

Sandwell and West Birmingham Hospitals

NHS Trust



Integrated Quality & Performance Report

Month Reported: **September 2020**

Reported as at: 28/10/2020

TRUST BOARD

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Operational Performance at a Glance: September 2020	
Highlights :	<ul style="list-style-type: none"> • Recovery: We are still continuing to see a steady increase in patient attendances in September and October so far, across the range of elective and non-elective patients, A&E attendances and Diagnostics ; the recovery activity plans have been set for the remaining part of the calendar year and reflect the 'NHSI Phase 3' guidance in respect of speed of recovery and prioritisation; this will include the guidance criteria in respect of prioritised patients, diagnostics and recovery targets compared to last year, for both, inpatients and outpatients. As at September the Trust delivers the Phase 3 and Clinical Groups own targets, but has not achieved its ambitious pre-COVID targets (internal Production Plan) at this stage. The next tab gives more insight. Clearly future recovery depends on CV19 course and potential likelihood of elective activity having to be cancelled. • A&E performance dropped again in September, looking similar in performance for October; ED performance is heavily impacted by ability to manage patient flow down-stream to wards; currently ED intensively focussing on implementing the NHS111 national initiative (patients calling NHS 111 before attending ED or other, appropriate settings which aims to alleviate ED crowding; 999 calls continue as before for seriously ill and injured) - the initiative goes live on 20th November 2020 • RTT & DM01 performance is fully dependant on recovery plans being achieved, patients attending safely diagnostics appointments, and so it is likely that we can expect an overall longer period before we are able to recover to the 92% standard; however some services should be able to achieve this faster than others. RTT plans are being finalised following group changes. GP referrals are increasing steadily, so essential that we are progressing patients through the waiting list now as more referrals are coming through. • Cancer performance is below standards in August (latest reported position) and we see an unusual drop in 2 week waits standard. However, other cancer standards are improving steadily; the recovery of the 62 days is predicted for the beginning of quarter 4 (Jan2021)
A&E Performance	<ul style="list-style-type: none"> • Performance dipped to 80.3% in September and heading towards c79% for October (position at this stage of reporting with October still a few days to run) ; attendance numbers, whilst increasing steadily right up to August are starting to drop again in September to 14,458 and dropping again in October c13,000 (October month still not complete) ; so we are seeing again an impact of patients staying away from attending ED. • Despite lower attendances we continue to see high levels of breaches, in September we reported 2,860 patients breaching the 4 hr target and in October this is around 2,600 so far; breaches are proportionally higher at Sandwell A&E ; main reasons for the breaches explained as cubicle capacity for the 'cold stream' patients and lack of patient flow into the ward bed-base. • There are 10 patient flow projects currently set up. Some of which have short-term impact and others that will focus on the longer term. A separate patient flow operational group is to be set up in November to monitor, tweak and develop the patient flow projects as to optimise patient flow throughout the organisation. • Other Same Day Emergency Care (SDEC) initiatives are also being optimised, including the fore-mentioned NHS 111 initiative with an aim to secure ED for the most ill and injured patients.
RESPONSIVE	<ul style="list-style-type: none"> • Benchmarking with regional A&E regional providers as at September indicates that we are just above UHB but behind Dudley, Walsall and Wolverhampton. We are doing more or less the same activity levels (compared to last year) as regional peers, but we are showing higher level of breaches, hence resulting in poorer performance compared to the other three Dudley, Walsall and Wolverhampton; Improvement focus clearly is required for 'cold' cubicles, supported by patient flow monitoring overseen by Urgent Care Board; but further difficulties may be experienced in the light of CV19 developments.
	<ul style="list-style-type: none"> • RTT performance for September improving to 68% with a trust aim to recovery to full standard by March 2021, clearly, achievement is dependent on elective activity not being cancelled due to CV19. As at September the RTT waiting list for the Trust was at 35,600 patients, in line with previous levels, with a backlog (patients over 18 weeks wait time) of 11,523 which has reduced from previous higher levels (as activity recovery was progressed). • At speciality level, we can see improvements generally for most specialities, but more challenging for Gastro, Oral and Dermatology with the lowest RTT performance at this stage. • 376 patients have breached the 52 week wait as at September.
	<ul style="list-style-type: none"> • September DM01 performance improving to 67.8% improving towards 99% full standard; recovery plans to achieve recovery to standard by November are in place, but some services will find this difficult without additional capacity due to large back-logs; recovery of services is continuing with a number of issues around patients not being keen to attend. Reminders and phone-calls to patients providing reassurance on safety are in place and we have had large success with Neurophysiology patients who increased rapidly their attendance. We continue to follow National policy by not removing patients from the waiting list who DNA or who do not want to come in at this time. • We have in total 3,768 (last month 5,020) breaches e.g. patient above the 6 weeks waiting time, of which 1,829 are on the waiting list above 13+ weeks
	<ul style="list-style-type: none"> • The Imaging diagnostic patient volumes increased in September increasing again to 26,957 (24,445 in August) and getting closer to pre-COVID levels which were at an average of c30,000-32,000 per month. • Against these September volumes, and the top three Board KPIs performance was: Inpatient total turnaround (TAT) time within 24hrs has dipped again to 82% against the 90% trust target (previous high was 91%); Urgent GP tests within 5 days improved slight to 56% vs 90% target, but on review most of the patients fitted in the non-responder category. Overall Imaging achieved to turn around 83% of 'all Imaging work' under the 4 weeks (target of 95% and previous highs of 94%) • Seeing now pressure in the booking of patients and patients who are too anxious to attend causing performance to fall below expected and previously achieved levels. Imaging are continuing to keep all patients who do not attend on their waiting list, whilst this is in place it will be challenging to progress recovery of the KPI or the DM01 as the impact of DNAs is significant. We continue to follow National policy by not removing patients from the waiting list who DNA or who do not want to come in at this time.

Operational Performance at a Glance: September 2020

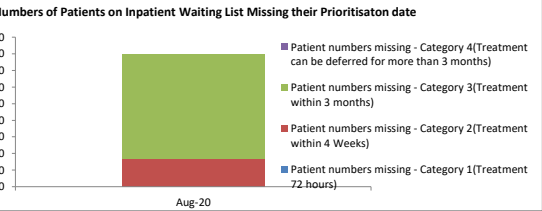
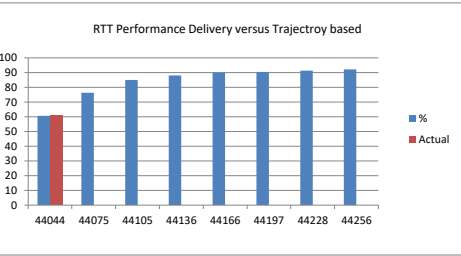
	Cancer Performance	<ul style="list-style-type: none"> Reporting the August position (latest available reporting period), the Trust, has met some access cancer standards, but continues to recover the 31-day and 62-day standard; however, we have now in August failed to deliver the 2WW at Trust level against the national target which is the very first time within SWBH. Overall 90.1% were seen within the 2 WW target. Four areas were under target colorectal (92.9%), Urology (88%), Dermatology (83.8%) and Upper GI (67%). Recovery towards standards is showing an improving position and we continues to work towards March 2021 for full recovery, but with challenges. Failed standards: 2WW at 90% vs 93% target, 31-Day at 93% vs 96% target and 62 Day 78% vs 85% target. Neutropenic sepsis delivery of 92% in September with 2/25 breaches; avg door to treatment time is 46mins and well below the 1 hr target. Breaching patients breached by only several minutes above the hour.
	Cancellations	<ul style="list-style-type: none"> September cancellations have doubled from last month resulting in a cancellations rate against all elective patients of 1.2%, exceeding the national standard of 0.8%. Avoidable cancellations were at 17/36 (47%)
SAFE	Infection Control	<ul style="list-style-type: none"> Infection Control metrics continue to report reasonable performance; we reported 1x CDIFF case in September (including community) and 12 cases on a year to date basis against the year to date target of 19. We also reported 1x MRSA case in September, the first case this year. MRSA screening rates non-electively delivering 93% in September and are very close against the target 95%. Elective patients MRSA screening rates are still below this target at 79% in September against the 95% target and this needs improvement focus. This performance is based on counting swabs within 6 weeks validity. With the MRSA incident in the month, a root cause analysis will be carried out and reported through the Quality & Safety Committee
	Harm Free Care	<ul style="list-style-type: none"> The Trust falls rate per 1,000 bed days in September is still showing increased levels reporting at a 4.66 rate just below the Trust target of 5; we report 82 actual falls in September, however there were no falls causing serious harm. The Trust Falls Lead Nurse looked at a comparison of number of falls during the covid period among some of the regional Trusts; this showed that SWB is below the average for the eight Trusts in the sample. Some Trust reported higher and lower than normal incidences. As a group they looked at the data and drew out common themes experienced during the covid surge in order to learn and prepare for the future. This is a really positive position for the Trust.
		<ul style="list-style-type: none"> Pressure Ulcers (Hospital or DN Caseload Acquired PUs) in September are steady to previous trends and showing low run rates; the overall Trust reports 49PUs (49 last month). There were no Grade 4 PUs reported. The Trust Tissue Viability Nurse (TVN) met with the West Midlands TVS leads, and all saw a reduction in hospital acquired cases. There was an increase in 'device related damage' in all the Critical Care areas, related to patients being prone for 12 hours at a time. Nationally no solution has been found as yet, the breathing tube has to be there and the damage caused is outweighed by the risk of moving the patients. NHSE/I are trying to gather some incidence data around device related damage.
		<ul style="list-style-type: none"> VTE assessment performance at 95.5% meeting the 95% target at Trust level; however missing the target in Surgical and Women's & Children's Group level Sepsis screening of eligible patients at 96% in September of which 23% of screened patients being sepsis positive; 90% of the sepsis positive patients were treated, of which 81% were treated within the prescribed 1hr, which is the highest ever performance for this last metric. Whilst Sepsis performance is still just below expected standards, we are seeing significant improvements based on the plan put in place by the Medical Director's team.; Groups are supporting and monitoring ward and ED sepsis performance routinely via available reporting and non-compliance drill down to patient level functionality.

Operational Performance at a Glance: September 2020		
	Obstetrics	<ul style="list-style-type: none"> The overall Caesarean Section rate for September has increased to 31.7% against trust target of 25%; year to date just below 30%. This is split between : Elective C-Section rates slightly higher than average trend and at 14% in September Non-elective C-Section rates were on average 17% during the full year, and in September at 17% In September, after elevated still-birth rate of 6.44 (and 11.9) per 1,000 babies this has decreased to 4.94. Neo-natal death rate in September again at zero, following an elevated few previous months A full service review report has been submitted to the Quality & Safety Committee during the last couple of months reporting on the elevated still birth and neonatal rate position.
CARING	Patient Experience (FFT), Mixed Sex Accommodation (MSA), Complaints, Flu Vaccination	<ul style="list-style-type: none"> MSA has not reported as yet for September . A data cleanse in September combined with a visit by the Chief Nurse to the Assessment Units suggest that this is where our breaches are. A decision is required as to when we begin to address this issue in the context of Covid-19 pressures and capacity; flu vaccination reporting resumes again for the winter season in October when vaccinations started and the Trust plans to have vaccinated 80% of the front-line staff by end of December.
EFFECTIVE	Mortality, Readmissions	<ul style="list-style-type: none"> Readmissions rates (30 days after discharge) have gone up again in September to 9.6%; the Groups are reviewing their readmissions reasons to assure themselves that these are as expected. Quality Plan is actively reviewing and leading readmissions focus. HSMR reporting at 134 above the tolerance levels as at the end of May (latest available reporting period and also during COVID), showing an elevated position against the weekend mortality rate which is 143 and weekday at 131. This position makes the Trust HSMR position a significant outlier compared against the national picture. As reported last month, an initial review concludes that some of the coding included COVID related deaths, which should have been excluded; the errors are multi-factorial e.g. delayed pathology tests after coding has taken place and other similar issues; learning from deaths facilitator and coding team will be jointly looking at corrections to ensure national guidance is appropriately applied (will take some time). The Learning from Deaths Facilitator will be producing a detailed review paper, which will summarise findings and learning. In the interim, however, looking therefore at deaths levels on a 'real' basis compared to same period last year, we can see April and May excess deaths, as expected from COVID, however more recent months are showing a reduction to prior year same period. This provides some reassurance that the outlier position is a coding related resulting in an increased HSMR rate. Coding team will be working with the Learning Deaths Facilitator to appropriately correct coding following the detailed review outcome. Mortality review performance picking up to 85% which is lower than trust target of 90% however, reasonable against peers which is around 80% pre-COVID levels.
	Stroke & Cardiology	<ul style="list-style-type: none"> Stroke performance good against most indicators; a dip in thrombolysis within the hour is observed in September and RCA is awaited. Admission to the stroke ward within 4 hours dipped slightly in the month below the 80% target. Cardiology performance also reporting good performance across all indicators
	Patient Flow	<ul style="list-style-type: none"> 21+ LOS patients (long stay patients) count at the end of September at 72 patients (within the acute setting; from 1 April 2020 we started reporting just the acute patients in line with current NHSI guidance and to align with our SitRep). This represented c9% of our bed base occupied by this long stay patient cohort and is in line with other providers. Neck of Femur performance recovers from to 80% in September against the 85% target. This indicator displays large fluctuations in performance.
WELL LED	Workforce	<ul style="list-style-type: none"> Sickness rate in month has risen to 5.1% (last month 4.7%) resulting in a cumulative rate of 5.6% against the trust target of 4%. Ward sickness rate specifically is at 7.9% increasing to the rates seen in the last three months. PDR rate for the Trust has been recorded at 91% and Mandatory Training (where staff are at 100% of their MT) is at 86% against the 95% aim.
USE OF RESOURCES	Use of Resources	<ul style="list-style-type: none"> The Use of Resources assessment is part of the combined CQC inspection alongside the Trust's rating for Quality and the wider Single Oversight Framework. 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 CQC assessment includes an analysis of Trust performance against a selection of CQC initial metrics, using local intelligence, and other evidence. The last Trust rating for Use of Resources was 'Requires Improvement' and the Trust is aiming to achieve a 'Good' rating in the next CQC inspection and performance will continue to be monitored with this aspiration. We have populated 7/16 of the Use of Resources metrics. No work is currently under way to increase this proportion and start deep-diving in presented opportunities.
TRUST EMPHASIS	Persistent Reds	<ul style="list-style-type: none"> Despite improvement progress being impacted by COVID-19, many indicators are moving in the right direction, maintaining or improving towards ambitions Stroke patients have met their target in September patients are reaching the dedicated stroke ward within the 4hrs target of 80%. Neutropenic sepsis patient breaches amount to 2 patient last month and in September; 92% performance has been achieved and breaching patients breaching by only several minutes over the hour. Mandatory training and MRSA screening (non-elective) have been improving month on month within reach of their targets now.

Recovery & Restoration SWB :	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21
Activity Delivery & RTT								
This measures activity % age activity achievement compared to the three different Trust Trajectories set :	Phase 3 : 70% IP / 90% OP	Phase 3 : 80% IP / 80% OP	Phase 3 : 90% IP / 100% OP	Phase 3 : 90% IP / 100% OP	Phase 3 : 90% IP / 100% OP	Phase 3 : 100% IP / 100% OP	Phase 3 : 100% IP / 100% OP	Phase 3 : 100% IP / 100% OP
% Of Phase 3 activity volumes	88.5%	102.2%						
% of Production Plan volumes	77.5%	85.1%						
% of Clinical Group agreed volumes	94.8%	112.2%						
RTT Trajectory Targets :	N/A	76.3%	85.0%	88.1%	89.9%	90.4%	91.5%	92.1%
Variance Performance Trajectory to achieve 92% by 31st Mar21	N/A	-8.6%						
Diagnostics (DM01)								
This measures activity % age activity achievement compared to Phase 3 Target which is based on previous year delivery : additionally the ambition to recover to DM01 standard of 99% by Nov21 :	Phase 3: 90%	Phase 3: 95%	Phase 3: 100%	Phase 3: 100% & to 99% Standard	100%	100%	100%	100%
% of Phase 3 activity volumes MRI (100% by October)	128.6%	121.8%						
% of Phase 3 activity volumes CT (100% by October)	104.2%	98.8%						
% of Phase 3 letter activity Endoscopy (100% in October)-All Scopes	74.2%	70.3%						
DM01 Trajectory	N/A	94.50%	98.20%	99.00%	99.00%	99.00%	99.00%	99.00%
Variation versus planned trajectory to achieve 99% DM01	N/A	-26.7%						
Cancer 62 Day Standard								
Cancer 62 Day standard aims to achieve 85% performance by Mar21 :		**Not yet Released**						85%
104 day volumes (patient numbers)	3							
62 day refer to treat % (distance from 85% standard)	77.4%(-7.6%)							
31 day diagnosis to treatment % (distance from 96% standard)	93.5%(-2.5%)							
Cancer Trajectory-104 day	N/A							
Cancer Trajectory-62 day	60%	55.00%	55.00%	80.00%	85.00%	85.00%	85.00%	85.00%
Cancer Trajectory-31 day	N/A							
52 Week Wait Breaches								
Shows volumes that will breach if no intervention (follows the waiting list patient queue to indicate potential breaches) :								Zero 52 WW Breaches
Volumes that will be breaching at 31 March 2021 - Inpatients	3,843	3,016						
Straight line trajectory to zero in March21-Inpatients	3,843	3,294	2,745	2,196	1,647	1,098	549	0
Variation	-							
Volumes that will be breaching at 31 March 2021 - Outpatients	7,460	5,015						
Straight line trajectory to zero in March21-Outpatients	7,460	6,394	5,329	4,263	3,197	2,131	1,066	-0
Clinical Prioritisation								
Numbers of patients who have been prioritised on the inpatient Waiting List and have not been seen within the specified time frame for their categorisation	Zero	Zero	Zero	Zero	Zero	Zero	Zero	Zero
Patient numbers missing - Category 1(Treatment 72 hours)	1	1						
Patient numbers missing - Category 2(Treatment within 4 Weeks)	168	120						
Patient numbers missing - Category 3(Treatment within 3 months)	629	591						
Patient numbers missing - Category 4(Treatment can be deferred for more than 3 months)	0	0						
Clinical Prioritisation-Ophthalmology								
Numbers of patients who have been prioritised on the inpatient Waiting List and have not been seen within the specified time frame for their categorisation	Zero	Zero	Zero	Zero	Zero	Zero	Zero	Zero
Patient numbers missing - Category 1(Treatment withn 24 hours)	0	0						
Patient numbers missing - Category 2(Treatment within 72 hours)	1	0						
Patient numbers missing - Category 3(Treatment within 4 Weeks)	231	225						
Patient numbers missing - Category 4(Treatment needed within 3-4 months)	190	162						
Safety Checks								
52 week breaches	252	376						
Potential/Actual Harm identified (whole numbers)								
Versus 104 day Cancer breaches last month %								
Potential/Actual Harm identified (whole numbers)								
Versus Clinically Prioritised Date**patients missing prioritisation date**	1220	1099						

Note: Retrospective will show performance against plan - Forward months will show planned performance

- Highlights:
- Activity levels at Trust level, across Elective and OPD, exceeding Phase 3 and Clinical Group Targets, 15% below the production plan target.
 - RTT- 8.6% behind recovery trajectory, aiming for March 2021 delivery (gaps with Groups to close out)
 - DM01-27% behind ambitious recovery trajectory in November to 99% standard (more movement expected next month with ability to remove non-repsnders back to referrer); MRI and CT doing well
 - Volumes breaching 52+ week waits at March 2021, showing reduction , demonstrating we are able to use some capacity to treat our long waiters
 - Numbers of patients missing their 'prioritisation date' on the Inpatient waiting list is lower than last month.



