Sandwell and West Birmingham Hospitals NHS Trust

# Integrated Quality & Performance Report

**Month Reported: November 2020**

**Reported as at: 17/12/2020**

**Performance Management Committee**
**Clinical Leadership Executive**
**Quality & Safety Committee**

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# Operational Performance at a Glance: November 2020

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| **Highlights :** | | • **Recovery:** Elective activity recovery continued during November despite cancellations, which started on 1st November. Whilst the trust is meeting the phase 3 guidance activity levels, which we know were mainly based around what was delivered last year, it is not meeting the production plan (pre-COVID activity plans). From 1st November we have begun to make a large number of elective patient cancellations in order to release staff to support the pandemic, which clearly will impact the recovery trajectories over the coming month to some degree at least. |
| | | • **A&E performance** was the same as in October delivering 79.2% of care within the 4hr target; 2,754 patient breached the 4 hr target. ED performance is heavily impacted by ability to manage patient flow down-stream to wards; currently, and additionally to CV19 pressures, ED have implemented the national NHS111 service which is now live since 20 November. The numbers coming through this service are still low and hence no insight of value is available until the numbers ramp up. It is meant to alleviate ED pressures. |
| | | • **RTT & DM01** performance is fully dependant on recovery plans being achieved and seeing patients through their waiting times. Diagnostics have been improving steadily; RTT waiting times are experiencing high volumes of patient breaching the 52 week wait time; we reported 648 in November, harm caused due to the delay is being clinically assessed by the groups and services. |
| | | • **Cancer** performance is below standards in October (latest reported position); however the Trust has managed to recover its 2 week waits standard, which has been failing for the last two previous months, however the position remains under pressure. |
| | | • **Other i**tems to highlight for November are: increasing falls rate and pressure ulcers in the month to take note of, ward sickness risen to 9.7% in November (the second highest level since initial COVID impact) |
| | **A&E Performance** | • Performance delivered at 79.2% in November similar to the October position; attendance numbers fell slightly compared to October to 13,235 in November and not as low as we saw in COVID round 1; so we are seeing again, as in the previous COVID round, an impact of patients staying away from attending ED, but not to such low volumes as before. Despite lower attendances we continue to see high levels of breaches, in November we reported 2,754 patients breaching the 4 hr target including 2x 12hr Trolley waits and delayed ambulance handovers, which however have improved since last month somewhat; breaches are proportionally higher at Sandwell A&E; for the patients seen within the 4hr target we know we are doing well looking at the 'overall waiting time' and benchmark with top performers in the country, on the performance side we are in the bottom quartile of the benchmark. Most breaches are explained by lack of patient flow.<br>• There are 10 patient flow projects currently set up and monitored by the Urgent Care Board. 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 strengthen delivery, tweak and develop the patient flow projects as to optimise patient flow throughout the organisation. This includes the latest NHSE guidance on discharges aimed at doctors.<br>• 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. Implementation of the Urgent Care Centre for Sandwell is progressing with a live date set for 1st April 2020 which will remove ED activity appropriately to this Same Day care facility. |
| **RESPONSIVENESS** | **Referral to Treatment in 18 weeks (RTT Incomplete)** | • **RTT** delivers at 74.8% for November below the recovery trajectory of 88%, and the national standard of 92%. Cancellations and prioritisations have been impacting this delivery amidst COVID. • The large number of 52 week breaches (648) is of concern and Groups are clinically validating presently the potential harm caused due to this delay and booking those patients in as soon as possible. • The patient waiting list has now increased (as we don't treat patients or cancel) to just below 39,000 patients. • The backlog (patients above 18 weeks waiting time) is just below 10,000. This includes the 648, 52 week waiting time breaches |
| | **Diagnostics Waits (% of patients waiting >6 weeks)** | • November **DM01** performance improving further to 83% (last month 76%), but below planned trajectory for this month and hence 99% achievement of the full standard by end November has been too ambitious for the Trust to plan for. • We have therefore still got a high level of patients (24%) on the diagnostics pathways waiting above the 6 week target and many sitting at 13+ weeks waiting time which has been caused by patients being unwilling to attend appointment in fear of CV19. |
| | | • The **specific Imaging diagnostic** patient volumes (CT, MRI, X rays and Ultrasounds) in November were 24,445 and getting closer to pre-COVID levels, which were at an average of c30,000-32,000 per month. Whilst the KPIs below are showing improvements, it needs to be noted that they are achieved by using increased outsourcing capacity, which has high costs associated to it.<br>• Against these November volumes, and the top three Board KPIs performance was: Inpatient total turnaround (TAT) time within 24hrs has improved to 84% against the 90% trust target (previous high was 91%); Urgent GP tests within 5 days worsened slightly to 53% vs 90% target, but on review most of the patients fitted in the non-responder/non-attenders category. Overall Imaging achieved to turn around 83% of 'all Imaging work' under the 4 weeks (target of 95% and previous highs of 94%)<br>• 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. • A much higher level of imaging reporting has been observed in November (c40%) as more plain film reporting goes to the two partner suppliers. This should be reviewed as it will impact costs significantly. The Group Director is aware. |
| | **Cancer Performance** | • Reporting the October position (latest available reporting period), the Trust, has met some access cancer standards, including recovery of the previously failed 2week wait standard with 94% of patients who were seen within the 2 WW target against the 93% standard. Failed standards: 31-Day at 92% vs 96% target and 62 Day 75% vs 85% target. • Cancer services are under continual pressure. |
| | **Cancellations** | • November **cancellations** have not been signed off fully by all services therefore unable to report at this stage. |

| Operational Performance at a Glance: November 2020 | | |
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| SAFE | Infection Control | • Infection Control metrics continue to report reasonably good performance; we reported 1x CDIFF case in November (including community) and 12 cases on a year to date basis against the year to date target of 25 so well below allocation.<br>• MRSA screening rates non-electively delivering 92% in November and are very close against the target 95%.<br>• Elective patients MRSA screening rates are below the 95% at 75% being under target in all Groups. |
| | Harm Free Care | • The Trust **falls** rate per 1,000 bed days in November has sharply increased to a rate of 5.2 (last month 3.76) and now above the Trust target of 5; we report a higher number in falls, 99 actual falls in November against which there were no reported falls causing serious harm.<br>• 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 coved surge in order to learn and prepare for the future. The November position requires understanding and responsiveness. |
| | | • **Pressure Ulcers** (Hospital or DN Caseload Acquired PUs) in November have also sharply increased to previous trends ; the overall Trust reports 76PUs (54 last month). There were no Grade 4 PUs reported.<br>• 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 proned 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. |
| | | • **VTE assessments** delivering 96% against the 95% target.<br>• **Sepsis (adults only)** screening of eligible patients at 97% for November (target is 100%); 27% of screened patients show positive results, and 79% of those positive patients are treated with antibiotics within the hour. We therefore still need to focus on the delivery of the 1hr standard.<br>• **Neutropenic Sepsis** reporting at 81% below the 100% target with 5/26 breaches in the 1hr from door to antibiotic standard. The average time was 56minutes in November, very close to the 60 minutes standard (1hr). Interestingly, all breaches are Sandwell A&E location wise; the breaches shows delays above the hour between 17-50 minutes. We continue still see much lower numbers of patients coming through the door, most likely due to COVID as these are immunocompromised patients. |

# Operational Performance at a Glance: November 2020

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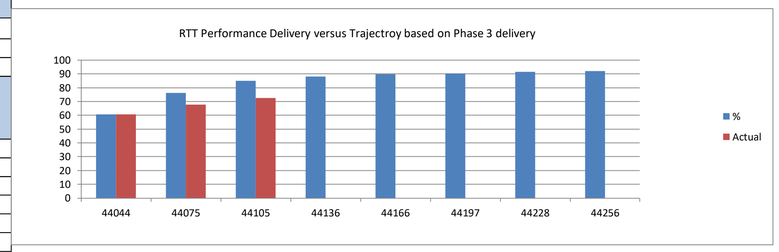
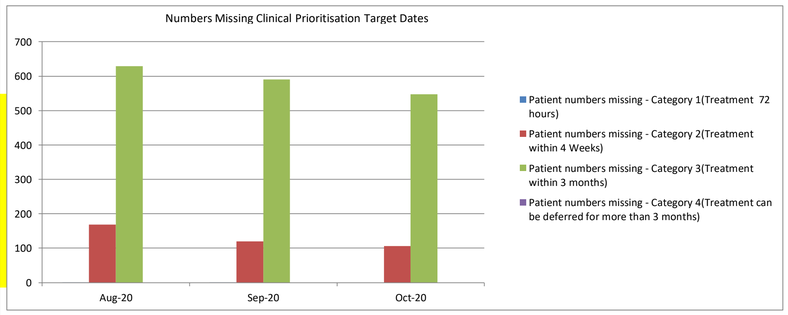
| | **Obstetrics** | • The overall **Caesarean Section** rate for November reports at 29.3% in month, against trust target of 25%; year to date just below 30%. This is split between :<br>• Elective C-Section rate at November is 11% higher than the long term average trend pre-COVID but in line during the COVID period<br>• Non-elective C-Section rates were on average 17% during the full year (pre-COVID periods), and in November we report at 18%<br>• In November we see a lower **still-birth** rates than last month, however this has been fairly variable in recent month • **Neo-natal** death rate is up from last month when it was zero, and again following an elevated few previous months<br>• 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. • **Post Partum Haemorrhage** (>2000ml) rate is 3 in November recovering from a spike in October. |
| **CARING** | **Patient Experience (FFT), Mixed Sex Accommodation (MSA), Complaints, Flu Vaccination** | • **MSA has not been reported for a few months running** . 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<br>• **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. As at October 46% of front line staff have been vaccinated, this is at 76% for November almost hitting already the 80% target set for end of December so likely now that the Trust will over-achieve this. |
| **EFFECTIVE** | **Mortality, Readmissions** | • Readmissions rates (30 days after discharge) have gone up again in October to 8.7%; Not reported for November as yet.<br>• HSMR reporting at 138 above the tolerance levels as at the end of July (latest available reporting period and also during COVID), showing an elevated position against the weekend mortality rate which is 153 and weekday at 133. 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.<br>• Mortality review performance picking up to 95% which is well above the trust target of 90% |
| | **Stroke & Cardiology** | • **Stroke** performance good against most indicators, but struggling to recover admission to the stroke ward within 4 hours which is low at 68% in the month below the 80% target; patients have stayed less than 90% on the stroke ward and thrombolysis below the target (RCAs in progress); it is worth noting that this service does achieve good SSNAP (Sentinel Stroke National Audit Portal) ratings. •<br>**Cardiology** performance also reporting good performance across all IQPR indicators |
| | **Patient Flow** | • **21+ LOS** patients (long stay patients) count at the end of November at 74 patients (this measures 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). • **Neck of Femur** performance recovers from to 85% in November against the 85% target. This indicator displays large fluctuations in performance. |
| **WELL LED** | **Workforce** | • Sickness rate overall is at 6.3% in the month resulting in a cumulative rate of 5.6% against the trust target of 4% (target for wards at 3%).<br>• Ward sickness rate specifically is at 9.7% sharply increasing again to recent months.<br>• Mandatory Training (where staff are at 100% of their MT) is at 81% against the 95% aim. |
| **USE OF RESOURCES** | **Use of Resources** | • 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. • Using a crude method to predict the CQC rating based on an inspection right now, which is taking factors other than what is highlighted in use of resources e.g. RTT, A&E etc, the Trust would mostly likely score 'requires improvement' again. Considering the COVID impact on most of these indicators this is not a worsening from where we were.<br><br>• 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, however, this is significantly slowed down due to CV19. |
| **TRUST EMPHASIS** | **Persistent Reds** | Paused currently. |

| 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% | 101.9% | 105.9% | | | | |
| % of Production Plan volumes | 77.5% | 85.1% | 85.5% | 86.0% | | | | |
| % of Clinical Group agreed volumes | 94.8% | 112.2% | 98.8% | 101.5% | | | | |
| | | | | | | | | |
| **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% | -12.5% | -13.3% | | | | |
| | | | | | | | | |
| **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% | 110.8% | 89.1% | | | | |
| % of Phase 3 activity volumes CT (100% by October) | 104.2% | 98.8% | 109.4% | 102.2% | | | | |
| % of Phase 3 letter actviity Endoscopy (100% in October)-All Scopes | 74.2% | 70.3% | 106.3% | 84.4% | | | | |
| **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% | -22.2% | -15.9% | | | | |
| **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 | 8 | 4 | | | | | |
| 62 day refer to treat % (distance from 85% standard ) | 77.4%(-7.6%) | 74.2%(-10.8%) | 75.4%(-9.6%) | | | | | |
| 31 day diagnosis to treatment % (distance from 96% standard) | 93.5%(-2.5%) | 94.6%(-1.4%) | 92%(-4.0%) | | | | | |
| **Cancer Trajectory-104 day** | 50 | 39 | 24 | 19 | 11 | | | |
| **Cancer Trajectory-62 day** | 60% | **55.00%** | **55.00%** | **80.00%** | **85.00%** | **85.00%** | **85.00%** | **85.00%** |
| **Cancer Trajectory-31 day** | 94.0% | 95% | 96% | 97% | 98% | | | |
| **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 | 2,427 | 2264 | | | | |
| 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 | 3,302 | 2322 | | | | |
| 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 and are still waiting.** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** |
| Patient numbers missing - Category 1(Treatment 72 hours) | 1 | 1 | 0 | 0 | | | | |
| Patient numbers missing - Category 2(Treatment within 4 Weeks) | 168 | 120 | 106 | 161 | | | | |
| Patient numbers missing - Category 3(Treatment within 3 months) | 629 | 591 | 547 | 507 | | | | |
| Patient numbers missing - Category 4(Treatment can be deferred for more than 3 months) | 0 | 0 | 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 and are still waiting.** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** | **Zero** |
| 0 | 0 | 0 | 0 | | | | | |
| Patient numbers missing - Category 2(Treatment within 72 hours) | 1 | 0 | 1 | 116 | | | | |
| Patient numbers missing - Category 3(Treatment within 4 Weeks) | 231 | 225 | 211 | 472 | | | | |
| Patient numbers missing - Category 4(Treatment needed within 3-4 months) | 190 | 162 | 166 | 264 | | | | |
| **Safety Checks** | | | | | | | | |
| | | | | | | | | |
| 52 week breaches | 252 | 376 | 482 | 641 | | | | |
| 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 | 1031 | 1520 | | | | |

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



# CQC Domain - Safe

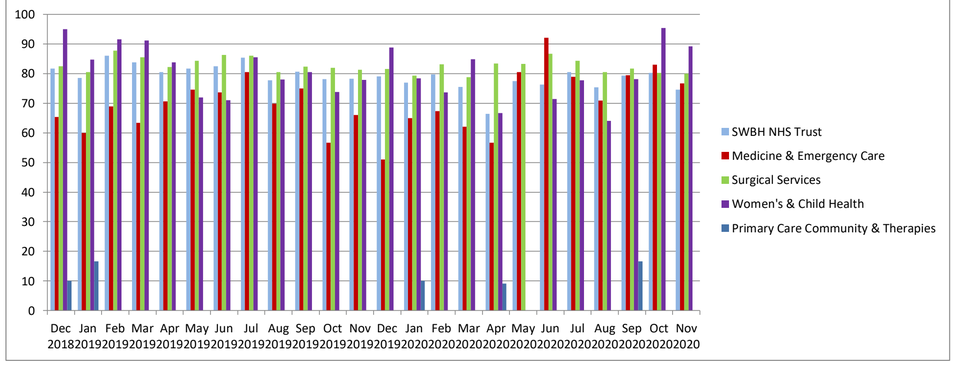
| | Kitemark | Reviewed Date | Indicator | Measure | Standard Year | Standard Month | Jun 2019 | Jul 2019 | Aug 2019 | Sep 2019 | Oct 2019 | Nov 2019 | Dec 2019 | Jan 2020 | Feb 2020 | Mar 2020 | Apr 2020 | May 2020 | Jun 2020 | Jul 2020 | Aug 2020 | Sep 2020 | Oct 2020 | Nov 2020 | 20/21 Year to Date | Group M | Group SS | Group W | Group I | Group PCCT | Group CO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Infection Control | | | C. Difficile (Post 48 hours) | <= No | 39 | 3 | 1 | 4 | 3 | 2 | 2 | 4 | 3 | 3 | 2 | 3 | 0 | 3 | 1 | 2 | 3 | 1 | 1 | 1 | 12 | 0 | 0 | 0 | - | 1 | - |
| | | | MRSA Bacteraemia (Post 48 hours) | <= No | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | - | 0 | - |
| | | | MSSA Bacteraemia (Post 48 Hours) - rate per 100,000 bed days | <= Rate2 | 9.42 | 9.42 | 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 | 10.86 | 5.54 | 8.67 | - | - | - | - | - | - |
| | | | E Coli Bacteraemia (Post 48 Hours) - rate per 100,000 bed days | <= Rate2 | 94.9 | 94.9 | 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 | 10.86 | 5.54 | 14.97 | - | - | - | - | - | - |
| | | | MRSA Screening - Elective | => % | 95 | 95 | 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 | 80.3 | 74.6 | 77.4 | 76.7 | 80.0 | 89.2 | 0.0 | 0.0 | - |
| | | | MRSA Screening - Non Elective | => % | 95 | 95 | 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 | 92.5 | 92.2 | 90.8 | 92.0 | 92.3 | 100.0 | - | 83.3 | - |
| Harm Free Care | | | Patient Safety Thermometer - Overall Harm Free Care | => % | 95 | 95 | 99.0 | 95.4 | 93.7 | 94.8 | 98.5 | 95.4 | 99.3 | 98.9 | 98.7 | 98.4 | Indicators discontinued nationally - awaiting replacements from NHSE/I | | | | | | | | 97.3 | - | - | - | - | - | - |
| | | | Patient Safety Thermometer - Catheters & UTIs | % | - | - | 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 | - | - | 34 | 26 | 36 | 37 | 34 | 26 | 36 | 33 | 31 | 28 | 32 | 43 | 45 | 42 | 26 | 43 | 40 | 39 | 310 | 20 | 12 | 0 | - | 7 | - |
| | | | Number of DOLS which are 7 day urgent | No | - | - | 34 | 26 | 36 | 37 | 34 | 26 | 36 | 33 | 31 | 28 | 32 | 43 | 45 | 42 | 26 | 43 | 40 | 39 | 310 | 20 | 12 | 0 | - | 7 | - |
| | | | Number of delays with LA in assessing for standard DOLS application | No | - | - | 15 | 6 | 11 | 2 | 4 | 3 | 7 | 6 | 7 | 0 | 3 | 3 | 4 | 8 | 6 | 6 | 7 | 3 | 40 | 2 | 0 | 0 | - | 1 | - |
| | | | Number DOLs rolled over from previous month | No | - | - | 7 | 0 | 4 | 0 | 1 | 1 | 2 | 0 | 5 | 7 | 9 | 8 | 9 | 6 | 3 | 2 | 6 | 8 | 51 | 4 | 3 | 0 | - | 1 | - |
| | | | Number patients discharged prior to LA assessment targets | No | - | - | 17 | 11 | 23 | 20 | 22 | 13 | 22 | 18 | 18 | 24 | 30 | 37 | 43 | 35 | 18 | 29 | 25 | 29 | 246 | 11 | 13 | 0 | - | 5 | - |
| | | | Number of DOLs applications the LA disagreed with | No | - | - | 1 | 0 | 2 | 2 | 0 | 1 | 0 | 0 | 2 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 2 | 0 | 0 | - | 0 | - |
| | | | Number patients cognitively improved regained capacity did not require LA assessment | No | - | - | 4 | 3 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 0 | 6 | 10 | 3 | 3 | 0 | - | 0 | - |
| | | Apr 19 | Falls | No | - | - | 89 | 86 | 92 | 78 | - | 71 | 88 | 97 | 84 | 110 | 66 | 67 | 70 | 74 | 81 | 82 | 74 | 99 | 613 | 60 | 12 | 3 | - | 20 | 1 |
| | | Apr 19 | Falls - Death or Severe Harm | <= No | 0 | 0 | 2 | 2 | 0 | 0 | - | 2 | 0 | 1 | 1 | 0 | 0 | 1 | 1 | 2 | 1 | 0 | 0 | 0 | 5 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | Falls Per 1000 Occupied Bed Days | <= Rate1 | 5 | 5 | 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 | 3.76 | 5.18 | 4.56 | - | - | - | - | - | - |
| | | Apr 19 | Pressure Ulcer SWB Hospital Acquired - Total | <= No | 0 | 0 | 28 | 26 | 28 | 33 | 23 | 14 | 32 | 36 | 39 | 32 | 38 | 32 | 19 | 23 | 20 | 25 | 32 | 38 | 227 | 26 | 9 | - | - | 3 | - |
| | | Apr 19 | Pressure Ulcers per 1000 Occupied Bed Days | Rate1 | - | - | 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 | 1.58 | 1.93 | 1.64 | - | - | - | - | - | - |
| | | Apr 19 | Pressure Ulcer DN Caseload Acquired - Total | <= No | 0 | 0 | 24 | 29 | 35 | 27 | 31 | 18 | 25 | 25 | 26 | 22 | 20 | 24 | 25 | 41 | 29 | 24 | 22 | 38 | 223 | - | - | - | - | 38 | - |
| | | | Pressure Ulcer Present on Admission to SWBH | <= No | 0 | 0 | 141 | 125 | 87 | 85 | 78 | 95 | 88 | 104 | 117 | 102 | 108 | 100 | 96 | 114 | 112 | 93 | 124 | 112 | 859 | - | - | - | - | - | - |
| | | | Venous Thromboembolism (VTE) Assessments | => % | 95 | 95 | 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 | 95.3 | 96.0 | 95.6 | 97.3 | 97.3 | 88.1 | 100.0 | 96.7 | - |
| | | Apr 19 | WHO Safer Surgery - Audit - 3 sections (%pts where all sections complete) | => % | 100 | 100 | 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 | 100.0 | 100.0 | 100.0 | - | 100.0 | - |
| | | Apr 19 | WHO Safer Surgery - brief(% lists where complete) | => % | 100 | 100 | 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 | 99.7 | 100.0 | 100.0 | 100.0 | 100.0 | - | - | - | - |
| | | Apr 19 | WHO Safer Surgery - Audit - brief and debrief (% lists where complete) | => % | 100 | 100 | 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 | 99.2 | 99.7 | 99.5 | 100.0 | 99.2 | - | - | - | - |
| | | | Never Events | <= No | 0 | 0 | 1 | 1 | 0 | 0 | 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 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | - |
| | | | Serious Incidents | <= No | 0 | 0 | 12 | 32 | 12 | 11 | 17 | 11 | 7 | 6 | 8 | 0 | 4 | 8 | 12 | 6 | 7 | 10 | 7 | 8 | 62 | 4 | 1 | 1 | 1 | 1 | 0 |
| | | | Open Central Alert System (CAS) Alerts | No | - | - | 4 | 9 | 8 | 11 | 12 | 10 | 12 | 10 | 9 | 8 | 2 | 5 | 3 | 3 | 5 | 6 | 4 | 4 | 32 | - | - | - | - | - | - |
| | | | Open Central Alert System (CAS) Alerts beyond deadline date | <= No | 0 | 0 | 3 | 6 | 5 | 6 | 7 | 2 | 1 | 1 | 0 | 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 | 97.4 | 97.4 | 95.8 | 96.8 | 99.4 | 100.0 | - | 96.3 | - |
| | | | 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 | 22.9 | 26.3 | 22.3 | 27.2 | 27.1 | 19.2 | - | 23.1 | - |
| | | | 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 | 88.3 | 89.7 | 82.3 | 91.1 | 87.4 | 80.0 | - | 50.0 | - |
| | | | 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 | 80.4 | 79.8 | 67.8 | 82.3 | 75.2 | 50.0 | - | 50.0 | - |
| | | | Sepsis - Antibiotic Review Within 72 hrs | => % | 100 | 100 | Currently no metric introduced to measure this | | | | | | | | | | | | | | | | | | - | - | - | - | - | - | - |

