

Quality & Safety Governance Summary Report Feb-2017

(2016/17 Financial Year)

The Right Care	Period	Target	Actual	Past 12 Month Trend Oldest -> Most Recent
Unplanned Readmissions	Jan	10.30%	10.41%	
Hospital Acquired BSI	Feb	0	1	
Falls per Bed Day	Feb	0	0.0043	
Quality Markers				
Quality Markers	Period	Target	Actual	
Age 75+ Patients Assessed for Falls Risk	2016 Q3	> 90%	92%	
Age 75+ Patients At Risk of Fall with Care Plan	2016 Q3	90%	77%	
Hand Hygiene Moment Compliance	2016 Q3	> 80%	81%	
CLAB Insertion Bundle Utilisation	2014 Q4	> 90%	72%	
Perioperative Harm Checklist Utilisation	2015 Q2	> 90%	95%	
Surgical Site Infection	Timely Antibiotics			
		98%	98%	
	> = 2g Cephazolin			
		98%	98%	
	Skin Preparation			
			100%	



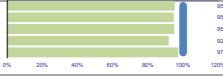
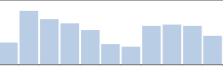
By the Right Person	Period	Target	Actual	Past 12 Month Trend Oldest -> Most Recent
Nursing Clinical Hours per Patient Day	Feb	6.14	6.21	
Nursing Clinical Variance HPPD %	Feb	10%	7%	
Appraisals Completed and Recorded	Feb	90.0%	73.3%	

In the Right Way	Period	Target	Actual	Past 12 Month Trend Oldest -> Most Recent
Serious Adverse Events	Feb	0	1	
Compliments	Feb	28	57	
Complaints	Feb	0	37	
Responded to Within 20 Days (Jan-2017)		95%	100%	

At the Right Time	Target	Actual	Trend	Data as at 10-Feb-2014
ESPI 1: Referrals Processed Within 10 Days	> 90%	90.7%		
ESPI 2: FSA Wait + 4 Months	< 1.5%	2.8%		
ESPI 5: Access to Treatment	< 4%	1.0%		
Theatre Cancellations	0	51		
2016-17 Q2				
	Target	Actual	Trend	
ED Stays < 6 Hours	> 95%	96%		

In the Right Place	Period	Target	Actual	Past 12 Month Trend Oldest -> Most Recent
Average Length of Stay (Days)	Feb	A 2.37 E 1.59	3.21	
Virtual: Practical FSA Percentage	Feb	7.77%	10.11%	
Outliers	Feb	0.0%	10.9%	
Day Stay Ward Overnight	Feb	0	2	

How to Read:

Symbol/abbreviation	Denotes:
Green	Favourable to Target/Plan
Amber	Caution: Variance to Target/Plan
Red	Issue or Unfavourable to Target/Plan
	Month by Month Trend, Oldest -> Most Recent
	Down/No-change/Up on Previous Month
	Actual (%) Position Against Plan (100%)
	Month by Month Trend, Oldest -> Most Recent
var	Variance

Section	Measure	Definition
The Right Care	1 Unplanned Readmissions	The percentage of unplanned re-admissions for the reporting month, raw and unstandardised, IDF excluded.
	2 Hospital Acquired Blood Stream Infections	The number of positive blood cultures in Inpatients hospitalised for more than 48 hours, or related to a hospital health-care associated device or procedure. Target = 0.
	3 Falls per Bed Day	The number of hospital inpatient falls per patient bed-day, including Mental Health, excluding DSS and Community. Target = 0.
	4 Age 75+ Patients Assessed for Falls Risk	The percentage of patients age 75 and above assessed for risk of falling.
	5 Hand Hygiene Moment Compliance	The percentage of care provision staff observed to comply with World Health Organisation standards for hand hygiene practice.
	6 CLAB Insertion Bundle Utilisation	The percentage of occasions when an insertion bundle was utilised (to prevent Central Line Associated Bacteremia).
	7 Perioperative Harm Checklist Utilisation	The percentage of operations where all three parts of the surgical checklist were utilised.
	8 Surgical Site Infection - Antibiotic at Right Time	The percentage of surgeries with antibiotic administration in the hour before first incision.
	9 Surgical Site Infection - Right Antibiotic, Dose	The percentage of hip and knee replacement surgeries utilising recommended antibiotic prophylaxis.
	10 Surgical Site Infection - Right Skin Antisepsis	The percentage of surgeries with appropriate skin antisepsis.
At the Right Time	11 ESPI 1 - Referrals Processed Within 10 Days	The percentage of patient referrals acknowledged and processed within ten business days of receipt. Aggregate percentage is reported, rather than per MoH definition '90% of Services above 90%'.
	12 ESPI 2 - FSA Wait +4 Months	The percentage of patients waiting longer than four months for their first specialist assessment.
	13 ESPI 5 - Access to Treatment	The percentage of patients given a commitment to treatment, but not treated within six months.
	14 Theatre Cancellations	The number of cancelled theatre appointments (excluding endoscopies), for the reporting month.
	15 ED Stays < 6 Hours	The percentage of Emergency Department patients admitted, discharged, or transferred from Emergency Department within six hours.
By the Right Person	16 Nursing Hours per Patient per Day	The number of nursing hours per day expended on bedside patient care.
	Nursing Clinical Variance HPPD %	The number of departments with positive (>20% green, 0-20% amber) and negative (<0% red) clinical variance hours per patient day.
	17 Appraisals Completed and Recorded	The percentage of employee appraisals due in the reporting period that were completed and recorded. Target = 90%.
In the Right Way	18 Serious Adverse Events	The number of SAC1 and SAC2 Serious Adverse Events in the reporting month. Target = 0.
	19 Compliments	The number of formal complimentary communications received in the reporting month.
	20 Complaints	The number of formal complaints received in the reporting month. Target = 0.
21 Complaints Responded to Within 20 Days	The percentage of formal complaints responded to within twenty business days, in the previous reporting month.	
In the Right Place	22 Average Length of Stay	The average number of days between admission and discharge of a patient.
	23 Virtual : Non-Virtual FSA Percentage	The percentage of Virtual to Non-Virtual First Specialist Assessments.
	24 Outliers	The percentage of total patient bed days spent in a ward not designated to that specialty. Target = 0.
	25 Day Stay Overnight Ward	The number of days per month that Day Stay Department has housed patients overnight. Target = 0.