Metric	Units	Source	Benchmark	Top Quartile Average	YTD	Q1 16/17	Trend Apr16- June 16	Apr-16	May-16	Jun-16	Jul-16
	SA		FION 1: R	eduction o	f Harm Ass	ociated wit	h Mortality				
HSMR (April 15 - March 16)	Ratio	Dr Foster	100		101.51	101.57	• • • • • • • • • • • • • • • • • • •	99.54	99.88	101.46	101.51
SHMI (Jan 15 - Dec 15)	Ratio	Dr Foster	100		110.99	110.99	•	111.21	111.21	110.99	110.99
Crude Mortality (HSMR basket 56 diagnosis)					1.620/	4.6694	++	1.010(4 700/	4.469/	1.500/
(June 16)	Mthly Number	Dr Foster	A 2. Rodu	ction of Ha	1.62%	1.66%	arm Free Care	1.81%	1.70%	1.46%	1.52%
Harm free care (new & old)		ST	95%	95%				01 75%	91.33%	92.92%	02.25%
Harm free care (new)	Mthly % Mthly %	ST	95%	95%	92.06% 96.86%	92.00% 96.92%		91.75% 97.51%		97.64%	
nami nee care (new)	IVILITIY %					Associated N	with Falls	97.51%	95.01%	97.04%	90.09%
Falls per 1000 OBD	Mthly %	Datix	3.90%	3.90%	3.83%	3.79%	• • • • • •	3.26%	3.89%	4.22%	3.93%
Falls with harm per 1000 OBD	Mthly %	Datix	0.19%	0.19%	0.50%	0.53%		1.01%	0.33%	0.26%	0.39%
Combined SQD Metrics (Falls)	Mthly %	SQD	90%	0.1370	71.91%	71.13%		1.0170	70.97%	71.29%	73.48%
	,	-		uction of Ha			ressure Ulcers		70.3778	71.2370	73.4070
Category 4 hospital acquired incidents	Mthly Number	PUNT	0	0	7	4		0	2	2	3
Category 3 hospital acquired incidents	Mthly Number	PUNT	0	0	8	8	•	1	4	3	0
Category 2 hospital acquired incidents	Mthly Number	PUNT	27	0	124	100		27	39	34	24
Pressure ulcers per 1000 OBD	Mthly %	IS	твс	ТВС	124	100		ТВС	ТВС	TBC	TBC
Tissue viability compliance (All metrics)	Mthly %	SQD	90%	The	71.91%	71.13%	•	TBC	92.74%	91.52%	92.30%
	,			duction of			Medication		52.7470	51.5270	52.3070
Medication incidents	Mthly Number	Datix			474	340		108	110	122	134
Medication incidents resulting in harm		Datix			7/4	540		100	110	144	1.54
(Low,Moderate, Severe & Death)	Mthly Number	Datix	0	0	48	36		12	9	15	12
Medication errors per 1000 OBD	Mthly %	Datix	ТВС	ТВС	3.36	3.27		3.45	2.90	3.45	3.66
CD Audit Compliance (Q1 April - June 16)	Mthly %	Pharmacy	100%	100%	79%	79%	•	82%		76%	
	<u>S/</u>	AFE AMBI	TION 6: Re	eduction of	f Harm Asso	ociated with	<u>n Infections</u>				
MRSA Cases	Mthly Number	IPC	0	0	0	0	•	0	0	0	0
C difficile Cases	Mthly Number	IPC	46		17	11		1	5	5	6
CAUTIs	Mthly Number	ST	2	TBC	7	4	+	1	2	1	3
	Mthly %	Facilities	95%	98%	85%	85%	• • •	81%	85%	87.74%	86.49%
	<u>SAF</u>	E AMBITI	ON 7: Red	uction of H	larm Assoc	iated with [<u>Deterioration</u>				
Sepsis Bundle compliance in A&E / Emergency							+ + +				
wards IVAB within 1 hour for sepsis in A&E /	Mthly %	QG	90%		71.91%	73.11%		66%	74.26%	79.07%	68.29%
Emergency wards	Mthly %	QG	90%		39.20%	38.05%		38%	38.16%	37.88%	42.65%
VTE rate	Mthly Number	ST	ТВС		7	6	+	2	3	1	1
VTE risk assessments completed on							+				
admission	Mthly %	Medway	>95%	100%	96.25%	96.46%		96.73%	96.64%	96.00%	95.64%
Physiological observations on time Cardiac Arrests outside of the Emergency	Mthly %	SQD	90%		79.43%	79.15%			79.2%	79.1%	80.0%
Department (not including peri-arrests)	Mthly Number	Resus	твс		57	43		13	15	15	14