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

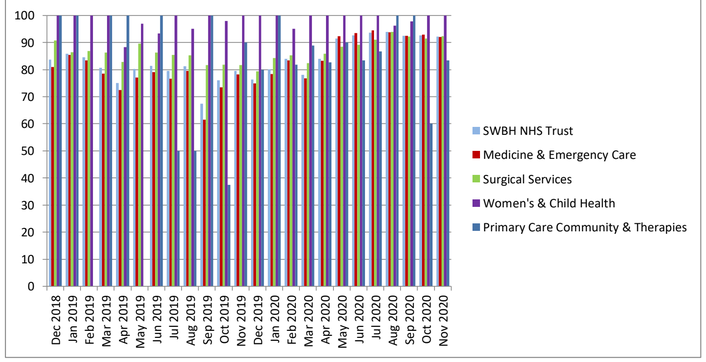
# CQC Domain - Safe

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

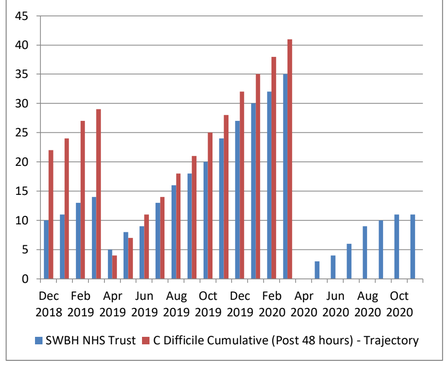
## MRSA Screening - Elective



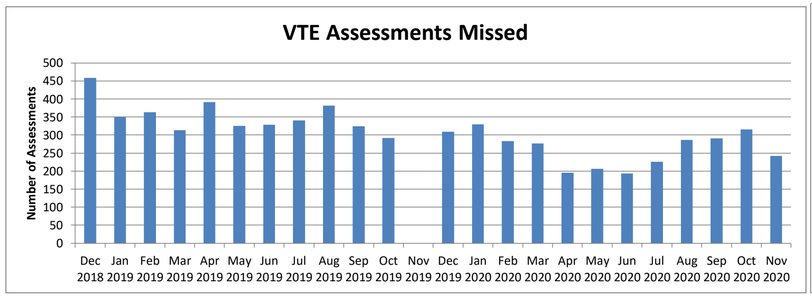

## MRSA Screening - Non Elective



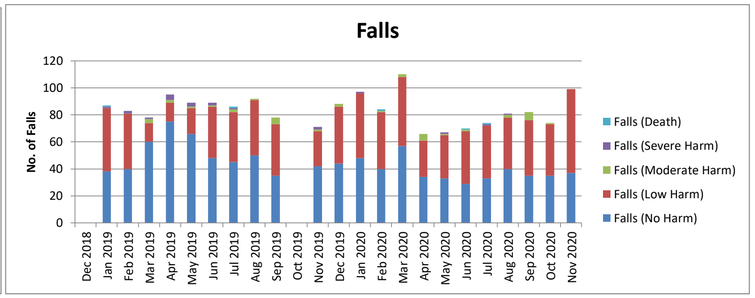

## C Diff Infection



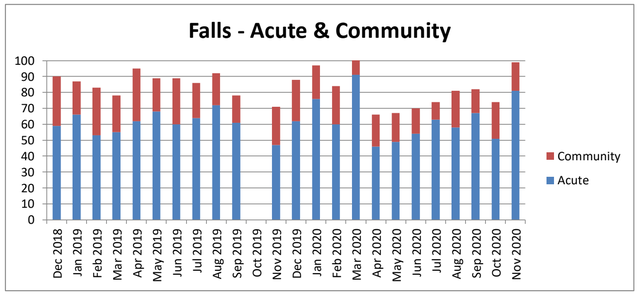

## VTE Assessments Missed



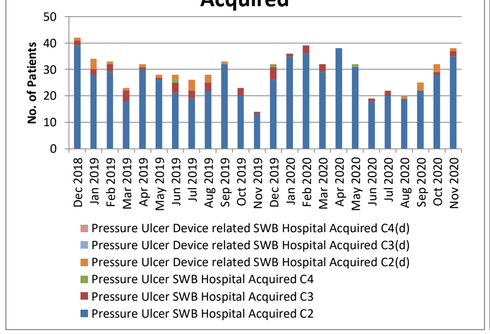

## Falls



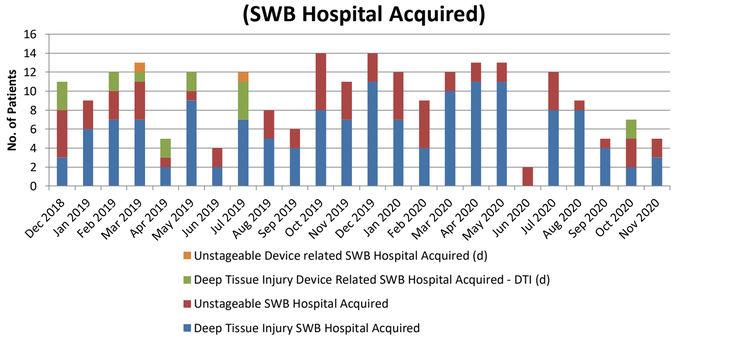

## Falls - Acute & Community



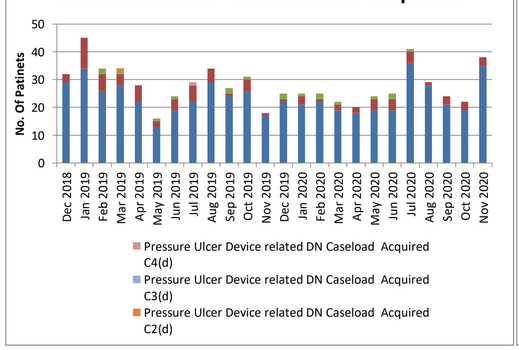

## Pressure Ulcers - SWB Hospital Acquired



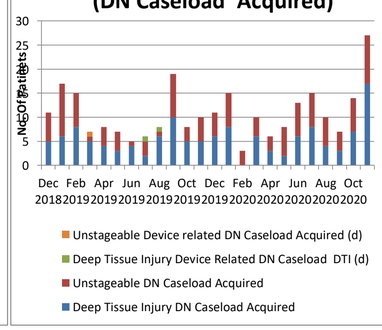

## Unstageable / Deep Tissue (SWB Hospital Acquired)




## Pressure Ulcers - DN Caseload Acquired




## Unstageable/Deep Tissue (DN Caseload Acquired)

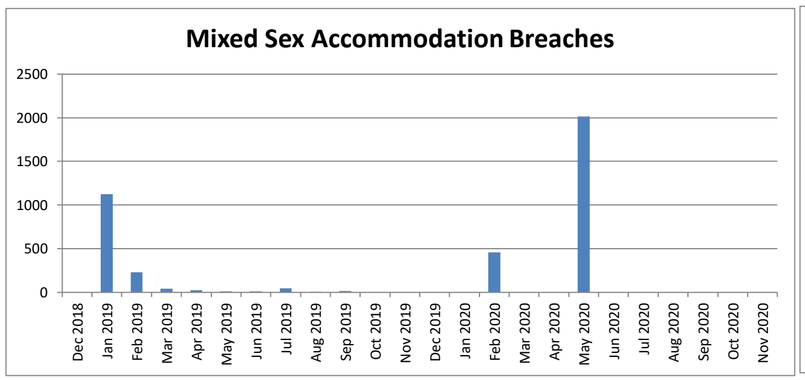


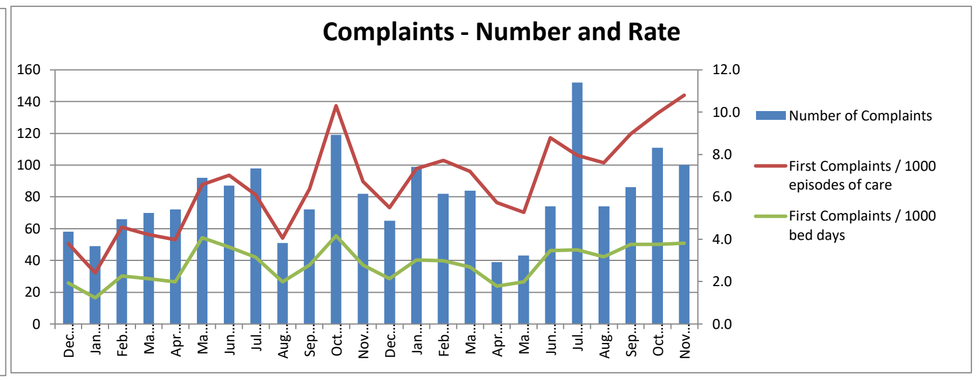
# CQC Domain - Caring

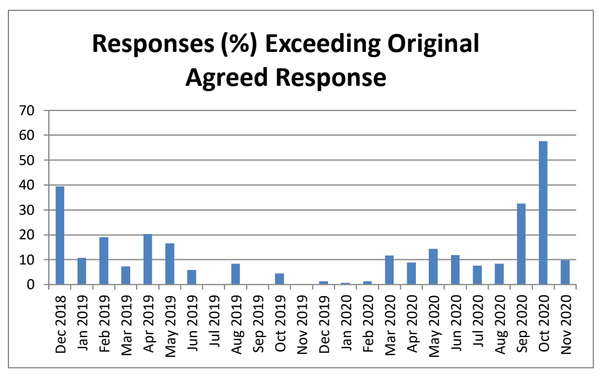
| | Kitemark | Reviewed Date | Indicator | Measure | Standard Year | Standard Month | Jun 2019 | Jul 2019 | Aug 2019 | Sep 2019 | Oct 2019 | Nov 2019 | Dec 2019 | Jan 2020 | Feb 2020 | Mar 2020 | Apr 2020 | May 2020 | Jun 2020 | Jul 2020 | Aug 2020 | Sep 2020 | Oct 2020 | Nov 2020 | 20/21 Year to Date | Group M | Group SS | Group W | Group I | Group PCCT | Group CO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| FFT | | | FFT Response Rate - Adult and Children Inpatients (including day cases and community) | => % | 25 | 25 | 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 | 17.8 | 15.4 | 17.1 | - | - | - | - | - | - |
| | | | FFT Score - Adult and Children Inpatients (including day cases and community) | => No | 95 | 95 | 92 | 91 | 90 | 89 | 89 | 89 | 86 | 89 | - | 90 | 86 | 86 | 88 | 89 | 82 | 85 | 84 | 83 | - | - | - | - | - | - | - |
| | | | FFT Response Rate: Type 1 and 2 Emergency Department | => % | 25 | 25 | 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 | 12.3 | 13.2 | 13.1 | 13.2 | - | - | - | - | - |
| | | | FFT Score - Adult and Children Emergency Department (type 1 and type 2) | => No | 95 | 95 | 73 | 76 | 78 | 71 | 71 | 68 | 73 | 75 | 72 | 79 | 89 | 85 | 84 | 81 | 78 | 77 | 78 | 78 | - | 78 | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | FFT Score - Outpatients | => No | 95 | 95 | 89 | 88 | 76 | 87 | 87 | 89 | 89 | 89 | 89 | 89 | 87 | 89 | 89 | 89 | 88 | 88 | 89 | 90 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | FFT Score - Maternity Antenatal | => No | 95 | 95 | 0 | 0 | 0 | 0 | 90 | 97 | 100 | 75 | 83 | 80 | 86 | 84 | 84 | 84 | 78 | 79 | 78 | 80 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | FFT Score - Maternity Postnatal Ward | => No | 95 | 95 | 0 | 100 | 100 | 100 | 92 | 93 | 0 | 97 | 94 | 100 | 0 | 67 | 0 | 100 | 0 | 100 | 8 | 80 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | FFT Score - Maternity Community | => No | 95 | 95 | 0 | 0 | 0 | 0 | 94 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | FFT Score - Maternity Birth | => No | 95 | 95 | 94 | 91 | 66 | 6 | 94 | 97 | 94 | 95 | 97 | 97 | 89 | 100 | 82 | 94 | 70 | 94 | 93 | 87 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | FFT Response Rate: Maternity Birth | => % | 25 | 25 | 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 | 11.2 | 6.0 | 14.0 | - | - | - | - | - | - |
| MSA | ● ○ ● ● ● ● | | Mixed Sex Accommodation - Breaches (Patients) | <= No | 0 | 0 | 9 | 44 | 7 | 16 | - | - | - | - | 458 | - | - | 2013 | - | - | - | - | - | - | 2013 | - | - | - | - | - | - |
| Complaints | ● ○ ● ● ● ● ● | | No. of Complaints Received (formal and link) | No | - | - | 87 | 98 | 51 | 72 | 119 | 82 | 65 | 99 | 82 | 84 | 39 | 43 | 74 | 152 | 74 | 86 | 111 | 100 | 679 | 44 | 21 | 11 | 2 | 17 | 5 |
| | ● ● ● ● ● ● ● | | No. of Active Complaints in the System (formal and link) | No | - | - | 121 | 148 | 91 | 121 | 140 | 114 | 92 | 106 | 142 | 126 | 102 | 109 | 123 | 152 | 139 | 189 | 288 | 374 | 1476 | 157 | 78 | 40 | 3 | 53 | 43 |
| | ● ● ● ● ● ● ● | | No. of First Formal Complaints received / 1000 bed days | Rate1 | - | - | 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 | 3.76 | 3.81 | 3.21 | 2.77 | 5.24 | 3.15 | - | 18.01 | - |
| | ● ● ● ● ● ● ● | | No. of First Formal Complaints received / 1000 episodes of care | Rate1 | - | - | 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 | 9.94 | 10.80 | 8.31 | 10.55 | 9.70 | 5.90 | - | 41.36 | - |
| | ● ● ● ● ● ● ● | | No. of Days to acknowledge a formal or link complaint (% within 3 working days after receipt) | => % | 100 | 100 | 100.0 | 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 | 84.7 | 82.0 | 63.0 | 100.0 | 14.3 | 100.0 | 100.0 | 100.0 | 100.0 |
| | ● ● ● ● ● ● ● | | No. of responses which have exceeded their original agreed response date (% of total active complaints) | <= % | 0 | 0 | 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 | 57.7 | 9.9 | 12.5 | 2.5 | 25.0 | 10.0 | 20.0 | 9.3 | 10.5 |
| | ● ● ● ● ● ● ● | | No. of responses sent out | No | - | - | 97 | 95 | 96 | 61 | 88 | 105 | 76 | 76 | 70 | 87 | 68 | 35 | 58 | 66 | 86 | 43 | 27 | 33 | 416 | 7 | 10 | 4 | 2 | 5 | 5 |
| WKF | ● ● ● ● ● ○ ● | Apr 19 | Flu Vaccination Rate | => % | 80 | 80 | - | - | - | - | 47.7 | 62.4 | 78.1 | 82.0 | 83.1 | - | - | - | - | - | - | - | 46.0 | 76.0 | 76.0 | - | - | - | - | - | - |

| 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



# CQC Domain - Responsive

| | Kitemark | Reviewed Date | Indicator | Measure | Standard Year | Standard Month | 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 | Oct 2020 | Nov 2020 | 20/21 Year to Date | Group M | Group SS | Group W | Group I | Group PCCT | Group CO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Emergency Care | | | Emergency Care Attendances (Including Malling) | No | - | - | 18091 | 19047 | 17657 | 17973 | 18445 | 17868 | 19330 | 18477 | 17367 | 13392 | 7163 | 9828 | 12215 | 14065 | 15099 | 14548 | 13833 | 13235 | 99986 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care 4-hour waits | => % | 95 | 95 | 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 | 79.1 | 79.2 | 84.3 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care 4-hour breach (numbers) | No | - | - | 3288 | 3542 | 3252 | 4764 | 5215 | 5199 | 5375 | 4819 | 4416 | 2768 | 844 | 828 | 1225 | 1941 | 2284 | 2860 | 2895 | 2754 | 15631 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care Trolley Waits >12 hours | <= No | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 3 | 2 | 6 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care Timeliness - Time to Initial Assessment (95th centile) | <= No | 15 | 15 | 89 | 45 | 52 | 71 | 185 | 154 | 116 | 121 | 62 | 85 | 74 | 44 | 62 | 194 | 69 | 163 | 149 | 183 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care Timeliness - Time to Treatment in Department (median) | <= No | 60 | 60 | 255 | 261 | 208 | 217 | 250 | 263 | 263 | 254 | 232 | 151 | 82 | 82 | 100 | 136 | 153 | 168 | 147 | 165 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care Patient Impact - Unplanned Reattendance Rate (%) | <= % | 5 | 5 | 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 | 7.7 | 7.0 | 7.9 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Emergency Care Patient Impact - Left Department Without Being Seen Rate (%) | <= % | 5 | 5 | 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 | 3.6 | 3.9 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number) | <= No | 0 | 0 | 128 | 123 | 162 | 238 | 251 | 228 | 279 | 199 | 242 | 380 | 234 | 172 | 77 | 183 | 172 | 161 | 267 | 186 | 1452 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | WMAS -Finable Handovers (emergency conveyances) >60 mins (number) | <= No | 0 | 0 | 4 | 5 | 9 | 33 | 16 | 9 | 12 | 9 | 32 | 42 | 8 | 1 | 0 | 0 | 3 | 9 | 43 | 31 | 95 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | WMAS - Handover Delays > 60 mins (% all emergency conveyances) | <= % | 0.02 | 0.02 | 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 | 1.0 | 0.8 | 0.4 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | WMAS - Emergency Conveyances (total) | No | - | - | 4555 | 4658 | 4486 | 4484 | 4656 | 4721 | 4887 | 4848 | 4522 | 4588 | 3069 | 3282 | 3039 | 3951 | 4209 | 4065 | 4323 | 4106 | 30044 | - | - | - | - | - | - |
| Patient Flow | ● ● ● ● ● ● ● | Apr 19 | Delayed Transfers of Care (Acute) (%) | <= % | 3.5 | 3.5 | 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 | 0.1 | 0.2 | 0.4 | - | - | - | - | - | - |
| | | | Delayed Transfers of Care (Acute) (Av./Week) attributable to NHS | <= No | 240 | 20 | 14 | - | 27 | 17 | 19 | 20 | 16 | 19 | 20 | 28 | 11 | - | - | 2 | 4 | 1 | 2 | 6 | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | Delayed Transfers of Care (Acute) - Finable Bed Days | <= No | 0 | 0 | 239 | 295 | 185 | 127 | 147 | 163 | 180 | 195 | 340 | 388 | 210 | 32 | 10 | 8 | 0 | 12 | 27 | 43 | 342 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | Patient Bed Moves (10pm - 6am) (No.) - ALL | No | - | - | 583 | 684 | 671 | 675 | 867 | 852 | 944 | 989 | 860 | 730 | 501 | 554 | 543 | 604 | 746 | 750 | 935 | 901 | 5534 | - | - | - | - | - | - |
| | | Apr 19 | Hip Fractures Best Practice Tariff (Operation < 36 hours of admissions | => % | 85 | 85 | 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 | 78.9 | 85.0 | 74.2 | - | 85.0 | - | - | - | - |
| Cancellations | ● ● ● ● ● ● ● | | No. of Sitrep Declared Late Cancellations - Total | <= No | 240 | 20 | 40 | 46 | 32 | 57 | 63 | 59 | 65 | 56 | 60 | 35 | 1 | 9 | 18 | 21 | 17 | 36 | 40 | - | 142 | 10 | 23 | 5 | - | 2 | - |
| | ● ● ● ● ● ● ● | | No. of Sitrep Declared Late Cancellations - Avoidable | No | - | - | 3 | 16 | 17 | 32 | 40 | 30 | 41 | 29 | 17 | 16 | 1 | 1 | 5 | 9 | - | 17 | 21 | - | 65 | 0 | 16 | 3 | - | 2 | - |
| | ● ● ● ● ● ● ● | | No. of Sitrep Declared Late Cancellations - Unavoidable | No | - | - | 37 | 30 | 15 | 25 | 23 | 29 | 24 | 27 | 43 | 19 | 0 | 8 | 13 | 12 | - | 19 | 19 | - | 77 | 10 | 7 | 2 | - | 0 | - |
| | ● ● ● ● ● ● ● | | Elective Admissions Cancelled at last minute for non-clinical reasons (as a percentage of admissions) | <= % | 0.8 | 0.8 | 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 | 1.5 | 1.2 | 1.0 | 1.1 | 0.9 | 4.0 | - | 0.5 | - |
| | ● ● ● ● ● ● ● | | Number of 28 day breaches | <= No | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 0 | 0 | 0 | 4 | - | 8 | 0 | 4 | 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 | - | - | - |
| | ● ● ● ● ● ● ● | | Urgent Cancellations | <= No | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | - | 1 | 0 | 1 | 0 | - | 0 | - |
| | ● ● ● ● ● ● ● | | No. of Sitrep Declared Late Cancellations (Pts. >1 occasion) | <= No | 0 | 0 | 2 | 1 | 1 | 1 | 2 | 0 | 1 | 1 | 2 | 4 | 0 | 0 | 0 | 1 | 0 | 1 | 1 | - | 3 | 0 | 1 | 0 | - | 0 | - |
| | ● ● ● ● ● ● ● | | Multiple Hospital Cancellations experienced by same patient (all cancellations) | <= No | 0 | 0 | 75 | 86 | 67 | 79 | 103 | 92 | 65 | 73 | 124 | 344 | 19 | 20 | 42 | 46 | 49 | 74 | 107 | 128 | 485 | 6 | 120 | 2 | - | - | - |
| | ● ● ● ● ● ● ● | | All Hospital Cancellations, with 7 or less days notice | <= No | 0 | 0 | 277 | 296 | 204 | 367 | 370 | 376 | 358 | 347 | 584 | 890 | 63 | 58 | 133 | 138 | 202 | 220 | 320 | 409 | 1543 | 27 | 355 | 27 | - | - | - |
| Cancer | ● ● ● ● ● ● ● | Apr 19 | 2 weeks | => % | 93 | 93 | 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 | 90.1 | 94.1 | - | 92.7 | 97.2 | 93.5 | 94.0 | - | 92.6 | - |
| | ● ● ● ● ● ● ● | Apr 19 | 2 weeks (Breast Symptomatic) | => % | 93 | 93 | 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 | 96.6 | 94.4 | - | 96.6 | - | 94.4 | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | 31 Day (diagnosis to treatment) | => % | 96 | 96 | 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 | 94.6 | 92.0 | - | 93.5 | 100.0 | 89.8 | 89.5 | - | 91.7 | - |
| | ● ● ● ● ● ● ● | Apr 19 | 31 Day (second/subsequent treatment - surgery) | => % | 94 | 94 | 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 | 88.2 | 69.2 | - | 84.4 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | 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 | 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 | 74.2 | 75.4 | - | 72.0 | 68.0 | 76.9 | 70.0 | - | 87.5 | - |
| | ● ● ● ● ● ● ● | | 62 Day (urgent GP referral to treatment) - Inc Rare Cancers | => % | 85 | 85 | 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 | 74.8 | 75.4 | - | 72.4 | 68.0 | 76.9 | 70.0 | - | 87.5 | - |
| | ● ● ● ● ● ● ● | Apr 19 | 62 Day (referral to treat from screening) | => % | 90 | 90 | 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 | 90.0 | 90.0 | - | 82.4 | - | 88.9 | 100.0 | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | 62 Day (referral to treat from hosp specialist) | => % | 90 | 90 | 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 | 90.7 | 74.2 | - | 84.8 | 57.6 | 96.2 | 0.0 | - | 100.0 | - |
| | ● ● ● ● ● ● ● | | Cancer = Patients Waiting Over 62 days for treatment | No | - | - | 8 | 10 | 11 | 10 | 11 | 6 | 12 | 12 | 9 | 9 | - | 17 | 19 | 13 | 11 | 20 | 16 | - | 94 | 4 | 8 | 3 | - | 1 | - |
| | ● ● ● ● ● ● ● | | Cancer - Patients Waiting Over 104 days for treatment | No | - | - | 1 | 3 | 5 | 3 | 3 | 5 | 6 | 7 | 4 | 2 | - | 4 | 10 | 8 | 3 | 8 | 4 | - | 35 | 1 | 3 | 1 | - | 0 | - |
| | ● ● ● ● ● ● ● | | Cancer - Longest wait for treatment (days) - TRUST | No | - | - | 91 | 196 | 147 | 96 | 171 | 149 | 148 | 169 | 217 | 121 | - | 171 | 177 | 138 | 136 | 207 | 117 | - | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | Neutropenia Sepsis - Door to Needle Time > 1hr | <= No | 0 | 0 | 3 | 3 | 4 | 6 | 6 | 9 | 15 | 7 | 11 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 5 | 21 | 5 | 0 | 0 | - | 0 | - |
| | ● ● ● ● ● ● ● | | IPT Referrals - Within 38 Days Of GP Referral for 62 day cancer pathway | % | - | - | 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 | 56.3 | 68.4 | - | 60.4 | - | - | - | - | - | - |
| | | | 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 | 70.3 | 76.4 | - | 83.1 | - | - | - | - | - | - |
| | | | 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 | 95.5 | 100.0 | - | 98.9 | - | - | - | - | - | - |
| | | | Cancer - 28 day FDS screening referral (% of Informed) - Total | % | - | - | - | - | - | - | - | - | - | 77.8 | - | 92.9 | - | - | 100.0 | - | - | - | 50.0 | - | 75.0 | - | - | - | - | - | - |
| | | | Cancer - 28 Day FDS TWW Referral (% of Eligible) - Total | % | - | - | - | - | - | - | - | - | - | 47.2 | 62.8 | 59.6 | 22.3 | 65.9 | - | 27.0 | 28.8 | 52.4 | 56.7 | - | 44.4 | - | - | - | - | - | - |