CQC Domain - Safe

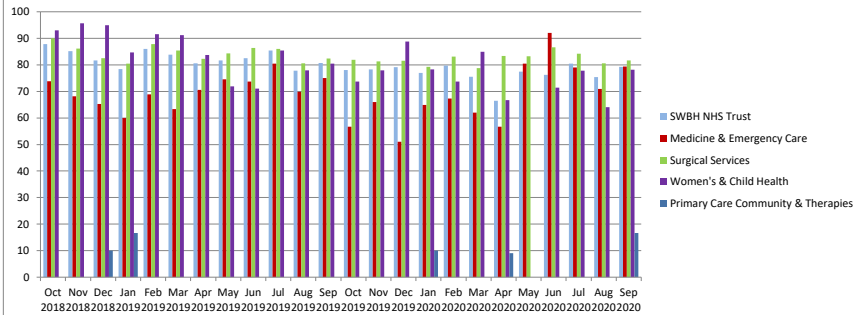
		Reviewed Date	Indicator	Measure	Standard		Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	20/21 Year to Date	Group						
	Kitemark				Year	Month																				M	SS	W	I	PCCT	CO	
Infection Control	●●●●●●●●		C. Difficile (Post 48 hours)	<= No	41	3.4	5	3	1	4	3	2	2	4	3	3	2	3	0	4	2	2	3	1	12	1	0	0	-	0	-	
	●●●●●●●●		MRSA Bacteraemia (Post 48 hours)	<= No	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1	0	0	-	0	-		
	●●●●●●●●		MSSA Bacteraemia (Post 48 Hours) - rate per 100,000 bed days	<= Rate2	9.42	9.42	5.48	5.44	0.00	5.46	5.49	5.65	15.18	0.00	4.76	4.88	21.01	0.00	7.02	12.15	7.23	13.49	0.00	12.61	8.85	-	-	-	-	-		
	●●●●●●●●		E Coli Bacteraemia (Post 48 Hours) - rate per 100,000 bed days	<= Rate2	94.9	94.9	32.90	5.44	17.68	5.46	10.99	22.58	15.18	5.19	14.27	24.39	26.26	16.43	21.05	18.23	28.93	6.75	13.15	18.92	17.69	-	-	-	-	-		
	●●●●●●●●		MRSA Screening - Elective	=> %	95	95	80.5	81.6	82.5	85.3	77.8	80.6	78.1	78.2	79.1	76.9	79.7	75.5	66.4	77.4	76.2	80.4	75.4	79.3	76.9	79.4	81.7	78.1	37.5	16.7	-	
	●●●●●●●●		MRSA Screening - Non Elective	=> %	95	95	75.1	80.2	81.3	79.5	81.3	67.3	76.0	79.5	76.3	80.0	83.9	78.1	83.9	91.5	92.6	93.6	93.9	92.5	90.2	92.5	92.1	97.7	-	100.0	-	
Harm Free Care	●●●●●●●●		Patient Safety Thermometer - Overall Harm Free Care	=> %	95	95	99.1	96.3	99.0	95.4	93.7	94.8	98.5	95.4	99.3	98.9	98.7	98.4	indicators suspended nationally; awaiting replacement					97.3	-	-	-	-	-	-	-	
	●●●●●●●●		Patient Safety Thermometer - Catheters & UTIs	%	-	-	0.0	0.2	0.3	0.1	0.3	0.5	0.5	0.0	0.4	0.0	0.3	0.1						0.2	-	-	-	-	-	-		
	●●●●●●●●		Number of DOLS raised	No	-	-	32	30	34	26	36	37	34	26	36	33	31	28	32	43	45	42	26	43	231	21	13	0	-	9	-	
	●●●●●●●●		Number of DOLS which are 7 day urgent	No	-	-	32	30	34	26	36	37	34	26	36	33	31	28	32	43	45	42	26	43	231	21	13	0	-	9	-	
	●●●●●●●●		Number of delays with LA in assessing for standard DOLS application	No	-	-	5	5	15	6	11	2	4	3	7	6	7	0	3	3	4	8	6	6	30	2	2	0	-	2	-	
	●●●●●●●●		Number DOLs rolled over from previous month	No	-	-	5	5	7	0	4	0	1	1	2	0	5	7	9	8	9	6	3	2	37	1	1	0	-	0	-	
	●●●●●●●●		Number patients discharged prior to LA assessment targets	No	-	-	19	22	17	11	23	20	22	13	22	18	18	24	30	37	43	35	18	29	192	17	10	0	-	2	-	
	●●●●●●●●		Number of DOLs applications the LA disagreed with	No	-	-	1	1	1	0	2	2	0	1	0	0	2	1	0	0	0	0	0	0	0	0	0	0	-	0	-	
	●●●●●●●●		Number patients cognitively improved regained capacity did not require LA assessment	No	-	-	4	0	4	3	0	0	0	0	0	1	0	0	0	0	0	0	0	4	4	2	1	0	-	1	-	
	●●●●●●●●	Apr 19	Falls	No	-	-	95	89	89	86	92	78	-	71	88	97	84	110	66	67	70	74	81	82	440	54	7	-	1	19	-	
	●●●●●●●●	Apr 19	Falls - Death or Severe Harm	<= No	0	0	4	3	2	2	0	0	-	2	0	1	1	0	0	1	1	2	1	0	5	0	0	0	0	0	0	
			Falls Per 1000 Occupied Bed Days	<= Rate1	5	5	4.40	4.20	3.97	3.80	4.32	3.78	-	3.22	3.80	4.19	3.94	5.66	4.33	4.54	4.62	4.58	4.84	4.66	4.60	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	37	28	28	26	28	33	23	14	32	36	39	32	38	32	19	23	20	25	157	10	9	-	-	6	-	
	●●●●●●●●	Apr 19	Pressure Ulcers per 1000 Occupied Bed Days	Rate1	-	-	1.72	1.37	1.34	1.16	1.27	1.54	0.97	0.61	1.32	1.50	1.77	1.59	2.44	2.10	1.22	1.38	1.16	1.38	1.60	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	36	16	24	29	35	27	31	18	25	25	26	22	20	24	25	41	29	24	163	-	-	-	-	24	-	
			Pressure Ulcer Present on Admission to SWBH	<= No	0	0	198	130	141	125	87	85	78	95	88	104	117	102	108	100	96	114	112	93	623	-	-	-	-	-	-	
	●●●●●●●●		Venous Thromboembolism (VTE) Assessments	=> %	95	95	95.1	96.0	95.7	95.9	95.2	95.6	96.3	-	95.9	96.0	96.0	95.3	94.9	95.0	96.2	96.2	95.3	95.5	95.6	96.8	94.4	92.4	95.8	98.8	-	
	●●●●●●●●	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	99.9	100.0	99.9	99.6	100.0	99.8	100.0	100.0	100.0	99.9	99.9	100.0	100.0	100.0	97.7	-	100.0	-	
	●●●●●●●●	Apr 19	WHO Safer Surgery - brief(% lists where complete)	=> %	100	100	100.0	100.0	99.8	100.0	99.8	100.0	100.0	100.0	100.0	100.0	100.0	99.6	100.0	100.0	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	99.4	100.0	99.8	99.8	99.6	100.0	99.7	100.0	99.3	100.0	99.8	99.3	100.0	100.0	100.0	98.7	99.3	100.0	99.5	100.0	100.0	-	-	100.0	-	
	●●●●●●●●		Never Events	<= No	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	
	●●●●●●●●		Medication Errors causing serious harm	<= No	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	1	1	1	0	0	0	-	
	●●●●●●●●		Serious Incidents	<= No	0	0	3	3	12	32	12	11	17	11	7	6	8	0	4	8	12	6	7	10	47	5	1	1	0	3	0	
	●●●●●●●●		Open Central Alert System (CAS) Alerts	No	-	-	15	15	4	9	8	11	12	10	12	10	9	8	2	5	3	3	5	6	24	-	-	-	-	-	-	
	●●●●●●●●		Open Central Alert System (CAS) Alerts beyond deadline date	<= No	0	0	6	7	3	6	5	6	7	2	1	1	0	0	0	0	0	0	0	0	0	0	-	-	-	-	-	
			Sepsis - Screened (as % Of Screening Required)	=> %	100	100	-	-	-	-	-	-	-	-	-	88.5	91.1	90.7	92.8	95.4	94.7	96.2	94.4	94.5	96.1	95.3	95.2	99.3	100.0	-	97.9	-
			Sepsis - Screened Positive (as % Of Screened)	%	-	-	-	-	-	-	-	-	-	-	-	16.2	16.3	17.6	19.6	20.2	21.1	20.8	22.8	22.9	23.5	21.5	25.3	18.7	14.3	-	10.9	-
			Sepsis - Treated (as % Of Screened Positive)	%	-	-	-	-	-	-	-	-	-	-	-	80.3	77.1	75.7	79.6	82.7	72.1	72.8	82.9	87.9	89.7	79.7	89.5	90.4	100.0	-	60.0	-
			Sepsis - Treated in 1 Hour (as % Of Treated)	=> %	100	100	-	-	-	-	-	-	-	-	-	54.9	51.9	60.0	53.9	57.2	64.2	58.2	57.1	56.1	81.0	62.4	81.9	75.5	100.0	-	66.7	-
			Sepsis - Antibiotic Review Within 72 hrs	=> %	100	100	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Data Quality - Kitemark						
1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Completeness	Granularity	Assessment of Exec Director
●	●	●	●	●	●	●

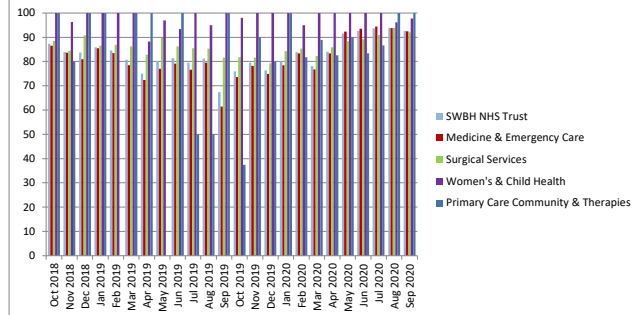
If segment 2 of the Kitemark is blank this indicates that a formal audit of this indicator has not yet taken place

CQC Domain - Safe

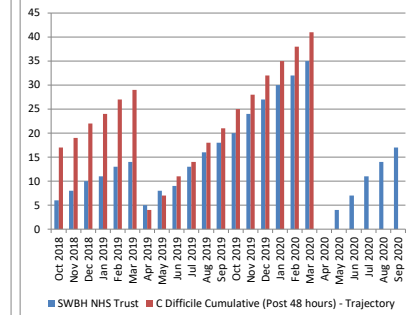
MRSA Screening - Elective



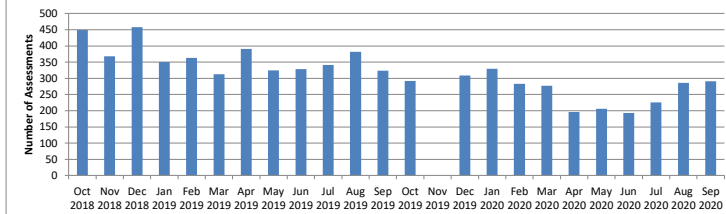
MRSA Screening - Non Elective



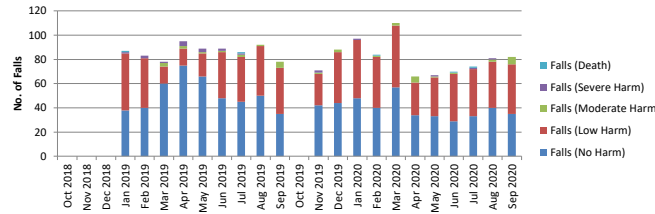
C Diff Infection



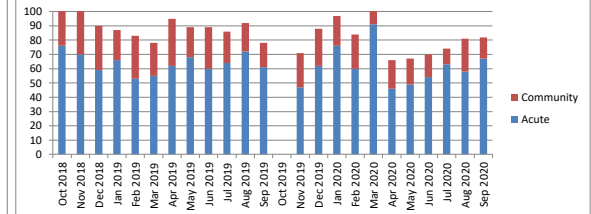
VTE Assessments Missed



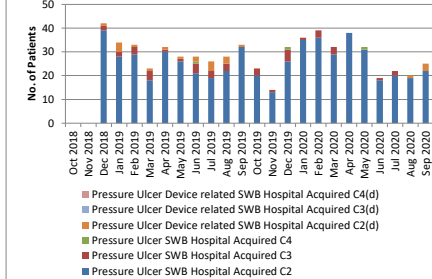
Falls



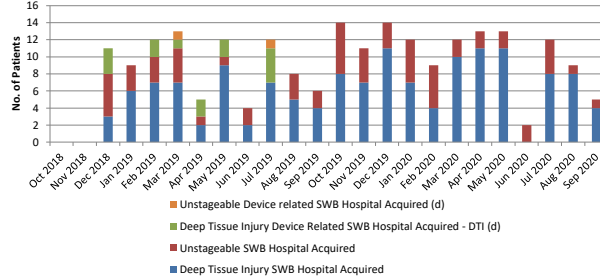
Falls - Acute & Community



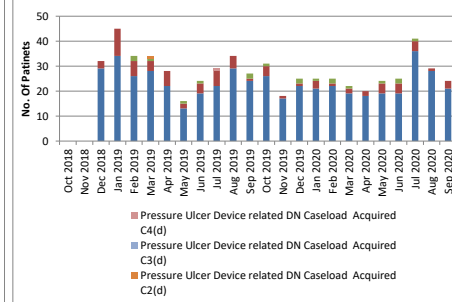
Pressure Ulcers - SWB Hospital Acquired



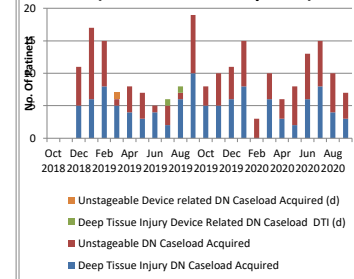
Unstageable / Deep Tissue (SWB Hospital Acquired)



Pressure Ulcers - DN Caseload Acquired



Unstageable/Deep Tissue (DN Caseload Acquired)

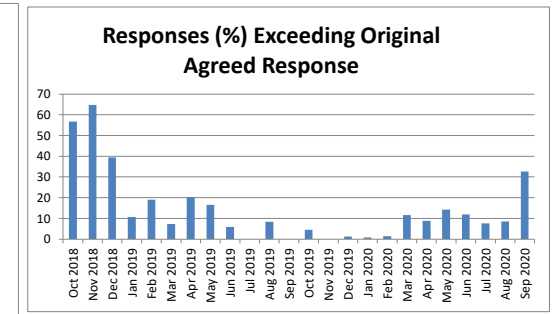
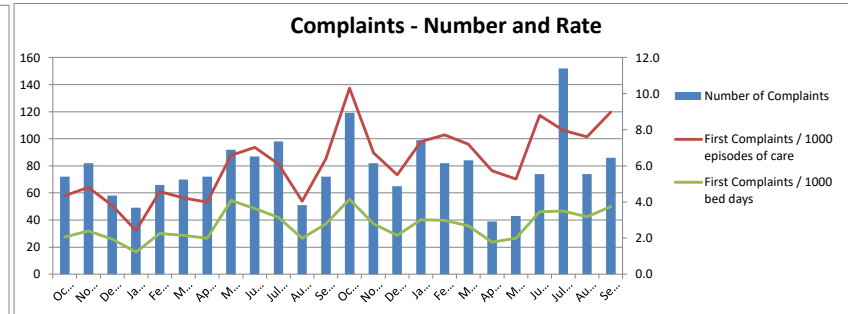
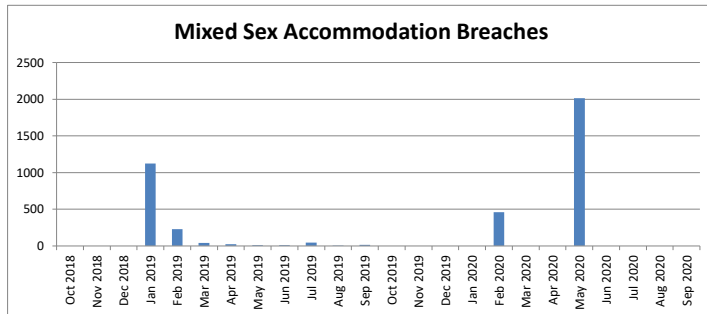


CQC Domain - Caring

	Kitemark	Reviewed Date	Indicator	Measure	Standard		Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	20/21 Year to Date	Group						
					Year	Month																				M	SS	W	I	PCCT	CO	
FFT			FFT Response Rate - Adult and Children Inpatients (including day cases and community)	=> %	25	25	16.1	29.0	25.7	23.1	20.9	23.4	18.7	21.5	18.5	20.5	26.2	26.2	13.6	16.2	15.5	23.8	14.7	18.7	17.2	-	-	-	-	-	-	
			FFT Score - Adult and Children Inpatients (including day cases and community)	=> No	95	95	89	89	92	91	90	89	89	89	86	89	-	90	86	86	88	89	82	85	-	-	-	-	-	-	-	
			FFT Response Rate: Type 1 and 2 Emergency Department	=> %	25	25	12.0	10.8	9.6	10.4	9.5	9.8	10.6	9.6	9.1	9.5	9.1	10.5	14.2	13.7	12.9	13.2	12.9	12.8	13.2	12.8	-	-	-	-	-	-
			FFT Score - Adult and Children Emergency Department (type 1 and type 2)	=> No	95	95	75	76	73	76	78	71	71	68	73	75	72	79	89	85	84	81	78	77	-	77	-	-	-	-	-	
	●●●●●●●●	Apr 19	FFT Score - Outpatients	=> No	95	95	90	90	89	88	76	87	87	89	89	89	89	89	87	89	89	89	88	88	-	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	FFT Score - Maternity Antenatal	=> No	95	95	0	0	0	0	0	0	90	97	100	75	83	80	86	84	84	84	78	79	-	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	FFT Score - Maternity Postnatal Ward	=> No	95	95	100	100	0	100	100	100	92	93	0	97	94	100	0	67	0	100	0	100	-	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	FFT Score - Maternity Community	=> No	95	95	0	0	0	0	0	0	94	0	0	0	0	0	0	0	0	0	0	0	-	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	FFT Score - Maternity Birth	=> No	95	95	100	94	94	91	66	6	94	97	94	95	97	97	89	100	82	94	70	94	-	-	-	-	-	-	-	
	●●●●●●●●	Apr 19	FFT Response Rate: Maternity Birth	=> %	25	25	2.1	3.5	8.3	10.2	1.4	6.1	28.2	35.3	12.2	32.2	55.0	28.2	4.4	8.4	6.1	41.6	7.3	17.5	15.6	-	-	-	-	-	-	
MSA	●●●●●●●●		Mixed Sex Accommodation - Breaches (Patients)	<= No	0	0	22	11	9	44	7	16	-	-	-	-	458	-	-	2013	-	-	-	-	2013	-	-	-	-	-	-	
Complaints	●●●●●●●●		No. of Complaints Received (formal and link)	No	-	-	72	92	87	98	51	72	119	82	65	99	82	84	39	43	74	152	74	86	468	37	19	12	1	13	4	
	●●●●●●●●		No. of Active Complaints in the System (formal and link)	No	-	-	163	149	121	148	91	121	140	114	92	106	142	126	102	109	123	152	139	189	814	89	43	22	2	23	10	
	●●●●●●●●		No. of First Formal Complaints received / 1000 bed days	Rate1	-	-	2.00	4.08	3.63	3.15	1.98	2.78	4.16	2.78	2.15	3.03	2.99	2.68	1.78	1.99	3.47	3.50	3.17	3.75	2.97	2.87	4.33	3.95	-	13.90	-	
	●●●●●●●●		No. of First Formal Complaints received / 1000 episodes of care	Rate1	-	-	3.98	6.57	7.02	6.10	4.05	6.38	10.31	6.72	5.50	7.33	7.72	7.21	5.74	5.26	8.79	7.96	7.61	8.97	7.54	8.99	7.55	6.33	-	25.84	-	
	●●●●●●●●		No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt)	=> %	100	100	100.0	2.2	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	82.9	76.1	83.1	10.4	7.6	52.4	52.4	0.0	31.6	0.0	0.0	7.7	0.0	
	●●●●●●●●		No. of responses which have exceeded their original agreed response date (% of total active complaints)	<= %	0	0	20.3	16.5	5.9	0.0	8.4	0.0	4.5	0.0	1.3	0.8	1.4	11.6	8.8	14.3	11.9	7.6	8.5	32.6	11.9	11.8	100.0	33.3	100.0	22.2	16.7	
	●●●●●●●●		No. of responses sent out	No	-	-	77	98	97	95	96	61	88	105	76	76	70	87	68	35	58	66	86	43	356	17	6	3	2	9	6	
	WKF	●●●●●●●●	Apr 19	Flu Vaccination Rate	=> %	80	80	-	-	-	-	-	-	47.7	62.4	78.1	82.0	83.1	-	-	-	-	-	-	70.7	-	-	-	-	-	-	

Data Quality - Kitemark						
1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Complete ness	Granularity	Assessment of Exec Director
●	●	●	●	●	●	●

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



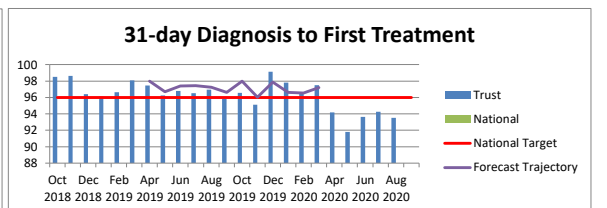
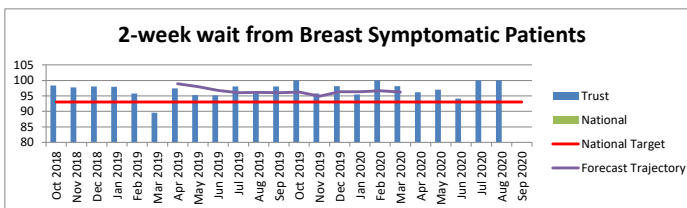
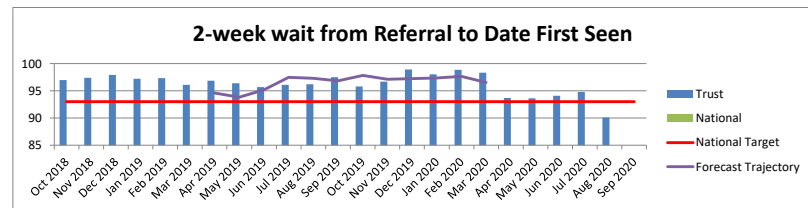
CQC Domain - Responsive