DNACPR compliance	Mthly %	SQD	90%		96.00%	95.31%			96.7%	93.96%	97.37%
			IBITION 8:	Reduction of	of Harm Ass	ociated with	Surgery				
Compliance WHO checklist completion	Mthly %	QG	100%		99%	98%		99.30%	96.9%	98.70%	99.50%
SAFE AMBITION 9: Reduction of Harm by Building a Positive Patient Safety Culture											
Incidents reported	Mthly Number	DATIX			4610	3426	· · · · · · · · · · · · · · · · · · ·	1054	1134	1238	1184
Never Events	Mthly Number	DATIX	0		1	1		0	0	1	0
Incidents reported on STEIS	Mthly Number	STEIS	твс		19	18		8	5	5	1
Incidents resulting in severe harm / death	Mthly Number	DATIX	ТВС		65	54		9	24	21	11
Duty of Candour compliance	Mthly %	DATIX	100%	100%	50%	50%	• • • •	17%	67%	67%	50%
		1			твс	твс					
Serious incidents relating to sub-optimal care	Mthly Number	DATIX	ТВС		_			TBC	твс	твс	твс
		<u> 0N 10: Imp</u>	provement	of Patient E	xperience A	ssociated wi	th Reduction of Complaints				
Complaints	Mthly Number	DATIX			243	198		72	63	63	45
PALS	Mthly Number	Pt Exp			1373	1046		367	326	353	327
				T			tient Experience				
Inpatient FFT Recommend	Mthly %	Pt Exp	94%	96%	89%	88%	• • •	88%	88%	89%	89%
Day Case FFT Recommend	Mthly %	Pt Exp	88%	87%	95%	95%		96%	95%	94%	95%
Emergency Services FFT Recommend	Mthly %	Pt Exp	88%	87%	80%	81%	↓ ↓	81%	82%	79%	78%
Maternity (Birth) FFT Recommend	Mthly %	Pt Exp	97%	96%	98%	97%	· · · · · · · · · · · · · · · · · · ·	100%	100%	91%	100%
Outpatient FFT Recommend	Mthly %	Pt Exp	92%	92%	92%	92%	•	92%	92%	92%	93%
Mixed Sex Accomodation	Mthly Number	DATIX	0	0	16	15		10	2	3	1
		1		1			of Communication to GP				
	Mthly %	IS	95%	95%	75.80%	75.61%		74.02%	76.72%	76.08%	76.37%
eDD compliance				3: Reductio	n of Harm A	ssociated wi	th Maternity				
	EF						+				
Number of Births	EF Mthly number	Maternity	500		1791	1325		427	445	453	466
Number of Births Normal Birth Rate	EF Mthly number Mthly %	Maternity Maternity	500 > 63.5%		59.89%	58.40%		56%	61.80%	56.95%	64.38%
Number of Births Normal Birth Rate Section Rate	EF Mthly number Mthly % Mthly %	Maternity Maternity Maternity	500 > 63.5% < 20.7%		59.89% 24.73%	58.40% 25.61%		56% 25%	61.80% 24.04%	56.95% 27.96%	64.38% 22.10%
Number of Births Normal Birth Rate Section Rate Number of Induction	EF Mthly number Mthly % Mthly % Mthly %	Maternity Maternity Maternity Maternity	500 > 63.5% < 20.7% 30%		59.89% 24.73% 27.66%	58.40% 25.61% 26.89%		56% 25% 31%	61.80% 24.04% 17.69%	56.95% 27.96% 31.54%	64.38% 22.10% 29.98%
Number of Births Normal Birth Rate Section Rate Number of Induction Number of still births	EF Mthly number Mthly % Mthly % Mthly number	Maternity Maternity Maternity Maternity Maternity	500 > 63.5% < 20.7% 30% < 1 mth		59.89% 24.73% 27.66% 7	58.40% 25.61% 26.89% 5		56% 25% 31% 3	61.80% 24.04% 17.69% 1	56.95% 27.96% 31.54% 1	64.38% 22.10% 29.98% 2
Number of Births Normal Birth Rate Section Rate Number of Induction	EF Mthly number Mthly % Mthly % Mthly %	Maternity Maternity Maternity Maternity	500 > 63.5% < 20.7% 30%		59.89% 24.73% 27.66%	58.40% 25.61% 26.89%		56% 25% 31%	61.80% 24.04% 17.69%	56.95% 27.96% 31.54%	64.38% 22.10% 29.98%