# CQC Domain - Responsive

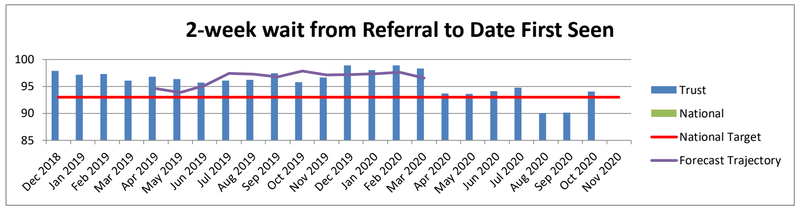
| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Cancer - 28 day FDS TWW breast symptomatic (% of Eligible) - Total | % | - | - | - | - | - | - | - | - | - | - | - | 105.3 | 62.7 | 72.1 | 16.2 | 34.0 | 22.8 | 18.9 | 18.1 | 68.9 | 107.0 | - | 33.5 | - | - | - | - | - | - |
| | | | Cancer - 28 day FDS screening referral (% of Eligible) - Total | % | - | - | - | - | - | - | - | - | - | - | - | 100.0 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| RTT | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | RTT - Admittted Care (18-weeks) | => % | 90 | 90 | 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 | 66.3 | 71.3 | 67.5 | 86.1 | 62.3 | 65.8 | - | 88.0 | - |
| | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | RTT - Non Admittted Care (18-weeks) | => % | 95 | 95 | 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 | 82.9 | 83.8 | 82.5 | 63.8 | 87.9 | 77.0 | - | 81.2 | - |
| | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | RTT - Incomplete Pathway (18-weeks) | => % | 92 | 92 | 92.1 | 92.0 | 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 | 72.5 | 74.8 | 67.7 | 74.9 | 74.8 | 87.0 | - | 52.1 | - |
| | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | RTT Waiting List - Incomplete | No | - | - | 37231 | 39115 | 38714 | 39634 | 39898 | 38360 | 38416 | 39374 | 39364 | 38603 | 34989 | 34058 | 34436 | 35421 | 36056 | 35684 | 36566 | 38639 | 292707 | 5390 | 19392 | 2184 | - | 3499 | 0 |
| | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | RTT - Backlog | No | - | - | 2951 | 3118 | 3082 | 3168 | 3360 | 3475 | 3433 | 3645 | 3781 | 4646 | 6823 | 9964 | 14405 | 16470 | 14061 | 11523 | 10067 | 9734 | 94686 | 1355 | 4887 | 284 | - | 1675 | 0 |
| | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | Patients Waiting >52 weeks (All Pathways) | <= No | 0 | 0 | 24 | 12 | 14 | 0 | 0 | 1 | 0 | 1 | 0 | 1 | 7 | 35 | 99 | 196 | 281 | 464 | 620 | 775 | 2477 | 28 | 512 | 17 | 0 | 83 | 0 |
| | 🟢🔴🔴🔴🔴🔴🟢 | Apr 19 | Patients Waiting >52 weeks (Incomplete) | <= No | 0 | 0 | 6 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 7 | 32 | 93 | 177 | 252 | 376 | 482 | 641 | 2060 | 17 | 436 | 9 | 0 | 72 | 0 |
| | 🟢⚪🟢🟢🟢🟢🟢 | | Treatment Functions Underperforming (Admitted, Non-Admitted,Incomplete | <= No | 0 | 0 | 29 | 30 | 29 | 27 | 26 | 32 | 29 | 28 | 28 | 32 | 30 | 32 | 41 | 41 | 42 | 40 | 42 | 43 | - | 10 | 21 | 3 | - | 5 | 0 |
| | 🟢⚪🟢🟢🟢🟢🟢 | | Treatment Functions Underperforming (Incomplete) | <= No | 0 | 0 | 5 | 5 | 5 | 4 | 5 | 7 | 7 | 5 | 6 | 10 | 14 | 15 | 16 | 16 | 16 | 14 | 15 | 14 | - | 3 | 7 | 1 | - | 2 | 0 |
| | | | RTT Clearance Time (Wks) | Ratio | - | - | 10.0 | 9.7 | 10.5 | 10.3 | 9.6 | 8.9 | 10.8 | - | 9.8 | - | 18.1 | 15.5 | - | 12.6 | - | 11.3 | 11.7 | 12.0 | 13.3 | 16.4 | 11.5 | 14.9 | - | 29.4 | - |
| DM01 | 🟢🔴🟢🟢🔴🟢🟢 | Apr 19 | Acute Diagnostic Waits in Excess of 6-weeks (End of Month Census) | <= % | 1 | 1 | 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 | 24.0 | 16.7 | 43.6 | 18.6 | 31.1 | - | 12.4 | - | - |
| | 🟢🔴🟢🟢🔴🟢🟢 | Apr 19 | Acute Diagnostic Waits in Excess of 6-weeks (In Month Waiters) | No | - | - | 1023 | 1010 | 600 | 614 | 457 | 359 | 338 | 1028 | 499 | 1140 | 78 | 281 | 232 | 525 | 974 | 1270 | 1263 | 1783 | 6406 | 140 | 156 | - | 1486 | - | - |

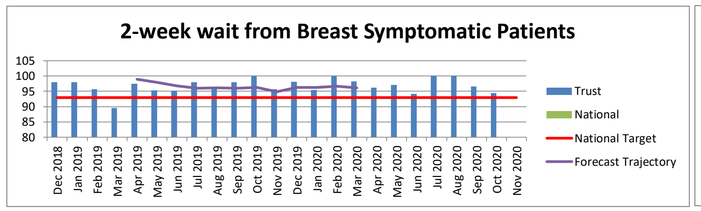
**Data Quality - Kitemark**

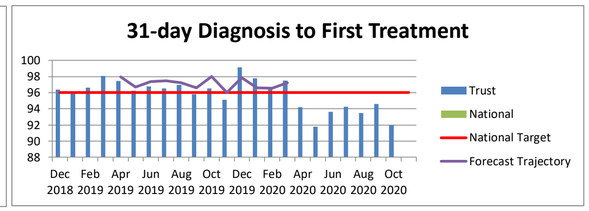
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|---|---|---|---|---|---|
| Timeliness | Audit | Source | Validation | Completeness | Granularity | Assessment of Exec Director |
| 🟢 | 🟢 | 🔴 | 🔴 | 🟢 | ⚪ | 🔴 |

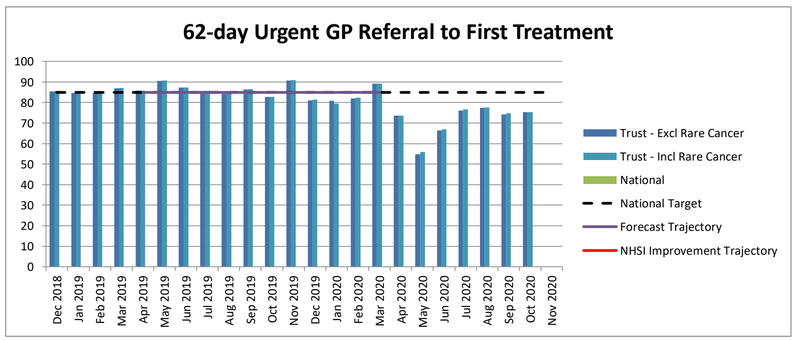
If segment 2 of the Kitemark is Blank this indicates that a formal audit of this indicator has not yet taken place

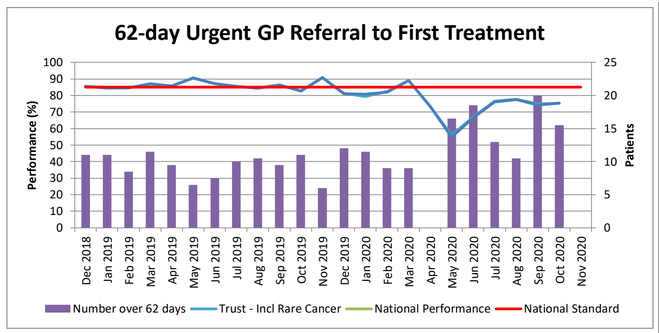
# CQC Domain - Responsive

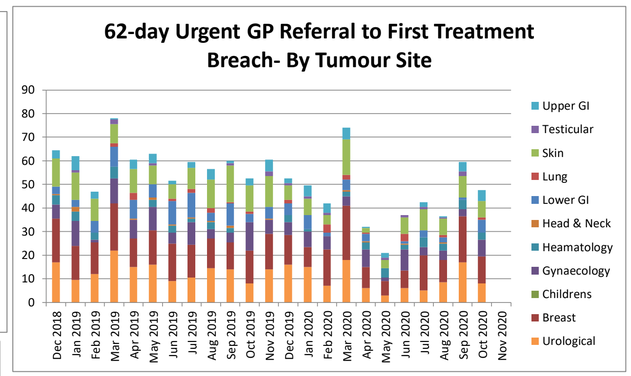


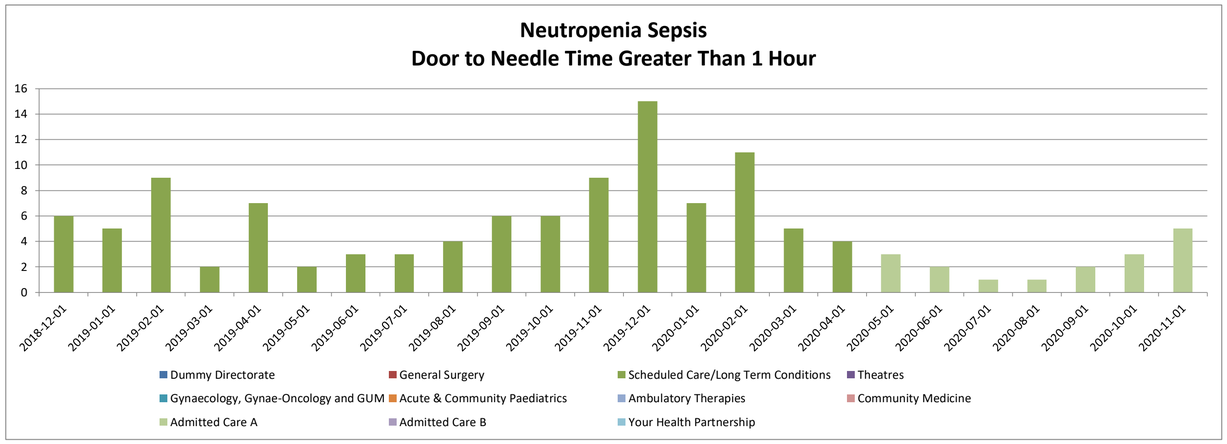



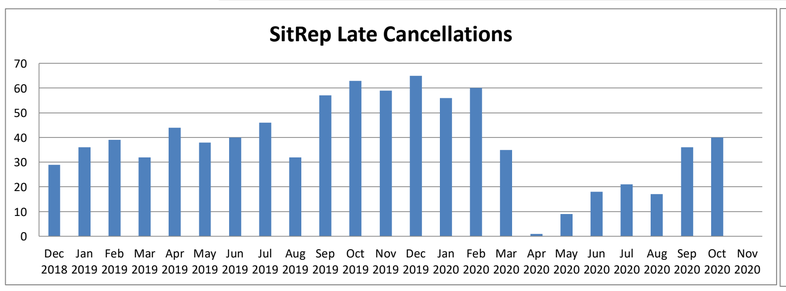



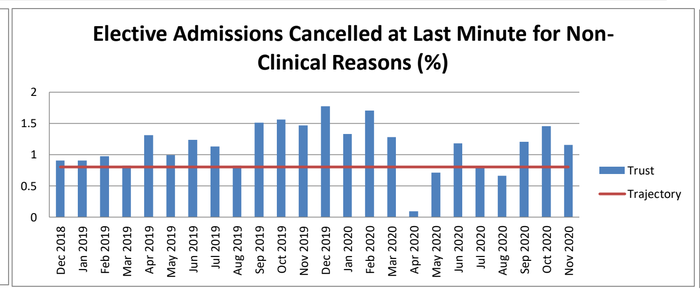



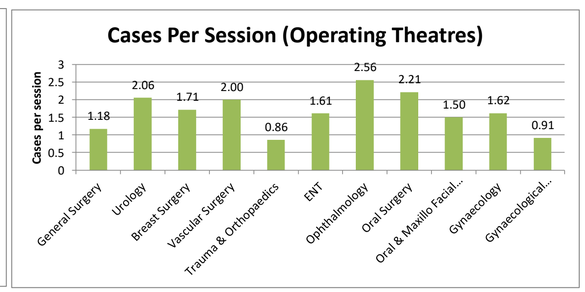



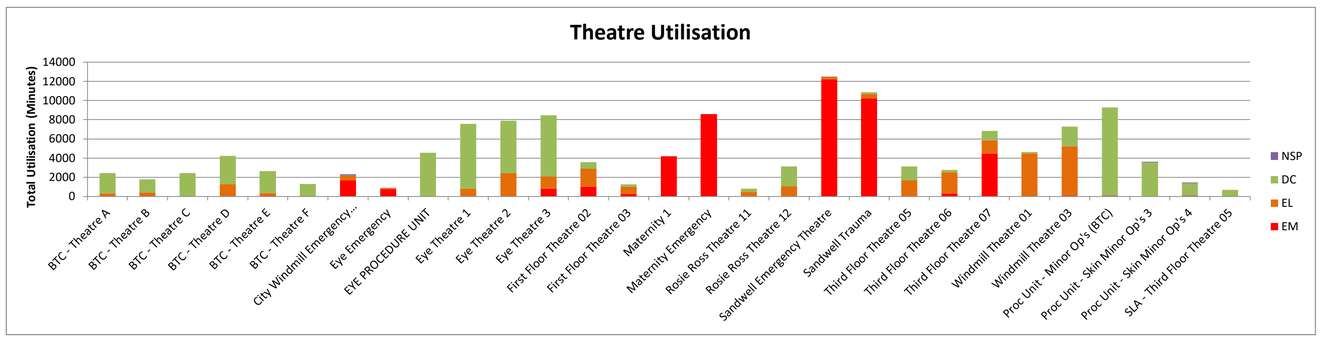

| Month | Indicator | TumourSite | Informed In 28 Days | Eligible | % of Informed | % of Eligible |
|---|---|---|---|---|---|---|
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Breast | 217 | 278 | 98.64 | 78.06 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Colorectal | 140 | 285 | 51.66 | 49.12 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Gynaecology | 152 | 185 | 76.77 | 82.16 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Haematology | 5 | 29 | 62.5 | 17.24 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Head & Neck | 9 | 113 | 28.13 | 7.965 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Lung | 6 | 25 | 100 | 24 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Skin | 154 | 226 | 96.25 | 68.14 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Upper GI | 128 | 201 | 80.5 | 63.68 |
| Oct 2020 | Cancer - 28 Day FDS TWW Referral | Urology | 32 | 145 | 65.31 | 22.07 |
| Oct 2020 | 28 day FDS TWW Breast Symptomatic | Breast | 46 | 43 | 100 | 107 |
| Oct 2020 | Cancer - 28 day FDS screening referral | Breast | 1 | 0 | 50 | 0 |
| Oct 2020 | Cancer - 28 day FDS screening referral | Colorectal | 0 | 0 | 0 | 0 |
| Oct 2020 | Cancer - 28 day FDS screening referral | Gynaecology | 0 | 0 | 0 | 0 |