		Reviewed Date	Indicator	Measure	Standard		Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	20/21 Year to Date	Group						
	Kitemark				Year	Month																					M	SS	W	I	PCCT	CO
Emergency Care			Emergency Care Attendances (Including Mailing)	No	-	-	18908	18541	18091	19047	17657	17973	18445	17868	19330	18477	17367	13392	7163	9828	12215	14065	15099	14548	72918	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care 4-hour waits	=> %	95	95	78.3	82.7	81.8	81.4	81.6	74.1	71.7	70.9	72.2	73.0	74.6	79.3	87.8	91.6	90.0	86.2	84.9	80.3	86.3	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care 4-hour breach (numbers)	No	-	-	4106	3213	3288	3542	3252	4764	5215	5199	5375	4819	4416	2768	844	828	1225	1941	2284	2860	9982	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care Trolley Waits >12 hours	<= No	0	0	0	0	0	0	2	2	1	1	0	0	0	1	0	0	0	0	0	0	1	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15	15	74	39	89	45	52	71	185	154	116	121	62	85	74	44	62	194	69	163	-	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60	282	264	255	261	208	217	250	263	263	254	232	151	82	82	100	136	153	168	-	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5	5	5.4	5.2	5.4	5.2	5.6	7.3	7.8	7.9	7.9	8.1	7.5	8.8	8.6	8.9	7.5	8.4	8.2	7.1	8.1	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5	5	7.3	6.6	7.1	7.4	6.4	8.8	10.5	10.2	9.5	8.0	7.8	5.5	2.8	2.6	3.2	4.5	4.8	4.9	4.0	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0	166	119	128	123	162	238	251	228	279	199	242	380	234	172	77	183	172	161	999	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0	5	4	4	5	9	33	16	9	12	9	32	42	8	1	0	0	3	9	21	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		WMAS - Handover Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02	0.1	0.1	0.1	0.1	0.2	0.7	0.3	0.2	0.2	0.2	0.7	0.9	0.3	0.0	#####	0.0	0.1	0.2	0.1	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●		WMAS - Emergency Conveyances (total)	No	-	-	4814	4670	4555	4658	4486	4484	4656	4721	4887	4848	4522	4588	3069	3282	3039	3951	4209	4065	21615	-	-	-	-	-	-	
Patient Flow	● ● ● ● ● ● ● ●	Apr 19	Delayed Transfers of Care (Acute) (%)	<= %	3.5	3.5	2.0	-	1.0	-	4.7	3.0	2.8	2.9	2.4	2.8	3.0	4.2	1.6	-	-	0.3	0.6	0.1	0.5	-	-	-	-	-	-	
			Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS	<= No	240	20	12	-	14	-	27	17	19	20	16	19	20	28	11	-	-	2	4	1	-	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	Delayed Transfers of Care (Acute) - Finable Bed Days	<= No	0	0	99	149	239	295	185	127	147	163	180	195	340	388	210	32	10	8	0	12	272	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - ALL	No	-	-	672	698	583	684	671	675	867	852	944	989	860	730	501	554	543	604	746	750	3698	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units	No	-	-	223	228	185	218	233	266	330	310	383	354	358	347	343	295	277	293	377	312	1897	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	Patient Bed Moves (10pm - 6am) (No.) - exc. Assessment Units and Clinical Transfers	No	-	-	65	37	30	46	45	52	52	80	66	71	64	95	80	47	39	25	40	52	283	-	-	-	-	-	-	
Cancellations		Apr 19	Hip Fractures Best Practice Tariff (Operation < 36 hours of admissions)	=> %	85	85	64.0	77.1	75.0	62.5	87.9	79.2	88.5	78.6	67.5	75.0	87.9	61.5	84.0	90.0	60.0	53.1	70.8	80.0	71.5	-	80.0	-	-	-	-	
	● ● ● ● ● ● ● ●		No. of Sitrep Declared Late Cancellations - Total	<= No	240	20	44	38	40	46	32	57	63	59	65	56	60	35	1	9	18	21	17	36	102	7	22	7	-	0	-	
	● ● ● ● ● ● ● ●		No. of Sitrep Declared Late Cancellations - Avoidable	No	-	-	16	13	3	16	17	32	40	30	41	29	17	16	1	1	5	9	-	17	44	2	11	4	-	0	-	
	● ● ● ● ● ● ● ●		No. of Sitrep Declared Late Cancellations - Unavoidable	No	-	-	28	25	37	30	15	25	23	29	24	27	43	19	0	8	13	12	-	19	58	5	11	3	-	0	-	
	● ● ● ● ● ● ● ●		Elective Admissions Cancelled at last minute for non-clinical reasons (as a percentage of admissions)	<= %	0.8	0.8	1.3	1.0	1.2	1.1	0.8	1.5	1.6	1.5	1.8	1.3	1.7	1.3	0.1	0.7	1.2	0.8	0.7	1.2	0.9	1.0	1.4	3.2	-	0.0	-	
	● ● ● ● ● ● ● ●		Number of 28 day breaches	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	4	0	0	0	4	0	0	0	-	0	-	
	● ● ● ● ● ● ● ●		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	-	-	-	
	● ● ● ● ● ● ● ●		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	-	
	● ● ● ● ● ● ● ●		No. of Sitrep Declared Late Cancellations (Pts. >1 occasion)	<= No	0	0	0	1	2	1	1	1	2	0	1	1	2	4	0	0	0	1	0	1	2	1	0	0	-	0	-	
	● ● ● ● ● ● ● ●		Multiple Hospital Cancellations experienced by same patient (all cancellations)	<= No	0	0	73	64	75	86	67	79	103	92	65	73	124	344	19	20	42	46	49	74	250	2	61	11	-	-	-	
● ● ● ● ● ● ● ●		All Hospital Cancellations, with 7 or less days notice	<= No	0	0	265	262	277	296	204	367	370	376	358	347	584	890	63	58	133	138	202	220	814	23	173	24	-	-	-		
	● ● ● ● ● ● ● ●	Apr 19	2 weeks	=> %	93	93	96.8	96.4	95.7	96.1	96.2	97.5	95.8	96.7	99.0	98.0	98.9	98.3	93.7	93.6	94.1	94.8	90.1	-	93.1	74.5	94.4	95.1	-	83.8	-	
	● ● ● ● ● ● ● ●	Apr 19	2 weeks (Breast Symptomatic)	=> %	93	93	97.4	95.3	95.1	98.1	95.8	98.0	100.0	95.7	98.1	95.5	100.0	98.2	96.2	97.1	94.1	100.0	100.0	-	97.5	-	100.0	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	31 Day (diagnosis to treatment)	=> %	96	96	97.5	96.2	96.8	96.5	96.9	95.8	96.6	95.1	99.2	97.8	96.5	97.5	94.2	91.8	93.6	94.3	93.5	-	93.5	100.0	93.0	84.6	-	100.0	-	
	● ● ● ● ● ● ● ●	Apr 19	31 Day (second/subsequent treatment - surgery)	=> %	94	94	100.0	94.7	95.0	96.2	95.2	100.0	93.5	100.0	93.1	100.0	100.0	95.7	92.3	69.6	100.0	100.0	100.0	-	86.7	-	-	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	31 Day (second/subsequent treatment - drug)	=> %	98	98	-	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	85.8	90.5	87.3	85.6	84.3	86.3	82.7	90.7	81.1	80.8	82.0	89.2	73.6	54.8	66.4	76.1	77.4	-	70.3	100.0	78.9	53.3	-	82.4	-	
	● ● ● ● ● ● ● ●		62 Day (urgent GP referral to treatment) - Inc Rare Cancers	=> %	85	85	85.8	90.6	87.3	85.6	84.6	86.5	82.7	91.0	81.4	79.5	82.4	89.2	73.6	56.0	67.0	76.6	77.7	-	70.8	100.0	79.3	53.3	-	82.4	-	
	● ● ● ● ● ● ● ●	Apr 19	62 Day (referral to treat from screening)	=> %	90	90	100.0	98.2	91.7	94.4	100.0	96.9	93.2	94.6	89.7	91.5	100.0	94.8	83.9	33.3	100.0	80.0	83.3	-	77.9	-	83.3	-	-	-	-	
	● ● ● ● ● ● ● ●	Apr 19	62 Day (referral to treat from hosp specialist)	=> %	90	90	89.4	83.1	92.9	84.3	80.0	86.4	76.5	81.8	82.3	87.5	76.1	84.6	95.5	82.1	80.3	85.3	92.9	-	86.4	84.6	100.0	100.0	-	-	-	

CQC Domain - Responsive

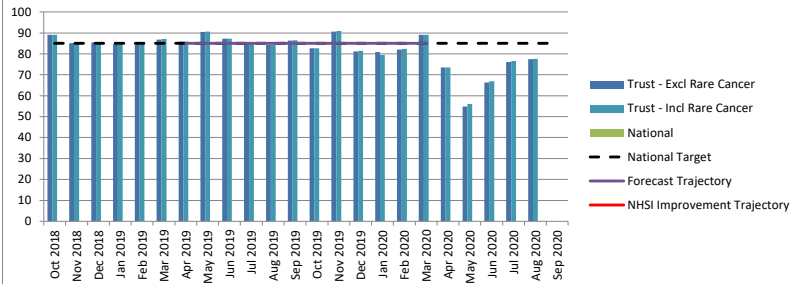
Cancer	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Cancer = Patients Waiting Over 62 days for treatment	No	-	-	10	7	8	10	11	10	11	6	12	12	9	9	-	17	19	13	11	-	59	0	6	4	-	2	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Cancer - Patients Waiting Over 104 days for treatment	No	-	-	3	4	1	3	5	3	3	5	6	7	4	2	-	4	10	8	3	-	24	0	1	1	-	2	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Cancer - Longest wait for treatment (days) - TRUST	No	-	-	241	183	91	196	147	96	171	149	148	169	217	121	-	171	177	138	136	-	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Neutropenia Sepsis - Door to Needle Time > 1hr	<= No	0	0	7	2	3	3	4	6	6	9	15	7	11	5	4	3	2	1	1	2	13	2	0	0	-	0	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway	%	-	-	48.0	53.3	63.6	74.1	51.9	65.2	66.7	69.6	35.7	69.6	68.8	84.2	73.3	66.7	35.7	57.1	61.1	-	59.2	-	-	-	-	-	-	
			Cancer - 28 Day FDS TWW Referral (% of Informed) - Total	%	-	-	-	-	-	-	-	-	-	-	-	85.2	97.8	96.7	84.6	96.5	94.7	99.8	76.2	-	89.9	-	-	-	-	-	-	
			Cancer - 28 day FDS TWW breast symptomatic (% of Informed)	%	-	-	-	-	-	-	-	-	-	-	-	99.4	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	-	-	-	-	-	-	
			Cancer - 28 day FDS screening referral (% of Informed) - Total	%	-	-	-	-	-	-	-	-	-	-	-	77.8	-	92.9	-	-	100.0	-	-	-	-	100.0	-	-	-	-	-	-
			Cancer - 28 Day FDS TWW Referral (% of Eligible) - Total	%	-	-	-	-	-	-	-	-	-	-	-	47.2	62.8	59.6	22.3	65.9	-	27.0	28.8	-	40.3	-	-	-	-	-	-	-
			Cancer - 28 day FDS TWW breast symptomatic (% of Eligible) - Total	%	-	-	-	-	-	-	-	-	-	-	-	105.3	62.7	72.1	16.2	34.0	22.8	18.9	18.1	-	21.8	-	-	-	-	-	-	-
			Cancer - 28 day FDS screening referral (% of Eligible) - Total	%	-	-	-	-	-	-	-	-	-	-	-	100.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
RTT	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	RTT - Admitted Care (18-weeks)	=> %	90	90	81.7	83.1	80.5	77.6	80.5	80.6	82.6	81.4	82.4	81.2	78.9	80.8	85.7	83.5	74.5	61.2	56.1	65.7	67.0	86.2	57.9	63.3	-	88.5	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	RTT - Non Admitted Care (18-weeks)	=> %	95	95	91.7	92.5	90.7	89.6	89.2	89.8	87.3	87.3	87.2	87.0	86.3	88.8	85.4	88.4	83.4	78.6	80.1	80.0	82.1	57.1	85.4	80.6	-	76.3	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	RTT - Incomplete Pathway (18-weeks)	=> %	92	92	93.2	92.6	92.1	92.0	92.0	91.6	90.9	91.1	90.7	90.4	88.0	80.5	70.7	58.2	53.5	61.0	67.7	65.6	63.9	67.9	81.4	-	50.6	-		
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	RTT Waiting List - Incomplete	No	-	-	35859	36762	37231	39115	38714	39634	39898	38360	38416	39374	39364	38603	34989	34058	34436	35421	36056	35684	217502	5457	18127	2161	-	3022	0	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	RTT - Backlog	No	-	-	2450	2710	2951	3118	3082	3168	3360	3475	3433	3645	3781	4646	6823	9964	14405	16470	14061	11523	74885	1969	5820	401	-	1494	0	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Patients Waiting >52 weeks (All Pathways)	<= No	0	0	1	11	24	12	14	0	0	1	0	1	0	1	7	35	99	196	281	464	1082	34	297	36	0	19	0	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Patients Waiting >52 weeks (Incomplete)	<= No	0	0	0	5	6	0	1	0	0	0	0	0	0	0	7	32	93	177	252	376	937	31	251	17	0	15	0	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Treatment Functions Underperforming (Admitted, Non-Admitted,Incomplete)	<= No	0	0	23	27	29	30	29	27	26	32	29	28	28	32	30	32	41	41	42	40	-	11	18	3	-	5	0	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Treatment Functions Underperforming (Incomplete)	<= No	0	0	2	3	5	5	5	4	5	7	7	5	6	10	14	15	16	16	16	14	-	4	6	1	-	2	0	
			RTT Clearance Time (Wks)	Ratio	-	-	9.5	9.7	10.0	9.7	10.5	10.3	9.6	8.9	10.8	-	9.8	-	18.1	15.5	-	12.6	-	11.3	13.9	13.4	11.3	14.7	-	21.6	-	
DM01	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census)	<= %	1	1	1.8	2.6	0.9	0.8	2.3	1.5	1.1	0.2	0.7	0.1	0.0	8.8	60.2	63.6	53.6	47.8	40.2	32.2	49.7	32.3	57.6	-	26.1	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters)	No	-	-	1158	1330	1023	1010	600	614	457	359	338	1028	499	1140	78	281	232	525	974	1270	3360	246	118	-	905	-	-	

Data Quality - Kitemark						
1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Completeness	Granularity	Assessment of Exec Director
●	●	●	●	●	●	●
If segment 2 of the Kitemark is Blank this indicates that a formal audit of this indicator has not yet taken place						

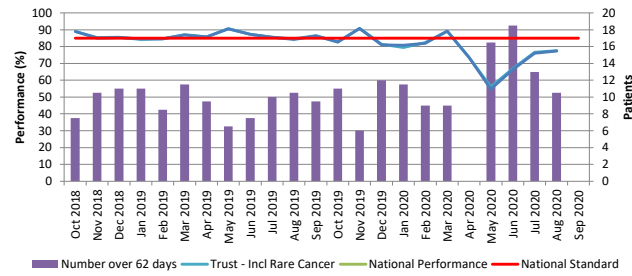


CQC Domain - Responsive

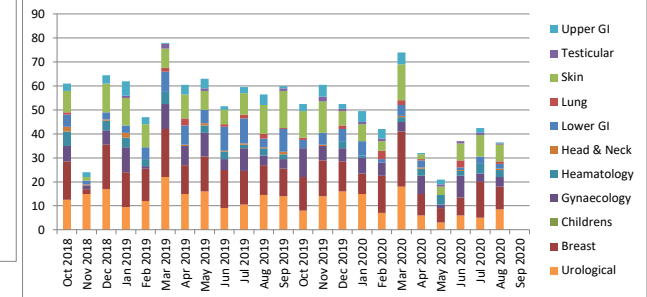
62-day Urgent GP Referral to First Treatment



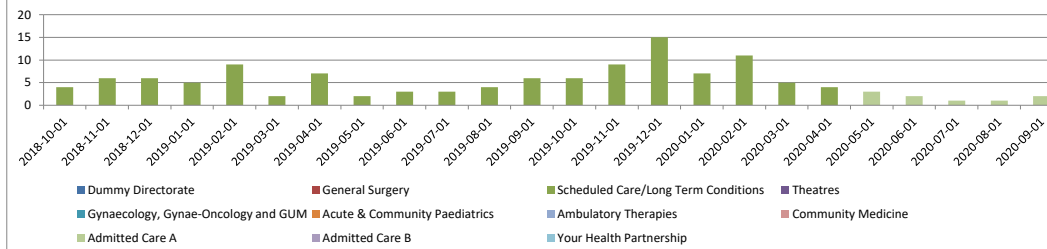
62-day Urgent GP Referral to First Treatment



62-day Urgent GP Referral to First Treatment
Breach- By Tumour Site

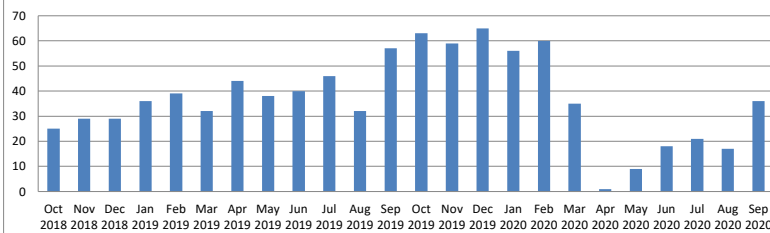


Neutropenia Sepsis
Door to Needle Time Greater Than 1 Hour

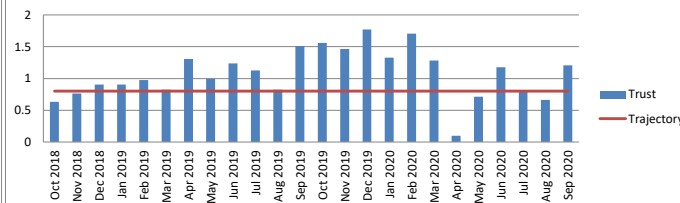


Month	Indicator	TumourSite	Informed in 28 Days	Eligible	% of Informed	% of Eligible
Jul 2020	Cancer - 28 Day FDS TWW Referral	Breast	207	426	99.52	48.59
Jul 2020	Cancer - 28 Day FDS TWW Referral	Colorectal	66	197	100	33.5
Jul 2020	Cancer - 28 Day FDS TWW Referral	Gynaecology	113	342	100	33.04
Jul 2020	Cancer - 28 Day FDS TWW Referral	Haematology	3	112	100	2.679
Jul 2020	Cancer - 28 Day FDS TWW Referral	Head & Neck	36	251	100	14.34
Jul 2020	Cancer - 28 Day FDS TWW Referral	Lung	13	254	100	5.118
Jul 2020	Cancer - 28 Day FDS TWW Referral	Skin	118	393	100	30.03
Jul 2020	Cancer - 28 Day FDS TWW Referral	Upper GI	63	286	100	22.03
Jul 2020	Cancer - 28 Day FDS TWW Referral	Urology	41	187	100	21.93
Jul 2020	28 day FDS TWW Breast Symptomatic	Breast	18	95	100	18.95
Jul 2020	Cancer - 28 day FDS screening referral	Breast	0	0	0	0
Jul 2020	Cancer - 28 day FDS screening referral	Colorectal	0	0	0	0
Jul 2020	Cancer - 28 day FDS screening referral	Gynaecology	0	0	0	0

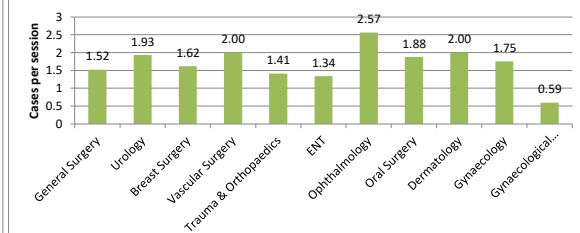
SitRep Late Cancellations



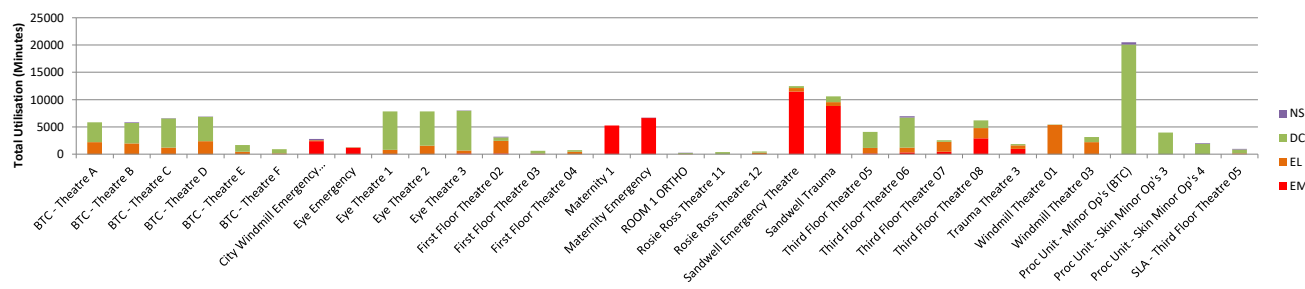
Elective Admissions Cancelled at Last Minute for Non-Clinical Reasons (%)



