	4.36	4.23	4.24	4.19
																	1
4.06	4.17	4.79	4.91	4.69	5.33	5.21	4.06	3.79	4.08	3.67	4.08	3.84	3.57	4.13	4.07	4.78	4.82
	,																ı
37	33	34	42	35	37	29	33	25	31	25	25	26	23	27	23	32	30
	1																ı
85	97	118	112	104	163	147	102	101	79	86	94	78	93	135	121	121	140

		Jup
		Dete
D	J	Data Period
-	-	Oct 2019
.24	4.19	Jan 2020
.78	4.82	Jan 2020
32	30	Jan 2020
21	140	Jan 2020
		Jan 2020

3.13	4.63	4.5	-	4.4	4.19	4.32
2.71	5.51	5.5	-	5.5	4.82	4.09
3	-	-	-	-	30	267
20	10	4.4	0	40	140	4040

Month

Directorate
AT | IB | IC | CT | CM

Primary Care, Community & Therapies Group

Section	Indicator	Measure	Traje Year	ectory Month	Α		S C) N	N C) J	F	Previo		onths T	end J	J	Α	S C) I	N D	J	Data Period	Directora	te CT CM	М	onth	Year To Date	
Community & Therapies Group Only	DVT numbers	=> No	730	61	-		- 7	7 7	7	3	2	5 12	20	38	43	55	43	27 2	5 2	29 19	21	Jan 2020				21	320	~~~
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	12	9	.95 13	10.	.7 10	.6 12.	8 11	.2 9.7	6 6.87	7.84	12	11.5	12.7	1.6		- -	-	Sep 2019			1	10.8	11.1	~~
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9	9	9	9	.13 9.0	05 8.7	75 9.4	8.5	6 8.5	56 8.78	8 8.92	2 8.23	10.1	8.7	10.5	0.59 9.0	67 9.	01 10.6	-	Dec 2019			1	10.6	9.5	
Community & Therapies Group Only	STEIS	<= No	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	22	2	0.1 17	.9 17.	.4 2	0 17.	4 20	.6 20.	3 24	21.8	15	19	22.5	1.7 19	0.7 19	9.4 20.7	19.4	Jan 2020			1	9.38	202.98	w/~
Community & Therapies Group Only	DNA/No Access Visits	%			1		1 1	1	1	1	1	1	1	1	1	1	1	0 1	1 1	1 1	-	Dec 2019				0.8		~
Community & Therapies Group Only	Baseline Observations for DN	=> %	95	95	95	9	6.4 92	2.4 91.	.2 92	.1 93.	8 96	.4 95.	8 91.2	97.7	96.8	95.7	97.3	95 93	3.7 92	2.1 93.6	-	Dec 2019			9	3.64	94.76	
Community & Therapies Group Only	Falls Assessments - DN Intial Assessments only	=> %	95	95	96	9	7.2 94	91.	.8 93	.1 94.	4 96	.2 96.	6 93	97.5	96.5	96.1	97.7	93	3.1 91	1.4 93.4	-	Dec 2019			Ş	93.4		
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Intial Assessments only	=> %	95	95	96	9	97 9	4 92.	2.1 93	.5 94.	4 96	.4 96.	4 93.2	97.5	96.8	96.5	97.3	93	3.3 92	2.3 93.4	-	Dec 2019			Ś	93.4		
Community & Therapies Group Only	MUST Assessments - DN Intial Assessments only	=> %	95	95	95	9	7.6 9	3 90	.5 92	.6 94.	2 95	.7 95.	8 92.6	97.2	96.8	96.3	97.7	93	3.1 91	1.4 93.6	-	Dec 2019			9	3.64		
Community & Therapies Group Only	Dementia Assessments - DN Intial Assessments only	=> %	95	95	95	9	0.4 91	.8 86	6 89	.8 91.	8 92	.3 93.	2 91.3	95.4	91.6	94.2	93.3	3.7 88	3.8	90.9	-	Dec 2019			9	0.91		
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%			95	9	95 9	5 95	5 9	4 96	9	5 96	-	95	1	94	95	95 9	5	- 95	-	Dec 2019			9	4.65		WW
	Making Every Contact (MECC) - DN Intial Assessments only	=> %	95	95	96	9	5.8 93	3.6 91	1 93	.1 94.	6 96	.7 95.8	8 92.4	97.5	96.8	96.3	97.1	93	3.1 90	0.6 92.4	-	Dec 2019			9	2.42	94.59	
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No			2		4 6	8	8 8	3 10	20	0 8	26	18	8	12	16	20 8	3 1	4 22	18	Jan 2020				9	81	_MV
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No			0		1 5	5 26	6 -	-] -	-	-	-	-	-	-		-	- -	-	Nov 2018				26	37	\
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No			1		0 2	2 11	1 -	-] -	-	-	-	-	-	-	- -	- .		-	Nov 2018				11	14	۸.
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	A	S	· 0) N	l D	J	F	Pre	evious	Months M	Trend	l J	Α	S	0	N D	J	Data Period	E	Di SG F W	irectorate NO		Month	Year To Date	Trend
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			5	4	4	1;	3 3	5	5	4	2	1	12	10	0	3	6	2 3	6	Jan 2020		2 1 0	0 1 0 2		6	45	M
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			8	8	5	12	2 11	8	8	9	2	6	4	5	1	4	3	4 1	0	Jan 2020		0 0 0	0 0 0 0		0		~~~
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0			-	-		-	-		-	-	-	-	-				-	Oct 2019		71 96 94	89 94 97 89			89.2	1 ////
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0																	-	Dec 2019		95			0.0	93	
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	4.4	0 4.3	8 4.3	35 4.2	25 4.22	2 4.2	1 4.2	23 4.2	1 4.2	21 4.21	4.22	2 4.21	4.26	4.32	4.47 4.	41 4.43	4.47	Jan 2020		3.89 2.07 2.93	3.38 3.38 5.22 5.60	6	4.47	4.32	
Workforce	Sickness Absence - in month	<= %	3.00	3.00	4.2	2 3.8	2 4.3	35 4.2	26 4.23	1 4.6	7 4.6	3.8	1 3.7	71 3.80	4.21	4.47	4.42	4.68	5.03 4.	48 4.46	4.91	Jan 2020		3.34 0.28 3.54	1.75 3.66 6.40 6.74	4	4.91	4.43	~~~
Workforce	Sickness Absence - Long Term - in month	No			33	3 26	5 26	6 2	5 29	27	28	3 28	3 20	25	32	32	40	33	35 3	32 27	27	Jan 2020		5.00 0.00 4.00	2.00 0.00 16.00 0.00	0	27.00	303.00	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Workforce	Sickness Absence - Short Term - in month	No			54	70	86	6 93	3 84	120	0 112	2 86	79	57	65	82	54	92	90 8	108	100	Jan 2020		4.00 0.00 13.00	16.00 0.00 67.00 0.00	0	100.00	811.00	~~~
Workforce	Mandatory Training	=> %	95.0	95.0																		Jan 2020		93 97 97	96 96 - 93	3	94.3	94	~~~