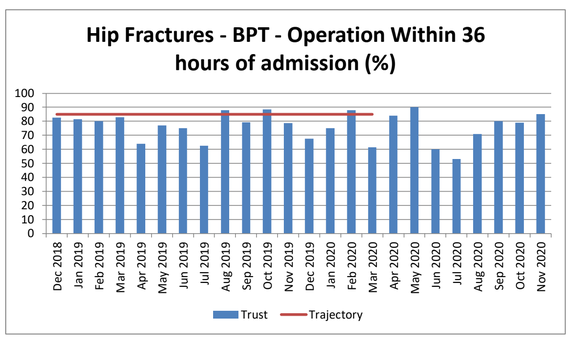


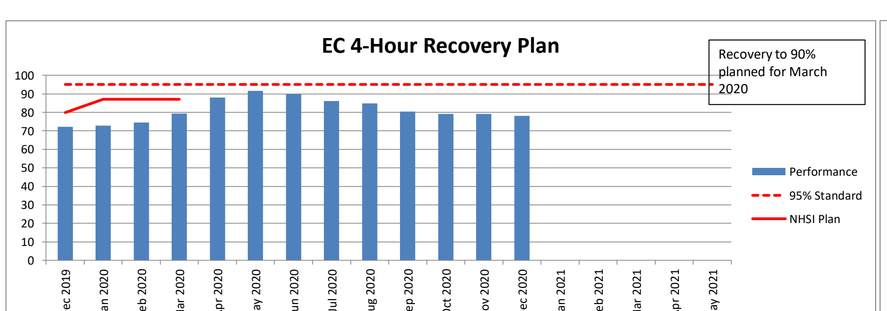



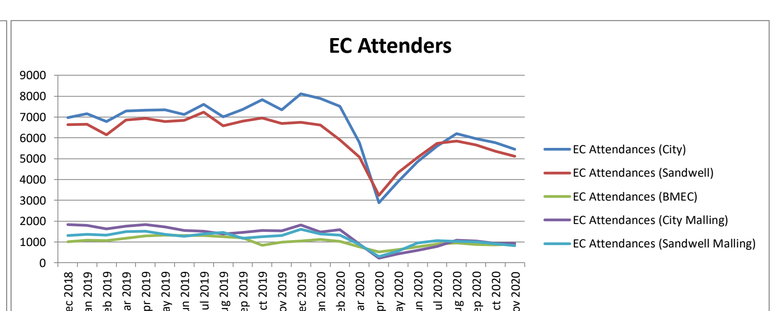



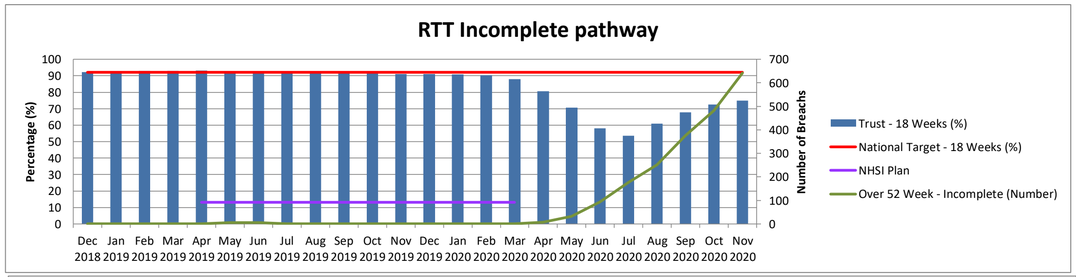
# CQC Domain - Responsive

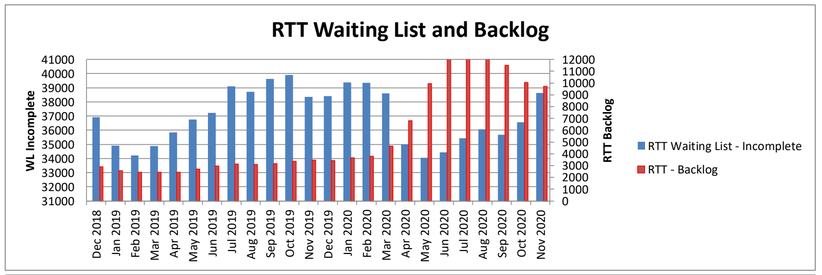


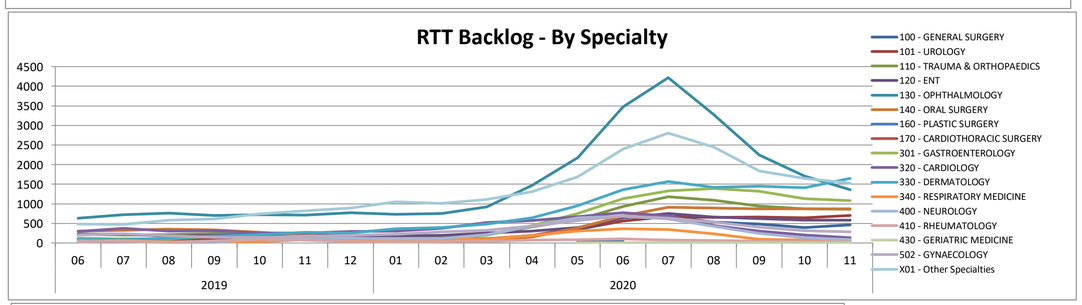



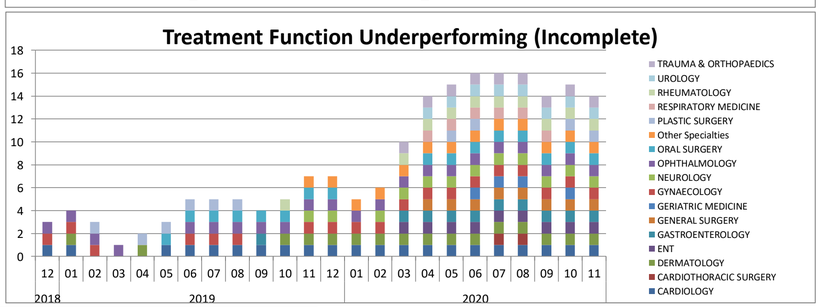



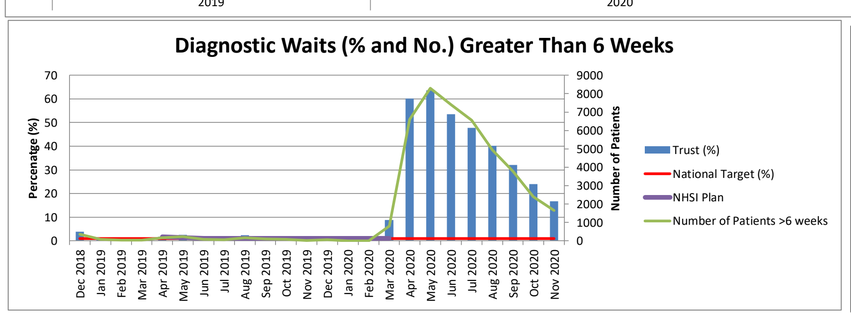



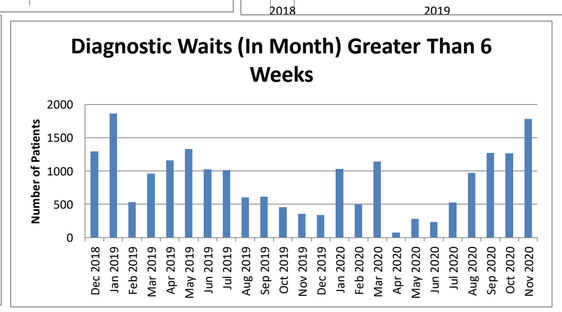



# CQC Domain - Effective

| | Kitemark | Reviewed Date | Indicator | Measure | Standard Year | Standard Month | 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 | Oct 2020 | Nov 2020 | 20/21 Year to Date | Group M | Group SS | Group W | Group I | Group PCCT | Group CO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mortality and Readmissions | ● ○ ● ● ○ ● ● | | Risk Adjusted Mortality Index (RAMI) - Overall (12-month cumulative) | No | - | - | 105 | 104 | 103 | 104 | 106 | 107 | 107 | 109 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | ● ○ ● ● ○ ● ● | | Risk Adjusted Mortality Index (RAMI) - Weekday Admission (12-month cumulative) | No | - | - | 105 | 104 | 103 | 103 | 87 | 106 | 106 | 107 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | ● ○ ● ● ○ ● ● | | Risk Adjusted Mortality Index (RAMI) - Weekend Admission (12-month cumulative) | No | - | - | 103 | 99 | 87 | 105 | 109 | 112 | 112 | 114 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | ● ○ ● ● ○ ● ● | | Hospital Standardised Mortality Rate (HSMR) - Overall (12-month cumulative) | No | - | - | 112 | 112 | 113 | 113 | 115 | 116 | 117 | 120 | 120 | 122 | 128 | 134 | 136 | 138 | - | - | - | - | - | - | - | - | - | - | - |
| | | | Hospital Standardised Mortality Rate (HSMR) - Weekday Admission (12-month cumulative) | No | - | - | - | - | - | - | - | - | - | - | - | 120 | 125 | 131 | 132 | 133 | - | - | - | - | - | - | - | - | - | - | - |
| | | | Hospital Standardised Mortality Rate (HSMR) - Weekend Admission (12-month cumulative) | No | - | - | - | - | - | - | - | - | - | - | - | 128 | 137 | 143 | 150 | 153 | - | - | - | - | - | - | - | - | - | - | - |
| | ● ○ ● ● ○ ● ● | | Summary Hospital-level Mortality Index (SHMI) (12-month cumulative) | No | - | - | 104 | 103 | 103 | 103 | 104 | 106 | 107 | 108 | 107 | 113 | 110 | 113 | 111 | - | - | - | - | - | - | - | - | - | - | - | - |
| | ● ○ ● ● ○ ● ● | | Deaths in Low Risk Diagnosis Groups (RAMI) - month | No | - | - | 93 | 125 | 85 | 88 | 152 | 97 | 121 | 71 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | | Mortality Reviews within 42 working days | => % | 90 | 90 | 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 | 92.2 | 95.2 | - | - | 79.1 | 95.7 | 100.0 | - | - | 80.0 | - |
| | ● ○ ● ● ○ ● ● | | Crude In-Hospital Mortality Rate (Deaths / Spells) (by month) | % | - | - | 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 | 1.4 | 59.0 | - | 12.4 | - | - | - | - | - | - |
| | ● ○ ● ○ ○ ● ● | | Crude In-Hospital Mortality Rate (Deaths / Spells) (12-month cumulative) | % | - | - | - | 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 | 2.0 | 2.1 | - | 1.9 | - | - | - | - | - | - |
| | ● ○ ● ● ● ● ● | | Deaths in The Trust | No | - | - | 117 | 109 | 118 | 114 | 133 | 136 | 139 | 162 | 125 | - | 334 | 150 | 125 | 103 | 102 | 108 | 148 | - | 1070 | 132 | 9 | 0 | 0 | 7 | 0 |
| | | | Avoidable Deaths In the Trust | No | - | - | 1 | 1 | 0 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | - | - | 1 | - | - | - | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month | % | - | - | 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 | 8.7 | 8.8 | - | 9.5 | 13.2 | 4.8 | 9.4 | 7.1 | 3.3 | - |
| | ● ● ● ● ● ● ● | Apr 19 | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative | % | - | - | 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 | 8.9 | 9.0 | - | 8.7 | 13.6 | 4.6 | 7.8 | 7.2 | 2.4 | - |
| | ● ● ● ● ● ● ● | Apr 19 | Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) month | % | - | - | 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 | 4.8 | - | 4.3 | 6.4 | 3.4 | 7.5 | - | - | - |
| | ● ● ● ● ● ● ● | Apr 19 | Emergency Readmissions (within 30 days) - Same Spec (exc. Deaths and Stillbirths) 12-month cumulative | % | - | - | 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 | 3.6 | 3.8 | - | 3.4 | 4.9 | 2.5 | 6.3 | 0.5 | 0.1 | - |
| Patient Flow | ● ● ● ● ● ● ● | Apr 19 | Inpatients Staying 21+ Days At Month End Census - NHSI | No | - | - | 124 | 129 | 118 | 152 | 159 | 148 | 156 | 154 | 173 | 161 | 66 | 57 | 56 | 53 | 55 | 72 | 77 | 74 | - | 63 | 9 | 1 | 0 | 1 | - |
| | ● ● ● ● ● ● ● | | 21+ Days Long Stay Rate - NHSI | % | - | - | 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 | 14.7 | 8.6 | 11.3 | 8.8 | 7.6 | 3.7 | - | 13.9 | - |
| | ● ● ● ● ● ● ● | | Estimated Beds - 21+ Days - NHSI | No | - | - | 101 | 96 | 125 | 111 | 122 | 128 | 121 | 117 | 124 | 140 | 54 | 39 | 36 | 26 | 15 | 35 | 66 | 36 | - | 28 | 7 | 0 | - | 1 | - |
| RTT | ● ● ● ● ● ● ● | Apr 19 | Routine Outpatient Appointments with Short Notice(<3Wks) | % | - | - | 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 | 56.2 | 55.7 | 56.5 | 67.3 | 60.0 | 35.9 | - | 32.2 | - |
| | ● ● ● ● ● ● ● | Apr 19 | Routine Outpatient Appointments with Short Notice(<3Wks) | No | - | - | 3498 | 3838 | 3034 | 3711 | 4512 | 4735 | 4029 | 4571 | 6313 | 4983 | 5886 | 3715 | 4644 | 5122 | 4706 | 5064 | 5407 | 5541 | 40085 | 1667 | 3058 | 465 | 0 | 346 | - |
| | ● ● ● ● ● ● ● | Apr 19 | Short Notice Inpatient Admission Offers (<3wks) | % | - | - | 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 | 68.7 | 69.6 | 72.5 | 64.0 | 72.2 | 62.1 | 95.5 | 55.8 | - |
| | ● ● ● ● ● ● ● | Apr 19 | Short Notice Inpatient Admission Offers (<3wks) | No | - | - | 2136 | 2375 | 2150 | 2142 | 2313 | 2388 | 2087 | 2242 | 2207 | 2155 | 549 | 547 | 898 | 1435 | 1625 | 1938 | 2069 | 1833 | 10894 | 119 | 1415 | 167 | 21 | 111 | - |
| Stroke | | | 5WD: Pts spending >90% stay on Acute Stroke Unit | => % | 90 | 90 | 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 | 88.4 | 92.6 | 89.8 | 92.6 | - | - | - | - | - |
| | | | 5WD: Pts admitted to Acute Stroke Unit within 4 hrs | => % | 80 | 80 | 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 | 65.0 | 67.9 | 76.1 | 67.9 | - | - | - | - | - |
| | | | 5WD: Pts receiving CT Scan within 1 hr of presentation | => % | 50 | 50 | 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 | 83.6 | 87.9 | 86.1 | 87.9 | - | - | - | - | - |
| | | | 5WD: Pts receiving CT Scan within 24 hrs of presentation | => % | 95 | 95 | 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 | 98.4 | 100.0 | 99.3 | 100.0 | - | - | - | - | - |
| | | | 5WD: Stroke Admission to Thrombolysis Time (% within 60 mins) | => % | 85 | 85 | 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 | 80.0 | 100.0 | 73.2 | 100.0 | - | - | - | - | - |
| | | | 5WD: TIA (High Risk) Treatment <24 Hours from receipt of referral | => % | 70 | 70 | 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 | Replaced by indicator below | | | 86.8 | 100.0 | - | - | - | - | - |
| | | | 5WD: TIA (Low Risk) Treatment <7 days from receipt of referral | => % | 75 | 75 | 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 | 82.6 | 88.9 | 89.3 | 88.9 | - | - | - | - | - |
| | ● ○ ● ● ● ● ● | | Primary Angioplasty (Door To Balloon Time 90 mins) | => % | 80 | 80 | 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 | 81.8 | 87.5 | 90.5 | 87.5 | - | - | - | - | - |
| | ● ○ ● ● ● ● ● | | Primary Angioplasty (Call To Balloon Time 150 mins) | => % | 80 | 80 | 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 | 88.9 | 87.5 | 86.9 | 87.5 | - | - | - | - | - |
| | ● ○ ● ● ● ● ○ | | Rapid Access Chest Pain - seen within 14 days | => % | 98 | 98 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | - | - | - | - | - |

**Data Quality - Kitemark**

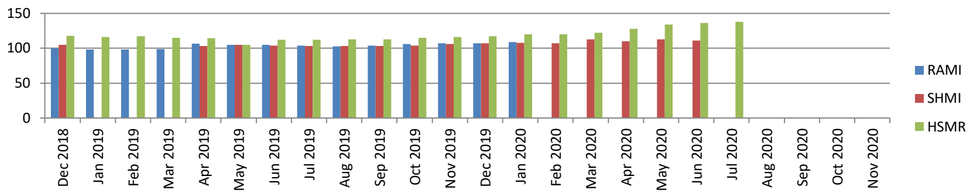
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|---|---|---|---|---|---|
| Timeliness | Audit | Source | Validation | Completeness | Granularity | Assessment of Exec Director |
| ● | ● | ● | ● | ● | ○ | ● |

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

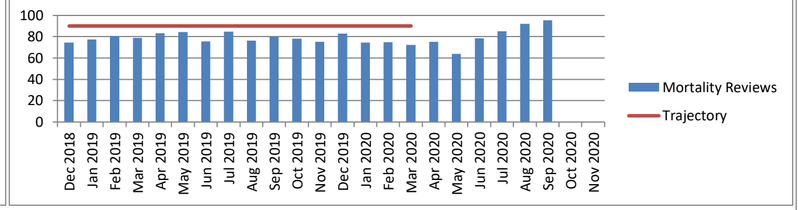
# CQC Domain - Effective

not yet taken place

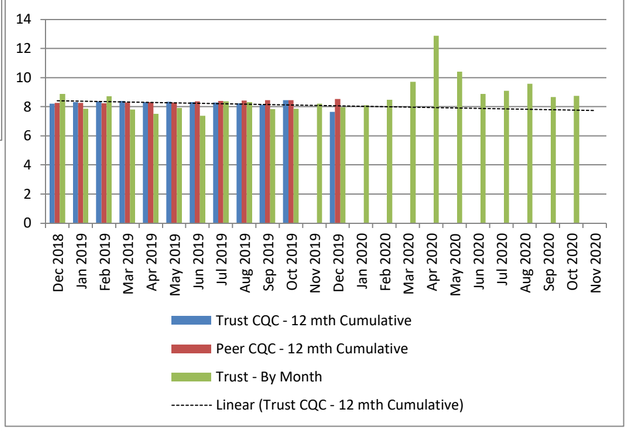
## RAMI, SHMI & HSMR (12-month cumulative)



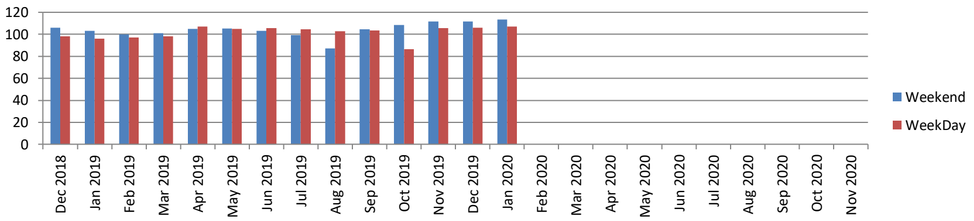

## Mortality Reviews (%)



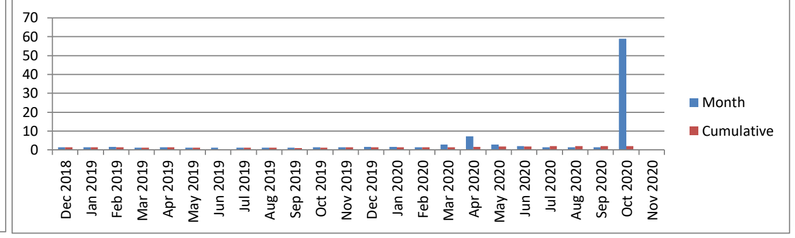

## Emergency 30-day Readmissions (%) - 12-month cumulative CQC CCS Diagnosis Groups and monthly overall



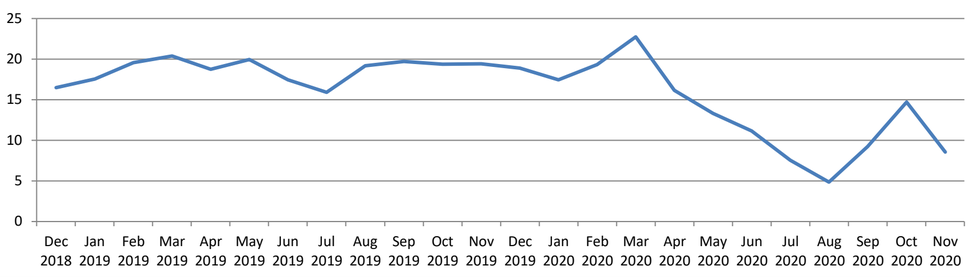

## Mortality (RAMI) - Weekend and Weekday (12-month cumulative)



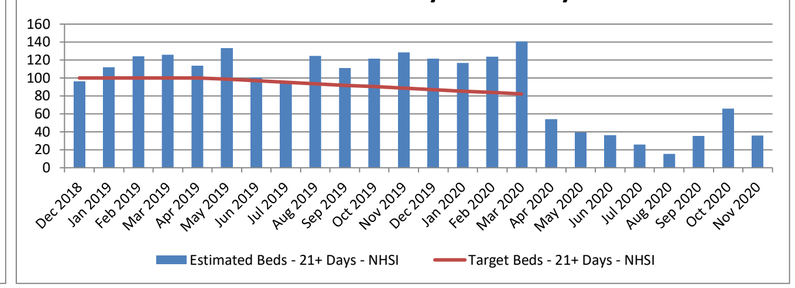

## Crude Mortality Rate




## 21+ Days Long Stay Rate - NHSI




## Estimated Bed Days - 21+ Days



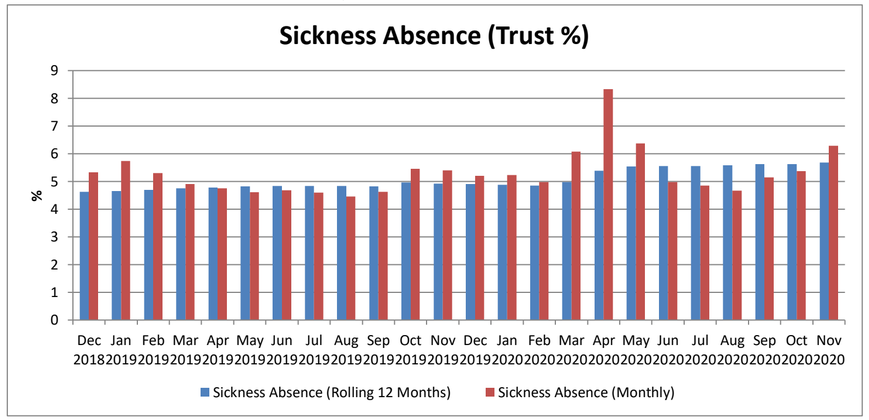

The stroke indicators in the IPR are based on ‘patient arrivals’ not ‘patient discharged’ as this monitors pathway performance rather than actual outcomes which may / may not change on discharge.
National SSNAP is based on ‘patient discharge’ which is more appropriate for outcomes based reporting.

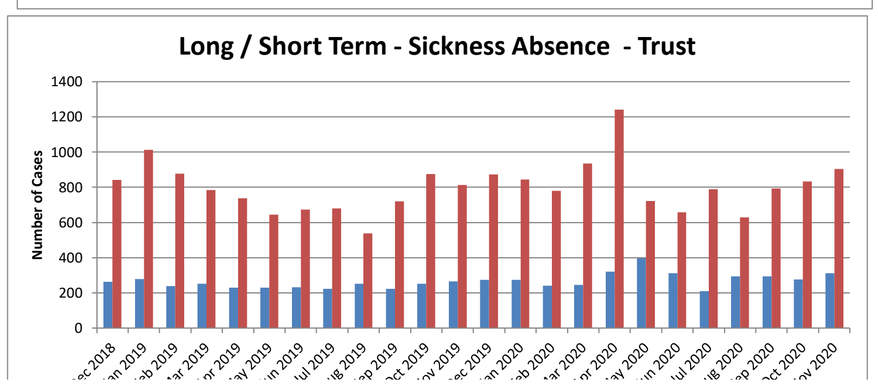
# CQC Domain - Well Led

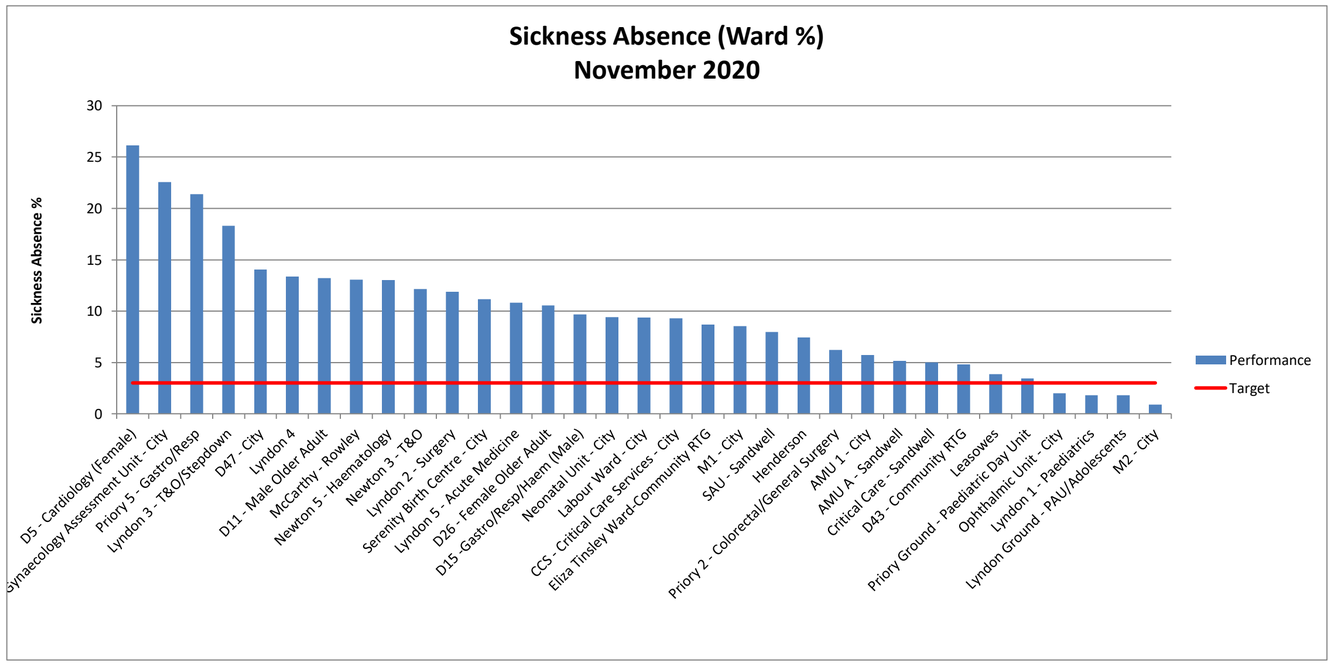
| | Kitemark | Reviewed Date | Indicator | Measure | Standard Year | Standard Month | Jun 2019 | Jul 2019 | Aug 2019 | Sep 2019 | Oct 2019 | Nov 2019 | Dec 2019 | Jan 2020 | Feb 2020 | Mar 2020 | Apr 2020 | May 2020 | Jun 2020 | Jul 2020 | Aug 2020 | Sep 2020 | Oct 2020 | Nov 2020 | 20/21 Year to Date | Group M | Group SS | Group W | Group I | Group PCCT | Group CO |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Workforce | | | 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 |
| | | | Medical Appraisal | => % | 90 | 90 | 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 | 97.0 | - | 99.6 | 94.6 | 98.2 | 97.0 | 100.0 | 97.3 | 100.0 |
| | | Apr 19 | Sickness Absence (Rolling 12 Months) | <= % | 3 | 3 | 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 | 5.6 | 5.7 | 5.6 | 6.9 | 6.2 | 5.6 | 4.4 | 5.1 | 4.9 |
| | | Apr 19 | Sickness Absence (Monthly) | <= % | 3 | 3 | 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 | 5.4 | 6.3 | 5.7 | 8.4 | 5.8 | 6.4 | 4.5 | 5.8 | 5.4 |
| | | | Sickness Absence - Long Term - (Open Cases in the month) | No | - | 140 | - | - | - | 131 | 156 | 169 | 187 | 153 | 114 | 152 | 156 | 228 | 160 | 145 | 162 | 148 | 161 | 175 | - | 56 | 25 | 29 | 4 | 17 | 44 |
| | | Apr 19 | Sickness Absence - Short Term (Monthly) | No | - | - | 674 | 681 | 539 | 719 | 875 | 814 | 872 | 845 | 779 | 936 | 1241 | 722 | 657 | 789 | 630 | 794 | 833 | 904 | - | 201 | 217 | 96 | 30 | 141 | 171 |
| | | | Ward Sickness Absence (Monthly) | <= % | 3 | 3 | 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 | 7.2 | 9.7 | 8.5 | 12.2 | 8.8 | 7.5 | - | 8.8 | - |
| | | | Mandatory Training - Health & Safety (% staff) | => % | 95 | 95 | 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 | 98.2 | 98.1 | 97.2 | 96.3 | 97.7 | 99.0 | 98.9 | 98.9 | 99.0 |
| | | | Staff at 100% compliance with mandatory training | % | - | - | 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 | 83.9 | 81.0 | 83.2 | 71.0 | 81.4 | 85.5 | - | 85.6 | - |
| | | | Staff requiring to complete 1 module to be at 100% compliance with mandatory training | % | - | - | 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 | 10.5 | 12.5 | 10.7 | 17.9 | 11.0 | 9.4 | - | 10.8 | - |
| | | | Staff requiring to complete 2 modules to be at 100% compliance with mandatory training | % | - | - | 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 | 2.8 | 3.7 | 3.0 | 5.8 | 4.0 | 3.6 | - | 2.3 | - |
| | | | 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 | 2.7 | 2.8 | 3.1 | 5.4 | 3.7 | 1.4 | - | 1.3 | - |
| | | Apr 19 | Nursing Turnover (Qualified Only) | <= % | 10.7 | 10.7 | 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 | 12.5 | 12.4 | 12.6 | 12.6 | - | - | - | - | - | - |
| | | Apr 19 | Nursing Vacancy Rate (Qualified) | <= % | 11 | 11 | 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 | 12.1 | 12.8 | 14.1 | 13.7 | 12.5 | 18.3 | 16.2 | 39.3 | 9.8 | 3.2 |
| | | Apr 19 | New Starters Complete Onboarding Process | => % | 100 | 100 | 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 | 97.2 | 93.9 | 92.7 | 97.5 | 79.6 | 100.0 | 100.0 | 90.0 | - | 93.3 | - |

| 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

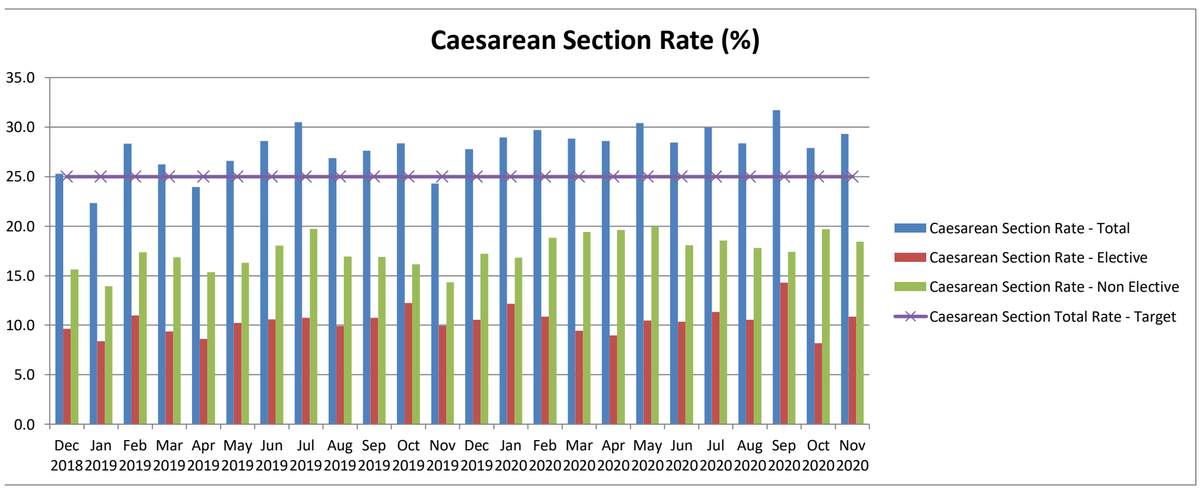


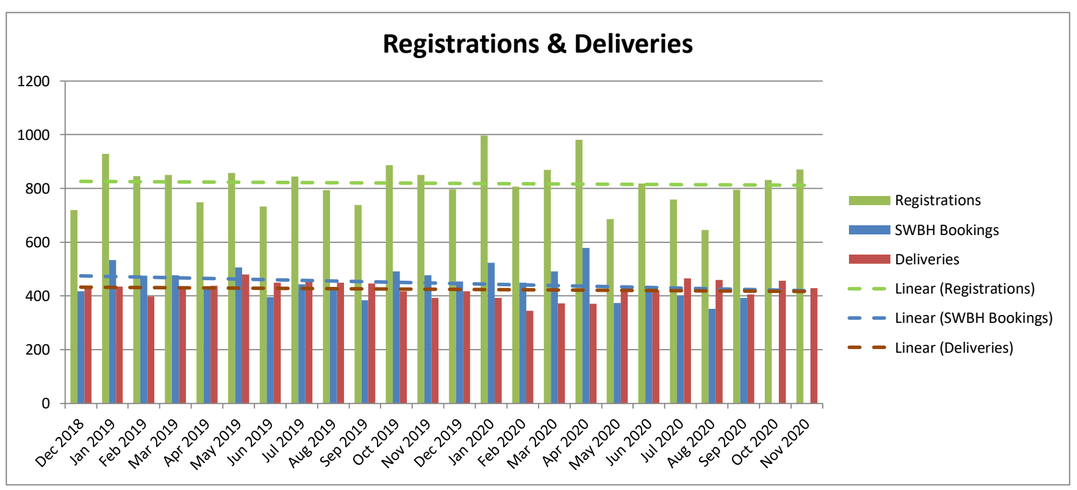



# Patient Safety - Obstetrics

| Data Quality | Last review | PAF | Indicator | Measure | Trajectory 2016-2017 Year | Trajectory 2016-2017 Month | Previous Months Trend (since Jun 2019) J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Caesarean Section Rate - Total | <= % | 25.0 | 25.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 29.3 | 29.3 | |
| | | • | Caesarean Section Rate - Elective | <= % | | | 11 | 11 | 10 | 11 | 12 | 10 | 11 | 12 | 11 | 9 | 9 | 10 | 10 | 11 | 11 | 14 | 8 | 11 | Nov 2020 | 10.9 | 10.6 | |
| | | • | Caesarean Section Rate - Non Elective | <= % | | | 18 | 20 | 17 | 17 | 16 | 14 | 17 | 17 | 19 | 19 | 20 | 20 | 18 | 19 | 18 | 17 | 20 | 18 | Nov 2020 | 18.4 | 18.7 | |
| | | •d | Maternal Deaths | <= No | 0 | 0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 0 | 1 | |
| | | | Post Partum Haemorrhage (>2000ml) | <= No | 48 | 4 | | | | | | | | | | | | | | | | | | | Nov 2020 | 3 | 30 | |
| | | | Admissions to Neonatal Intensive Care (Level 3) | <= % | 10.0 | 10.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 6.76 | 5.45 | |
| | | | Adjusted Perinatal Mortality Rate (per 1000 babies) | <= Rate1 | 8.0 | 8.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 2.33 | 8.74 | |
| | Apr-19 | | Stillbirth Rate (Corrected) (per 1000 babies) | Rate1 | | | 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 | 8.75 | 2.33 | Nov 2020 | 2.33 | 6.41 | |
| | Apr-19 | | Neonatal Death Rate (Corrected) (per 1000 babies) | Rate1 | | | 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 | 0.00 | 2.33 | Nov 2020 | 2.33 | 2.62 | |
| | | | Early Booking Assessment (<12 + 6 weeks) - SWBH Specific | => % | 85.0 | 85.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 91.3 | 92.3 | |
| | | | Early Booking Assessment (<12 + 6 weeks) - National Definition | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 153.1 | 137.9 | |
| | | | Breast Feeding Initiation (Quarterly) | => % | 74.0 | 74.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 80.62 | 82.92 | |
| | Apr-19 | • | Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) - | <= % | | | 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 | 1.0 | 1.3 | Nov 2020 | 1.28 | 1.41 | |
| | Apr-19 | • | Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%) | <= % | | | 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 | 1.0 | 1.3 | Nov 2020 | 1.28 | 1.04 | |
| | Apr-19 | • | Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%) | <= % | | | 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 | 0.8 | 1.0 | Nov 2020 | 0.96 | 0.38 | |



