Quality Strategy Dashboard - June 2018

NHS Sherwood Forest Hospitals NHS Foundation Trust

Clinical Risks

Outcome	Indicator	Target	Baseline	Apr-18	May-18	Trend	RAG
Falls	92% or more compliance with implementation of falls care plans for at risk patients	≥92%	90%	-	90%		G
	5% reduction (based on 17/18) in number of reported instances of: Falls involving moderate/severe harm	TBC	TBC	0	1		G
Pressure ulcers	92% or more compliance with implementation of pressure sore prevention plans for at risk patients	≥92%	79%	-	92%		G
	5% reduction (based on 17/18) in number of reported instances of: Hospital acquired pressure ulcers			Awaiting Data			
Medication	5% reduction (based on 17/18) in number of reported instances of: High-risk medication errors			Data collection and monitoring method being developed			
	PPH >1.5L	≤3.2%	<3.2%	3.41%	3.47%	3.47%	G
	Harm Free care	≥95%		Awaiting Data			
	Fluid balance charts and calculation	≥90%		Awaiting Data			

Safety

Outcome	Indicator	Target	Baseline	Apr-18	May-18	Trend	RAG
Timeliness of Clinical respsonce to unexpected Radiology or pathology	10% fewer incidents based on 17/18 involving failure to detect	2.7	3	Measure to be reviewed due to small numbers			
CAS Alerts	≥98%Closure before or on dealine day	≥98%	100%	100%	100%		B
Response to SIs	≥75% with in 72 hours	≥75%	71%	67%	86%		G
Open and Learning Culture	Number of patient safety incidents reported on datix (by incident date) compared with the Units of Activity	-	0.4%	0.4%	0.3%		G
Compliance with NICE	All specialties reporting their position on NICE Guideline uptake	100%	74%	Data reported quarterly and available from August 2018			
	≥75% of specialties have completed baseling assessment	≥75%	100%	Data reported quarterly and available from August 2018			

* Mortality

SFH - Mortality Trend

	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
HSMR	99.66	104.67	86.18	87.14	89.9	94.5	96.6	95.9	95.9	99.1	99.1	99.1	99.1	99.1	90.0	103.7	96.7	103.8	99.7	122.3	98.5	122.3	98.5	114.6	103.9	106.6	107.3	106.7	104.7	104.2	105.4
Rolling 12 Month HSMR	110.97	110.71	107.95	105.64	103.5	100.9	98.6	96.6	94.9	94.4	94.4	95.1	96.1	98.5	99.3	99.6	103.0	103.5	105.9	106.6	107.3	106.7	104.7	104.2	104.2	102.2	101.6	101.6	101.6	102.7	102.4
SHMI	101.9	101.9	101.9	99.1	99.1	95.9	95.9	95.9	95.9	95.15	95.15	95.15	95.1	98.8	98.8	98.8	100.2	102.2	102.2	101.6	101.6	101.6									
Crude Mortality SFH	2.72%	2.92%	2.46%	2.81%	3.26%	3.42%	3.15%	1.81%	2.18%	2.12%	2.84%	2.56%	2.65%	2.74%	2.61%	5.18%	3.96%	3.44%	3.33%	3.18%	2.79%	2.44%	2.55%	2.66%	2.64%	2.12%	2.50%	3.81%	4.06%	3.50%	3.48%	3.15%

HSMR February : 105.4 Statistically within expected

March 17 – February 18 = 102.4 within the expected range. Interestingly SHMI & HSMR are the same at (given a 3 month time differential)

'% of deaths with Avoidable Factors
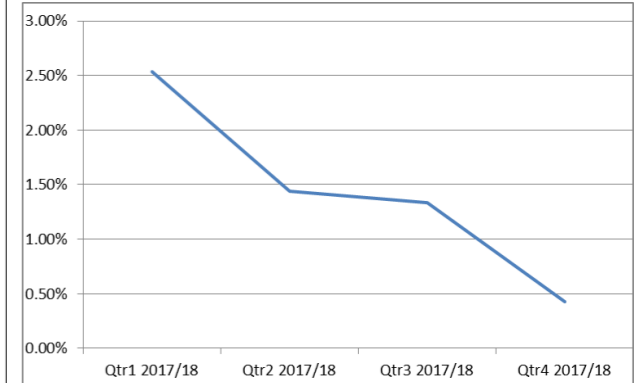
The number of deaths where, through the SJR methodology the death was believed to be avoidable or avoidable factors were identified. This is reported as 21 cases or 1.35% of all deaths and 1.61% of those deaths reviewed.

