

Reporting to:	Trust Board - July 31st 2014
Title	Care Quality Commission – Intelligent Monitoring Report – July 14 release
Sponsoring Director	Director of Corporate Governance
Author(s)	Head of Assurance
Previously considered by	Exec Directors (July 14); ORG (July 14); HEC (July 14)
Executive Summary	<p>The Care Quality Commission (CQC) released their third Intelligent Monitoring Report (IMR) on 24 July.</p> <p>The Trust is identified as having one elevated risk (previously 2) and six risks, (previously three) which places us in Band 3 (of 6 bands, where Band 1 indicates the Trusts considered highest risk – and therefore most likely for inspection and Band 6, low risk Trusts).</p> <p>The draft action plan for the identified risks is appendix 1. The IMR is in the Information Pack</p>
Strategic Priorities	
<ol style="list-style-type: none"> 1. Improving Quality and Safety 2. Delivery of Operational Performance Standards 3. Service Reconfiguration 4. Workforce 5. Stakeholder Engagement 6. Finance and Investment Strategy 	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Reduce harm, deliver best clinical outcomes and improve patient experience through our Quality Improvement Strategy <input type="checkbox"/> To develop a transition plan, with supporting mitigation actions and contingency plans, that ensures the safety and short term sustainability of challenged clinical services. 2014/15 <input checked="" type="checkbox"/> To address the existing capacity shortfall and process issues to consistently deliver national healthcare standards. 2014/15 <input type="checkbox"/> To undertake a review of all current services at specialty level to inform future service and business decisions. 2015/16 <input type="checkbox"/> Complete and embed the successful reconfiguration of Women and Children's services <input type="checkbox"/> Develop a sustainable long term clinical services strategy for the Trust to deliver our vision of future healthcare services through our Future Fit Programme <input checked="" type="checkbox"/> Develop our leaders and promote staff engagement to make our organisation a great place to work through our People Strategy <input type="checkbox"/> Embed a customer focussed approach and improve relationships with our GPs through our Stakeholder Engagement Strategy <input type="checkbox"/> Develop a transition plan that ensures financial sustainability and addresses liquidity issues pending the outcome of the Future Fit Programme <input type="checkbox"/> Develop a robust Investment Strategy to modernise our equipment and estate to support service transformation and increase productivity through the use of technology)

Board Assurance Framework (BAF) Risks	<input checked="" type="checkbox"/> If we do not deliver safe care then patients may suffer avoidable harm and poor clinical outcomes and experience <input type="checkbox"/> If we do not implement our falls prevention strategy then patients may suffer serious injury <input type="checkbox"/> Risk to sustainability of clinical services due to potential shortages of key clinical staff <input checked="" type="checkbox"/> If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards <input type="checkbox"/> If we do not have a clear clinical service vision then we may not deliver the best services to patients <input checked="" type="checkbox"/> If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve <input type="checkbox"/> If we are unable to resolve our (historic) shortfall in liquidity and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment
Care Quality Commission (CQC) Domains	<input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Effective <input type="checkbox"/> Caring <input type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well led
<input type="checkbox"/> Receive <input checked="" type="checkbox"/> Review <input type="checkbox"/> Note <input checked="" type="checkbox"/> Approve	Recommendation <ul style="list-style-type: none"> ▪ To review the latest Intelligent Monitoring Report from CQC ▪ To review and approve the planned actions

Care Quality Commission – Intelligent Monitoring Report

1 Background

The Care Quality Commission (CQC) released a draft of the July 2014 Intelligent Monitoring Report (IMR) on June 23rd prior to publication on July 24th. This is the third IMR and further changes have been made to the construction since the previous version.

The indicators in the IMR will be used to inform questions about the quality of care, but not in isolation on their own to make judgments. Judgments will always be based on the result of an inspection, which will take into account the Intelligent Monitoring Analysis alongside local information from the public, the trust and other organisations. It contains what CQC call Tier 1 indicators (Tier 2 and 3 are still being developed). Using statistical tests to determine risk thresholds, the IMR identifies three possible ratings against each of the indicators– ‘no evidence of risk’, ‘risks’ and ‘elevated risks’.