# CQC : Use of Resources

| | Kitemark | Reviewed Date | Indicator | Measure | Benchmark | | | | | | | Trust | | 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 | Oct 2020 | Nov 2020 | 20/21 Year to Date | Group | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | Period | Model Hospital STP Peer | Royal Wolverh NHS Trust | Walsall Healthcare NHS Trust | Dudley Group NHS Foundation Trust | Model Hospital National Median | Model Hospital Quality Account Peer | Trust Delivery | Target | | | | | | | | | | | | | | | | | | | | | | M | SS | W | I | PCCT | CO |
| Clinical Services | | | Pre-Procedure Elective Bed Days | Avg | Q4 2019/20 | 0.15 | 0.18 | 0.03 | 0.08 | 0.11 | 0.21 | 0.2 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 0.32 | 0.31 | 0.25 | 0.22 | 0.18 | 0.31 | 0.57 | 0.09 | 0.09 | 0.00 | 1.00 | - |
| | | | Pre-Procedure Non-Elective Bed Days | <= Avg | Q4 2019/20 | 0.74 | 0.64 | 0.85 | 0.82 | 0.66 | 0.54 | 0.66 | - | 0.66 | 0.72 | 0.85 | 0.67 | 0.77 | 0.61 | 0.59 | 0.63 | 0.61 | 0.49 | 0.55 | 0.38 | 0.52 | 0.28 | 0.25 | 0.33 | 0.44 | 0.53 | 0.41 | 0.63 | 0.35 | 0.16 | - | 0.67 | - |
| | | | DNA Rate - Inc Radiology (Model Hospital) | <= % | Q4 2019/20 | 8.09 | 7.31 | 9.92 | 6.63 | 7.11 | 6.75 | 8.35 | - | 7.8 | 7.9 | 8.4 | 8.1 | 8.1 | 8.3 | 8.8 | 7.7 | 7.7 | 11.7 | 9.1 | 7.5 | 8.0 | 8.6 | 9.1 | 9.4 | 9.6 | 9.2 | 8.9 | 8.2 | 11.9 | 13.7 | 0.0 | 8.7 | - |
| | | | DNA Rate - Exc Radiology (SWB) | <= % | Q3 2019/20 | n/a | - | - | - | n/a | n/a | 10.49 | - | 9.8 | 9.9 | 10.5 | 10.2 | 10.2 | 10.3 | 11.0 | 9.6 | 9.5 | 14.1 | 10.0 | 8.6 | - | 10.3 | 11.4 | 11.7 | 11.9 | 11.2 | 10.5 | 8.2 | 11.9 | 13.7 | 13.8 | 8.7 | - |
| | | | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month | <= % | Q4 2019/20 | 7.97 | 6.68 | 8.16 | 5.72 | 7.94 | 7.49 | 8.23 | - | 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 | 8.7 | 8.8 | - | 9.5 | 13.2 | 4.8 | 9.4 | 7.1 | 3.3 | - |
| Clinical Support Services | | | Top 10 Medicines - Delivery of Savings | % | To Mar2018 | - | - | - | - | 100 | - | 82 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | | | Pathology Overall Cost Per Test | £ | 2018/19 | £1.45 | £2.08 | £1.58 | £1.14 | £1.94 | £2.46 | £1.33 | - | Pathology services are provided by the Black Country Pathology Services model; costs per test are available annually only in Model Hospital | | | | | | | | | | | | | | | | | | | | | | | | | |
| People | | | Staff Retention Rate | % | To May2020 | 86 | 87.2 | 84.4 | 89.8 | 86.2 | 85.1 | 85 | - | - | - | - | - | - | - | - | - | 86.1 | 86.6 | 85.4 | 85.5 | 85.7 | 86.3 | 86.6 | 86.4 | 90.7 | 86.7 | 86.7 | 84.7 | 87.2 | 86.7 | 92.5 | 87.1 | 86.9 |
| | | | Sickness Absence (Monthly) | <= % | May2020 | 5.41 | 4.87 | 6.89 | 4.82 | 4.77 | 5.01 | 5.39 | - | 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 | 5.4 | 6.3 | 5.7 | 8.4 | 5.8 | 6.4 | 4.5 | 5.8 | 5.4 |
| | | | **Total Cost per WAU** | **£** | **2018/19** | **£3,614** | - | - | - | **£3,500** | - | **£3,359** | - | Pay and Non-Pay costs per WAU are published on Model Hospital annually after the Natoinal Cost Collection window (formerly known as Refernce Cost Submission); we are therefore unable to complete monthly trends on a per WAU basis | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | **Total Pay Cost per WAU** | **£** | **2018/19** | **£1,940** | - | - | - | **£1,923** | - | **£1,901** | - | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Clinial Staff Pay Cost WAU | £ | 2018/19 | £1,940 | - | - | - | £1,923 | - | £1,901 | - | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Substantive Medical Staff Cost Per WAU | £ | 2018/19 | £780 | £774 | £786 | £793 | £763 | - | £770 | - | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Substantive Nursing Staff Cost Per WAU | £ | 2018/19 | £924 | £839 | £948 | £1,005 | £892 | - | £901 | - | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Professional Technical and Therapies Staff Cost Per WAU | £ | 2018/19 | £236 | - | - | - | £268 | - | £230 | - | | | | | | | | | | | | | | | | | | | | | | | | | |
| Corporate services, Procurement, Estates & Facilities | | | **Total Non-Pay Cost Per WAU** | **£** | **2018/19** | **£1,674** | - | - | - | **£1,577** | - | **£1,458** | - | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | Finance Cost Per £100m Turnover | £000 | 2018/19 | 483.8k | 483.42 | 626.25 | 457.75 | 653.3 | 653.3k | 634.6k | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | ##### | - | - | - | 0.7 | - | - | - | - | - | - |
| | | | HR Cost Per £100m Turnover | £000 | 2018/19 | 686.9k | 767.49 | 1270 | 388.35 | 910.7 | 767.5k | 794.9k | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | ##### | - | - | - | 0.7 | - | - | - | - | - | - |
| | | | Estates & Facilities Cost (£ per m2) | £ | 2018/19 | - | £360 | £366 | £494 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
| | | | Procurement League Table: Process Efficiency and Price Performance Score (scaled 0 to 100) | => No | Q2 2019/20 | 54 | 58 | 43 | 50 | 57 | 57 | 74 | - | - | 74 | --> | --> | - | - | - | - | - | - | - | - | - | - | - | - | - | - | 74 | - | - | - | - | - | - |
| Finance | | | Capital Service Capacity - Value | No | Feb 20 | n/a | - | - | - | n/a | n/a | - | - | - | - | - | - | - | - | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | - | 16 | - | - | - | - | - | - |
| | | | Liquidity (Days) - Value | No | Feb 20 | n/a | - | - | - | n/a | n/a | - | - | - | - | - | - | - | - | -15 | -11 | -15 | -164 | -91 | -59 | -52 | -34 | -37 | -28 | - | -464 | - | - | - | - | - | - |
| | | | Distance From Agency Spend Cap - Value | % | Feb 20 | n/a | - | - | - | n/a | n/a | - | - | - | - | - | - | - | - | 76.0 | 75.0 | 78.0 | 70.0 | 50.0 | 31.0 | 37.0 | 22.0 | 23.0 | 27.0 | - | 37.1 | - | - | - | - | - | - |
| | | | Income and Expenditure (I &E) Margin - Value | % | Feb 20 | n/a | - | - | - | n/a | n/a | - | - | - | - | - | - | - | - | -0.4 | -0.5 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | - | 0.0 | - | - | - | - | - | - |
| | | | Distance Form Financial Plan - Value | % | Feb 20 | n/a | - | - | - | n/a | n/a | - | - | - | - | - | - | - | - | -0.1 | -0.1 | 0.0 | 5.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | - | 0.7 | - | - | - | - | - | - |

**Benchmark:**

**Quality Account Peer Group :**

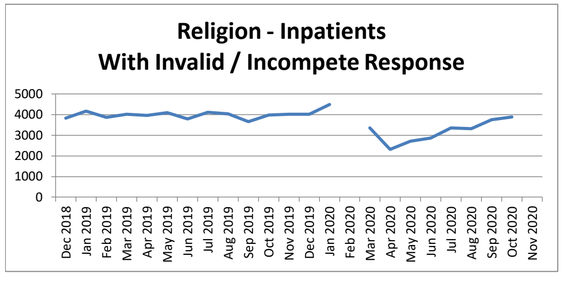
- Bradford Teaching NHS Foundation Trust (BTH)
- Kings College Hospital NHS Foundation Trust (KCH)
- Royal Liverpool & Broadgreen University NHS Foundation Trust (RLBUH)
- The Royal Wolverhampton NHS Trust (RWH)
- University Hospital Bristol NHS Foundation Trust (UH Bristol)
- Worcestershire Acute Hospital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

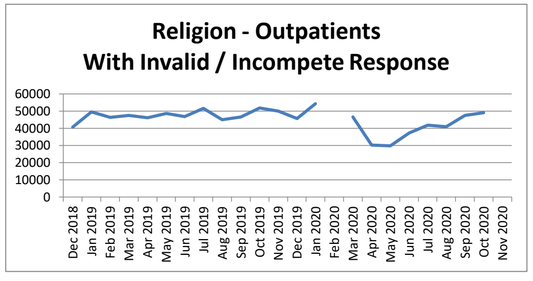
**STP FootPrint Peer Group:**

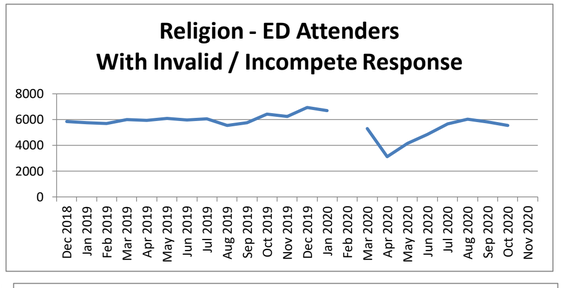
- Black Country Partnership NHS Foundation Trust
- Dudley and Walsall Mental Health Partnership NHS Trust
- Dudley Group NHS Foundation Trust
- Royal Wolverhampton NHS Trust
- Sandwell and West Birmingham Hospitals NHS Trust
- Walsall Healthcare NHS Trust
- West Midlands Ambulance Service NHS Foundation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

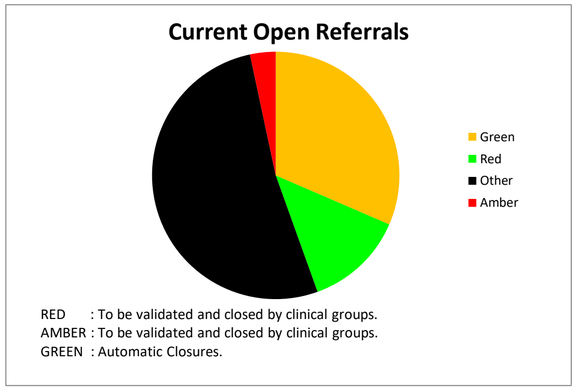
# Data Completeness

| Data Quality | Last review | PAF | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend (since Jun 2019) J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Group M | SS | W | P | I | PCCT | CO | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Data Completeness Community Services | => % | 50.0 | 50.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | | | | | | | 61.2 | 61.2 | | |
| | | | Percentage SUS Records for AE with valid entries in mandatory fields - provided by HSCIC | => % | 99.0 | 99.0 | | | | | | | | | | | | | | | - | - | - | - | Jul 2020 | | | | | | | | 71.5 | | |
| | | | Percentage SUS Records for IP care with valid entries in mandatory fields - provided by HSCIC | => % | 99.0 | 99.0 | | | | | | | | | | | | | | | - | - | - | - | Jul 2020 | | | | | | | | 97.4 | | |
| | | | Percentage SUS Records for OP care with valid entries in mandatory fields - provided by HSCIC | => % | 99.0 | 99.0 | | | | | | | | | | | | | | | - | - | - | - | Jul 2020 | | | | | | | | 99.0 | | |
| | | | Completion of Valid NHS Number Field in acute (inpatient) data set submissions to SUS | => % | 99.0 | 99.0 | 96.8 | 98.7 | 97.9 | 96.8 | 97.2 | 96.2 | 95.1 | 95.7 | 99.0 | 97.1 | 95.5 | 98.4 | 98.6 | 96.2 | - | 98.3 | 96.5 | - | Oct 2020 | | | | | | | | 96.5 | 97.5 | |
| | | | Completion of Valid NHS Number Field in acute (outpatient) data set submissions to SUS | => % | 99.0 | 99.0 | 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 | - | 99.7 | 99.8 | - | Oct 2020 | | | | | | | | 99.8 | 99.6 | |
| | | | Completion of Valid NHS Number Field in A&E data set submissions to SUS | => % | 95.0 | 95.0 | 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 | - | 91.2 | 92.0 | - | Oct 2020 | | | | | | | | 92.0 | 90.6 | |
| | | | Ethnicity Coding - percentage of inpatients with recorded response | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | - | | | - | Oct 2020 | | | | | | | | 88.1 | 87.3 | |
| | | | Ethnicity Coding - percentage of outpatients with recorded response | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | - | | | - | Oct 2020 | | | | | | | | 89.9 | 89.3 | |
| | | | Protected Characteristic - Religion - INPATIENTS with recorded response | % | | | 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 | 61.1 | - | Oct 2020 | | | | | | | | 61.1 | 63.4 | |
| | | | Protected Characteristic - Religion - OUTPATIENTS with recorded response | % | | | 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 | 46.3 | - | Oct 2020 | | | | | | | | 46.3 | 49.2 | |
| | | | Protected Characteristic - Religion - ED patients with recorded response | % | | | 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 | 54.7 | - | Oct 2020 | | | | | | | | 54.7 | 55.2 | |
| | | | Protected Characteristic - Marital Status - INPATIENTS with recorded response | % | | | 99.9 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 | - | 100.0 | 99.9 | 100.0 | 100.0 | 99.9 | 100.0 | 100.0 | 99.9 | - | Oct 2020 | | | | | | | | 99.9 | 100.0 | |
| | | | Protected Characteristic - Marital Status - OUTPATIENTS with recorded response | % | | | 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 | 34.4 | - | Oct 2020 | | | | | | | | 34.4 | 34.5 | |
| | | | Protected Characteristic - Marital Status - ED patients with recorded response | % | | | 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 | 38.4 | - | Oct 2020 | | | | | | | | 38.4 | 37.1 | |
| | | | Maternity - Percentage of invalid fields completed in SUS submission | <= % | 15.0 | 15.0 | | | | | | | | | | | | | | | - | | | - | Oct 2020 | | | | | | | | 7.3 | 6.9 | |
| | | | Open Referrals | No | | | 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 | 215,688 | 218,431 | Nov 2020 | 52,741 | 104,864 | 25,436 | - | 751 | 34,639 | | 218,431 | | |
| | | | Open Referrals without Future Activity/ Waiting List: Requiring Validation | No | | | 64,564 | 54,518 | 53,060 | 46,595 | 37,194 | 36,476 | 38,047 | 38,823 | 38,104 | 38,197 | 32,736 | 35,780 | 36,323 | 36,553 | 36,380 | 37,027 | 38,053 | 38,864 | Nov 2020 | 14,818 | 14,187 | 5,367 | - | 442 | 3,849 | | 38864 | | |

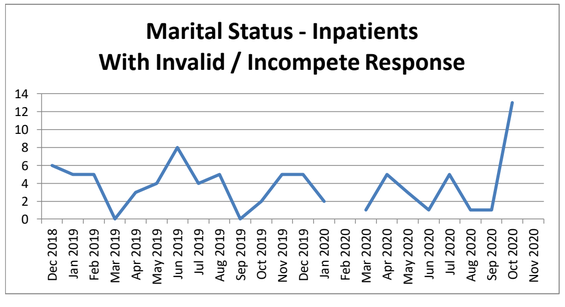


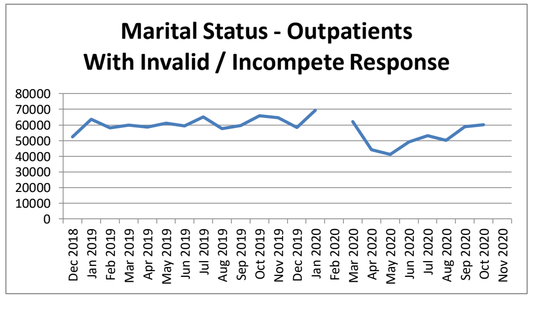



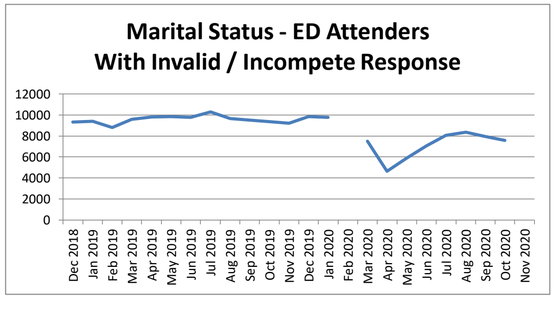




RED : To be validated and closed by clinical groups.
AMBER : To be validated and closed by clinical groups.
GREEN : Automatic Closures.



# Local Quality Indicators - 2020/2021

| Data Quality | Last review | PAF | Indicator | Measure | Trajectory | | Previous Months Trend (From Jun 2019) | | | | | | | | | | | | | | | | | | Data Period | Group | | | | | | | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | M | SS | W | P | I | PCCT | CO | | | |
| | | | WHO Safer Surgery - Audit - brief and debrief (% lists where complete) - SQPR | => % | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 99 | 100 | 100 | 99 | 100 | 100 | 100 | 99 | 99 | 100 | 99 | 100 | | Nov 2020 | 100 | 99.2 | - | | | - | | 99.7 | 99.5 | |
| | | | Morning Discharges (00:00 to 12:00) - SQPR | => % | 35 | 35 | 17 | 17 | 17 | 14 | 17 | 15 | 17 | 18 | 15 | 18 | 20 | 15 | 16 | 13 | 14 | 14 | 15 | 16 | | Nov 2020 | 16 | 12.6 | 27.1 | | | 22 | | 16.3 | 15.6 | |
| | | | ED Diagnosis Coding (Mental Health CQUIN) - SQPR | => % | 85 | 85 | 91 | 92 | 92 | 75 | 68 | 63 | 61 | 55 | 5 | 6 | 7 | 5 | 5 | 4 | 2 | 3 | 2 | 2 | | Nov 2020 | | | | | | | | 2.3 | 3.5 | |
| | | | CO Level >4ppm Referred For Smoking Cessation - SQPR | => % | 90 | 90 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | | Nov 2020 | | | | | | | | 100.0 | 100.0 | |
| | | | BMI recorded by 12+6 weeks of pregnancy - SQPR | => % | 90 | 90 | 99 | 100 | 99 | 98 | 98 | 98 | 99 | 99 | 100 | 100 | 100 | 100 | 99 | 100 | 99 | 99 | 98 | 98 | | Nov 2020 | | | | | | | | 97.6 | 99.1 | |
| | | | CO Monitoring by 12+6 weeks of pregnancy - SQPR | => % | 90 | 90 | 94 | 93 | 93 | 90 | 91 | 92 | 90 | 93 | 94 | 47 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 3 | | Nov 2020 | | | | | | | | 2.6 | 0.6 | |
| | | | Community Nursing - Falls Assessment For Appropriate Patients on home visiting caseload | => % | 100 | 100 | 97 | 97 | 97 | 96 | 93 | 91 | 93 | 95 | 93 | 92 | 96 | 93 | 92 | 93 | 92 | 89 | 89 | 88 | | Nov 2020 | | | | | | | | 88.3 | 91.6 | |
| | | | Community Nursing - Pressure Ulcer Risk Assessment For New community patients at intial assessment | => % | 95 | 95 | 98 | 97 | 96 | 96 | 93 | 92 | 93 | 96 | 93 | 92 | 96 | 93 | 92 | 93 | 92 | 89 | 90 | 89 | | Nov 2020 | | | | | | | | 88.5 | 91.7 | |

# 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 | Complete ness | Granularity | Assessment of Exec Director |
| ● | ● | ● | ● | ● | ● | ● |