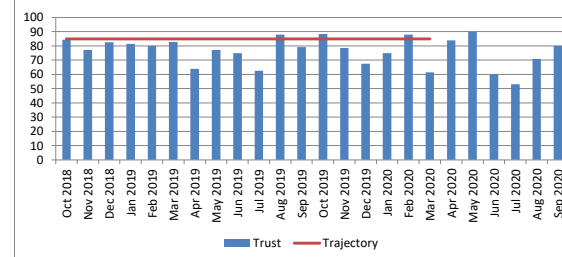
Cases Per Session (Operating Theatres)



Theatre Utilisation

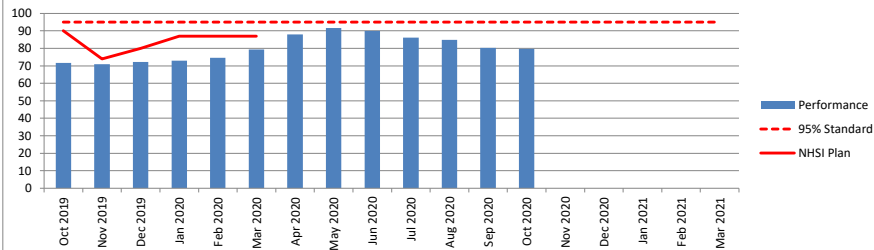


Hip Fractures - BPT - Operation Within 36 hours of admission (%)

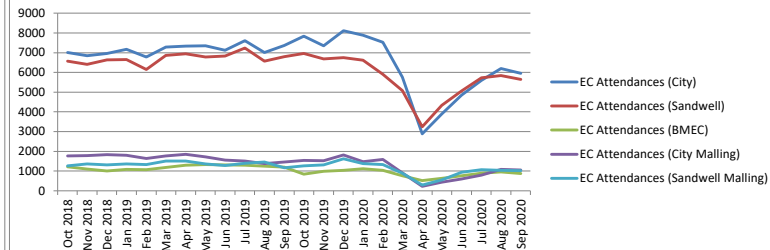


CQC Domain - Responsive

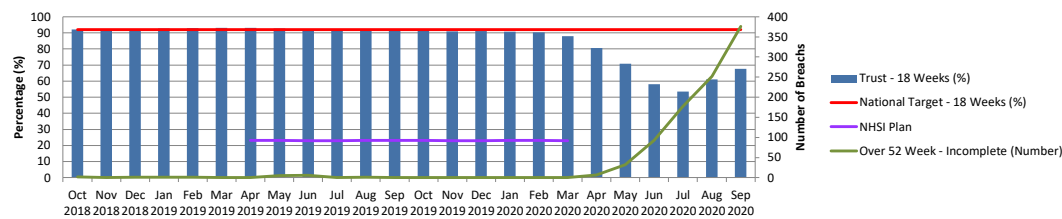
EC 4-Hour Recovery Plan



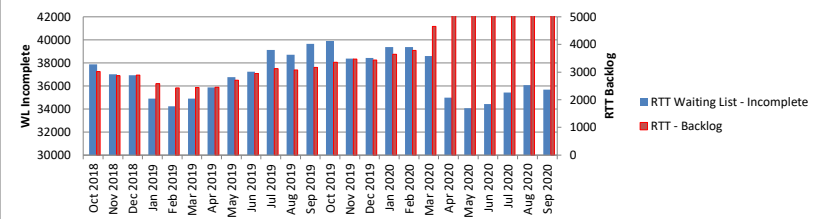
EC Attenders



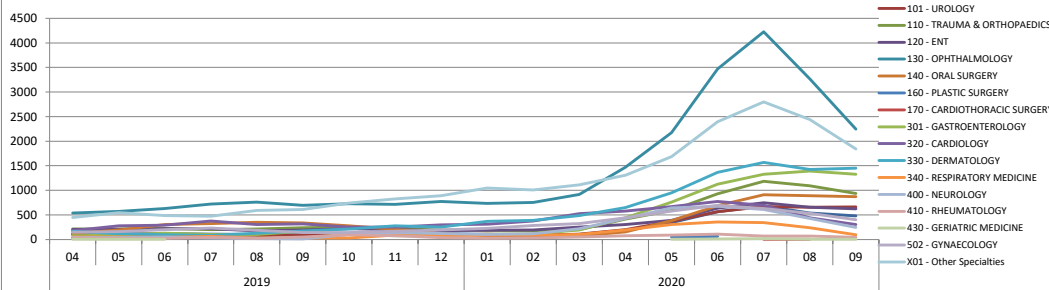
RTT Incomplete pathway



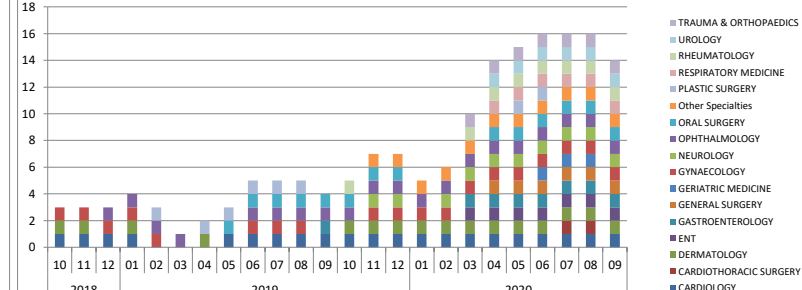
RTT Waiting List and Backlog



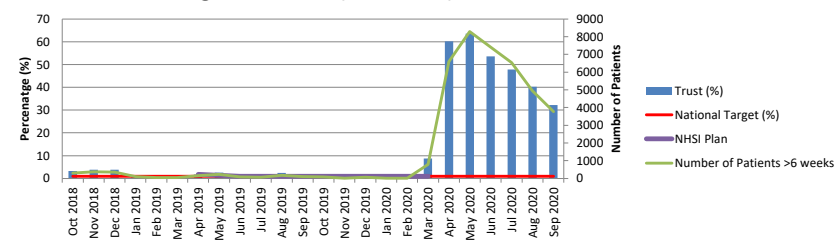
RTT Backlog - By Specialty



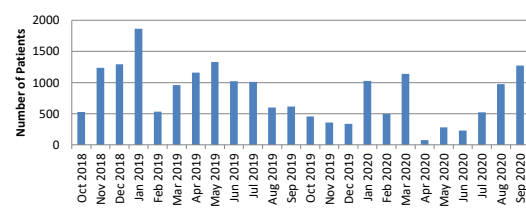
Treatment Function Underperforming (Incomplete)



Diagnostic Waits (% and No.) Greater Than 6 Weeks



Diagnostic Waits (In Month) Greater Than 6 Weeks



CQC Domain - Effective

	Kitemark	Reviewed Date	Indicator	Measure	Standard		Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	20/21 Year to Date	Group							
					Year	Month																				M	SS	W	I	PCCT	CO		
Mortality and Readmissions	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative)	No	-	-	107	105	105	104	103	104	106	107	107	109	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative)	No	-	-	107	105	105	104	103	103	87	106	106	107	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative)	No	-	-	105	105	103	99	87	105	109	112	112	114	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative)	No	-	-	115	105	112	112	113	113	115	116	117	120	120	122	128	134	-	-	-	-	-	-	-	-	-	-	-	-	
			Hospital Standardised Mortality Rate (HSMR) - Weekday Admission (12-month cumulative)	No	-	-	-	-	-	-	-	-	-	-	-	-	-	-	120	125	131	-	-	-	-	-	-	-	-	-	-	-	
			Hospital Standardised Mortality Rate (HSMR) - Weekend Admission (12-month cumulative)	No	-	-	-	-	-	-	-	-	-	-	-	-	-	-	128	137	143	-	-	-	-	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Summary Hospital-level Mortality Index (SHMI) (12-month cumulative)	No	-	-	103	105	104	103	103	103	104	106	107	108	107	113	110	-	-	-	-	-	-	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Deaths in Low Risk Diagnosis Groups (RAMI) - month	No	-	-	98	-	93	125	85	88	152	97	121	71	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Mortality Reviews within 42 working days	=> %	90	90	83.3	84.5	75.7	84.9	76.3	80.0	78.0	75.4	82.7	74.5	74.8	72.2	75.1	63.9	78.4	85.1	-	-	74.8	85.9	90.9	-	-	60.0	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Crude In-Hospital Mortality Rate (Deaths / Spells) (by month)	%	-	-	1.4	1.2	1.3	1.1	1.2	1.3	1.4	1.4	1.6	1.7	1.5	2.9	7.3	3.0	2.1	1.5	1.5	-	2.8	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative)	%	-	-	1.3	1.3	-	1.3	1.3	1.0	1.3	1.3	1.3	1.4	1.4	1.5	1.7	1.9	1.9	2.0	2.0	-	1.9	-	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Deaths in The Trust	No	-	-	134	112	117	109	118	114	133	136	139	162	125	-	334	150	125	103	102	-	814	89	12	1	0	0	0	0	
			Avoidable Deaths in the Trust	No	-	-	0	0	1	1	0	1	1	0	1	0	0	0	0	0	0	1	-	-	1	-	-	-	-	-	-	-	-
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%	-	-	7.5	7.9	7.4	8.4	8.3	7.8	7.9	8.2	8.0	8.1	8.5	9.7	12.9	10.4	8.9	9.1	9.6	-	10.0	14.5	5.1	5.1	-	2.8	-	-	
<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%	-	-	7.9	7.9	7.9	7.9	7.9	7.9	8.0	8.1	8.0	8.0	8.0	8.1	8.3	8.5	8.6	8.7	8.8	-	8.6	13.5	4.5	7.8	6.4	2.1	-	-		
<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) month	%	-	-	3.0	3.0	2.6	3.5	3.5	3.2	3.0	3.3	2.9	3.0	3.1	3.8	5.2	4.1	3.6	4.0	4.5	-	4.2	6.0	3.3	4.0	-	-	-	-		
<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) 12-month cumulative	%	-	-	3.5	3.5	3.4	3.4	3.3	3.3	3.4	3.3	3.2	3.2	3.1	3.1	3.2	3.3	3.4	3.4	3.5	-	3.4	4.4	2.4	6.4	0.5	0.1	-	-		
Patient Flow	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Inpatients Staying 21+ Days At Month End Census - NHSI	No	-	-	139	130	124	129	118	152	159	148	156	154	173	161	66	57	56	53	55	72	-	46	21	4	1	0	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		21+ Days Long Stay Rate - NHSI	%	-	-	18.7	20.0	17.5	15.9	19.2	19.7	19.4	19.4	18.9	17.5	19.3	22.7	16.1	13.3	11.1	7.5	4.8	9.2	11.1	10.8	3.7	4.4	42.3	4.0	-		
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Estimated Beds - 21+ Days - NHSI	No	-	-	114	133	101	96	125	111	122	128	121	117	124	140	54	39	36	26	15	35	-	30	3	0	1	0	-	-	
RTT	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Routine Outpatient Appointments with Short Notice(<3Wks)	%	-	-	38.6	35.4	34.5	36.3	33.9	37.9	38.6	38.9	39.6	38.0	46.0	36.4	48.8	54.9	61.7	62.7	61.4	55.2	56.7	66.5	57.2	33.1	-	36.5	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Routine Outpatient Appointments with Short Notice(<3Wks)	No	-	-	3599	3767	3498	3838	3034	3711	4512	4735	4029	4571	6313	4983	5886	3715	4644	5122	4706	5064	29137	1722	2690	356	0	295	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Short Notice Inpatient Admission Offers (<3wks)	%	-	-	57.9	57.4	56.1	53.8	54.4	51.4	51.4	53.7	54.8	55.3	56.3	55.4	49.5	94.0	82.1	78.8	76.2	73.5	74.6	85.2	71.5	71.6	100.0	78.4	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Short Notice Inpatient Admission Offers (<3wks)	No	-	-	2416	2414	2136	2375	2150	2142	2313	2388	2087	2242	2207	2155	549	547	898	1435	1625	1938	6992	202	1319	189	10	218	-	-	
Stroke			5WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90	90	88.5	87.9	92.9	90.2	98.2	88.2	93.7	91.5	96.2	84.0	90.5	-	84.8	-	88.9	95.2	87.0	91.7	89.5	91.7	-	-	-	-	-	-	
			5WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80	80	50.8	67.3	63.5	76.6	77.1	47.4	45.6	70.6	48.4	52.0	66.0	-	72.5	-	82.2	84.2	81.8	75.5	80.3	75.5	-	-	-	-	-	-	
			5WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50	50	68.9	66.1	60.3	70.2	73.5	53.4	60.3	73.5	74.6	94.1	88.7	-	82.9	-	87.5	85.9	89.1	84.0	86.3	84.0	-	-	-	-	-	-	
			5WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95	95	98.4	98.3	100.0	97.9	100.0	96.6	100.0	100.0	100.0	100.0	100.0	-	97.6	-	100.0	100.0	100.0	100.0	99.3	100.0	-	-	-	-	-	-	
			5WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85	85	66.7	85.7	85.7	83.3	60.0	100.0	50.0	66.7	50.0	75.0	83.3	-	25.0	-	50.0	100.0	50.0	66.7	66.7	66.7	-	-	-	-	-	-	
			5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=> %	70	70	100.0	88.9	64.3	87.5	75.0	68.2	65.4	88.2	80.0	65.2	83.3	80.0	82.6	-	85.7	100.0	100.0	-	86.8	100.0	-	-	-	-	-	-	
			5WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=> %	75	75	73.9	93.3	77.8	88.4	90.9	90.0	88.0	61.1	61.9	61.1	76.2	67.6	25.0	-	96.2	96.2	-	-	93.1	96.2	-	-	-	-	-	-	
			5WD : TIA Treatment <24 Hours from receipt of referral	%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	100.0	87.2	91.6	87.2	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		20WD: Pts spending >90% stay on Acute Stroke Unit	=> %	90	90	90.9	88.2	93.0	92.9	98.3	-	-	-	-	-	-	93.7	-	-	86.7	-	87.5	-	88.1	87.5	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		20WD: Pts admitted to Acute Stroke Unit within 4 hrs	=> %	80	80	45.2	66.7	59.6	72.3	80.0	-	-	-	-	-	-	78.7	-	-	84.4	-	81.8	-	82.3	81.8	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		20WD: Pts receiving CT Scan within 1 hr of presentation	=> %	50	50	62.9	66.1	61.4	64.6	73.9	-	-	-	-	-	-	-	-	-	87.5	-	89.1	-	86.8	89.1	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		20WD: Pts receiving CT Scan within 24 hrs of presentation	=> %	95	95	96.8	98.3	100.0	95.8	100.0	-	-	-	-	-	-	-	-	-	100.0	-	100.0	-	99.2	100.0	-	-	-	-	-	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		20WD: Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85	85	66.7	87.5	85.7	83.3	60.0	-	-	-	-	-	-	50.0	-	-	50.0	-	50.0	-	66.7	50.0	-	-	-	-	-	-	
			20WD: TIA (High Risk) Treatment <24 Hours from receipt of referral	=> %	70	70	100.0	91.7	100.0	87.5	73.3	68.2	65.4	88.2	80.0	65.2	83.3	80.0	-	-	92.3	-	100.0	-	86.1	100.0	-	-	-	-	-	-	
			20WD: TIA (Low Risk) Treatment <7 days from receipt of referral	=> %	75	75	82.9	94.7	83.3	88.9	84.2	90.0	88.0	61.1	61.9	61.1	76.2	67.6	-	-	100.0	-	-	-	91.3	100.0	-	-	-	-	-	-	

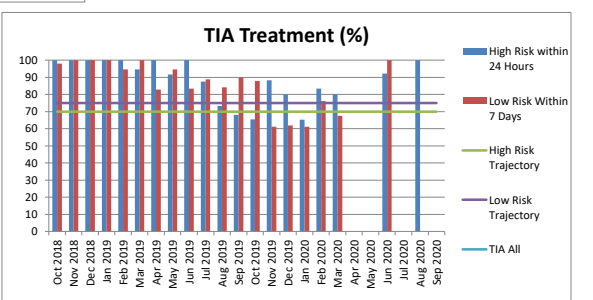
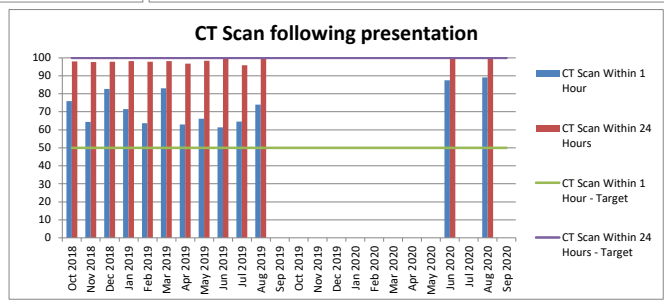
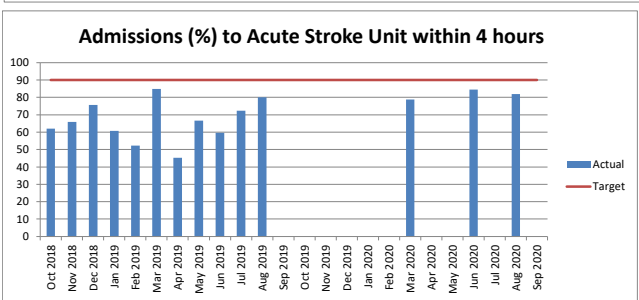
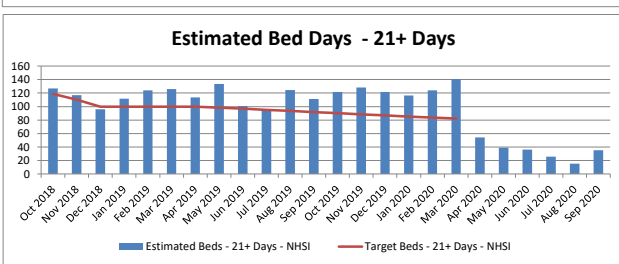
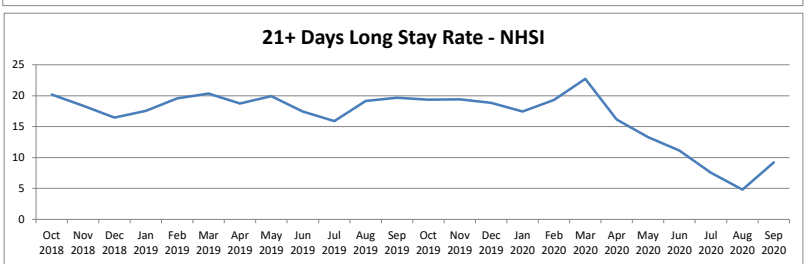
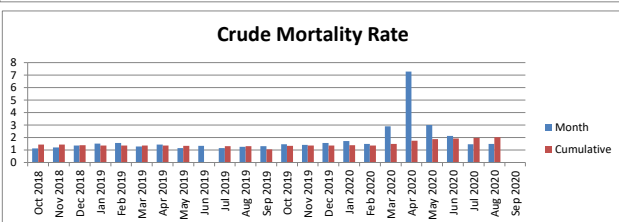
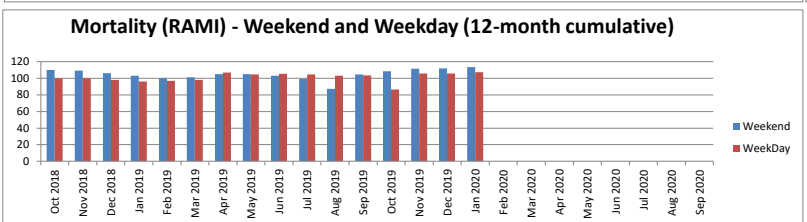
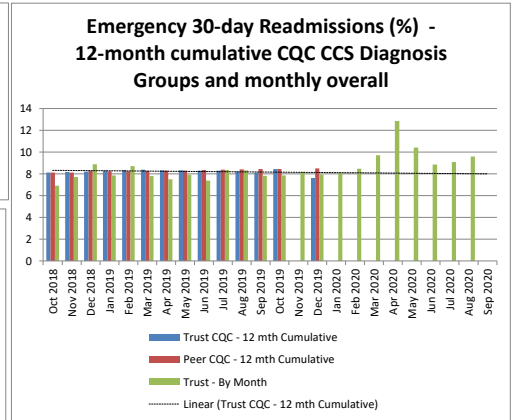
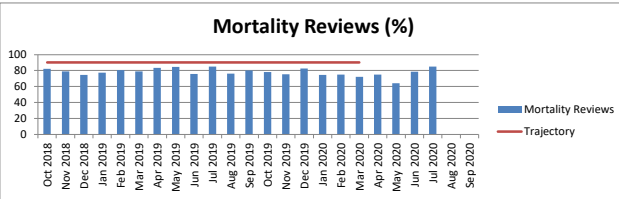
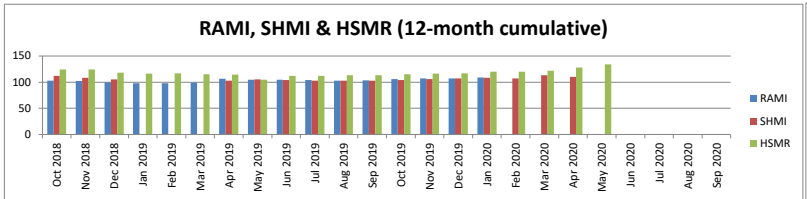
CQC Domain - Effective

		20WD : TIA Treatment <24 Hours from receipt of referral	%	-	-
● ● ● ● ● ● ● ●		Primary Angioplasty (Door To Balloon Time 90 mins)	=> %	80	80
● ● ● ● ● ● ● ●		Primary Angioplasty (Call To Balloon Time 150 mins)	=> %	80	80
● ● ● ● ● ● ● ●		Rapid Access Chest Pain - seen within 14 days	=> %	98	98

-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	100.0	-	100.0	100.0	-	-	-	-	-	-
95.2	85.7	100.0	93.8	100.0	77.8	100.0	95.7	91.7	94.1	91.7	71.4	33.3	100.0	100.0	100.0	100.0	88.9	93.2	88.9	-	-	-	-	-	-	-	-	-
95.5	85.7	87.5	93.3	90.9	66.7	100.0	89.5	81.8	88.2	91.7	50.0	33.3	80.0	100.0	75.0	100.0	88.9	86.4	88.9	-	-	-	-	-	-	-	-	-
100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	-	-	-	-	-	-	-

1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Completeness	Granularity	Assessment of Executive Director
●	●	●	●	●	●	●

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



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.