2 July 2014 Intelligent Monitoring Report (IMR)

For SaTH there are now 95 applicable indicators. The identified risks are shown below:

Level	Indicator
Elevated risk	The number of cases assessed as achieving compliance with all nine standards of care measured within the National Hip Fracture Database.
Risk	Composite of Central Alerting System (CAS) safety alerts indicators (01-Apr-04 to 30-Apr-14) – alerts closed late
Risk	Composite indicator: In-hospital mortality - Nephrological conditions (01-Apr-12 to 18-Jun-14)
Risk	Referral to treatment times under 18 weeks: admitted pathway
Risk	Trust Development Authority (TDA) - Escalation score
Risk	NHS Staff Survey - KF9. Support from immediate managers
Risk	NHS Staff Survey - KF15. The proportion of staff who stated that the incident reporting procedure was fair and effective (01-Sep-13 to 31-Dec-13)
Risk	NHS Staff Survey - KF21. The proportion of staff reporting good communication between senior management and staff (01-Sep-13 to 31-Dec-13)

These results placed SaTH in band 3 (of six possible bands), where band 1 indicates the priority trusts for inspection. In October, the Trust was in band 1.

3 Changes since the previous IMR

Four new indicators have been judged to be risks:

- Composite of Central Alerting System (CAS) safety alerts indicators (01-Apr-04 to 30-Apr-14) – alerts closed late
- Composite indicator: In-hospital mortality - Nephrological conditions (01-Apr-12 to 18-Jun-14)
- NHS Staff Survey - KF15. The proportion of staff who stated that the incident reporting procedure was fair and effective (01-Sep-13 to 31-Dec-13)
- NHS Staff Survey - KF21. The proportion of staff reporting good communication between senior management and staff (01-Sep-13 to 31-Dec-13)

The following item is no longer judged to be a risk:

- **Inpatient Survey 2012 Q32 "Were you involved as much as you wanted to be in decisions about your care and treatment?"**

The results from the latest national inpatient survey show an improvement for this indicator.

The risk level for this indicator has reduced from an elevated risk.

- **Referral to treatment times under 18 weeks: admitted pathway**

4 Mortality and morbidity indicators

4.1 Composite indicator: In-hospital mortality - Nephrological conditions (01-Apr-12 to 18-Jun-14)

The construction of this indicator is complex and is undertaken by Dr Foster Intelligence (a provider of healthcare information in the UK). It is a composite indicator which is comprised of an aggregate measure of mortality, coupled with outlier alerts for individual diagnostic groups. To further complicate matters, these measures are applied to different time periods making analysis of the underlying issues very difficult.

The CQC Intelligent Monitoring Report states that there is no mortality outlier risk for SaTH over a longer period of time for either acute and unspecified renal failure or chronic renal failure. Although the Trust does not have access to the Dr Foster tool to readily access the measures described in the CQC IMR, when the same ICD10 codes (a clinical classification) are applied to the in-hospital Summary Hospital-level Mortality Indicator (SHMI) for Dec12 – Nov 13 there is also no overall mortality risk. The statistical tool used by Dr Foster for this measure is the CUSUM (cumulative sums). As measurements are taken, the difference between each measurement and the bench mark value is calculated, and this is cumulatively summed up (thus CUSUM). These are often used to identify small shifts in control.

Work by Tracey Lloyd, Patient Safety Advisor, on behalf of the Mortality Group suggests that the issue may be related to the way in which the aggregate measures are constructed. With aggregate data you need positive outcomes to follow any negative outcomes, in essence to cancel out the negative outcomes, otherwise the cumulative effect reaches a threshold and triggers an alert. The details of the relevant patients have been identified and sent to Dr Diwaker, Consultant Nephrologist, who is already carrying out work on Acute Kidney Injury (AKI); he will consult with colleagues and agree what further analysis/action is needed. This will be reported back through the Hospital Mortality Group, chaired by the Medical Director.

4.2 Other indicators

The IMR does not highlight areas where practice is good but it is worth pointing out that there are no risks in any of the following mortality indicators or maternity outlier alerts; and the readmission rates are lower than expected. The mortality indicators which are considered to be 'as expected' include:

- Hospital Standardised Mortality Rate (HSMR) - various composites
- Cardiological conditions and procedures
- Dermatological conditions
- Endocrinological conditions
- Gastroenterological and hepatological conditions and procedures
- Genito-urinary conditions
- Haematological conditions
- Infectious diseases
- Conditions associated with Mental health
- Musculoskeletal conditions
- Neurological conditions
- Paediatric and congenital disorders and perinatal mortality
- Respiratory conditions and procedures
- Trauma and orthopaedic conditions and procedures
- Vascular conditions and procedures

In addition, the following morbidity indicators show no evidence of increased risk:

- Maternity outlier alert: Elective Caesarean section
- Maternity outlier alert: Emergency Caesarean section
- Maternity outlier alert: Puerperal sepsis and other puerperal infection
- Maternity outlier alert: Maternal readmissions
- Maternity outlier alert: Neonatal readmissions
- Emergency readmissions following an emergency admission
- Emergency readmissions following an elective admission