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

**Key**

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

# Medicine & EC Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | EC | ACA | ACB | | | |
| Patient Safety - Inf Control | C. Difficile | <= No | 30 | 3 | | | | | | | | | | | | | | | | | | | Nov 2020 | 0 | 0 | 0 | 0 | 11 | |
| Patient Safety - Inf Control | MRSA Bacteraemia | <= No | 0 | 0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 0 | 0 | 0 | 0 | 1 | |
| Patient Safety - Inf Control | MRSA Screening - Elective (%) | => % | 95 | 95 | | | | | | | | | | | | | | | | | | | Nov 2020 | 88 | 80 | 25 | 76.7 | | |
| Patient Safety - Inf Control | MRSA Screening - Non Elective (%) | => % | 95 | 95 | | | | | | | | | | | | | | | | | | | Nov 2020 | 93 | 88 | 91 | 92.0 | | |
| Patient Safety - Harm Free Care | Number of DOLS raised | No | | | 21 | 13 | 14 | 24 | 19 | 12 | 25 | 14 | 17 | 15 | 13 | 21 | 23 | 17 | 15 | 21 | 16 | 20 | Nov 2020 | 2 | 18 | 0 | 20 | 146 | |
| Patient Safety - Harm Free Care | Number of DOLS which are 7 day urgent | No | | | 21 | 13 | 14 | 24 | 19 | 12 | 25 | 14 | 17 | 15 | 13 | 21 | 23 | 17 | 15 | 21 | 16 | 20 | Nov 2020 | 2 | 18 | 0 | 20 | 146 | |
| Patient Safety - Harm Free Care | Number of delays with LA in assessing for standard DOLS application | No | | | 11 | 2 | 4 | 0 | 4 | 3 | 6 | 3 | 4 | 0 | 2 | 1 | 3 | 3 | 3 | 2 | 4 | 2 | Nov 2020 | 0 | 2 | 0 | 2 | 20 | |
| Patient Safety - Harm Free Care | Number DOLs rolled over from previous month | No | | | 4 | 0 | 2 | 0 | 1 | 0 | 0 | 0 | 2 | 1 | 5 | 4 | 2 | 3 | 1 | 1 | 2 | 4 | Nov 2020 | 1 | 3 | 0 | 4 | 22 | |
| Patient Safety - Harm Free Care | Number patients discharged prior to LA assessment targets | No | | | 9 | 8 | 8 | 13 | 12 | 7 | 16 | 7 | 10 | 11 | 12 | 22 | 19 | 15 | 11 | 17 | 8 | 11 | Nov 2020 | 3 | 8 | 0 | 11 | 115 | |
| Patient Safety - Harm Free Care | Number of DOLs applications the LA disagreed with | No | | | 0 | 0 | 2 | 2 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | Nov 2020 | 0 | 2 | 0 | 2 | 2 | |
| Patient Safety - Harm Free Care | Number patients cognitively improved regained capacity did not require LA assessment | No | | | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 3 | Nov 2020 | 0 | 3 | 0 | 3 | - | |
| Patient Safety - Harm Free Care | Falls | <= No | 0 | 0 | 47 | 58 | 58 | 39 | - | 34 | 47 | 46 | 42 | 65 | 21 | 35 | 44 | 51 | 44 | 54 | 44 | 60 | Nov 2020 | 12 | - | - | 60 | 353 | |
| Patient Safety - Harm Free Care | Falls - Death or Severe Harm | <= No | 0 | 0 | 1 | 2 | 0 | 0 | - | 1 | 0 | 1 | 1 | 0 | 0 | 1 | 1 | 2 | 0 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 4 | |
| Patient Safety - Harm Free Care | Pressure Ulcer SWB Hospital Acquired - Total | <= No | 0 | 0 | 16 | 14 | 12 | 15 | 12 | 3 | 14 | 14 | 17 | 18 | 15 | 17 | 6 | 7 | 11 | 10 | 23 | 26 | Nov 2020 | 2 | - | - | 26 | 115 | |
| Patient Safety - Harm Free Care | Venous Thromboembolism (VTE) Assessments | => % | 95.0 | 95.0 | | | | | | - | | | | | | | | | | | | | Nov 2020 | 97.8 | 96.2 | 96.9 | 97.3 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections | => % | 100.0 | 100.0 | | | | - | | | | | | | | | | | | | | | Nov 2020 | 100.0 | 100.0 | 100.0 | 100.0 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections and brief | => % | 100.0 | 100.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 100 | 100 | 100 | 100.0 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief | => % | 100.0 | 100.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 100 | 100 | 100 | 100.0 | | |
| Patient Safety - Harm Free Care | Never Events | <= No | 0 | 0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Medication Errors | <= No | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 1 | |
| Patient Safety - Harm Free Care | Serious Incidents | <= No | 0 | 0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 2 | 2 | 0 | 4 | 24 | |
| Clinical Effect - Mort & Read | Mortality Reviews within 42 working days | => % | 100 | 98 | | | | | | | | | | | | | | | | - | - | | Sep 2020 | 94 | 100 | 100 | 96 | | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month | % | | | 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 | 13.3 | 13.2 | - | Oct 2020 | | | | 13.2 | | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative | % | | | 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 | 13.6 | 13.6 | - | Oct 2020 | | | | | 13.4 | |

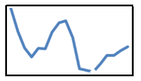
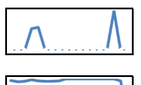
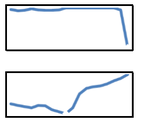
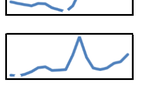
# Medicine & EC Group

| Section | Indicator | | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | EC | AC | SC | | | |
| Clinical Effect - Stroke & Card | Pts spending >90% stay on Acute Stroke Unit (%) | => % | 90.0 | 90.0 | 92.98 | 92.86 | 98.33 | - | - | - | - | - | - | 93.65 | - | - | 86.67 | - | 87.5 | - | 85 | - | Oct 2020 | | - | | 85.0 | 88.2 | |
| Clinical Effect - Stroke & Card | Pts admitted to Acute Stroke Unit within 4 hrs (%) | => % | 90.0 | 90.0 | 59.65 | 72.34 | 80 | - | - | - | - | - | - | 78.72 | - | - | 84.44 | - | 81.82 | - | 66.67 | - | Oct 2020 | | - | | 66.7 | 78.1 | |
| Clinical Effect - Stroke & Card | Pts receiving CT Scan within 1 hr of presentation (%) | => % | 50.0 | 50.0 | 61.4 | 64.58 | 73.91 | - | - | - | - | - | - | - | - | - | 87.5 | - | 89.13 | - | 83.61 | - | Oct 2020 | | - | | 83.6 | 85.3 | |
| Clinical Effect - Stroke & Card | Pts receiving CT Scan within 24 hrs of presentation (%) | => % | 100.0 | 100.0 | 100 | 95.83 | 100 | - | - | - | - | - | - | - | - | - | 100 | - | 100 | - | 98.36 | - | Oct 2020 | | - | | 98.4 | 99.1 | |
| Clinical Effect - Stroke & Card | Stroke Admission to Thrombolysis Time (% within 60 mins) | => % | 85.0 | 85.0 | 85.7 | 83.3 | 60.0 | - | - | - | - | - | - | 50.0 | - | - | 50.0 | - | 50.0 | - | 80.0 | - | Oct 2020 | | - | | 80.0 | 70.3 | |
| Clinical Effect - Stroke & Card | Stroke Admissions - Swallowing assessments (<24h) (%) | => % | 98.0 | 98.0 | 100 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Jun 2019 | | - | | 100.0 | 100.0 | |
| Clinical Effect - Stroke & Card | TIA (High Risk) Treatment <24 Hours from receipt of referral (%) | => % | 70.0 | 70.0 | 100 | 87.5 | 73.33 | 68.18 | 65.38 | 88.24 | 80 | 65.22 | 83.33 | 80 | - | - | 92.31 | - | 100 | - | - | - | Aug 2020 | | - | | 100.0 | 86.1 | |
| Clinical Effect - Stroke & Card | TIA (Low Risk) Treatment <7 days from receipt of referral (%) | => % | 75.0 | 75.0 | 83.33 | 88.89 | 84.21 | 90 | 88 | 61.11 | 61.9 | 61.11 | 76.19 | 67.57 | - | - | 100 | - | - | - | - | - | Jun 2020 | | - | | 100.0 | 91.3 | |
| Clinical Effect - Stroke & Card | Primary Angioplasty (Door To Balloon Time 90 mins) (%) | => % | 80.0 | 80.0 | 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 | 81.82 | 87.5 | Nov 2020 | | 87.5 | | 87.5 | 90.5 | |
| Clinical Effect - Stroke & Card | Primary Angioplasty (Call To Balloon Time 150 mins) (%) | => % | 80.0 | 80.0 | 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 | 88.89 | 87.5 | Nov 2020 | | 87.5 | | 87.5 | 86.9 | |
| Clinical Effect - Stroke & Card | Rapid Access Chest Pain - seen within 14 days (%) | => % | 98.0 | 98.0 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | 100 | Nov 2020 | | 100.0 | | 100.0 | 100.0 | |
| Clinical Effect - Cancer | 2 weeks | => % | 93.0 | 93.0 | 🔴 | 🟢 | 🔴 | 🟢 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🟢 | - | Oct 2020 | | | 97.2 | 97.2 | | |
| Clinical Effect - Cancer | 31 Day (diagnosis to treatment) | => % | 96.0 | 96.0 | 🔴 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | - | Oct 2020 | | | 100.0 | 100.0 | | |
| Clinical Effect - Cancer | 62 Day (urgent GP referral to treatment) | => % | 85.0 | 85.0 | 🟢 | 🔴 | 🔴 | 🟢 | 🔴 | 🟢 | 🔴 | 🔴 | 🟢 | 🟢 | 🔴 | 🔴 | 🔴 | 🔴 | 🟢 | 🔴 | 🔴 | - | Oct 2020 | | | 57.9 | 68.0 | | |
| Clinical Effect - Cancer | Cancer = Patients Waiting Over 62 days for treatment | No | | | 2 | 5 | 4 | 2 | 3.5 | 1 | 3.5 | 3.5 | 1.5 | 1 | - | 4 | 3 | 2.5 | 0 | 3.5 | 4 | - | Oct 2020 | - | 0.00 | 4.00 | 4.00 | 17 | |
| Clinical Effect - Cancer | Cancer - Patients Waiting Over 104 days for treatment | No | | | 0 | 1.5 | 1.5 | 2 | 1 | 1 | 2.5 | 2.5 | 1 | 0 | - | 0 | 1 | 1.5 | 0 | 2.5 | 0.5 | - | Oct 2020 | - | 0.00 | 0.50 | 0.50 | 6 | |
| Clinical Effect - Cancer | Cancer - Longest wait for treatment (days) | No | | | 91 | 149 | 147 | 83 | 141 | 149 | 145 | 133 | 156 | 79 | - | 91 | 173 | 134 | 62 | 210 | 130 | - | Oct 2020 | - | 41 | 130 | 130 | | |
| Clinical Effect - Cancer | Neutropenia Sepsis<br>Door to Needle Time Greater than 1hr | <= No | 0.0 | 0.0 | 3 | 3 | 4 | 6 | 6 | 9 | 15 | 7 | 11 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 5 | Nov 2020 | - | 5 | 0 | 5 | 21 | |
| Pt. Experience - FFT,MSA,Comp | Mixed Sex Accommodation Breaches | <= No | 0.0 | 0.0 | 0 | 31 | 0 | 9 | - | - | - | - | 401 | - | - | - | - | - | - | - | - | - | May 2020 | - | - | - | - | - | |
| Pt. Experience - FFT,MSA,Comp | No. of Complaints Received (formal and link) | No | | | 26 | 31 | 24 | 21 | 37 | 31 | 29 | 40 | 36 | 32 | 14 | 19 | 32 | 52 | 34 | 37 | 37 | 44 | Nov 2020 | 21 | 23 | 0 | 44 | 269 | |
| Pt. Experience - FFT,MSA,Comp | No. of Active Complaints in the System (formal and link) | No | | | 37 | 58 | 48 | 47 | 54 | 50 | 50 | 58 | 68 | 59 | 49 | 51 | 54 | 52 | 61 | 89 | 121 | 157 | Nov 2020 | 76 | 81 | 0 | 157 | | |

# Medicine & EC Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | EC | AC | SC | | | |
| Pt. Experience - Cancellations | Elective Admissions Cancelled at last minute for non-clinical reasons | <= % | 0.8 | 0.8 | | | | | | | | | | | | | | | | | | Nov 2020 | 1.96 | 1.08 | 1.04 | 1.14 | | |
| 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 | - | Oct 2020 | 0.0 | 0.0 | 0.0 | 0 | 0 | |
| Pt. Experience - Cancellations | Sitrep Declared Late Cancellations | <= No | 0 | 0 | 0 | 0 | 0 | 5 | 3 | 12 | 5 | 14 | 5 | 3 | 0 | 2 | 9 | 7 | 0 | 7 | 10 | - | Oct 2020 | 0.0 | 10.0 | 0.0 | 10 | 35 | |
| Pt. Experience - Cancellations | Urgent Cancellations | No | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | - | Oct 2020 | 0.00 | 0.00 | 0.00 | 0.00 | 0 | |
| Emergency Care & Pt. Flow | Emergency Care 4-hour waits (%) | => % | 95.0 | 95.0 | | | | | | | | | | | | | | | | | | Nov 2020 | 73.1 | 82.8 | Site S/C | 78.1 | 83.6 | |
| Emergency Care & Pt. Flow | Emergency Care 4-hour breach (numbers) | No | | | 2570 | 2695 | 2549 | 2032 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Emergency Care & Pt. Flow | Emergency Care Trolley Waits >12 hours | <= No | 0 | 0 | | | | | | | | | | | | | | | | | | Nov 2020 | 1.0 | 1.0 | Site S/C | 2 | 6 | |
| Emergency Care & Pt. Flow (Group Sheet Only) | Emergency Care Timeliness - Time to Initial Assessment (95th centile) | <= No | 15.0 | 15.0 | | | | | | | | | | | | | | | | | | Nov 2020 | 31.0 | 29.0 | Site S/C | 29 | 24 | |
| Emergency Care & Pt. Flow (Group Sheet Only) | Emergency Care Timeliness - Time to Treatment in Department (median) | <= No | 60.0 | 60.0 | | | | | | | | | | | | | | | | | | Nov 2020 | 41.0 | 35.0 | Site S/C | 37 | 31 | |
| Emergency Care & Pt. Flow | Emergency Care Patient Impact - Unplanned Reattendance Rate (%) | <= % | 5.0 | 5.0 | | | | | | | | | | | | | | | | | | Nov 2020 | 6.8 | 7.5 | Site S/C | 7.2 | 8.1 | |
| Emergency Care & Pt. Flow | Emergency Care Patient Impact - Left Department Without Being Seen Rate (%) | <= % | 5.0 | 5.0 | | | | | | | | | | | | | | | | | | Nov 2020 | 3.8 | 3.6 | Site S/C | 3.7 | 4.1 | |
| Emergency Care & Pt. Flow | WMAS - Finable Handovers (emergency conveyances) 30 - 60 mins (number) | <= No | 0 | 0 | 128 | 123 | 162 | 238 | 251 | 228 | 279 | 199 | 242 | 380 | 234 | 172 | 77 | 183 | 172 | 161 | 267 | 186 | Nov 2020 | 139 | 47 | | 186 | 1452 | |
| Emergency Care & Pt. Flow | WMAS -Finable Handovers (emergency conveyances) >60 mins (number) | <= No | 0 | 0 | 4 | 5 | 9 | 33 | 16 | 9 | 12 | 9 | 32 | 42 | 8 | 1 | 0 | 0 | 3 | 9 | 43 | 31 | Nov 2020 | 12 | 19 | | 31 | 95 | |
| Emergency Care & Pt. Flow | WMAS - Turnaround Delays > 60 mins (% all emergency conveyances) | <= % | 0.02 | 0.02 | | | | | | | | | | | | | #DIV/0! | | | | | Nov 2020 | 0.54 | 1.02 | | 0.75 | 0.35 | |
| Emergency Care & Pt. Flow | WMAS - Emergency Conveyances (total) | No | | | 4555 | 4658 | 4486 | 4484 | 4656 | 4721 | 4887 | 4848 | 4522 | 4588 | 3069 | 3282 | 3039 | 3951 | 4209 | 4065 | 4323 | 4106 | Nov 2020 | 2238 | 1868 | | 4106 | 30044 | |
| Emergency Care & Pt. Flow | Inpatients Staying 21+ Days At Month End Census - NHSI | No | | | 112 | 112 | 101 | 128 | 132 | 128 | 130 | 128 | 144 | 129 | 45 | 38 | 40 | 39 | 32 | 46 | 53 | 63 | Nov 2020 | 29 | 7 | | 63 | - | |
| Emergency Care & Pt. Flow | 21+ Days Long Stay Rate - NHSI | % | | | 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 | 7.4439 | 8.8308 | Nov 2020 | 8 | 16 | | 9 | 10 | |
| Emergency Care & Pt. Flow | Estimated Beds - 21+ Days - NHSI | No | | | 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 | 21.71 | 27.57 | Nov 2020 | 13 | 6 | | 28 | - | |
| RTT | RTT - Admittted Care (18-weeks) (%) | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | | | | Nov 2020 | - | 84.4 | 100.0 | 86.1 | | |
| RTT | RTT - Non Admittted Care (18-weeks) (%) | => % | 95.0 | 95.0 | | | | | | | | | | | | | | | | | | Nov 2020 | - | 62.7 | 64.7 | 63.8 | | |
| RTT | RTT - Incomplete Pathway (18-weeks) (%) | => % | 92.0 | 92.0 | | | | | | | | | | | | | | | | | | Nov 2020 | - | 88.3 | 68.1 | 74.9 | | |
| RTT | RTT - Backlog | <= No | 0 | 0 | 515 | 568 | 451 | 525 | 483 | 559 | 579 | 601 | 695 | 1034 | 1639 | 2372 | 2944 | 2989 | 2501 | 1969 | 1542 | 1355 | Nov 2020 | 0 | 212 | 1143 | 1355 | | |
| RTT | Patients Waiting >52 weeks | <= No | 0 | 0 | 4 | 1 | 7 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 34 | 46 | 28 | Nov 2020 | 0 | 20 | 8 | 28 | | |
| RTT | Treatment Functions Underperforming | <= No | 0 | 0 | 6 | 6 | 5 | 7 | 6 | 9 | 7 | 7 | 7 | 10 | 10 | 8 | 11 | 12 | 12 | 11 | 10 | 10 | Nov 2020 | 0 | 6 | 4 | 10 | | |
| RTT | Acute Diagnostic Waits in Excess of 6-weeks (%) | <= % | 1.0 | 1.0 | | | | | | | | | | | | | | | | | | Nov 2020 | - | - | - | 18.59 | | |

# Medicine & EC Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | EC | AC | SC | | | |
| Data Completeness | Open Referrals | No | | | 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 | 52,368 | 52,741 | Nov 2020 | 12,958 | 21,556 | 18,227 | 52741 | |  |
| Data Completeness | Open Referrals without Future Activity/ Waiting List: Requ | No | | | 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 | 14,417 | 14,818 | Nov 2020 | 7,275 | 4,863 | 2,680 | 14818 | | |
| Workforce | PDRs - 12 month rolling (%) | => % | 95.0 | 95.0 | - | - | - | 🔴 | 🔴 | - | - | - | - | - | - | - | - | - | - | 🔴 | - | - | Sep 2020 | 85.89 | 90.16 | 87.98 | | 87.8 |  |
| Workforce | Medical Appraisal and Revalidation | => % | 95.0 | 95.0 | 🟢 | 🔴 | 🔴 | 🟢 | 🔴 | 🔴 | 🔴 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🔴 | - | Oct 2020 | 94.85 | 97.22 | 92.31 | | 99.3 |  |
| Workforce | Sickness Absence - 12 month rolling (%) | <= % | 3.00 | 3.00 | 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 | 6.66 | 6.85 | Nov 2020 | 6.03 | 7.17 | 7.65 | 6.85 | 6.41 |  |
| Workforce | Sickness Absence - In month | <= No | 3.00 | 3.00 | 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 | 7.05 | 8.36 | Nov 2020 | 6.43 | 8.63 | 10.60 | 8.36 | 7.36 | |
| Workforce | Sickness Absence - Long Term - In month | No | | | 39 | 42 | 47 | 45 | 52 | 59 | 57 | 60 | 47 | 58 | 91 | 95 | 66 | 42 | 66 | 77 | 66 | 70 | Nov 2020 | 24 | 16 | 30 | 70 | 626 | |
| Workforce | Sickness Absence - Short Term - In month | No | | | 188 | 153 | 142 | 177 | 209 | 176 | 183 | 195 | 188 | 299 | 338 | 175 | 162 | 191 | 166 | 201 | 221 | 201 | Nov 2020 | 84 | 41 | 76 | 201 | 1820 |  |
| Workforce | Mandatory Training (%) | => % | 95.0 | 95.0 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | - | - | - | - | - | - | - | - | - | - | Jan 2020 | 84.12 | - | - | | 87.6 |  |

# Surgical Services Group

| Section | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate GS | SS | TH | An | O | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Patient Safety - Inf Control | C. Difficile | <= No | 7 | 1 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Inf Control | MRSA Bacteraemia | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Inf Control | MRSA Screening - Elective | => % | 95 | 95 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 93.16 | 84.91 | - | 0 | 48.89 | 80.0 | | |
| Patient Safety - Inf Control | MRSA Screening - Non Elective | => % | 95 | 95 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 94.83 | 87.86 | - | 100 | 83.33 | 92.3 | | |
| Patient Safety - Harm Free Care | Number of DOLS raised | No | | | 8 | 7 | 9 | 8 | 8 | 8 | 7 | 13 | 9 | 9 | 10 | 16 | 14 | 12 | 6 | 13 | 13 | 12 | Nov 2020 | 10 | 0 | 0 | 2 | 0 | 12 | 96 | |
| Patient Safety - Harm Free Care | Number of DOLS which are 7 day urgent | No | | | 8 | 7 | 9 | 8 | 8 | 8 | 7 | 13 | 9 | 9 | 10 | 16 | 14 | 12 | 6 | 13 | 13 | 12 | Nov 2020 | 10 | 0 | 0 | 2 | 0 | 12 | 96 | |
| Patient Safety - Harm Free Care | Number of delays with LA in assessing for standard DOLS application | No | | | 1 | 1 | 1 | 2 | 0 | 0 | 0 | 2 | 0 | 0 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 9 | |
| Patient Safety - Harm Free Care | Number DOLs rolled over from previous month | No | | | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 6 | 2 | 2 | 4 | 1 | 1 | 1 | 1 | 3 | Nov 2020 | 2 | 0 | 0 | 1 | 0 | 3 | 15 | |
| Patient Safety - Harm Free Care | Number patients discharged prior to LA assessment targets | No | | | 6 | 2 | 7 | 5 | 6 | 4 | 5 | 9 | 6 | 12 | 9 | 10 | 15 | 10 | 4 | 10 | 9 | 13 | Nov 2020 | 10 | 0 | 0 | 3 | 0 | 13 | 80 | |
| Patient Safety - Harm Free Care | Number of DOLs applications the LA disagreed with | No | | | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Falls | <= No | 0 | 0 | 12 | 6 | 9 | 16 | - | 11 | 13 | 20 | 8 | 16 | 20 | 12 | 8 | 8 | 12 | 7 | 5 | 12 | Nov 2020 | 5 | 6 | - | - | 1 | 12 | 84 | |
| 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 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Pressure Ulcer SWB Hospital Acquired - Total | <= No | 0 | 0 | 7 | 6 | 8 | 8 | 7 | 4 | 6 | 13 | 9 | 7 | 16 | 5 | 7 | 2 | 5 | 9 | 7 | 9 | Nov 2020 | 1 | 4 | - | 4 | - | 9 | 60 | |
| Patient Safety - Harm Free Care | Venous Thromboembolism (VTE) Assessments | => % | 95.0 | 95.0 | ● | ● | ● | ● | ● | - | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 95.98 | 95.9 | - | 100 | 98.71 | 97.3 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections | => % | 100.0 | 100.0 | ● | ● | ● | - | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 100 | 100 | 100 | 100 | 100 | 100.0 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections and brief | => % | 100.0 | 100.0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | - | 100 | 100 | - | 100 | 100.0 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief | => % | 100.0 | 100.0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | - | 93.33 | 100 | - | 100 | 99.2 | | |
| Patient Safety - Harm Free Care | Never Events | <= No | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Medication Errors | <= No | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Serious Incidents | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 1 | 0 | 1 | 6 | |
| Clinical Effect - Mort & Read | Mortality Reviews within 42 working days | => % | 100 | 98.0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | - | - | Sep 2020 | 100 | - | - | - | - | 100.0 | | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month | % | | | 4.8 | 4.8 | 4.5 | 4.6 | 3.7 | 4.1 | 3.7 | 3.6 | 4.2 | 5.7 | 10.4 | 6.3 | 4.8 | 4.2 | 5.1 | 5.0 | 4.8 | - | Oct 2020 | | | | | | 4.8 | | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative | % | | | 6.07 | 5.84 | 5.63 | 5.48 | 5.32 | 5.13 | 4.87 | 4.75 | 4.61 | 4.54 | 4.56 | 4.48 | 4.47 | 4.41 | 4.45 | 4.48 | 4.61 | - | Oct 2020 | | | | | | | 4.5 | |