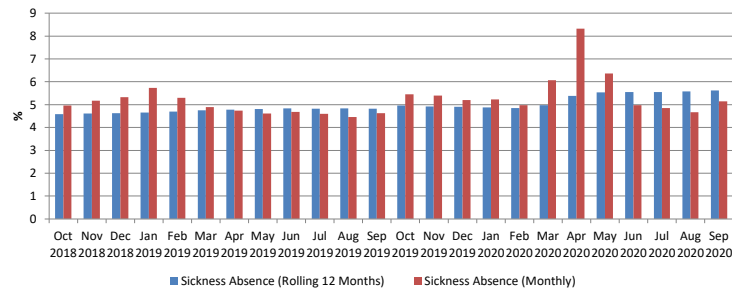
CQC Domain - Well Led

	Kitemark	Reviewed Date	Indicator	Measure	Standard		Apr 2019	May 2019	Jun 2019	Jul 2019	Aug 2019	Sep 2019	Oct 2019	Nov 2019	Dec 2019	Jan 2020	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	20/21 Year to Date	Group						
					Year	Month																				M	SS	W	I	PCCT	CO	
Workforce	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		PDRs - 12 month rolling	=> %	95	95	-	-	-	-	-	75.3	78.9	-	-	-	-	-	-	-	-	-	-	-	91.4	91.4	87.8	87.3	97.2	89.8	95.9	94.7
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Medical Appraisal	=> %	90	90	95.3	95.2	94.4	93.6	94.6	97.3	94.7	94.7	94.9	94.4	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Sickness Absence (Rolling 12 Months)	<= %	3	3	4.8	4.8	4.8	4.8	4.8	4.8	5.0	4.9	4.9	4.9	4.9	5.0	5.4	5.5	5.5	5.6	5.6	5.6	5.5	6.6	6.4	5.6	4.2	4.9	4.8	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Sickness Absence (Monthly)	<= %	3	3	4.7	4.6	4.7	4.6	4.5	4.6	5.4	5.4	5.2	5.2	5.0	6.1	8.3	6.4	5.0	4.8	4.7	5.1	5.7	6.7	5.2	5.4	3.8	4.4	4.2	
			Sickness Absence - Long Term - (Open Cases in the month)	No	-	140	-	-	-	-	-	131	156	169	187	153	114	152	156	228	160	145	162	148	-	41	28	22	4	16	37	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Sickness Absence - Short Term (Monthly)	No	-	-	738	644	674	681	539	719	875	814	872	845	779	936	1241	722	657	789	630	794	-	201	176	92	32	116	139	
			Ward Sickness Absence (Monthly)	<= %	3	3	6.8	6.6	6.7	5.8	5.8	6.7	7.2	7.6	7.0	6.6	6.8	8.9	11.7	9.5	7.4	6.8	7.1	7.9	8.5	9.2	8.1	6.4	-	6.4	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>		Mandatory Training - Health & Safety (% staff)	=> %	95	95	95.6	94.0	71.0	80.3	85.3	86.2	89.0	90.4	91.8	92.8	92.7	94.2	93.9	96.3	97.7	98.6	97.5	97.6	96.9	94.7	97.8	98.4	99.6	98.8	98.4	
			Staff at 100% compliance with mandatory training	%	-	-	73.8	72.7	56.8	64.4	60.4	72.0	73.6	79.1	80.1	52.8	71.5	74.4	72.6	78.4	89.3	87.7	86.4	85.7	83.4	75.9	83.5	89.0	-	89.8	-	
			Staff requiring to complete 1 module to be at 100% compliance with mandatory training	%	-	-	13.5	12.9	23.0	18.7	22.0	12.7	13.8	10.1	9.4	25.5	15.1	15.3	16.3	13.2	6.8	8.3	9.1	8.8	10.4	14.4	9.6	6.6	-	7.3	-	
			Staff requiring to complete 2 modules to be at 100% compliance with mandatory training	%	-	-	8.4	6.5	8.5	7.2	7.6	5.7	4.6	3.8	4.0	10.0	5.8	4.9	5.2	3.8	1.8	1.9	2.4	2.6	3.0	4.3	3.6	2.3	-	1.2	-	
			Staff requiring to complete 3 modules to be at 100% compliance with mandatory training	%	-	-	-	-	-	-	-	-	-	-	-	11.7	7.6	5.4	5.9	4.6	2.0	2.1	2.2	2.8	3.2	5.5	3.4	2.1	-	1.8	-	
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Nursing Turnover (Qualified Only)	<= %	10.7	10.7	11.8	12.4	12.3	12.3	11.7	11.5	12.2	12.1	12.6	12.3	12.6	12.5	12.7	12.9	12.4	12.3	12.6	12.6	12.6	12.6	-	-	-	-	-	-
	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>	Apr 19	Nursing Vacancy Rate (Qualified)	<= %	11	11	15.2	15.8	15.9	16.1	15.8	14.3	14.6	13.8	14.5	12.9	12.3	12.4	12.4	13.3	14.2	18.0	12.6	12.6	13.9	9.7	17.8	15.3	46.3	8.9	-1.9	
		Apr 19	New Starters Complete Onboarding Process	=> %	100	100	92.3	77.6	87.5	94.6	87.0	93.5	99.2	100.0	100.0	94.8	100.0	96.9	38.8	100.0	98.9	100.0	98.9	97.2	93.9	76.9	77.4	100.0	100.0	-	100.0	-

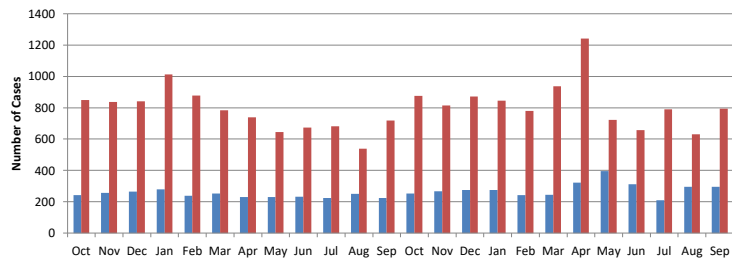
Data Quality - Kitemark						
1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Completeness	Granularity	Assessment of Exec Director
●	●	●	●	●	●	●

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

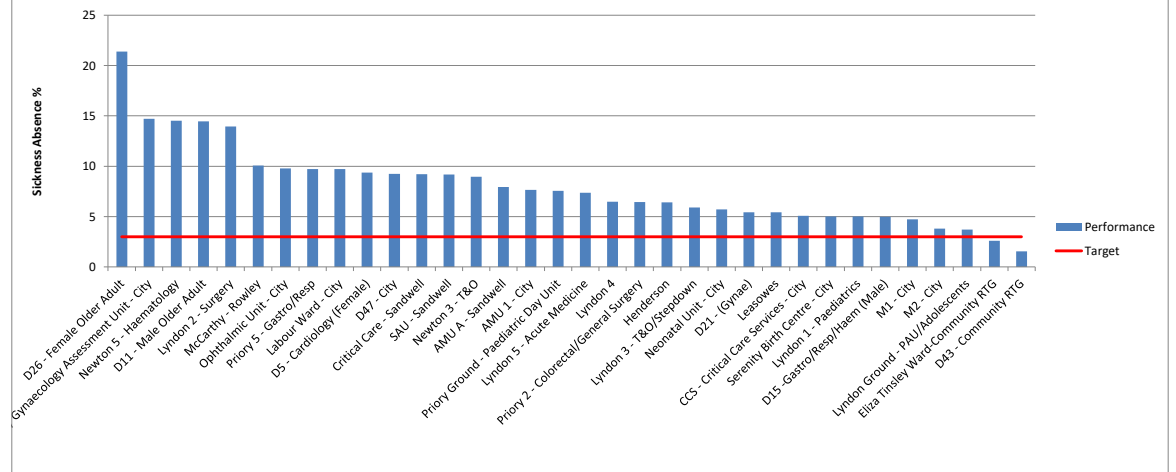
Sickness Absence (Trust %)
























Long / Short Term - Sickness Absence - Trust













Sickness Absence (Ward %) September 2020



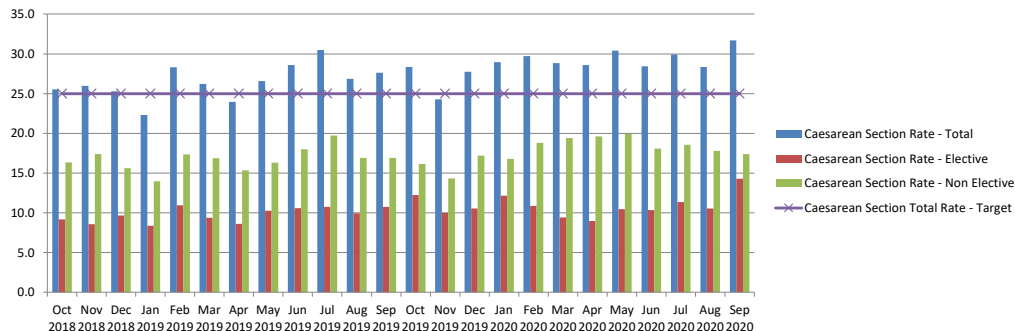
Patient Safety - Obstetrics

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

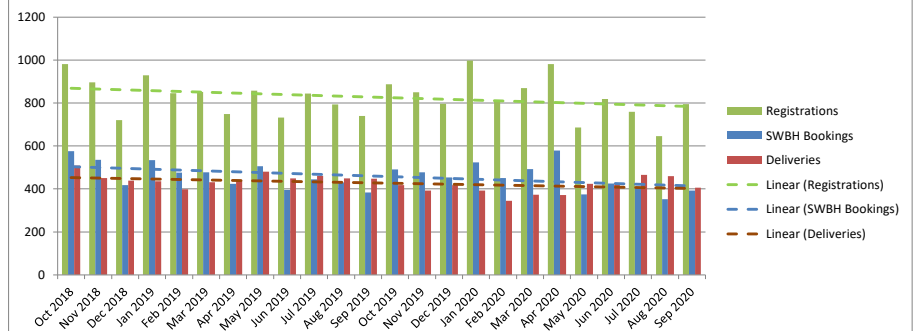
Previous Months Trend (since Apr 2019)																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
24.0	26.6	28.6	30.5	26.9	27.6	28.4	24.3	27.8	28.9	29.7	28.8	28.6	30.4	28.4	29.9	28.4	31.7
9	10	11	11	10	11	12	10	11	12	11	9	9	10	10	11	11	14
15	16	18	20	17	17	16	14	17	17	19	19	20	20	18	19	18	17
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0.00	6.25	4.45	6.51	8.93	2.24	4.80	2.54	4.78	5.10	0.00	2.68	2.70	9.43	11.90	6.44	4.35	4.94
0.00	2.08	0.00	0.00	0.00	0.00	2.40	5.09	2.39	2.55	0.00	2.68	5.39	2.36	4.76	6.44	0.00	0.00
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1.8	2.2	1.4	0.9	0.8	0.3	0.3	1.2	0.5	1.1	0.0	0.3	1.9	1.6	1.8	1.7	2.1	0.6
0.9	1.9	1.0	0.9	0.8	0.3	0.3	1.2	0.5	0.8	0.0	0.3	0.4	0.8	1.3	1.1	1.8	0.6
0.0	0.6	0.7	0.6	0.0	0.0	0.0	0.3	0.0	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.7	0.0

Data Period	Month	Year To Date	Trend
Sep 2020	31.7	29.6	
Sep 2020	14.3	11.0	
Sep 2020	17.4	18.6	
Sep 2020	0	1	
Sep 2020	3	19	
Sep 2020	7.16	4.99	
Sep 2020	4.94	9.82	
Sep 2020	4.94	6.68	
Sep 2020	0.00	3.14	
Sep 2020	92.0	92.3	
Sep 2020	150.9	135.6	
Sep 2020	83.47	83.27	
Sep 2020	0.57	1.54	
Sep 2020	0.57	0.98	
Sep 2020	0.00	0.14	

Caesarean Section Rate (%)



Registrations & Deliveries

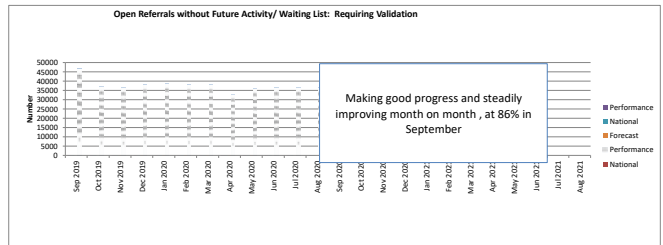
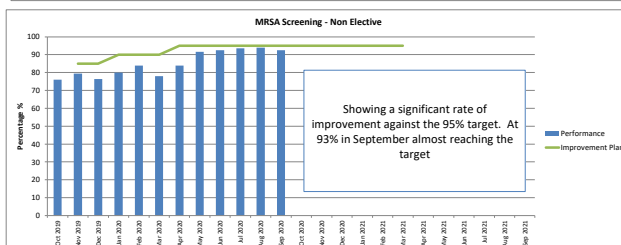
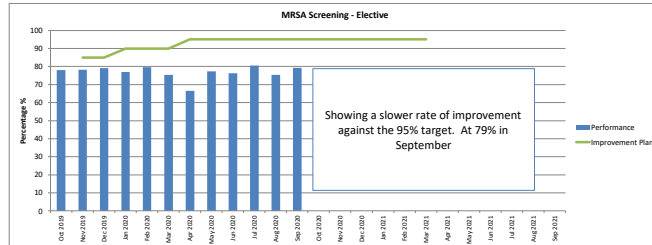
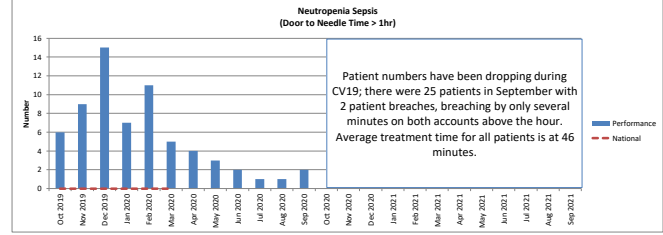
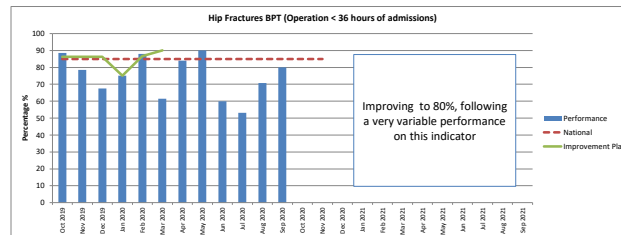
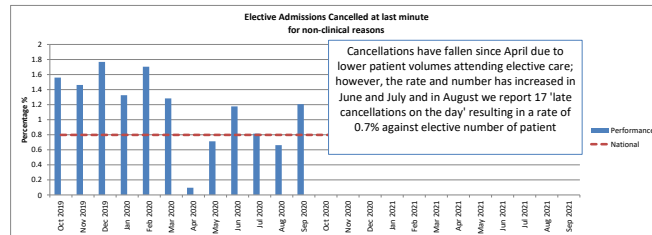
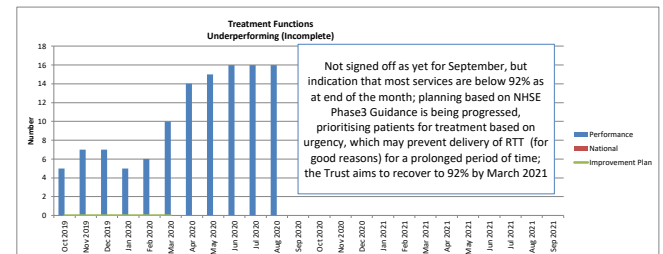
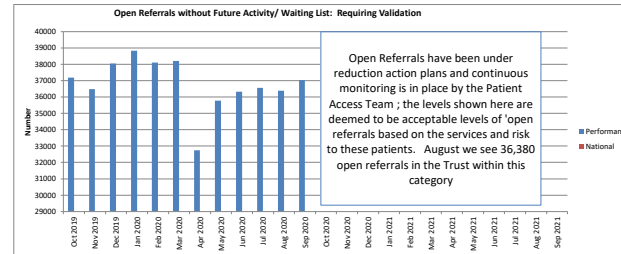
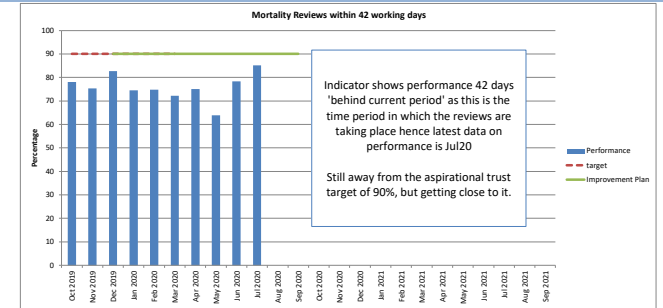


Persistent Red Focus

Exec Lead	11	Indicator <i>Note: Some are grouped (two or more indicators)</i>	Standard Expected	Plan in Place	Recovery Expected	Sept20 - Actual Perf	Tracking Planned Monthly
Dr DC	1	- Mortality Reviews within 42days	90%	✓	Dec-19	85.1%	X
RG	1	- Mandatory Training (staff % where MT 100% complete)	95%	✓	Mar-20	85.7%	X
LK	1	- Treatment Functions below 92% RTT	0	✓	Phase 3 Mar21	16	X
	1	- Open Referrals (relevant for improvement)	30,000	✓	Sep-19	37,027	✓
	1	- Neck of Femur - to surgery within 36 hours	85%	✓	Jul-19	80.0%	X
	1	- Cancellations (20pm)	20	✓	Mar-20	36	X
	1	- Cancellations as %age of elective admissions	0.80%	✓	Mar-20	1.2%	X
	1	- Stroke Ward Admissions (Within 4 hrs)	80%	✓	Mar-20	91.7%	✓
KF	1	- Neutropenic Sepsis	100%	✓	Jul-19	95.0%	X
	1	- MRSA Screening (Elective & Non-Elective)	95%	✓	Apr-20	79% Elec / 93% Non-Elec	X
	1	- FFT Response Target (IP, OP, Maternity and A&E)	25%	✓	TBC	IP 19% / Maternity 18% / OP not shown in IOPE	X

September performance:

- Improvement progress has been impacted by COVID-19 pressures, however, many indicators are moving in the right direction or have continued to improve or achieve targets in August.
- Stroke patients have met their target in reaching the dedicated stroke ward within the 4hrs target of 80%.
- Neutropenic sepsis would have achieved 95% in August with 1 patient breaching by 11 minutes over the hour.
- Mandatory training and MRSA screening (non-elective) have been improving month on month within reach of their targets now.
- Neck of Femur continues to be up and down in terms of performance at 80% in September (85% target)
- RTT has been impacted by COVID and most services have been unable to deliver the 92%; as we progress the recovery plan (as per Phase 3) over the next few months, recovery is expected at the end of March 2021. Recovery of RTT by March 2021 depends on several factors such as e.g. are referrals coming in at the rate predicted in the model, what is COVID-19 second surge going to present impacting potentially the capacity to see elective patients; wider STP discussions are also taking place on this matter.