LoS—Top 25% of all Acute Trusts (Sept 17—Feb 2018)
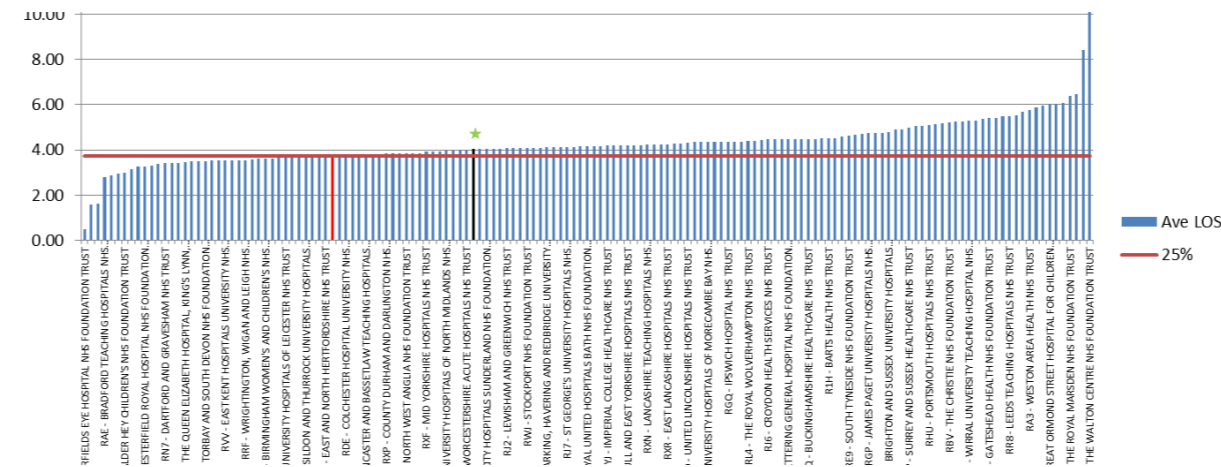
Staffing Levels

Number of Band 5 vacancies

	Current	Predicted in October 2018
	150	100

Tipping Point breaches (YTD)
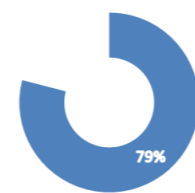
0

WHO Checks and Stop Moments

WHO Checks Compliance (May 2018)

100%

Stop moments are being defined and a data collection method developed.

Preferred Venue at EoL and 14hr Reviews

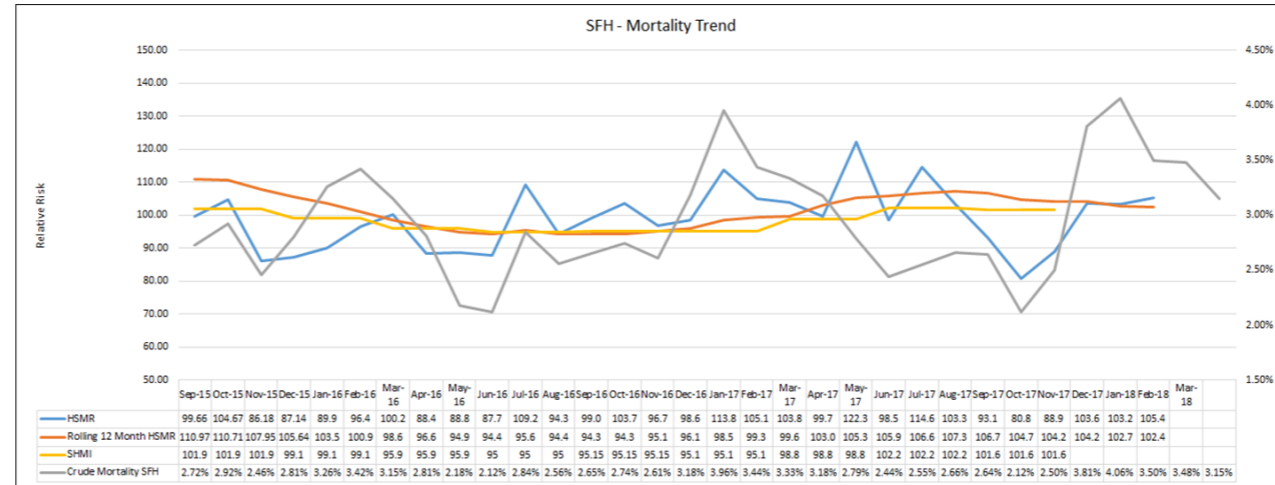**Fast Track Patients Discharged Q1 2018/19**

79%

Discharges for Fast Track patients:

Q1—79%

2017/18 average—78%

2018/19 target—85%

	Sep-16	Mar-17	Sep-17
Proportion of patients reviewed by a consultant within 14 hours of admission at hospital	74%	93%	80%

Staff engagement

76% of staff feel they are able to contribute to improvements at work

Staff FFT	Q1 2017/18	Q2 2017/18	Q4 2017/18
How likely are you to recommend this organisation to friends and family if they needed care or treatment?	86%	90%	89%
How likely are you to recommend this organisation to friends and family as a place to work?	71%	73%	77%

PPI

73% of patients are satisfied that their care has been explained in an understandable way (2017 Inpatient survey)

Incidents of unsafe discharge: Data being collected

Care and Discharge Involvement: Data being collected