# Surgical Services Group

| Section | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate GS | SS | TH | An | O | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clinical Effect - Cancer | 2 weeks | => % | 93.0 | 93.0 | | | | | | | | | | | | | | | | | | - | Oct 2020 | 93.5 | - | - | - | - | 93.53 | | |
| Clinical Effect - Cancer | 2 weeks (Breast Symptomatic) | => % | 93.0 | 93.0 | | | | | | | | | | | | | | | | | | - | Oct 2020 | 94.4 | - | - | - | - | 94.44 | | |
| Clinical Effect - Cancer | 31 Day (diagnosis to treatment) | => % | 96.0 | 96.0 | | | | | | | | | | | | | | | | | | - | Oct 2020 | 89.8 | - | - | - | - | 89.83 | | |
| Clinical Effect - Cancer | 62 Day (urgent GP referral to treatment) | => % | 85.0 | 85.0 | | | | | | | | | | | | | | | | | | - | Oct 2020 | 76.9 | - | - | - | - | 76.92 | | |
| Clinical Effect - Cancer | Cancer = Patients Waiting Over 62 days for treatment | No | | | 4 | 3 | 6 | 5 | 4 | 4 | 6 | 6 | 2 | 4 | - | 7 | 6 | 8 | 6 | 14 | 8 | - | Oct 2020 | - | - | - | - | - | 7.5 | 48 | |
| Clinical Effect - Cancer | Cancer - Patients Waiting Over 104 days for treatment | No | | | 1 | 1 | 3 | 1 | 1 | 4 | 3 | 4 | 0 | 1 | - | 3 | 4 | 5 | 1 | 5 | 3 | - | Oct 2020 | 2.5 | - | 0 | - | - | 2.5 | 20 | |
| Clinical Effect - Cancer | Cancer - Longest wait for treatment (days) | No | | | 111 | 105 | 168 | 167 | 137 | 202 | 239 | 204 | 102 | 166 | - | 228 | 141 | 177 | 234 | 248 | 258 | - | Oct 2020 | 258 | - | 0 | - | - | 258 | | |
| Clinical Effect - Cancer | Neutropenia Sepsis<br>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 | Nov 2020 | 0 | - | 0 | - | - | 0 | 0 | |
| Pt. Experience - FFT,MSA,Comp | Mixed Sex Accommodation Breaches | <= No | 0 | 0 | 9 | 13 | 7 | 7 | - | - | - | - | 57 | - | - | - | - | - | - | - | - | - | May 2020 | - | - | - | - | - | - | - | |
| Pt. Experience - FFT,MSA,Comp | No. of Complaints Received (formal and link) | No | | | 18 | 22 | 15 | 22 | 42 | 28 | 19 | 26 | 32 | 25 | 12 | 9 | 19 | 43 | 8 | 19 | 27 | 21 | Nov 2020 | 8 | 3 | 0 | 0 | 10 | 21 | 158 | |
| Pt. Experience - FFT,MSA,Comp | No. of Active Complaints in the System (formal and link) | No | | | 30 | 38 | 26 | 33 | 41 | 32 | 19 | 30 | 41 | 28 | 27 | 28 | 34 | 43 | 29 | 43 | 64 | 78 | Nov 2020 | 40 | 6 | 3 | 4 | 25 | 78 | | |
| Pt. Experience - Cancellations | Elective Admissions Cancelled at last minute for non-clinical reasons | <= % | 0.8 | 0.8 | | | | | | | | | | | | | | | | | | | Nov 2020 | 1.5 | 0.82 | - | - | 0.83 | 0.93 | | |
| 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 | 4 | - | Oct 2020 | 2 | 2 | 0 | 0 | 0 | 4 | 4 | |
| Pt. Experience - Cancellations | Sitrep Declared Late Cancellations | <= No | 0 | 0 | 32 | 39 | 27 | 42 | 55 | 32 | 54 | 35 | 40 | 21 | 0 | 1 | 4 | 10 | 15 | 22 | 23 | - | Oct 2020 | 11 | 3 | 0 | 0 | 9 | 23 | 75 | |
| Pt. Experience - Cancellations | Urgent Cancellations | <= No | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | - | Oct 2020 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | |
| Emergency Care & Pt. Flow | Emergency Care 4-hour breach (%) | => % | 95.0 | 95.0 | 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 | 91.9 | 94.3 | Nov 2020 | - | - | - | - | 94.33 | - | - | |
| Emergency Care & Pt. Flow | Emergency Care 4-hour breach (numbers) | <= No | 0 | 0 | 94 | 148 | 144 | 165 | 88 | 72 | 41 | 48 | 21 | 23 | 3 | 2 | 15 | 32 | 47 | 45 | 55 | 44 | Nov 2020 | 0 | 0 | 0 | 0 | 44 | 44 | 243 | |
| Emergency Care & Pt. Flow | Emergency Care Trolley Waits >12 hours | <= No | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | - | - | - | - | 0 | - | - | |
| Emergency Care & Pt. Flow | Emergency Care Patient Impact - Unplanned Reattendance Rate (%) | <= % | 5.0 | 5.0 | 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 | 5.0 | 5.6 | Nov 2020 | - | - | - | - | 5.56 | - | - | |
| Emergency Care & Pt. Flow | Emergency Care Patient Impact - Left Department Without Being Seen Rate (%) | <= % | 5.0 | 5.0 | 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 | 2.4 | 2.6 | Nov 2020 | - | - | - | - | 2.55 | - | - | |
| Emergency Care & Pt. Flow | Emergency Care Timeliness - Time to Initial Assessment (95th centile) | <= No | 15 | 15 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2018 | - | - | - | - | 123 | 0 | 0 | |
| Emergency Care & Pt. Flow | Emergency Care Timeliness - Time to Treatment in Department (median) | <= No | 60 | 60 | 6 | 3 | 10 | 7 | 12 | 12 | 6 | 7 | 6 | 12 | 23 | 2 | 11 | 3 | 5 | 3 | 38 | 7 | Nov 2020 | 4.57 | 1.17 | - | 0 | 0.77 | 6.51 | 91 | |
| Emergency Care & Pt. Flow | Hip Fractures BPT (Operation < 36 hours of admissions | => % | 85.0 | 85.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | | | | | | 85.0 | 74.2 | |
| Emergency Care & Pt. Flow | Inpatients Staying 21+ Days At Month End Census - NHSI | No | | | 10 | 15 | 16 | 23 | 21 | 17 | 25 | 24 | 28 | 29 | 15 | 18 | 12 | 12 | 16 | 21 | 17 | 9 | Nov 2020 | 5 | 3 | 0 | 0 | 1 | 9 | - | |
| Emergency Care & Pt. Flow | 21+ Days Long Stay Rate - NHSI | % | | | 5 | 3 | 8 | 6 | 10 | 9 | 5 | 7 | 6 | 12 | 39 | 4 | 16 | 3 | 6 | 4 | 29 | 8 | Nov 2020 | 8.98 | 6.34 | - | 0 | 4.76 | 7.61 | 15 | |
| Emergency Care & Pt. Flow | Estimated Beds - 21+ Days - NHSI | No | | | 6 | 3 | 10 | 7 | 12 | 12 | 6 | 7 | 6 | 12 | 23 | 2 | 11 | 3 | 5 | 3 | 38 | 7 | Nov 2020 | 4.57 | 1.17 | - | 0 | 0.77 | 6.51 | - | |

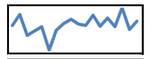
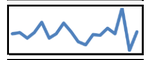
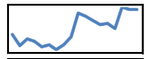
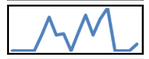
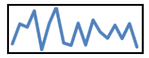
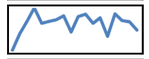
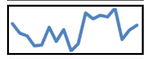
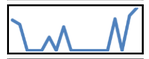
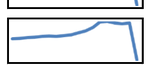
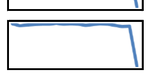
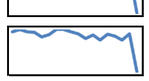
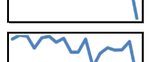
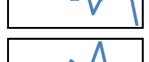
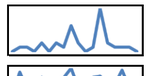
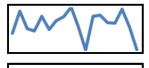
# Surgical Services Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | GS | SS | TH | An | O | | | |
| RTT | RTT - Admittted Care (18-weeks) (%) | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 62.2 | 61.5 | - | - | 62.5 | 62.3 | | |
| RTT | RTT - Non Admittted Care (18-weeks) (%) | => % | 95.0 | 95.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 84.5 | 90.7 | - | - | 89.1 | 87.9 | | |
| RTT | RTT - Incomplete Pathway (18-weeks) (%) | => % | 92.0 | 92.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 71.3 | 73.0 | - | - | 80.3 | 74.8 | | |
| RTT | RTT - Backlog | <= No | 0 | 0 | 1630 | 1722 | 1711 | 1668 | 1690 | 1573 | 1480 | 1382 | 1378 | 1643 | 2721 | 4298 | 6903 | 8409 | 7097 | 5820 | 5117 | 4887 | Nov 2020 | 2610 | 921 | 0 | 0 | 1356 | 4887 | | |
| RTT | Patients Waiting >52 weeks | <= No | 0 | 0 | 19 | 7 | 5 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 7 | 32 | 80 | 142 | 203 | 297 | 406 | 512 | Nov 2020 | 132 | 54 | 0 | 0 | 326 | 512 | | |
| RTT | Treatment Functions Underperforming | <= No | 0 | 0 | 15 | 16 | 16 | 13 | 12 | 13 | 12 | 11 | 11 | 11 | 11 | 13 | 18 | 18 | 18 | 18 | 21 | 21 | Nov 2020 | 12 | 6 | 0 | 0 | 3 | 21 | | |
| RTT | Acute Diagnostic Waits in Excess of 6-weeks (%) | <= % | 1.0 | 1.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 31.1 | - | - | - | - | 31.09 | | |
| Data Completeness | Open Referrals | No | | | 108,313 | 106,808 | 107,224 | 104,317 | 105,170 | 105,645 | 106,065 | 104,786 | 104,619 | 104,392 | 99,486 | 98,167 | 98,850 | 100,115 | 101,729 | 102,705 | 103,707 | 104,864 | Nov 2020 | 35,741 | 13,881 | 0 | 4,945 | 50,297 | 104864 | | |
| Data Completeness | Open Referrals without Future Activity/ Waiting List: Rec | No | | | 24,862 | 20,182 | 20,403 | 16,396 | 12,243 | 12,318 | 12,848 | 13,069 | 12,672 | 13,789 | 11,899 | 12,476 | 12,641 | 12,933 | 13,059 | 13,252 | 14,040 | 14,187 | Nov 2020 | 5,033 | 2,824 | 0 | 2,294 | 4,036 | 14187 | | |
| Workforce | PDRs - 12 month rolling | => % | 95.0 | 95.0 | - | - | - | | | - | - | - | - | - | - | - | - | - | - | | - | - | Sep 2020 | 74.4 | 83.0 | 96.9 | 86.4 | 97.9 | | 87.3 | |
| Workforce | Medical Appraisal and Revalidation | => % | 95.0 | 95.0 | | | | | | | | | | | | | | | | | | - | Oct 2020 | 96.43 | 97.67 | - | 100 | 98.51 | | 99.8 | |
| Workforce | Sickness Absence - 12 month rolling (%) | <= % | 3.0 | 3.0 | 4.97 | 5.01 | 4.96 | 4.92 | 5.09 | 5.12 | 5.18 | 5.23 | 5.26 | 5.39 | 5.85 | 6.16 | 6.22 | 6.30 | 6.35 | 6.39 | 6.27 | 6.15 | Nov 2020 | 5.8 | 7.8 | 8.1 | 5.3 | 3.9 | 6.2 | 6.2 | |
| Workforce | Sickness Absence - In Month | <= % | 3.0 | 3.0 | 5.34 | 4.87 | 4.33 | 4.37 | 6.30 | 6.27 | 5.90 | 5.93 | 5.53 | 6.80 | 8.97 | 7.90 | 6.07 | 5.80 | 4.68 | 5.19 | 4.84 | 5.76 | Nov 2020 | 5.1 | 10.0 | 5.3 | 6.1 | 2.5 | 5.8 | 6.1 | |
| Workforce | Sickness Absence - Long Term - In Month | No | | | 46 | 43 | 44 | 39 | 47 | 58 | 55 | 63 | 50 | 41 | 59 | 99 | 75 | 54 | 64 | 56 | 45 | 52 | Nov 2020 | 10.0 | 11.0 | 15.0 | 11.0 | 5.0 | 52 | 504 | |
| Workforce | Sickness Absence - Short Term - In Month | No | | | 141 | 133 | 93 | 133 | 181 | 174 | 171 | 118 | 148 | 214 | 238 | 167 | 149 | 187 | 144 | 176 | 176 | 217 | Nov 2020 | 53.0 | 63.0 | 31.0 | 47.0 | 23.0 | 217 | 1454 | |
| Workforce | Mandatory Training | => % | 95.0 | 95.0 | | | | | | | | | - | - | - | - | - | - | - | - | - | - | Jan 2020 | 87.2 | 88.0 | 93.2 | 92.8 | 90.6 | | 91.3 | |

# Women & Child Health Group

| Section | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate G | Directorate M | Directorate P | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Patient Safety - Inf Control | C. Difficile | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Inf Control | MRSA Bacteraemia | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Inf Control | MRSA Screening - Elective | => % | 95 | 95 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 94.3 | | | 89.2 | | |
| Patient Safety - Inf Control | MRSA Screening - Non Elective | => % | 95 | 95 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | - | 100 | | 100.0 | | |
| Patient Safety - Harm Free Care | Falls | <= No | 0 | 0 | 1 | 0 | 1 | - | - | - | - | 1 | 1 | 1 | 3 | 1 | - | - | 2 | - | 1 | 3 | Nov 2020 | 1 | 2 | - | 3 | 10 | |
| 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 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Pressure Ulcer SWB Hospital Acquired - Total | <= % | 0 | 0 | 2 | - | - | - | - | - | 2 | - | 2 | - | 2 | 4 | 2 | - | - | - | - | - | Nov 2020 | - | - | - | - | 4 | |
| Patient Safety - Harm Free Care | Venous Thromboembolism (VTE) Assessments | => % | 95.0 | 95.0 | ● | ● | ● | ● | ● | - | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 90.5 | 88.6 | | 88.1 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections | => % | 100.0 | 100.0 | ● | ● | ● | - | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 100 | 100 | | 100.0 | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections and brief | => % | 100.0 | 100.0 | - | - | - | - | ● | - | - | - | - | - | ● | - | - | - | - | - | - | - | Nov 2020 | - | - | | - | | |
| Patient Safety - Harm Free Care | WHO Safer Surgery Checklist - Audit 3 sections, brief and debrief | => % | 100.0 | 100.0 | - | - | - | - | ● | - | - | - | - | - | ● | - | - | - | - | - | - | - | Nov 2020 | - | - | | - | | |
| Patient Safety - Harm Free Care | Never Events | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Medication Errors | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Serious Incidents | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 1 | 0 | 1 | 8 | |

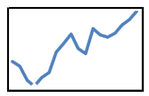
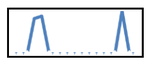
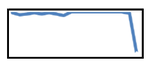
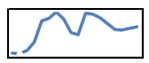
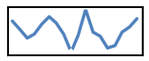
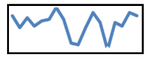
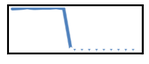
# Women & Child Health Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | G | M | P | | | |
| Patient Safety - Obstetrics | Caesarean Section Rate - Total | <= % | 25.0 | 25.0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 29.3 | | 29.3 | 29.3 |  |
| Patient Safety - Obstetrics | Caesarean Section Rate - Elective | % | | | 11 | 11 | 10 | 11 | 12 | 10 | 11 | 12 | 11 | 9 | 9 | 10 | 10 | 11 | 11 | 14 | 8 | 11 | Nov 2020 | | 10.9 | | 10.9 | 10.6 |  |
| Patient Safety - Obstetrics | Caesarean Section Rate - Non Elective | % | | | 18 | 20 | 17 | 17 | 16 | 14 | 17 | 17 | 19 | 19 | 20 | 20 | 18 | 19 | 18 | 17 | 20 | 18 | Nov 2020 | | 18.4 | | 18.4 | 18.7 | |
| Patient Safety - Obstetrics | Maternal Deaths | <= No | 0 | 0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 0 | | 0 | 1 | |
| Patient Safety - Obstetrics | Post Partum Haemorrhage (>2000ml) | <= No | 48 | 4 | | | | | | | | | | | | | | | | | | Nov 2020 | | 3 | | 3 | 30 | |
| Patient Safety - Obstetrics | Admissions to Neonatal Intensive Care | <= % | 10.0 | 10.0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 6.76 | | 6.8 | 5.5 |  |
| Patient Safety - Obstetrics | Adjusted Perinatal Mortality Rate (per 1000 babies) | <= Rate1 | 8.0 | 8.0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 2.33 | | 2.3 | | |
| Patient Safety - Obstetrics | Stillbirth (Corrected) Mortality Rate (per 1000 babies) | Rate1 | | | 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 | 8.75 | 2.33 | Nov 2020 | | 2.33 | | 2.33 | 6.41 | |
| Patient Safety - Obstetrics | Neonatal Death (Corrected) Mortality Rate (per 1000 babies) | Rate1 | | | 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 | 0.00 | 1.00 | Nov 2020 | | 2.33 | | 2.33 | 2.62 |  |
| Patient Safety - Obstetrics | Early Booking Assessment (<12 + 6 weeks) (>=%) - SWBH Specific | => % | 85.0 | 85.0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 91.3 | | 91.3 | |  |
| Patient Safety - Obstetrics | Early Booking Assessment (<12 + 6 weeks) (%) - National Definition | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 153 | | 153.1 | | |
| Patient Safety - Obstetrics | Breast Feeding Initiation (Quarterly) | => % | 74.0 | 74.0 | | | | | | | | | | | | | | | | | | Nov 2020 | | 80.6 | | 80.6 | |  |
| Patient Safety - Obstetrics | Puerperal Sepsis and other puerperal infections (variation 1 - ICD10 O85 or O86) (%) - | % | | | 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 | 1.0 | 1.3 | Nov 2020 | | 1.28 | | 1.3 | |  |
| Patient Safety - Obstetrics | Puerperal Sepsis and other puerperal infections (variation 2 - ICD10 O85 or O86 Not O864) (%) | % | | | 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 | 1.0 | 1.3 | Nov 2020 | | 1.28 | | 1.3 | | |
| Patient Safety - Obstetrics | Puerperal Sepsis and other puerperal infections (variation 3 - ICD10 O85) (%) | % | | | 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 | 0.8 | 1.0 | Nov 2020 | | 0.96 | | 1.0 | |  |
| Clinical Effect - Mort & Read | Mortality Reviews within 42 working days | => % | 100.0 | 97.0 | N/A | N/A | N/A | | | N/A | | N/A | N/A | | N/A | N/A | N/A | N/A | N/A | N/A | - | - | Sep 2020 | - | - | - | - | | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month | % | | | 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 | 3.8 | 9.4 | - | Oct 2020 | | | | 9.4 | | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative | % | | | 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 | 7.7 | 7.8 | - | Oct 2020 | | | | | 7.4 |  |
| Clinical Effect - Cancer | 2 weeks | => % | 93.0 | 93.0 | | | | | | | | | | | | | | | | | - | Oct 2020 | 94 | | - | 94.0 | |  |
| Clinical Effect - Cancer | 31 Day (diagnosis to treatment) | => % | 96.0 | 96.0 | | | | | | | | | | | | | | | | | - | Oct 2020 | 89.5 | | | 89.5 | |  |
| Clinical Effect - Cancer | 62 Day (urgent GP referral to treatment) | => % | 85.0 | 85.0 | | | | | | | | | | | | | | | | | - | Oct 2020 | 70 | | | 70.0 | |  |
| Clinical Effect - Cancer | Cancer = Patients Waiting Over 62 days for treatment | No | | | 1.5 | 2 | 1 | 3 | 3.5 | 1.5 | 2.5 | 2 | 5.5 | 4 | - | 5.5 | 10 | 2.5 | 3.5 | 2.5 | 3 | - | Oct 2020 | 3 | - | 0 | 3 | 27 |  |
| Clinical Effect - Cancer | Cancer - Patients Waiting Over 104 days for treatment | No | | | 0 | 0.5 | 0.5 | 0 | 1 | 0 | 1 | 0.5 | 3 | 1 | - | 0.5 | 5 | 1 | 0.5 | 0.5 | 0.5 | - | Oct 2020 | 0.5 | - | 0 | 0.5 | 8 | |
| Clinical Effect - Cancer | Cancer - Longest wait for treatment (days) | No | | | 85 | 196 | 109 | 96 | 171 | 104 | 148 | 169 | 217 | 121 | - | 171 | 177 | 138 | 136 | 207 | 117 | - | Oct 2020 | 117 | - | 0 | 117 | |  |
| 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 | Nov 2020 | 0 | - | 0 | 0 | 0 |  |

# Women & Child Health Group

| Section | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate G | Directorate M | Directorate P | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 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 | | | 12 | 23 | 4 | 17 | 19 | 10 | 6 | 11 | 5 | 9 | 3 | 6 | 10 | 23 | 8 | 12 | 15 | 11 | Nov 2020 | 2 | 6 | 3 | 11 | 88 | |
| Pt. Experience - FFT,MSA,Comp | No. of Active Complaints in the System (formal and link) | No | | | 19 | 23 | 6 | 22 | 25 | 12 | 13 | 13 | 14 | 15 | 9 | 12 | 15 | 23 | 14 | 22 | 33 | 40 | Nov 2020 | 0 | 0 | 0 | 40 | | |
| Pt. Experience - Cancellations | Elective Admissions Cancelled at last minute for non-clinical reasons | <= % | 0.8 | 0.8 | | | | | | | | | | | | | | | | | | | Nov 2020 | 5.97 | | - | 4.0 | | |
| 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 | - | Oct 2020 | 0 | | | 0 | 0 | |
| Pt. Experience - Cancellations | Sitrep Declared Late Cancellations | <= No | 0 | 0 | 3 | 5 | 5 | 10 | 5 | 8 | 6 | 7 | 13 | 4 | 0 | 1 | 3 | 3 | 1 | 7 | 5 | - | Oct 2020 | 5 | | | 5 | 20 | |
| Pt. Experience - Cancellations | Urgent Cancellations | No | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | - | Oct 2020 | 0 | - | 0 | 0 | 0 | |
| Emergency Care & Pt. Flow | Emergency Care 4-hour breach (numbers) | No | | | 10 | 13 | 7 | 20 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | 0 | 0 | |
| Emergency Care & Pt. Flow | Inpatients Staying 21+ Days At Month End Census - NHSI | No | | | 1 | 1 | 1 | 1 | 3 | 1 | 1 | 1 | 1 | 1 | 4 | 0 | 2 | 0 | 3 | 4 | 0 | 1 | Nov 2020 | 1 | 0 | 0 | 1 | - | |
| Emergency Care & Pt. Flow | 21+ Days Long Stay Rate - NHSI | % | | | 3 | 7 | 1 | 0 | 4 | 23 | 7 | 0 | 16 | 0 | 0 | 0 | 0 | 0 | 4 | 4 | 0 | 4 | Nov 2020 | 3.73 | - | - | 4 | 2 | |
| Emergency Care & Pt. Flow | Estimated Beds - 21+ Days - NHSI | No | | | 0 | 1 | 0 | 0 | 0 | 5 | 1 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | Nov 2020 | 0.4 | - | - | 0 | - | |
| RTT | RTT - Admittted Care (18-weeks) | => % | 90.0 | 90.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 65.8 | | | 65.8 | | |
| RTT | RTT - Non Admittted Care (18-weeks) | => % | 95.0 | 95.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 77 | | | 77.0 | | |
| RTT | RTT - Incomplete Pathway (18-weeks) | => % | 92.0 | 92.0 | | | | | | | | | | | | | | | | | | | Nov 2020 | 87 | | | 87.0 | | |
| RTT | RTT - Backlog | <= No | 0 | 0 | 201 | 231 | 187 | 141 | 142 | 169 | 191 | 225 | 282 | 324 | 437 | 577 | 696 | 632 | 529 | 401 | 318 | 284 | Nov 2020 | 284 | | | 284 | | |
| RTT | Patients Waiting >52 weeks | <= No | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 11 | 18 | 36 | 20 | 17 | Nov 2020 | 17 | | | 17 | | |
| RTT | Treatment Functions Underperforming | <= No | 0 | 0 | 3 | 3 | 3 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | Nov 2020 | 3 | | | 3 | | |
| RTT | Acute Diagnostic Waits in Excess of 6-weeks | <= % | 0.1 | 0.1 | | | | | | | | | | | | | | | | | | | Nov 2020 | - | | | - | | |