CQC : Use of Resources

[illegible]

Benchmark:

Quality Account Peer Group :

- Bradford Teaching NHS Foundation Trust (BTH)
- Kings College Hospital NHS Foundation Trust (KCH)
- Royal Liverpool & Broadgreen University NHS Foundation Trust (RLBUH)
- The Royal Wolverhampton NHS Trust (RWH)
- University Hospital Bristol NHS Foundation Trust (UH Bristol)
- Worcestershire Acute Hospital NHS Foundation Trust (Worcs Acute)
- Northumbria Healthcare NHS Foundation Trust

STP FootPrint Peer Group:

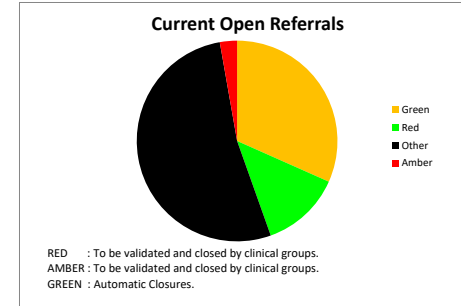
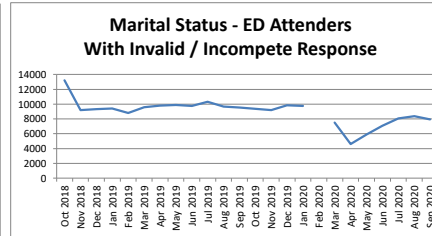
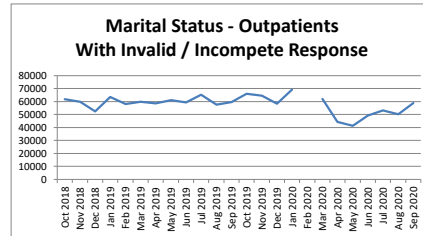
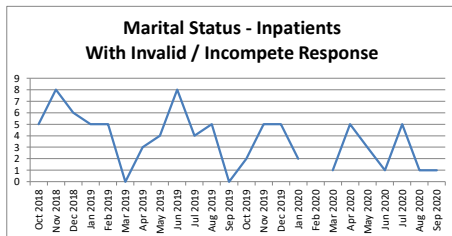
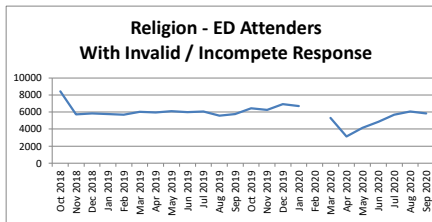
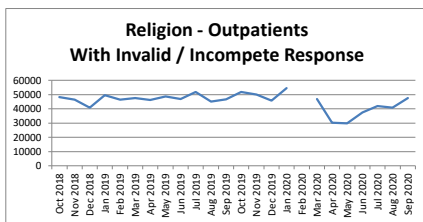
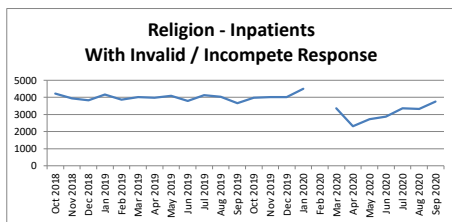
- Black Country Partnership NHS Foundation Trust
- Dudley and Walsall Mental Health Partnership NHS Trust
- Dudley Group NHS Foundation Trust
- Royal Wolverhampton NHS Trust
- Sandwell and West Birmingham Hospitals NHS Trust
- Walsall Healthcare NHS Trust
- West Midlands Ambulance Service NHS Foundation Trust

Data Completeness

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

Previous Months Trend (since Apr 2019)																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
98.2	98.1	96.8	96.7	97.9	96.8	97.2	96.2	95.1	95.7	99.0	97.1	95.5	98.4	98.6	96.2	-	-
99.6	99.7	99.6	99.6	99.5	99.6	99.6	99.6	99.6	99.5	99.7	99.5	99.6	99.4	99.4	99.5	-	-
97.6	97.6	97.3	97.3	97.2	92.6	82.7	84.4	84.2	86.0	85.6	88.4	90.3	89.9	90.2	90.2	-	-
68.6	68.2	68.0	67.7	66.8	67.7	65.7	65.9	65.3	62.9	-	64.5	65.5	63.4	65.0	63.6	63.8	62.1
50.7	50.2	50.3	50.4	51.1	50.6	50.3	50.9	50.3	50.0	-	51.2	55.9	52.5	50.1	48.1	46.5	46.9
64.0	62.8	62.9	64.7	64.6	63.7	59.2	59.1	57.0	57.7	-	55.5	55.1	55.3	56.2	55.3	55.0	54.8
100.0	100.0	99.9	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	100.0	99.9	100.0	100.0	99.9	100.0	100.0
37.5	37.4	37.2	37.5	37.3	36.8	36.7	36.5	36.5	36.4	-	35.1	35.5	34.4	34.4	34.1	34.3	34.3
40.6	40.0	39.5	39.9	38.4	40.1	40.5	39.8	39.1	38.3	-	37.2	33.6	36.5	36.3	36.5	37.7	38.6
311,212	223,937	221,026	216,977	215,389	210,947	213,037	213,645	216,909	216,936	217,529	215,194	207,500	206,550	206,748	209,022	211,836	213,760
158,535	69,739	64,564	54,518	53,090	46,595	37,194	36,716	38,047	38,823	38,104	38,197	32,736	35,790	36,523	36,555	36,590	37,027

Data Period	Group							Month	Year To Date	Trend
	M	SS	W	P	I	PCCT	CO			
Sep 2020							61.2			
Jul 2020										
Jul 2020										
Jul 2020										
Jul 2020										
Jul 2020										
Jul 2020										
Jul 2020										
Jul 2020										
Jul 2020										
Sep 2020								62.1	63.8	
Sep 2020								46.9	49.7	
Sep 2020								54.8	55.3	
Sep 2020								100.0	100.0	
Sep 2020								34.3	34.5	
Sep 2020								38.6	36.8	
Jul 2020										
Sep 2020								213,760		
Sep 2020								3,787		



Legend

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

Indicators which comprise the External Performance Assessment Frameworks	
	CQC Regulatory Framework and NHS Oversight Framework
a	Caring
b	Well-led
c	Effective
d	Safe
e	Responsive
f	Finance

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

Data Quality - Kitemark						
1	2	3	4	5	6	7
Timeliness	Audit	Source	Validation	Completeness	Granularity	Assessment of Exec Director
●	●	●	●	●	●	●

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

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

Group Performance

Medicine & EC Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date	Trend	
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	EC	ACA				ACB
Patient Safety - Inf Control	C. Difficile	<= No	30	3	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	1	0	0	1	9	<div></div>	
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	1	0	0	1	1	<div></div>	
Patient Safety - Inf Control	MRSA Screening - Elective (%)	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	86	83	63	79.4		<div></div>	
Patient Safety - Inf Control	MRSA Screening - Non Elective (%)	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	93	93	89	92.5		<div></div>	
Patient Safety - Harm Free Care	Number of DOLS raised	No			20	16	21	13	14	24	19	12	25	14	17	15	13	21	23	17	15	21	Sep 2020	9	12	0	21	110	<div></div>
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			20	16	21	13	14	24	19	12	25	14	17	15	13	21	23	17	15	21	Sep 2020	9	12	0	21	110	<div></div>
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			2	4	11	2	4	0	4	3	6	3	4	0	2	1	3	3	3	2	Sep 2020	0	2	0	2	14	<div></div>
Patient Safety - Harm Free Care	Number DOLS rolled over from previous month	No			5	2	4	0	2	0	1	0	0	0	2	1	5	4	2	3	1	1	Sep 2020	0	1	0	1	16	<div></div>
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			11	9	9	8	8	13	12	7	16	7	10	11	12	22	19	15	11	17	Sep 2020	8	9	0	17	96	<div></div>
Patient Safety - Harm Free Care	Number of DOLS applications the LA disagreed with	No			1	0	0	0	2	2	0	0	0	0	1	0	0	0	0	0	0	0	Sep 2020	0	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			4	0	2	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2	Sep 2020	0	2	0	2	-	<div></div>
Patient Safety - Harm Free Care	Falls	<= No	0	0	51	60	47	58	58	39	-	34	47	46	42	65	21	35	44	51	44	54	Sep 2020	16	-	-	54	249	<div></div>
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	2	2	1	2	0	0	-	1	0	1	1	0	0	1	1	2	0	0	Sep 2020	0	0	0	0	4	<div></div>
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	14	11	16	14	12	15	12	3	14	14	17	18	15	17	6	7	11	10	Sep 2020	2	-	-	10	66	<div></div>
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	98.2	92.6	96.9	96.8		<div></div>	
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	<div></div>	-	<div></div>	<div></div>	<div></div>	<div></div>	-	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	100.0	100.0	100.0	100.0		<div></div>	
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	100	100	100	100.0		<div></div>	
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	100	100	100	100.0		<div></div>	
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	1	0	<div></div>	
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	Sep 2020	0	1	0	1	1	<div></div>
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	4	1	0	5	17	<div></div>	
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2020	85	100	82	86		<div></div>	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			11.9	12.7	12.3	13.0	12.9	12.6	13.3	14.1	13.3	13.8	13.9	13.7	14.9	12.8	11.9	13.3	14.5	-	Aug 2020				14.5		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			12.4	12.4	12.4	12.4	12.4	12.5	12.7	12.9	12.9	13.0	13.0	13.1	13.3	13.4	13.4	13.4	13.5	-	Aug 2020					13.4	<div></div>

Medicine & EC Group

Section	Indicator		Trajectory	
			Year	Month
Clinical Effect - Stroke & Card	Pts spending >90% stay on Acute Stroke Unit (%)	=> %	90.0	90.0
Clinical Effect - Stroke & Card	Pts admitted to Acute Stroke Unit within 4 hrs (%)	=> %	90.0	90.0
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.0
Clinical Effect - Stroke & Card	Stroke Admission to Thrombolysis Time (% within 60 mins)	=> %	85.0	85.0
Clinical Effect - Stroke & Card	Stroke Admissions - Swallowing assessments (<24h) (%)	=> %	98.0	98.0
Clinical Effect - Stroke & Card	TIA (High Risk) Treatment <24 Hours from receipt of referral (%)	=> %	70.0	70.0
Clinical Effect - Stroke & Card	TIA (Low Risk) Treatment <7 days from receipt of referral (%)	=> %	75.0	75.0
Clinical Effect - Stroke & Card	Primary Angioplasty (Door To Balloon Time 90 mins) (%)	=> %	80.0	80.0
Clinical Effect - Stroke & Card	Primary Angioplasty (Call To Balloon Time 150 mins) (%)	=> %	80.0	80.0
Clinical Effect - Stroke & Card	Rapid Access Chest Pain - seen within 14 days (%)	=> %	98.0	98.0
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No		
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No		
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No		
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0.0	0.0
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0.0	0.0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		

Previous Months Trend																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
90.91	88.24	92.98	92.86	98.33	-	-	-	-	-	-	93.65	-	-	86.67	-	87.5	-
45.16	66.67	59.65	72.34	80	-	-	-	-	-	-	78.72	-	-	84.44	-	81.82	-
62.9	66.1	61.4	64.58	73.91	-	-	-	-	-	-	-	-	-	87.5	-	89.13	-
96.77	98.31	100	95.83	100	-	-	-	-	-	-	-	-	-	100	-	100	-
66.7	87.5	85.7	83.3	60.0	-	-	-	-	-	-	50.0	-	-	50.0	-	50.0	-
100	100	100	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
100	91.67	100	87.5	73.33	68.18	65.38	88.24	80	65.22	83.33	80	-	-	92.31	-	100	-
82.86	94.74	83.33	88.89	84.21	90	88	61.11	61.9	61.11	76.19	67.57	-	-	100	-	-	-
95.24	85.71	100	93.75	100	77.78	100	95.65	91.67	94.12	91.67	71.43	33.33	100	100	100	100	88.89
95.45	85.71	87.5	93.33	90.91	66.67	100	89.47	81.82	88.24	91.67	50	33.33	80	100	75	100	88.89
100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-
4	0.5	2	5	4	2	3.5	1	3.5	3.5	1.5	1	-	4	3	2.5	0	-
1	0.5	0	1.5	1.5	2	1	1	2.5	2.5	1	0	-	0	1	1.5	0	-
168	183	91	149	147	83	141	149	145	133	156	79	-	91	173	134	62	-
7	2	3	3	4	6	6	9	15	7	11	5	4	3	2	1	1	2
4	0	0	31	0	9	-	-	-	-	401	-	-	-	-	-	-	-
33	47	26	31	24	21	37	31	29	40	36	32	14	19	32	52	34	37
84	80	37	58	48	47	54	50	50	58	68	59	49	51	54	52	61	89

Data Period	Directorate			Month	Year To Date	
	EC	AC	SC			
Aug 2020		-		87.5	88.1	
Aug 2020		-		81.8	82.3	
Aug 2020		-		89.1	86.8	
Aug 2020		-		100.0	99.2	
Aug 2020		-		50.0	66.7	
Jun 2019		-		100.0	100.0	
Aug 2020		-		100.0	86.1	
Jun 2020		-		100.0	91.3	
Sep 2020		88.9		88.9	93.2	
Sep 2020		88.9		88.9	86.4	
Sep 2020		100.0		100.0	100.0	
Aug 2020			70.7	74.5		
Aug 2020			100.0	100.0		
Aug 2020			100.0	100.0		
Aug 2020	-	0.00	0.00	0.00	10	
Aug 2020	-	0.00	0.00	0.00	3	
Aug 2020	-	45	62	62		
Sep 2020	-	2	0	2	13	
May 2020	-	-	-	-	-	
Sep 2020	22	15	0	37	188	
Sep 2020	44	45	0	89		

Medicine & EC Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8
Pt. Experience - Cancellations	28 day breaches	<= No	0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0
Pt. Experience - Cancellations	Urgent Cancellations	No		
Emergency Care & Pt. Flow	Emergency Care 4-hour waits (%)	=> %	95.0	95.0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No		
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15.0	15.0
Emergency Care & Pt. Flow (Group Sheet Only)	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60.0	60.0
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0
Emergency Care & Pt. Flow	WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number)	<= No	0	0
Emergency Care & Pt. Flow	WMAS -Finable Handovers (emergency conveyances) >60 mins (number)	<= No	0	0
Emergency Care & Pt. Flow	WMAS - Turnaround Delays > 60 mins (% all emergency conveyances)	<= %	0.02	0.02
Emergency Care & Pt. Flow	WMAS - Emergency Conveyances (total)	No		
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No		
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%		
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No		
RTT	RTT - Admitted Care (18-weeks) (%)	=> %	90.0	90.0
RTT	RTT - Non Admitted Care (18-weeks) (%)	=> %	95.0	95.0
RTT	RTT - Incomplete Pathway (18-weeks) (%)	=> %	92.0	92.0
RTT	RTT - Backlog	<= No	0	0
RTT	Patients Waiting >52 weeks	<= No	0	0
RTT	Treatment Functions Underperforming	<= No	0	0
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0

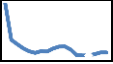
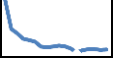


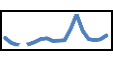
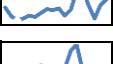


Previous Months Trend																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	5	3	12	5	14	5	3	0	2	9	7	0	7
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
3104	2534	2570	2695	2549	2032	0	0	0	0	0	0	0	0	0	0	0	0
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
166	119	128	123	162	238	251	228	279	199	242	380	234	172	77	183	172	161
5	4	4	5	9	33	16	9	12	9	32	42	8	1	0	0	3	9
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
4814	4670	4555	4658	4486	4484	4656	4721	4887	4848	4522	4588	3069	3282	3039	3951	4209	4065
118	117	112	112	101	128	132	128	130	128	144	129	45	38	40	39	32	46
22.153	22.386	20.622	19.24	22.542	23.638	21.995	21.864	22.148	20.107	22.379	25.318	11.752	15.592	10.334	9.1135	4.535	10.839
106.27	119.09	94.77	91.52	113.55	104.16	108.8	111.8	114.81	109.36	115.27	128.52	30.63	36.96	25.2	22.51	10.19	30.4
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●
346	452	515	568	451	525	483	559	579	601	695	1034	1639	2372	2944	2989	2501	1969
0	1	4	1	7	0	0	0	0	0	0	0	0	0	0	1	1	34
3	6	6	6	5	7	6	9	7	7	7	10	10	8	11	12	12	11
●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●

Data Period	Directorate			Month	Year To Date	
	EC	AC	SC			
Sep 2020	-	1.26	-	0.96		
Sep 2020	0.0	0.0	0.0	0	0	
Sep 2020	0.0	7.0	0.0	7	25	
Sep 2020	0.00	0.00	0.00	0.00	0	
Sep 2020	73.8	84.8	Site S/C	79.4	85.6	
Sep 2020	0	0	0	0	0	
Sep 2020	0.0	0.0	Site S/C	0	1	
Sep 2020	24.0	31.0	Site S/C	28	21	
Sep 2020	55.0	36.0	Site S/C	45	29	
Sep 2020	7.0	7.5	Site S/C	7.3	8.2	
Sep 2020	5.1	5.1	Site S/C	5.1	4.2	
Sep 2020	124	37		161	999	
Sep 2020	2	7		9	21	
Sep 2020	0.09	0.37		0.22	0.11	
Sep 2020	2165	1900		4065	21615	
Sep 2020	27	7		46	-	
Sep 2020	13	12		11	11	
Sep 2020	19	6		30	-	
Sep 2020	-	84.4	100.0	86.2		
Sep 2020	-	49.0	64.7	57.1		
Sep 2020	-	73.3	58.3	63.9		
Sep 2020	0	548	1421	1969		
Sep 2020	0	32	2	34		
Sep 2020	0	6	5	11		
Sep 2020	-	-	-	32.33		

Medicine & EC Group

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

Previous Months Trend																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
78,128	58,658	56,434	54,224	52,647	51,785	52,607	52,552	54,131	55,024	55,223	53,611	50,679	50,502	50,369	51,104	51,936	51,949
47,385	27,937	25,112	21,330	20,501	19,410	16,093	15,603	16,166	16,654	16,294	14,829	12,044	13,757	14,228	14,244	13,873	14,160
-	-	-	-	-	🔴	🔴	-	-	-	-	-	-	-	-	-	-	🔴
🟢	🟢	🟢	🔴	🔴	🟢	🔴	🔴	🔴	🔴	🟢	🟢	🟢	🟢	🟢	🟢	🟢	-
5.69	5.54	5.50	5.43	5.38	5.32	5.44	5.41	5.24	5.14	5.06	5.33	5.96	6.21	6.28	6.32	6.41	6.55
6.13	4.97	4.49	4.41	4.68	5.20	5.90	6.05	5.43	5.50	5.54	8.32	11.74	7.83	5.87	5.55	5.82	6.72
62	46	39	42	47	45	52	59	57	60	47	58	91	95	66	42	66	77
190	171	188	153	142	177	209	176	183	195	188	299	338	175	162	191	166	201
🔴	🔴	🔴	🔴	🔴	🔴	🔴	🔴	🔴	🔴	-	-	-	-	-	-	-	-

Data Period	Directorate			Month	Year To Date	
	EC	AC	SC			
Sep 2020	12,417	21,449	18,083	51949		
Sep 2020	7,076	4,542	2,542	14160		
Sep 2020	85.89	90.16	87.98		87.8	
Aug 2020	100	100	100		100.0	
Sep 2020	5.85	6.81	7.23	6.55	6.29	
Sep 2020	6.14	7.67	6.64	6.72	7.25	
Sep 2020	27	24	26	77	490	
Sep 2020	81	40	80	201	1398	
Jan 2020	84.12	-	-		87.6	

Surgical Services Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate					Month	Year To Date	Trend	
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	GS	SS	TH	An				O
Patient Safety - Inf Control	C. Difficile	<= No	7	1	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div></div>
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div></div>
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>95.04</div>	<div>88.39</div>	<div>-</div>	<div>0</div>	<div>39.53</div>	<div>81.7</div>	<div></div>	<div></div>
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>92.09</div>	<div>91.76</div>	<div>-</div>	<div>66.67</div>	<div>100</div>	<div>92.1</div>	<div></div>	<div></div>
Patient Safety - Harm Free Care	Number of DOLS raised	No			<div>8</div>	<div>8</div>	<div>8</div>	<div>7</div>	<div>9</div>	<div>8</div>	<div>8</div>	<div>8</div>	<div>7</div>	<div>13</div>	<div>9</div>	<div>9</div>	<div>10</div>	<div>16</div>	<div>14</div>	<div>12</div>	<div>6</div>	<div>13</div>	Sep 2020	<div>11</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>0</div>	<div>13</div>	<div>71</div>	<div></div>
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			<div>8</div>	<div>8</div>	<div>8</div>	<div>7</div>	<div>9</div>	<div>8</div>	<div>8</div>	<div>8</div>	<div>7</div>	<div>13</div>	<div>9</div>	<div>9</div>	<div>10</div>	<div>16</div>	<div>14</div>	<div>12</div>	<div>6</div>	<div>13</div>	Sep 2020	<div>11</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>0</div>	<div>13</div>	<div>71</div>	<div></div>
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			<div>2</div>	<div>0</div>	<div>1</div>	<div>1</div>	<div>1</div>	<div>2</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>2</div>	<div>1</div>	<div>1</div>	<div>1</div>	<div>2</div>	Sep 2020	<div>2</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>8</div>	<div></div>
Patient Safety - Harm Free Care	Number DOLS rolled over from previous month	No			<div>0</div>	<div>2</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>1</div>	<div>6</div>	<div>2</div>	<div>2</div>	<div>4</div>	<div>1</div>	<div>1</div>	<div>1</div>	Sep 2020	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>11</div>	<div></div>
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			<div>6</div>	<div>8</div>	<div>6</div>	<div>2</div>	<div>7</div>	<div>5</div>	<div>6</div>	<div>4</div>	<div>5</div>	<div>9</div>	<div>6</div>	<div>12</div>	<div>9</div>	<div>10</div>	<div>15</div>	<div>10</div>	<div>4</div>	<div>10</div>	Sep 2020	<div>8</div>	<div>0</div>	<div>0</div>	<div>2</div>	<div>0</div>	<div>10</div>	<div>58</div>	<div></div>
Patient Safety - Harm Free Care	Number of DOLS applications the LA disagreed with	No			<div>0</div>	<div>1</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	Sep 2020	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div></div>
Patient Safety - Harm Free Care	Falls	<= No	0	0	<div>11</div>	<div>8</div>	<div>12</div>	<div>6</div>	<div>9</div>	<div>16</div>	<div>-</div>	<div>11</div>	<div>13</div>	<div>20</div>	<div>8</div>	<div>16</div>	<div>20</div>	<div>12</div>	<div>8</div>	<div>8</div>	<div>12</div>	<div>7</div>	Sep 2020	<div>2</div>	<div>5</div>	<div>-</div>	<div>-</div>	<div>-</div>	<div>7</div>	<div>67</div>	<div></div>
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>-</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	Sep 2020	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div></div>
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	<div>8</div>	<div>8</div>	<div>7</div>	<div>6</div>	<div>8</div>	<div>8</div>	<div>7</div>	<div>4</div>	<div>6</div>	<div>13</div>	<div>9</div>	<div>7</div>	<div>16</div>	<div>5</div>	<div>7</div>	<div>2</div>	<div>5</div>	<div>9</div>	Sep 2020	<div>1</div>	<div>4</div>	<div>-</div>	<div>4</div>	<div>-</div>	<div>9</div>	<div>44</div>	<div></div>
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>-</div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>93.46</div>	<div>97.3</div>	<div>-</div>	<div>100</div>	<div>90.75</div>	<div>94.4</div>	<div></div>	<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	<div></div>	<div>-</div>	<div></div>	<div></div>	<div></div>	<div>-</div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>100</div>	<div>100</div>	<div>100</div>	<div>100</div>	<div>100</div>	<div>100.0</div>	<div></div>	<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>-</div>	<div>100</div>	<div>100</div>	<div>-</div>	<div>100</div>	<div>100.0</div>	<div></div>	<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>-</div>	<div>100</div>	<div>100</div>	<div>-</div>	<div>100</div>	<div>100.0</div>	<div></div>	<div></div>
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div>0</div>	<div>1</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	Sep 2020	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	Sep 2020	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div></div>
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div>1</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>0</div>	<div>1</div>	<div>4</div>	<div></div>
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100	98.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Jul 2020	<div>88</div>	<div>100</div>	<div>-</div>	<div>100</div>	<div>-</div>	<div>90.9</div>	<div></div>	<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			<div>5.6</div>	<div>6.0</div>	<div>4.8</div>	<div>4.8</div>	<div>4.5</div>	<div>4.6</div>	<div>3.7</div>	<div>4.1</div>	<div>3.7</div>	<div>3.6</div>	<div>4.2</div>	<div>5.7</div>	<div>10.4</div>	<div>6.3</div>	<div>4.8</div>	<div>4.2</div>	<div>5.1</div>	<div>-</div>	Aug 2020	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>5.1</div>	<div></div>	<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			<div>6.16</div>	<div>6.18</div>	<div>6.07</div>	<div>5.84</div>	<div>5.63</div>	<div>5.48</div>	<div>5.32</div>	<div>5.13</div>	<div>4.87</div>	<div>4.75</div>	<div>4.61</div>	<div>4.54</div>	<div>4.56</div>	<div>4.48</div>	<div>4.47</div>	<div>4.41</div>	<div>4.45</div>	<div>-</div>	Aug 2020	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div>4.5</div>	<div></div>

Surgical Services Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0
Clinical Effect - Cancer	2 weeks (Breast Symptomatic)	=> %	93.0	93.0
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No		
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No		
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No		
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0	0
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8
Pt. Experience - Cancellations	28 day breaches	<= No	0	0
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0
Pt. Experience - Cancellations	Urgent Cancellations	<= No	0	0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (%)	=> %	95.0	95.0
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	<= No	0	0
Emergency Care & Pt. Flow	Emergency Care Trolley Waits >12 hours	<= No	0	0
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Unplanned Reattendance Rate (%)	<= %	5.0	5.0
Emergency Care & Pt. Flow	Emergency Care Patient Impact - Left Department Without Being Seen Rate (%)	<= %	5.0	5.0
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Initial Assessment (95th centile)	<= No	15	15
Emergency Care & Pt. Flow	Emergency Care Timeliness - Time to Treatment in Department (median)	<= No	60	60
Emergency Care & Pt. Flow	Hip Fractures BPT (Operation < 36 hours of admissions)	=> %	85.0	85.0
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No		
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%		
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No		




Previous Months Trend																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-
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<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-
5	4	4	3	6	5	4	4	6	6	2	4	-	7	6	8	6	-
1	4	1	1	3	1	1	4	3	4	0	1	-	3	4	5	1	-
131	120	111	105	168	167	137	202	239	204	102	166	-	228	141	177	234	-
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18	11	9	13	7	7	-	-	-	-	57	-	-	-	-	-	-	-
18	16	18	22	15	22	42	28	19	26	32	25	12	9	19	43	8	19
34	26	30	38	26	33	41	32	19	30	41	28	27	28	34	43	29	43
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
38	31	32	39	27	42	55	32	54	35	40	21	0	1	4	10	15	22
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
98.8	98.7	95.9	95.7	98.3	93.2	90.3	93.3	96.4	95.8	98.0	97.0	98.8	99.7	97.9	96.0	94.1	94.7
145	102	94	148	144	165	88	72	41	48	21	23	3	2	15	32	47	45
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1	2.1	1.7	2.6	2.2	6.3	5.2	7.2	9.9	8.3	4.1	7.3	5.6	5.6	7.0	5.0	6.2	4.6
4.8	4.5	5.5	6.7	3.7	3.5	6.4	5.9	0.7	2.1	2.7	1.4	0.6	0.8	2.4	2.3	2.2	1.5
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7	14	6	3	10	7	12	12	6	7	6	12	23	2	11	3	5	3
<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
21	13	10	15	16	23	21	17	25	24	28	29	15	18	12	12	16	21
6	12	5	3	8	6	10	9	5	7	6	12	39	4	16	3	6	4
7	14	6	3	10	7	12	12	6	7	6	12	23	2	11	3	5	3

Data Period	Directorate					Month	Year To Date	
	GS	SS	TH	An	O			
Aug 2020	94.4	-	-	-	-	94.43		
Aug 2020	100.0	-	-	-	-	100		
Aug 2020	93.0	-	-	-	-	93.02		
Aug 2020	78.9	-	-	-	-	78.85		
Aug 2020	-	-	-	-	-	5.5	26	
Aug 2020	1	-	0	-	-	1	13	
Aug 2020	234	-	0	-	-	234		
Sep 2020	0	-	0	-	-	0	0	
May 2020	-	-	-	-	-	-	-	
Sep 2020	8	2	0	1	8	19	110	
Sep 2020	21	5	2	6	9	43		
Sep 2020	2.39	2.01	-	-	0.98	1.35		
Sep 2020	0	0	0	0	0	0	0	
Sep 2020	11	5	0	0	6	22	52	
Sep 2020	0	0	0	0	0	0	0	
Sep 2020	-	-	-	-	94.73	-	-	
Sep 2020	0	0	0	0	45	45	144	
Sep 2020	-	-	-	-	0	-	-	
Sep 2020	-	-	-	-	4.62	-	-	
Sep 2020	-	-	-	-	1.5	-	-	
Nov 2018	-	-	-	-	108	0	0	
Sep 2020	0.5	1.5	-	-	0.97	2.97	47	
Sep 2020						80.0	71.5	
Sep 2020	16	3	0	0	2	21	-	
Sep 2020	1.18	5.34	-	-	11.2	3.74	11	
Sep 2020	0.5	1.5	-	-	0.97	2.97	-	

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

[illegible]

Data Period	Directorate					Month	Year To Date	
	GS	SS	TH	An	O			
Sep 2020	67.8	40.8	-	-	57.8	57.9		
Sep 2020	83.3	85.2	-	-	86.6	85.4		
Sep 2020	65.7	70.3	-	-	69.2	67.9		
Sep 2020	2636	938	0	0	2246	5820		
Sep 2020	41	18	0	0	238	297		
Sep 2020	12	3	0	0	3	18		
Sep 2020	57.6	-	-	-	-	57.57		
Sep 2020	33,881	14,151	0	4,891	49,982	102705		
Sep 2020	4,723	2,821	0	2,084	3,624	13252		
Sep 2020	74.4	83.0	96.9	86.4	97.9	87.3		
Aug 2020	100	100	-	100	100	100.0		
Sep 2020	6.0	7.9	8.7	5.4	4.1	6.4	6.2	
Sep 2020	5.3	6.1	6.6	5.0	3.1	5.2	6.4	
Sep 2020	12.0	9.0	16.0	10.0	9.0	56	407	
Sep 2020	63.0	28.0	31.0	39.0	15.0	176	1061	
Jan 2020	87.2	88.0	93.2	92.8	90.6	91.3		

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date	Trend		
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	G	M				P	
Patient Safety - Inf Control	C. Difficile	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	0	0	<div></div>			
Patient Safety - Inf Control	MRSA Bacteraemia	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	0	0	<div></div>			
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	80.7			78.1		<div></div>			
Patient Safety - Inf Control	MRSA Screening - Non Elective	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	-	97.7		97.7		<div></div>			
Patient Safety - Harm Free Care	Falls	<= No	0	0	0	0	1	0	1	-	-	-	-	1	1	1	3	1	-	-	2	-	Sep 2020	-	-	-	-	6	<div></div>	
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0	0	Sep 2020	0	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= %	0	0	4	0	2	-	-	-	-	2	-	2	-	2	4	2	-	-	-	-	Sep 2020	-	-	-	-	4	<div></div>	
Patient Safety - Harm Free Care	Venous Thromboembolism (VTE) Assessments	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	87.2	96.6		92.4		<div></div>			
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections	=> %	100.0	100.0	<div></div>	-	<div></div>	<div></div>	<div></div>	-	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	100	96.2		97.7		<div></div>			
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections and brief	=> %	100.0	100.0	-	-	-	-	-	-	<div></div>	-	-	-	-	-	<div></div>	-	-	-	-	-	-	Sep 2020	-	-		-		<div></div>
Patient Safety - Harm Free Care	WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief	=> %	100.0	100.0	-	-	-	-	-	-	<div></div>	-	-	-	-	-	<div></div>	-	-	-	-	-	-	Sep 2020	-	-		-		<div></div>
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	0	0	<div></div>			
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	0	0	<div></div>			
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	1	0	1	4	<div></div>			

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date		
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	G	M				P
Patient Safety - Obstetrics	Caesarean Section Rate - Total	<= %	25.0	25.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	31.7	<div></div>	31.7	29.6	<div></div>		
Patient Safety - Obstetrics	Caesarean Section Rate - Elective	%			9	10	11	11	10	11	12	10	11	12	11	9	9	10	10	11	11	14	Sep 2020	<div></div>	14.3	<div></div>	14.3	11.0	<div></div>
Patient Safety - Obstetrics	Caesarean Section Rate - Non Elective	%			15	16	18	20	17	17	16	14	17	17	19	19	20	20	18	19	18	17	Sep 2020	<div></div>	17.4	<div></div>	17.4	18.6	<div></div>
Patient Safety - Obstetrics	Maternal Deaths	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	0	<div></div>	0	1	<div></div>		
Patient Safety - Obstetrics	Post Partum Haemorrhage (>2000ml)	<= No	48	4	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	3	<div></div>	3	19	<div></div>		
Patient Safety - Obstetrics	Admissions to Neonatal Intensive Care	<= %	10.0	10.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	7.16	<div></div>	7.2	5.0	<div></div>		
Patient Safety - Obstetrics	Adjusted Perinatal Mortality Rate (per 1000 babies)	<= Rate1	8.0	8.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	4.94	<div></div>	4.9		<div></div>		
Patient Safety - Obstetrics	Stillbirth (Corrected) Mortality Rate (per 1000 babies)	Rate1			0.00	6.25	4.45	6.51	8.93	2.24	4.80	2.54	4.78	5.10	0.00	2.68	2.70	9.43	11.90	6.44	4.35	4.94	Sep 2020	<div></div>	4.94	<div></div>	4.94	6.68	<div></div>
Patient Safety - Obstetrics	Neonatal Death (Corrected) Mortality Rate (per 1000 babies)	Rate1			0.00	2.08	0.00	0.00	0.00	0.00	2.40	5.09	2.39	2.55	0.00	2.68	5.39	2.36	4.76	6.44	0.00	0.00	Sep 2020	<div></div>	0	<div></div>	0.00	3.14	<div></div>
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	92	<div></div>	92.0		<div></div>		
Patient Safety - Obstetrics	Early Booking Assessment (<12 + 6 weeks) (%) - National Definition	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	151	<div></div>	150.9		<div></div>		
Patient Safety - Obstetrics	Breast Feeding Initiation (Quarterly)	=> %	74.0	74.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	<div></div>	83.5	<div></div>	83.5		<div></div>		
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) -	%			1.8	2.2	1.4	0.9	0.8	0.3	0.3	1.2	0.5	1.1	0.0	0.3	1.9	1.6	1.8	1.7	2.1	0.6	Sep 2020	<div></div>	0.57	<div></div>	0.6		<div></div>
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%)	%			0.9	1.9	1.0	0.9	0.8	0.3	0.3	1.2	0.5	0.8	0.0	0.3	0.4	0.8	1.3	1.1	1.8	0.6	Sep 2020	<div></div>	0.57	<div></div>	0.6		<div></div>
Patient Safety - Obstetrics	Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%)	%			0.0	0.6	0.7	0.6	0.0	0.0	0.0	0.3	0.0	0.5	0.0	0.0	0.0	0.0	0.0	0.0	0.7	0.0	Sep 2020	<div></div>	0	<div></div>	0.0		<div></div>
Clinical Effect - Mort & Read	Mortality Reviews within 42 working days	=> %	100.0	97.0	<div></div>	N/A	N/A	N/A	N/A	<div></div>	<div></div>	N/A	<div></div>	N/A	N/A	<div></div>	N/A	N/A	N/A	N/A	-	-	Jul 2020	-	-	-	-	<div></div>	
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	%			4.3	4.0	3.7	9.2	9.4	6.2	7.9	7.1	7.5	7.5	8.4	9.2	8.7	9.4	7.6	11.3	5.1	-	Aug 2020	<div></div>	<div></div>	<div></div>	5.1		<div></div>
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	%			4.6	4.6	4.5	4.6	4.8	4.9	5.0	5.1	5.0	5.1	5.3	5.7	6.1	6.9	8.1	8.2	7.8	-	Aug 2020	<div></div>	<div></div>	<div></div>		7.2	<div></div>
Clinical Effect - Cancer	2 weeks	=> %	93.0	93.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-	Aug 2020	95.1	<div></div>	-	95.1		<div></div>	
Clinical Effect - Cancer	31 Day (diagnosis to treatment)	=> %	96.0	96.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-	Aug 2020	84.6	<div></div>	<div></div>	84.6		<div></div>
Clinical Effect - Cancer	62 Day (urgent GP referral to treatment)	=> %	85.0	85.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	-	Aug 2020	53.3	<div></div>	<div></div>	53.3		<div></div>
Clinical Effect - Cancer	Cancer = Patients Waiting Over 62 days for treatment	No			0.5	2	1.5	2	1	3	3.5	1.5	2.5	2	5.5	4	-	5.5	10	2.5	3.5	-	Aug 2020	3.5	-	0	3.5	21.5	<div></div>
Clinical Effect - Cancer	Cancer - Patients Waiting Over 104 days for treatment	No			1	0	0	0.5	0.5	0	1	0	1	0.5	3	1	-	0.5	5	1	0.5	-	Aug 2020	0.5	-	0	0.5	7	<div></div>
Clinical Effect - Cancer	Cancer - Longest wait for treatment (days)	No			241	97	85	196	109	96	171	104	148	169	217	121	-	171	177	138	136	-	Aug 2020	136	-	0	136		<div></div>
Clinical Effect - Cancer	Neutropenia Sepsis Door to Needle Time Greater than 1hr	<= No	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Sep 2020	0	-	0	0	0	<div></div>

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date		
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	G	M				P
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	-	-	-	-	0	-	-	-	-	-	-	May 2020	-			-	-				
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			5	18	12	23	4	17	19	10	6	11	5	9	3	6	10	23	8	12	Sep 2020	6	4	2	12	62	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			17	26	19	23	6	22	25	12	13	13	14	15	9	12	15	23	14	22	Sep 2020	0	0	0	22		
Pt. Experience - Cancellations	Elective Admissions Cancelled at last minute for non-clinical reasons	<= %	0.8	0.8	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	4.46		-	3.2		
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	Sep 2020	0			0	0		
Pt. Experience - Cancellations	Sitrep Declared Late Cancellations	<= No	0	0	6	7	3	5	5	10	5	8	6	7	13	4	0	1	3	3	1	7	Sep 2020	7			7	15	
Pt. Experience - Cancellations	Urgent Cancellations	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Sep 2020	0	-	0	0	0		
Emergency Care & Pt. Flow	Emergency Care 4-hour breach (numbers)	No			46	20	10	13	7	20	0	0	0	0	0	0	0	0	0	0	0	Sep 2020	0	0	0	0	0		
Emergency Care & Pt. Flow	Inpatients Staying 21+ Days At Month End Census - NHSI	No			0	0	1	1	1	1	3	1	1	1	1	1	4	0	2	0	3	4	Sep 2020	4	0	0	4	-	
Emergency Care & Pt. Flow	21+ Days Long Stay Rate - NHSI	%			1	4	3	7	1	0	4	23	7	0	16	0	0	0	0	0	4	4	Sep 2020	4.45	-	0	4	2	
Emergency Care & Pt. Flow	Estimated Beds - 21+ Days - NHSI	No			0	0	0	1	0	0	0	5	1	0	2	0	0	0	0	0	0	0	Sep 2020	0.43	-	0	0	-	
RTT	RTT - Admitted Care (18-weeks)	=> %	90.0	90.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	63.3			63.3		
RTT	RTT - Non Admitted Care (18-weeks)	=> %	95.0	95.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	80.6			80.6		
RTT	RTT - Incomplete Pathway (18-weeks)	=> %	92.0	92.0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	81.4			81.4		
RTT	RTT - Backlog	<= No	0	0	146	162	201	231	187	141	142	169	191	225	282	324	437	577	696	632	529	401	Sep 2020	401			401		
RTT	Patients Waiting >52 weeks	<= No	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	4	11	18	36	Sep 2020	36			36		
RTT	Treatment Functions Underperforming	<= No	0	0	2	2	3	3	3	2	2	3	3	3	3	3	2	2	3	3	3	3	Sep 2020	3			3		
RTT	Acute Diagnostic Waits in Excess of 6-weeks	<= %	0.1	0.1	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	-			-		

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Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate			Month	Year To Date		
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	G	M				P
Data Completeness	Open Referrals	No			27,992	24,316	23,359	23,153	22,571	22,333	22,687	22,895	23,733	24,099	24,479	23,888	23,681	24,706	24,448	24,352	24,511	24,854	Sep 2020	6,422	10,825	7,607	24854		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No			10,961	7,086	6,248	5,887	5,518	5,139	4,857	4,788	5,150	5,048	5,068	4,875	4,425	5,000	4,890	5,100	5,164	5,234	Sep 2020	1,416	3,552	266	5234		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Sep 2020	100	94.2	99.7		97.2	
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Aug 2020	100	100	100		100.0	
Workforce	Sickness Absence - 12 month rolling	<= %	3.0	3.0	5.06	5.26	5.35	5.34	5.38	5.47	5.69	5.72	5.79	5.71	5.57	5.54	5.77	5.76	5.72	5.66	5.60	5.59	Sep 2020	4.11	6.15	5.34	5.6	5.7	
Workforce	Sickness Absence - in month	<= %	3.0	3.0	5.35	6.06	6.21	5.59	4.96	5.24	6.00	6.56	6.09	5.26	3.92	5.15	7.08	5.41	5.09	4.20	4.40	5.39	Sep 2020	2.9	5.33	6.04	5.4	5.3	
Workforce	Sickness Absence - Long Term - in month	No			39	45	47	40	46	41	44	45	52	45	31	30	40	49	43	27	43	41	Sep 2020	2	21	18	41.0	243.0	
Workforce	Sickness Absence - Short Term - in month	No			97	78	70	87	60	98	98	106	103	101	94	96	137	79	77	86	66	92	Sep 2020	4	39	49	92.0	537.0	
Workforce	Mandatory Training	=> %	95.0	95.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Jan 2020	87.6	86.4	95.4		90.6	