# Women & Child Health Group

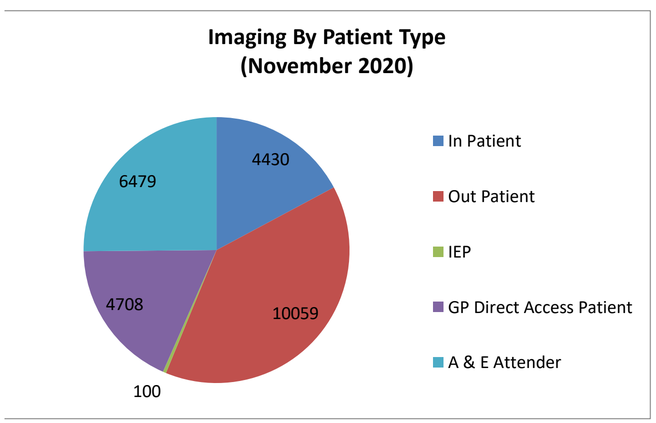
| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | G | M | P | | | |
| Data Completeness | Open Referrals | No | | | 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 | 25,085 | 25,436 | Nov 2020 | 6,636 | 11,087 | 7,713 | 25436 | |  |
| Data Completeness | Open Referrals without Future Activity/ Waiting List: Requiring Validation | No | | | 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 | 5,302 | 5,367 | Nov 2020 | 1,496 | 3,574 | 297 | 5367 | | |
| 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 | 🟢 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | - | Oct 2020 | 93.8 | 100 | 100 | | 99.6 |  |
| Workforce | Sickness Absence - 12 month rolling | <= % | 3.0 | 3.0 | 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 | 5.61 | 5.63 | Nov 2020 | 4.57 | 6.2 | 5.23 | 5.6 | 5.7 |  |
| Workforce | Sickness Absence - in month | <= % | 3.0 | 3.0 | 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 | 5.78 | 6.40 | Nov 2020 | 9.95 | 7.34 | 4.46 | 6.4 | 5.5 |  |
| Workforce | Sickness Absence - Long Term - in month | No | | | 47 | 40 | 46 | 41 | 44 | 45 | 52 | 45 | 31 | 30 | 40 | 49 | 43 | 27 | 43 | 41 | 49 | 47 | Nov 2020 | 4 | 25 | 18 | 47.0 | 339.0 |  |
| Workforce | Sickness Absence - Short Term - in month | No | | | 70 | 87 | 60 | 98 | 98 | 106 | 103 | 101 | 94 | 96 | 137 | 79 | 77 | 86 | 66 | 92 | 97 | 96 | Nov 2020 | 16 | 51 | 29 | 96.0 | 730.0 | |
| Workforce | Mandatory Training | => % | 95.0 | 95.0 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | 🔴 | - | - | - | - | - | - | - | - | - | - | Jan 2020 | 87.6 | 86.4 | 95.4 | | 90.6 |  |

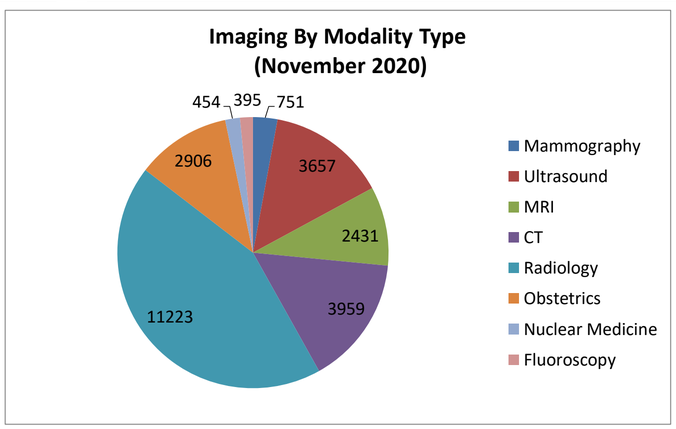
# Women & Child Health Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | | | Data Period | Directorate | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | G | M | P | | | |
| WCH Group Only | HV (C1) - No. of mothers who receive a face to face AN contact with a HV at =>28 weeks of pregancy | No | | | --> | 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 | --> | 92.4 | --> | --> | 90.9 | --> | --> | 91.3 | --> | --> | 94.1 | --> | --> | 90.3 | --> | --> | --> | --> | 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 | % | | | --> | 7.64 | --> | --> | 7.38 | --> | --> | 8.18 | --> | --> | 5.86 | --> | --> | 6.03 | --> | --> | --> | --> | 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 | --> | 96.1 | --> | --> | 97.3 | --> | --> | 96.6 | --> | --> | 96.8 | --> | --> | 95.8 | --> | --> | --> | --> | 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 | --> | --> | 95.1 | --> | --> | 96.5 | --> | --> | 96 | --> | --> | 96 | --> | --> | --> | --> | 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 | --> | 95.8 | --> | --> | 96.6 | --> | --> | 97 | --> | --> | 97.5 | --> | --> | 96.9 | --> | --> | --> | --> | 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 | % | | | --> | 98.6 | --> | --> | 98.4 | --> | --> | 98.2 | --> | --> | 98.1 | --> | --> | 98.4 | --> | --> | --> | --> | 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 | --> | --> | 99.7 | --> | --> | 99.5 | --> | --> | 100 | --> | --> | 99.8 | --> | --> | --> | --> | 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 | --> | 99.9 | --> | --> | 99.7 | --> | --> | 99.1 | --> | --> | 100 | --> | --> | 99.1 | --> | --> | --> | --> | Jul 2020 | | | 99.2 | 99.15 | 99.57 | |
| WCH Group Only | HV - % of infants being breastfed at 6 - 8 weeks | % | | | --> | 44.1 | --> | --> | 45.1 | --> | --> | 43 | --> | --> | 46.6 | --> | --> | 43.7 | --> | --> | --> | --> | 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 | | | --> | 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 | | | --> | 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 | | | --> | 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 | | | --> | 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 | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate DR | IR | NM | BS | BCP | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Patient Safety - Harm Free Care | Never Events | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Medication Errors | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) month | <= No | 0 | 0 | 2.0 | - | 1.0 | 1.0 | 1.0 | 4.0 | 1.0 | 1.0 | 2.0 | - | 1.0 | 1.0 | - | 2.0 | - | 1.0 | 1.0 | - | Oct 2020 | | | | | | 7.14 | - | |
| Clinical Effect - Mort & Read | Emergency Readmissions (within 30 days) - Overall (exc. Deaths and Stillbirths) 12-month cumulative | => % | 0 | 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 | 14.0 | 14.0 | - | Oct 2020 | | | | | | - | 6.5 | |
| Clinical Effect - Stroke & Card | Pts receiving CT Scan within 1 hr of presentation (%) | => % | 50.0 | 50.0 | ● | ● | ● | - | - | - | - | - | - | - | - | - | ● | - | ● | - | ● | - | Oct 2020 | | | - | | | 83.61 | 85.34 | |
| Clinical Effect - Stroke & Card | Pts receiving CT Scan within 24 hrs of presentation (%) | => % | 100.0 | 100.00 | ● | ● | ● | - | - | - | - | - | - | - | - | - | ● | - | ● | - | ● | - | Oct 2020 | | | - | | | 98.36 | 99.14 | |
| Pt. Experience - FFT,MSA,Comp | No. of Complaints Received (formal and link) | No | | | 5 | 3 | 2 | 0 | 1 | 3 | 3 | 5 | 1 | 0 | 1 | 1 | 1 | 4 | 2 | 1 | 2 | 2 | Nov 2020 | 2 | 0 | 0 | 0 | 0 | 2 | 14 | |
| Pt. Experience - FFT,MSA,Comp | No. of Active Complaints in the System (formal and link) | No | | | 11 | 6 | 3 | 1 | 2 | 3 | 2 | 5 | 2 | 1 | 2 | 2 | 3 | 4 | 4 | 2 | 5 | 3 | Nov 2020 | 3 | 0 | 0 | 0 | 0 | 3 | | |
| RTT | Acute Diagnostic Waits in Excess of 6-weeks (%) | <= % | 1.0 | 1.0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 12.44 | | | | | 12.44 | | |
| Data Completeness | Open Referrals | No | | | 295 | 308 | 350 | 363 | 396 | 449 | 486 | 516 | 526 | 527 | 737 | 715 | 701 | 701 | 731 | 736 | 738 | 751 | Nov 2020 | 560 | 24 | 0 | 0 | 167 | 751 | | |
| Data Completeness | Open Referrals without Future Activity/ Waiting List: Requiring Validation | No | | | 178 | 215 | 233 | 244 | 255 | 304 | 321 | 357 | 366 | 373 | 382 | 388 | 395 | 396 | 423 | 434 | 432 | 442 | Nov 2020 | 409 | 4 | 0 | 0 | 29 | 442 | | |
| Workforce | PDRs - 12 month rolling | => % | 95.0 | 95.0 | - | - | - | ● | ● | - | - | - | - | - | - | - | - | - | - | ● | - | - | Sep 2020 | 89.8 | 63.6 | 85.7 | 97.8 | - | - | 89.8 | |
| Workforce | Medical Appraisal and Revalidation | => % | 95.0 | 95.0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | - | Oct 2020 | 100 | - | 100 | - | 100 | - | 100.0 | |
| Workforce | Sickness Absence - 12 month rolling | <= % | 3.00 | 3.00 | 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 | 4.26 | 4.39 | Nov 2020 | 4.7 | 4.8 | 1.8 | 4.8 | 0.0 | 4.39 | 4.29 | |
| Workforce | Sickness Absence - in month | <= % | 3.00 | 3.00 | 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 | 5.31 | 4.47 | Nov 2020 | 4.7 | 1.9 | 0.9 | 6.2 | 0.0 | 4.47 | 4.37 | |
| Workforce | Sickness Absence - Long Term - in month | No | | | 7 | 5 | 8 | 9 | 10 | 7 | 7 | 5 | 5 | 5 | 7 | 9 | 8 | 6 | 11 | 7 | 9 | 12 | Nov 2020 | 10 | 0 | 0 | 2 | 0 | 12 | 69 | |
| Workforce | Sickness Absence - Short Term - in month | No | | | 26 | 24 | 19 | 24 | 33 | 25 | 33 | 44 | 34 | 39 | 40 | 24 | 26 | 30 | 23 | 32 | 38 | 30 | Nov 2020 | 19 | 2 | 3 | 6 | 0 | 30 | 243 | |
| Workforce | Mandatory Training | => % | 95.0 | 95.0 | ● | ● | ● | ● | ● | ● | ● | ● | - | - | - | - | - | - | - | - | - | - | Jan 2020 | 92.9 | 94.6 | 93.3 | 92.7 | - | 93.0 | 93.6 | |
| Workforce | Imaging - Total Scans | No | | | 29,982 | 32,665 | 29,248 | 29,463 | 31,286 | 29,477 | 28,573 | 32,398 | 29,181 | 23,026 | 12,474 | 15,657 | 20,296 | 23,773 | 24,445 | 26,957 | 27,499 | 25,757 | Nov 2020 | | | | | | 25757 | 176858 | |
| Board KPI | Imaging - Inpatient Turnaround Time <=24hr | => % | 90.0 | 90.0 | 69 | 67 | 69 | 67 | 77 | 77 | 77 | 79 | 82 | 87 | 91 | 87 | 86 | 85 | 84 | 82 | 80 | 82 | Nov 2020 | | | | | | 82.5 | 84.4 | |
| Board KPI | Imaging - Urgent Other(GP 5) Turnround Time <=5d | => % | 90.0 | 90.0 | 65 | 66 | 70 | 71 | 77 | 75 | 72 | 72 | 74 | 68 | 82 | 87 | 79 | 69 | 53 | 56 | 58 | 53 | Nov 2020 | | | | | | 53.3 | 66.7 | |
| Board KPI | Imaging - All Imaging Work Reported in less than 4 weeks (request to report) | => % | 95.0 | 95.0 | - | - | - | - | 88 | 90 | 90 | 88 | 92 | 90 | 93 | 94 | 90 | 85 | 83 | 83 | 85 | 83 | Nov 2020 | | | | | | 83.4 | 86.2 | |

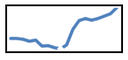


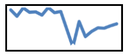
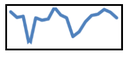
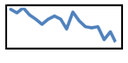
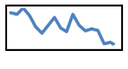
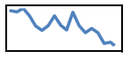
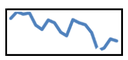
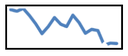
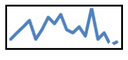
# Primary Care, Community & Therapies Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | | | | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | AT | IB | IC | CT | CM | YHP | | | |
| Patient Safety - Inf Control | MRSA Screening - Elective | => % | 95 | 95 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | - | - | - | - | 0 | - | 0 | | |
| Patient Safety - Harm Free Care | Number of DOLS raised | No | | | 5 | 6 | 13 | 5 | 7 | 6 | 4 | 6 | 5 | 4 | 9 | 6 | 8 | 13 | 5 | 9 | 11 | 7 | Nov 2020 | 0 | 7 | 0 | - | 0 | 0 | 7 | 68 | |
| Patient Safety - Harm Free Care | Number of DOLS which are 7 day urgent | No | | | 5 | 6 | 13 | 5 | 7 | 6 | 4 | 6 | 5 | 4 | 9 | 6 | 8 | 13 | 5 | 9 | 11 | 7 | Nov 2020 | 0 | 7 | 0 | - | 0 | 0 | 7 | 68 | |
| Patient Safety - Harm Free Care | Number of delays with LA in assessing for standard DOLS application | No | | | 3 | 3 | 6 | 0 | 0 | 0 | 1 | 1 | 3 | 0 | 0 | 0 | 0 | 4 | 2 | 2 | 2 | 1 | Nov 2020 | 0 | 1 | 0 | - | 0 | 0 | 1 | 11 | |
| Patient Safety - Harm Free Care | Number DOLs rolled over from previous month | No | | | 2 | 0 | 2 | 0 | 0 | 1 | 1 | 0 | 2 | 0 | 2 | 2 | 3 | 2 | 1 | 0 | 3 | 1 | Nov 2020 | 0 | 1 | 0 | - | 0 | 0 | 1 | 14 | |
| Patient Safety - Harm Free Care | Number patients discharged prior to LA assessment targets | No | | | 2 | 1 | 8 | 2 | 4 | 2 | 1 | 2 | 2 | 1 | 9 | 5 | 9 | 10 | 3 | 2 | 8 | 5 | Nov 2020 | 0 | 5 | 0 | - | 0 | 0 | 5 | 51 | |
| 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 | Nov 2020 | 0 | 0 | 0 | - | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Number patients cognitively improved regained capacity did not require LA assessment | No | | | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | - | 0 | 0 | 0 | 1 | |
| Patient Safety - Harm Free Care | Falls | <= No | 0 | 0 | 29 | 22 | 24 | 23 | - | 26 | 28 | 29 | 32 | 25 | 22 | 19 | 18 | 14 | 23 | 19 | 24 | 20 | Nov 2020 | - | 18 | 2 | - | - | - | 20 | 159 | |
| Patient Safety - Harm Free Care | Falls - Death or Severe Harm | <= No | 0 | 0 | 1 | 0 | 0 | 0 | - | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | Nov 2020 | 0 | 0 | 0 | - | 0 | 0 | 0 | 1 | |
| Patient Safety - Harm Free Care | Pressure Ulcer SWB Hospital Acquired - Total | <= No | 0 | 0 | 8 | 12 | 16 | 20 | 8 | 14 | 22 | 18 | 24 | 14 | 12 | 16 | 10 | 28 | 8 | 12 | 4 | 6 | Nov 2020 | - | 3 | - | - | - | - | 3 | 48 | |
| Patient Safety - Harm Free Care | Pressure Ulcer DN Caseload Acquired - Total | <= No | 0 | 0 | 24 | 29 | 34 | 27 | 31 | 18 | 24 | 25 | 25 | 22 | 20 | 23 | 25 | 37 | 29 | 24 | 22 | 38 | Nov 2020 | - | - | 38 | - | - | - | 38 | 218 | |
| Patient Safety - Harm Free Care | Never Events | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | - | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Medication Errors | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 0 | - | 0 | 0 | 0 | 0 | |
| Patient Safety - Harm Free Care | Serious Incidents | <= No | 0 | 0 | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | ● | Nov 2020 | 0 | 0 | 1 | - | 0 | 0 | 1 | 22 | |
| 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 | | | 13 | 8 | 6 | 9 | 14 | 8 | 5 | 11 | 4 | 8 | 6 | 4 | 7 | 19 | 16 | 13 | 20 | 17 | Nov 2020 | 0 | 3 | 3 | - | 3 | 8 | 17 | 102 | |
| Pt. Experience - FFT,MSA,Comp | No. of Active Complaints in the System (formal and link) | No | | | 20 | 17 | 7 | 14 | 15 | 13 | 7 | 0 | 11 | 11 | 12 | 12 | 14 | 19 | 21 | 23 | 43 | 53 | Nov 2020 | 3 | 10 | 5 | - | 8 | 27 | 53 | | |

# Primary Care, Community & Therapies Group

| Section | Indicator | Measure | Trajectory | | Previous Months Trend | | | | | | | | | | | | | | | | Data Period | Directorate | | | | | | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | Year | Month | J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | | AT | IB | IC | CT | CM | YHP | | | |
| Workforce | PDRs - 12 month rolling | => % | 95.0 | 95.0 | - | - | - | 🔴 | 🔴 | - | - | - | - | - | - | - | - | - | - | 🟢 | - | - | Sep 2020 | 100 | 99.3 | 96 | - | 89 | 90.12 | | 95.9 | |
| Workforce | Sickness Absence - 12 month rolling | <= % | 3.00 | 3.00 | 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 | 4.94 | 5.08 | Nov 2020 | 3.16 | 5.88 | 5.3 | - | 5.8 | 5.55 | 5.08 | 4.85 |  |
| Workforce | Sickness Absence - in month | <= % | 3.00 | 3.00 | 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 | 4.74 | 5.84 | Nov 2020 | 4.17 | 8.42 | 5.2 | - | 5.6 | 4.58 | 5.84 | 5.13 | |
| Workforce | Sickness Absence - Long Term - in month | No | | | 25 | 25 | 26 | 23 | 27 | 23 | 32 | 30 | 31 | 36 | 29 | 50 | 44 | 27 | 40 | 38 | 33 | 34 | Nov 2020 | 6 | - | - | - | - | - | 34 | 296 | |
| Workforce | Sickness Absence - Short Term - in month | No | | | 86 | 94 | 78 | 93 | 135 | 121 | 121 | 140 | 114 | 92 | 181 | 104 | 81 | 99 | 85 | 116 | 110 | 141 | Nov 2020 | 30 | 68 | 27 | 0 | 15 | 1 | 141 | 920 | |
| Workforce | Mandatory Training | => % | 95.0 | 95.0 | 🔴 | 🟢 | 🟢 | 🔴 | 🟢 | 🟢 | 🟢 | 🔴 | - | - | - | - | - | - | - | - | - | - | Jan 2020 | 95.9 | 93.3 | 94 | - | 91 | - | | 95.4 | |

# Primary Care, Community & Therapies Group

| Section | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate AT | IB | IC | CT | CM | YHP | Month | Year To Date | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Community & Therapies Group Only | DVT numbers | => No | 730 | 61 | 43 | 55 | 43 | 27 | 25 | 29 | 19 | 21 | 14 | 1 | 15 | 22 | 31 | 26 | 28 | 23 | 25 | 21 | Nov 2020 | | | | | | | 21 | 191 | |
| Community & Therapies Group Only | Adults Therapy DNA rate OP services | <= % | 9 | 9 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Aug 2017 | | | | | | | 8.0 | 8.2 | |
| Community & Therapies Group Only | Therapy DNA rate Paediatric Therapy services | <= % | 9 | 9 | 12 | 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 | 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 | 6.72 | 7.14 | Nov 2020 | | | | | | | 7.1 | 5.9 |  |
| Community & Therapies Group Only | STEIS | <= No | 0 | 0 | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Oct 2018 | | | | | | | 0 | 1 | |
| Community & Therapies Group Only | Green Stream Community Rehab response time for treatment (days) | <= No | 15.0 | 15.0 | 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 | 18.7 | 13.7 | Nov 2020 | | | | | | | 13.7 | 91.96 | |
| Community & Therapies Group Only | DNA/No Access Visits | % | | | 1 | 1 | 1 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | Nov 2020 | | | | | | | 0.83 | |  |
| Community & Therapies Group Only | Baseline Observations for DN | => % | 95 | 95 | 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 | 89.7 | 85.8 | Nov 2020 | | | | | | | 85.75 | 90.66 |  |
| Community & Therapies Group Only | Falls Assessments<br>- DN Intial Assessments only | => % | 95 | 95 | 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 | 89.2 | 88.3 | Nov 2020 | | | | | | | 88.27 | |  |
| Community & Therapies Group Only | Pressure Ulcer Assessment<br>- DN Intial Assessments only | => % | 95 | 95 | 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 | 89.7 | 88.5 | Nov 2020 | | | | | | | 88.55 | |  |
| Community & Therapies Group Only | MUST Assessments<br>- DN Intial Assessments only | => % | 95 | 95 | 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 | 89 | 86.9 | Nov 2020 | | | | | | | 86.87 | | |
| Community & Therapies Group Only | Dementia Assessments<br>- DN Intial Assessments only | => % | 95 | 95 | 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 | 83.2 | 82.3 | Nov 2020 | | | | | | | 82.31 | |  |
| Community & Therapies Group Only | 48 hour inputting rate<br>- DN Service Only | % | | | 1 | 94 | 95 | 95 | 95 | - | 95 | 94 | 95 | 96 | 95 | 95 | - | - | - | - | 93 | 94 | Nov 2020 | | | | | | | 94.28 | | |
| Community & Therapies Group Only | Making Every Contact (MECC)<br>- DN Intial Assessments only | => % | 95 | 95 | 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 | 88.1 | 88 | Nov 2020 | | | | | | | 87.99 | 90.69 |  |
| Community & Therapies Group Only | Avoidable Grade 2,3 or 4 Pressure Ulcers<br>(DN Caseload acquired) | No | | | 8 | 12 | 16 | 20 | 8 | 14 | 22 | 18 | 24 | 14 | 12 | 16 | 10 | 28 | 8 | 12 | 4 | 6 | Nov 2020 | | | | | | | 3 | 48 |  |
| Community & Therapies Group Only | Avoidable Grade 2 Pressure Ulcers<br>(DN caseload acquired) | No | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Nov 2018 | | | | | | | 26 | 37 | |
| Community & Therapies Group Only | Avoidable Grade 3 Pressure Ulcers<br>(DN caseload acquired) | No | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Nov 2018 | | | | | | | 11 | 14 | |
| Community & Therapies Group Only | Avoidable Grade 4 Pressure Ulcers<br>(DN caseload acquired) | No | | | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | Nov 2018 | | | | | | | 0 | 1 | |

# Corporate Group

| Section | Indicator | Measure | Trajectory Year | Trajectory Month | Previous Months Trend J | J | A | S | O | N | D | J | F | M | A | M | J | J | A | S | O | N | Data Period | Directorate SG | F | W | M | E | N | O | Month | Year To Date | Trend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Pt. Experience - FFT,MSA,Comp | No. of Complaints Received (formal and link) | No | | | 12 | 10 | 0 | 3 | 6 | 2 | 3 | 6 | 3 | 10 | 3 | 4 | 5 | 11 | 6 | 4 | 10 | 5 | Nov 2020 | 0 | 0 | 1 | 1 | 0 | 3 | 0 | 5 | 48 | |
| Pt. Experience - FFT,MSA,Comp | No. of Active Complaints in the System (formal and link) | No | | | 4 | 5 | 1 | 4 | 3 | 4 | 1 | 0 | 5 | 12 | 3 | 4 | 3 | 11 | 10 | 10 | 22 | 43 | Nov 2020 | 1 | 0 | 0 | 1 | 29 | 12 | 0 | 43 | | |
| 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 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🔴 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | 🟢 | - | Oct 2020 | | | 95 | | | | | 100.0 | 100 | |
| Workforce | Sickness Absence - 12 month rolling | <= % | 3.00 | 3.00 | 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 | 4.82 | 4.88 | Nov 2020 | 3.62 | 1.38 | 2.97 | 3.75 | 6.39 | 6.18 | 3.83 | 4.88 | 4.89 | |
| Workforce | Sickness Absence - in month | <= % | 3.00 | 3.00 | 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 | 4.51 | 5.35 | Nov 2020 | 5.60 | 1.76 | 2.33 | 2.75 | 8.67 | 6.34 | 3.29 | 5.35 | 4.72 | |
| Workforce | Sickness Absence - Long Term - in month | No | | | 32 | 32 | 40 | 33 | 35 | 32 | 27 | 27 | 33 | 31 | 37 | 77 | 62 | 45 | 62 | 67 | 63 | 73 | Nov 2020 | 7.00 | 1.00 | 3.00 | 3.00 | 37.00 | 17.00 | 5.00 | 73.00 | 492.00 | |
| Workforce | Sickness Absence - Short Term - in month | No | | | 65 | 82 | 54 | 92 | 90 | 84 | 108 | 100 | 80 | 73 | 116 | 147 | 134 | 164 | 120 | 139 | 144 | 171 | Nov 2020 | 6.00 | 8.00 | 9.00 | 24.00 | 60.00 | 47.00 | 17.00 | 171.00 | 1152.00 | |
| Workforce | Mandatory Training | => % | 95.0 | 95.0 | 🔴 | 🔴 | 🔴 | 🔴 | 🟢 | 🟢 | 🟢 | 🔴 | - | - | - | - | - | - | - | - | - | - | Jan 2020 | 93 | 97 | 97 | 96 | - | 93 | - | 94.3 | 94 | |