Women & Child Health Group

Section	Indicator	Measure	Trajectory		Previous Months Trend														Data Period	Directorate			Month	Year To Date					
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M		J	J	A				S	G	M	P
WCH Group Only	HV (C1) - No. of mothers who receive a face to face AN contact with a HV at =>28 weeks of pregnancy	No			978	-->	-->	1045	-->	-->	928	-->	-->	908	-->	-->	1004	-->	-->	1008	-->	-->	Jul 2020			1008	1008	2012	
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	-->	-->	92.4	-->	-->	90.9	-->	-->	91.3	-->	-->	94.1	-->	-->	90.292	-->	-->	Jul 2020			90.3	90.29	92.12	
WCH Group Only	HV (C3) - % of births that receive a face to face new birth visit by a HV >days	%			6.09	-->	-->	7.64	-->	-->	7.38	-->	-->	8.18	-->	-->	5.86	-->	-->	6.032	-->	-->	Jul 2020			6.03	6.03	5.95	
WCH Group Only	HV (C4) - % of children who received a 12 months review by 12 months	=> %	95.0	95.0	96.4	-->	-->	96.1	-->	-->	97.3	-->	-->	96.6	-->	-->	96.8	-->	-->	95.753	-->	-->	Jul 2020			95.8	95.75	96.29	
WCH Group Only	HV (C5) - % of children who received a 12 months review by the time they were 15 months	%			96.7	-->	-->	96	-->	-->	95.1	-->	-->	96.5	-->	-->	96	-->	-->	96.016	-->	-->	Jul 2020			96	96.02	96.03	
WCH Group Only	HV (C6i) - % of children who received a 2 - 2.5 year review	=> %	95.0	95.0	94.8	-->	-->	95.8	-->	-->	96.6	-->	-->	97	-->	-->	97.5	-->	-->	96.915	-->	-->	Jul 2020			96.9	96.91	97.23	
WCH Group Only	HV (C6ii) - % of children who receive a 2 - 2.5 year review using ASQ 3	%			94.5	-->	-->	98.6	-->	-->	98.4	-->	-->	98.2	-->	-->	98.1	-->	-->	98.408	-->	-->	Jul 2020			98.4	98.41	98.24	
WCH Group Only	HV (C7) - No. of Sure Start Advisory Boards / Children's Centre Boards witha HV presence	=> No	100	100	-->	-->	-->	4	-->	-->	-->	-->	-->	1	-->	-->	-->	-->	-->	1	-->	-->	Jul 2020			1	1	1	
WCH Group Only	HV (C8) - % of children who receive a 6 - 8 week review	=> %	95.0	95.0	99.9	-->	-->	99.9	-->	-->	99.7	-->	-->	99.5	-->	-->	100	-->	-->	99.787	-->	-->	Jul 2020			99.8	99.79	99.89	
WCH Group Only	HV - % of infants for whom breast feeding status is recorded at 6 - 8 week check	=> %	100	100	99.8	-->	-->	99.9	-->	-->	99.7	-->	-->	99.1	-->	-->	100	-->	-->	99.15	-->	-->	Jul 2020			99.2	99.15	99.57	
WCH Group Only	HV - % of infants being breastfed at 6 - 8 weeks	%			40.3	-->	-->	44.1	-->	-->	45.1	-->	-->	43	-->	-->	46.6	-->	-->	43.677	-->	-->	Jul 2020			43.7	43.68	45.09	
WCH Group Only	HV - % HV staff who have completed mandatory training at L1,2 or 3 in child protection in last 3 years	=> %	95.0	95.0	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Feb 2017			-	100	100	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 10 - 14 day developmental check	No			99.4	-->	-->	1071	-->	-->	1125	-->	-->	1004	-->	-->	979	-->	-->	1035	-->	-->	Jul 2020			1035	1035	2014	
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 10 - 14 day developmental check	=> %	100	100	-->	-->	-->	99.4	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jul 2019			99.4	99.44	99.44	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 6 - 8 week developmental check	No			1.8	-->	-->	0.21	-->	-->	21	-->	-->	19	-->	-->	14	-->	-->	37	-->	-->	Jul 2020			37	37	51	
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 6 - 8 week developmental check	=> %	100	100	-->	-->	-->	2.2	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jul 2019			2.2	2.2	2.2	
WCH Group Only	HV - No. of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	No			2.2	-->	-->	3.6	-->	-->	28	-->	-->	35	-->	-->	27	-->	-->	22	-->	-->	Jul 2020			22	22	49	
WCH Group Only	HV - % of babies from 0 - 1 year who have a conclusive newborn bloodspot status documented at the 9 - 12 months developmental check	=> %	100	100	-->	-->	-->	3.6	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jul 2019			3.6	3.6	3.6	
WCH Group Only	HV - movers into provider <1 year of age to be checked =<14 d following notification to HV service	No			73.5	-->	-->	255	-->	-->	196	-->	-->	210	-->	-->	170	-->	-->	120	-->	-->	Jul 2020			120	120	290	
WCH Group Only	HV - all untested babies <1 year of age will be offered NBBS screening & results to HV.	Y/N			-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	-->	Jan-00						

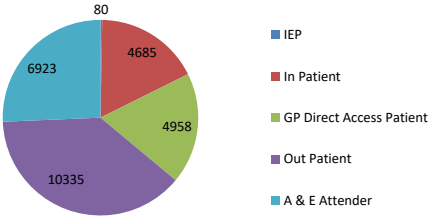
Imaging Group

Section	Indicator	Measure	Trajectory	
			Year	Month
Patient Safety - Harm Free Care	Never Events	<= No	0	0
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month	<= No	0	0
Clinical Effect - Mort & Read	Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative	=> %	0	0
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 1 hr of presentation (%)	=> %	50.0	50.0
Clinical Effect - Stroke & Card	Pts receiving CT Scan within 24 hrs of presentation (%)	=> %	100.0	100.0
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No		
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No		
RTT	Acute Diagnostic Waits in Excess of 6-weeks (%)	<= %	1.0	1.0
Data Completeness	Open Referrals	No		
Data Completeness	Open Referrals without Future Activity/ Waiting List: Requiring Validation	No		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00
Workforce	Sickness Absence - in month	<= %	3.00	3.00
Workforce	Sickness Absence - Long Term - in month	No		
Workforce	Sickness Absence - Short Term - in month	No		
Workforce	Mandatory Training	=> %	95.0	95.0
Workforce	Imaging - Total Scans	No		
Board KPI	Imaging - Inpatient Turnaround Time <=24hr	=> %	90.0	90.0
Board KPI	Imaging - Urgent Other(GP 5) Turnround Time <=5d	=> %	90.0	90.0
Board KPI	Imaging - All Imaging Work Reported in less than 4 weeks (request to report)	=> %	95.0	95.0

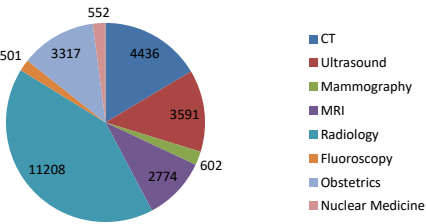
Previous Months Trend																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
2.0	3.0	2.0	-	1.0	1.0	1.0	4.0	1.0	1.0	2.0	-	1.0	1.0	-	2.0	-	-
13.0	16.0	17.0	16.0	16.0	16.0	15.0	18.0	18.0	18.0	20.0	18.0	17.0	15.0	13.0	15.0	14.0	-
0	6	5	3	2	0	1	3	3	5	1	0	1	1	1	4	2	1
3	6	11	6	3	1	2	3	2	5	2	1	2	2	3	4	4	2
977	268	295	308	300	363	386	449	486	516	526	527	727	715	701	701	721	726
901	186	178	223	244	255	304	321	357	366	373	382	388	385	386	423	434	
-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
4.66	4.88	4.71	4.62	4.68	4.60	4.52	4.24	4.07	4.03	3.99	4.09	4.24	4.26	4.21	4.38	4.33	4.24
4.56	5.06	3.86	3.53	4.82	4.46	4.20	4.12	3.57	3.64	3.57	5.24	5.88	4.58	3.35	4.31	3.31	3.79
10	10	7	5	8	9	10	7	7	5	5	5	7	9	8	6	11	7
34	19	26	24	19	24	33	25	33	44	34	39	40	24	26	30	23	32
65	65	69	67	69	67	77	77	77	79	82	87	91	87	86	85	84	82
76	69	65	66	70	71	77	75	72	72	74	68	82	87	79	69	53	56
-	-	-	-	-	-	88	90	90	88	92	90	93	94	90	85	83	83

Data Period	Directorate					Month	Year To Date	Trend
	DR	IR	NM	BS	BCP			
Sep 2020	0	0	0	0	0	9	9	
Sep 2020	0	0	0	0	0	9	9	
Aug 2020						-	-	
Aug 2020						-	6.34	
Aug 2020						89.13	86.81	
Aug 2020						100	99.15	
Sep 2020	0	1	0	0	0	1	10	
Sep 2020	1	0	0	1	0	2		
Sep 2020	26.1					26.13		
Sep 2020	503	26	0	0	177	736		
Sep 2020	382	7	0	0	35	434		
Sep 2020	89.8	63.6	85.7	87.8	-	-	89.8	
Aug 2020	100	-	100	-	100	-	100.0	
Sep 2020	4.7	4.2	1.9	4.1	0.0	4.24	4.28	
Sep 2020	3.8	0.0	2.4	5.2	0.0	3.79	4.20	
Sep 2020	6	0	0	1	0	7	48	
Sep 2020	17	0	3	12	0	32	175	
Jan 2020	92.9	94.6	93.3	92.7	-	93.0	93.6	
Sep 2020						26957	123602	
Sep 2020						82.5	85.7	
Sep 2020						56.2	71.8	
Sep 2020						83.2	87.6	

Imaging By Patient Type
(September 2020)



Imaging By Modality Type
(September 2020)



Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate						Month	Year To Date	Trend	
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	AT	IB	IC	CT	CM				YHP
Patient Safety - Inf Control	MRSA Screening - Elective	=> %	95	95	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	-	-	-	-	17	-	17	<div></div>	
Patient Safety - Harm Free Care	Number of DOLS raised	No			4	6	5	6	13	5	7	6	4	6	5	4	9	6	8	13	5	9	Sep 2020	0	9	0	-	0	0	9	50	<div></div>
Patient Safety - Harm Free Care	Number of DOLS which are 7 day urgent	No			4	6	5	6	13	5	7	6	4	6	5	4	9	6	8	13	5	9	Sep 2020	0	9	0	-	0	0	9	50	<div></div>
Patient Safety - Harm Free Care	Number of delays with LA in assessing for standard DOLS application	No			1	1	3	3	6	0	0	0	1	1	3	0	0	0	0	4	2	2	Sep 2020	0	2	0	-	0	0	2	8	<div></div>
Patient Safety - Harm Free Care	Number DOLS rolled over from previous month	No			0	1	2	0	2	0	0	1	1	0	2	0	2	2	3	2	1	0	Sep 2020	0	0	0	-	0	0	0	10	<div></div>
Patient Safety - Harm Free Care	Number patients discharged prior to LA assessment targets	No			2	5	2	1	8	2	4	2	1	2	2	1	9	5	9	10	3	2	Sep 2020	0	2	0	-	0	0	2	38	<div></div>
Patient Safety - Harm Free Care	Number of DOLS applications the LA disagreed with	No			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Sep 2020	0	0	0	-	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Number patients cognitively improved regained capacity did not require LA assessment	No			0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	Sep 2020	0	1	0	-	0	0	1	1	<div></div>
Patient Safety - Harm Free Care	Falls	<= No	0	0	33	21	29	22	24	23	-	26	28	29	32	25	22	19	18	14	23	19	Sep 2020	-	19	-	-	-	-	19	115	<div></div>
Patient Safety - Harm Free Care	Falls - Death or Severe Harm	<= No	0	0	2	1	1	0	0	0	-	1	0	0	0	0	0	0	0	0	1	0	Sep 2020	0	0	0	-	0	0	0	1	<div></div>
Patient Safety - Harm Free Care	Pressure Ulcer SWB Hospital Acquired - Total	<= No	0	0	26	18	8	12	16	20	8	14	22	18	24	14	12	16	10	28	8	12	Sep 2020	-	3	3	-	-	-	6	43	<div></div>
Patient Safety - Harm Free Care	Pressure Ulcer DN Caseload Acquired - Total	<= No	0	0	36	16	24	29	34	27	31	18	24	25	25	22	20	23	25	37	29	24	Sep 2020	-	-	24	-	-	-	24	158	<div></div>
Patient Safety - Harm Free Care	Never Events	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	-	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Medication Errors	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	0	0	-	0	0	0	0	<div></div>
Patient Safety - Harm Free Care	Serious Incidents	<= No	0	0	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>	Sep 2020	0	1	2	-	0	0	3	21	<div></div>
Pt. Experience - FFT,MSA,Comp	Mixed Sex Accommodation Breaches	<= No	0	0	0	0	0	0	0	-	-	-	-	0	-	-	-	-	-	-	-	May 2020	-	-	-	-	-	-	-	-	<div></div>	
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			14	4	13	8	6	9	14	8	5	11	4	8	6	4	7	19	16	13	Sep 2020	2	2	1	-	1	7	13	65	<div></div>
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			22	5	20	17	7	14	15	13	7	0	11	11	12	12	14	19	21	23	Sep 2020	3	3	2	-	6	9	23		<div></div>

Primary Care, Community & Therapies Group

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

Previous Months Trend																	
A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A	S
-	-	-	-	-	●	●	-	-	-	-	-	-	-	-	-	-	95.874
4.30	4.37	4.40	4.39	4.38	4.33	4.36	4.23	4.24	4.19	4.17	4.26	4.60	4.80	4.84	4.81	4.84	4.89
3.79	4.08	3.67	4.08	3.84	3.57	4.13	4.07	4.78	4.82	4.82	4.91	6.89	5.98	4.55	4.21	4.44	4.44
25	31	25	25	26	23	27	23	32	30	31	36	29	50	44	27	40	38
101	79	86	94	78	93	135	121	121	140	114	92	181	104	81	99	85	116
●	●	●	●	●	●	●	●	●	●	●	-	-	-	-	-	-	-

Data Period

Sep 2020

Sep 2020

Sep 2020

Sep 2020

Sep 2020

Jan 2020

Directorate

AT IB IC CT CM YHP

2.9 5.5 5.3 - 5.5 5.76

4 5 4 - 4.1 5.19

8 - - - - -

29 38 33 0 13 3

96 93 94 - 91 -

Month

4.89

4.89

4.44

38

116

Year To Date

95.9

4.8

5.08

229

669









95.4



Primary Care, Community & Therapies Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																	Data Period	Directorate						Month	Year To Date		
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J	A		S	AT	IB	IC	CT	CM				YHP
Community & Therapies Group Only	DVT numbers	=> No	730	61	20	38	43	55	43	27	25	29	19	21	14	1	15	22	31	26	28	23	Sep 2020							23	145	
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	6.87	7.84	12	11.5	12.7	11.6	-	-	-	-	-	-	-	-	-	-	-	-	Sep 2019							10.8	11.1	
Community & Therapies Group Only	Therapy DNA rate S1 based OP Therapy services	<= %	9	9	8.92	8.23	10.1	8.7	10.5	9.59	9.67	9.01	10.6	9.49	9.71	6.16	2.25	7.63	4.41	5.56	6.29	6.2	Sep 2020							6.2	5.4	
Community & Therapies Group Only	Green Stream Community Rehab response time for treatment (days)	<= No	15.0	15.0	24	21.8	15	19	22.5	21.7	19.7	19.4	20.7	19.4	13.3	14.6	4.76	5.75	7.5	9	16.8	15.7	Sep 2020							15.68	59.53	
Community & Therapies Group Only	DNA/No Access Visits	%			1	1	1	1	1	0	1	1	1	1	1	1	0	0	1	1	1	1	Sep 2020							1.04		
Community & Therapies Group Only	Baseline Observations for DN	=> %	95	95	91.2	97.7	96.8	95.7	97.3	95	93.7	92.1	93.6	94.7	93.7	90.6	95.9	93.2	91.3	91	91.3	87.3	Sep 2020							87.3	91.61	
Community & Therapies Group Only	Falls Assessments - DN Initial Assessments only	=> %	95	95	93	97.5	96.5	96.1	97.7	95.9	93.1	91.4	93.4	95.3	92.8	91.9	96.1	93.4	92.1	92.6	92.1	88.9	Sep 2020							88.89		
Community & Therapies Group Only	Pressure Ulcer Assessment - DN Initial Assessments only	=> %	95	95	93.2	97.5	96.8	96.5	97.3	95.6	93.3	92.3	93.4	95.6	93.5	92.4	96.4	93.4	91.8	92.8	91.8	89.4	Sep 2020							89.42		
Community & Therapies Group Only	MUST Assessments - DN Initial Assessments only	=> %	95	95	92.6	97.2	96.8	96.3	97.7	95.4	93.1	91.4	93.6	94.9	93	92.4	96.4	92.6	90.6	91.5	92.1	87	Sep 2020							87.04		
Community & Therapies Group Only	Dementia Assessments - DN Initial Assessments only	=> %	95	95	91.3	95.4	91.6	94.2	93.3	93.7	88.8	87	90.9	89.7	85.9	84.4	91.1	89.8	88.9	85.8	78.4	79.5	Sep 2020							79.53		
Community & Therapies Group Only	48 hour inputting rate - DN Service Only	%			-	95	1	94	95	95	95	-	95	94	95	96	95	95	-	-	-	-	May 2020							94.62		
Community & Therapies Group Only	Making Every Contact (MECC) - DN Initial Assessments only	=> %	95	95	92.4	97.5	96.8	96.3	97.1	95.2	93.1	90.6	92.4	94.7	93	92.4	95.3	93.4	90.6	91.7	91.3	87.6	Sep 2020							87.57	91.61	
Community & Therapies Group Only	Avoidable Grade 2,3 or 4 Pressure Ulcers (DN Caseload acquired)	No			26	18	8	12	16	20	8	14	22	18	24	14	12	16	10	28	8	12	Sep 2020							6	43	
Community & Therapies Group Only	Avoidable Grade 2 Pressure Ulcers (DN caseload acquired)	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018							26	37	
Community & Therapies Group Only	Avoidable Grade 3 Pressure Ulcers (DN caseload acquired)	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018							11	14	
Community & Therapies Group Only	Avoidable Grade 4 Pressure Ulcers (DN caseload acquired)	No			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	Nov 2018							0	1	

Corporate Group

Section	Indicator	Measure	Trajectory		Previous Months Trend																Data Period	Directorate							Month	Year To Date	Trend		
			Year	Month	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J		A	S	SG	F	W	M	E				N	O
Pt. Experience - FFT,MSA,Comp	No. of Complaints Received (formal and link)	No			2	1	12	10	0	3	6	2	3	6	3	10	3	4	5	11	6	4	Sep 2020	0	0	0	0	0	3	1	4	33	
Pt. Experience - FFT,MSA,Comp	No. of Active Complaints in the System (formal and link)	No			2	6	4	5	1	4	3	4	1	0	5	12	3	4	3	11	10	10	Sep 2020	0	0	0	0	2	7	1	10		
Workforce	PDRs - 12 month rolling	=> %	95.0	95.0	-	-	-	-	-	●	●	-	-	-	-	-	-	-	-	-	-	●	Sep 2020	99	95	87	92	95	96	96	94.7		
Workforce	Medical Appraisal and Revalidation	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	●	-	Aug 2020			95					100.0	100	
Workforce	Sickness Absence - 12 month rolling	<= %	3.00	3.00	4.21	4.21	4.22	4.21	4.26	4.32	4.47	4.41	4.43	4.47	4.51	4.59	4.94	4.99	4.91	4.88	4.86	4.84	Sep 2020	3.20	1.44	3.17	3.98	6.03	6.24	3.94	4.84	4.90	
Workforce	Sickness Absence - in month	<= %	3.00	3.00	3.71	3.80	4.21	4.47	4.42	4.68	5.03	4.48	4.46	4.91	4.89	4.77	6.75	4.87	3.81	4.31	4.14	4.21	Sep 2020	3.92	0.68	0.80	2.74	5.73	5.84	4.06	4.21	4.66	
Workforce	Sickness Absence - Long Term - in month	No			20	25	32	32	40	33	35	32	27	27	33	31	37	77	62	45	62	67	Sep 2020	6.00	1.00	0.00	5.00	26.00	22.00	7.00	67.00	356.00	
Workforce	Sickness Absence - Short Term - in month	No			79	57	65	82	54	92	90	84	108	100	80	73	116	147	134	164	120	139	Sep 2020	6.00	3.00	9.00	18.00	49.00	35.00	19.00	139.00	837.00	
Workforce	Mandatory Training	=> %	95.0	95.0	●	●	●	●	●	●	●	●	●	●	-	-	-	-	-	-	-	-	Jan 2020	93	97	97	96	-	93	-	94.3	94	