Appendix 1: DRAFT Action plan

Level	Indicator	Comment	Director	Responsible	Current Position / Actions
Elevated risk	The number of cases assessed as achieving compliance with all nine standards of care measured within the National Hip Fracture Database.	Remains elevated risk - annual reporting cycle	Edwin Borman	Mark Cheetham – Care Group Medical Director (Scheduled Care)	Action plan in place Quality of care as measured through compliance with the Best Practice Tariff criteria has improved at the Royal Shrewsbury Hospital. Prior to January 2104, no patient achieved all nine criteria for best practice tariff at either of our sites. Between January and March, 36% of patients achieved all criteria RSH, and since April 2014, 54% of patients at RSH have achieved all criteria. As this is an annual reporting cycle risk will not reduce until 2015
Risk	Composite of Central Alerting System (CAS) safety alerts indicators (01-Apr-04 to 30-Apr-14) – alerts closed late	New	Sarah Bloomfield	Jo Banks - Acting Deputy Director of Nursing and Quality	This relates to late sign off of NHS England Patient Safety Alerts which have a short time scale for action and completion. The Patient Safety Team recently took over responsibility for the dissemination and reporting of alerts. The oversight for the monitoring of completed actions are reported through Clinical Governance Executive group and a sign off procedure is now in place.
Risk	Composite indicator: In-hospital mortality - Nephrological conditions (01-Apr-12 to 18-Jun-14)	New	Edwin Borman	Dr Diwaker, and Trust mortality group	Tracey Lloyd [Patient Safety Advisor] is undertaking further work with the Mortality Group and Dr Diwaker [Consultant Nephrologist] to understand the issues related by this alert.
Risk	Referral to treatment times under 18 weeks: admitted pathway	Reduced risk level - previously elevated risk	Debbie Kadum	Sara Biffen – Assistant Chief Operating Officer	Remedial Action Plan in place with actions monitored through Operational Performance Group
Risk	TDA - Escalation score	Remains a risk			linked to other risks
Risk	NHS Staff Survey - KF9. Support from immediate managers	Remains a risk in new staff survey	Victoria Maher		Values launched in Autumn 2013 with behaviours associated with values being developed currently.
Risk	NHS Staff Survey - KF21. The proportion of staff reporting good communication between senior management and staff	New	Victoria Maher		In house leadership development programme underway which will be rolled out to all band 8 staff. Revised appraisal process linked to Trust values
Risk	NHS Staff Survey - KF15. The proportion of staff who stated that the incident reporting procedure was fair and effective	New	Sarah Bloomfield	Jo Banks - Acting Deputy Director of Nursing and Quality	Revise and relaunch Guidelines for Managers and Employees on the management of individuals involved in adverse events

Intelligent Monitoring Report

Report on
Shrewsbury and Telford Hospital NHS Trust

July 2014

CQC has developed a new model for monitoring a range of key indicators about NHS acute and specialist hospitals. These indicators relate to the five key questions we will ask of all services – are they safe, effective, caring, responsive and well-led? The indicators will be used to raise questions about the quality of care. They will not be used on their own to make judgements. Our judgements will always be based on the result of an inspection, which will take into account our Intelligent Monitoring analysis alongside local information from the public, the trust and other organisations.

What does this report contain?

This report presents CQC's analysis of the key indicators (which we call 'tier one indicators') for Shrewsbury and Telford Hospital NHS Trust. We have analysed each indicator to identify two possible levels of risk.

We have used a number of tests to determine where the thresholds of "risk" and "elevated risk" sit for each indicator, based on our judgement of which statistical tests are most appropriate. These tests include CUSUM and z-scoring techniques. Where an indicator has 'no evidence of risk' this refers to where our statistical analysis has not deemed there to be a "risk" or "elevated risk". For some data sources these thresholds are determined by a rules-based approach - for example concerns raised by staff to CQC (and validated by CQC) are always flagged in the model.

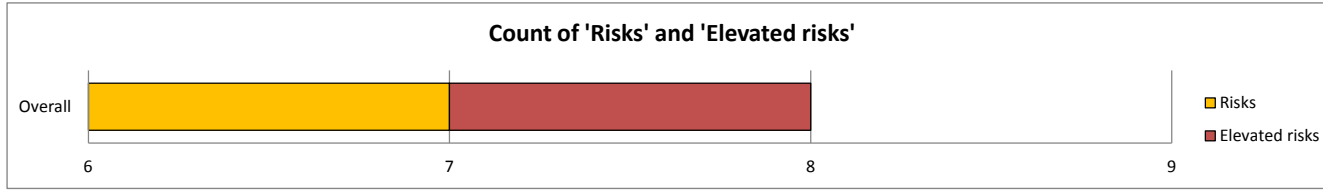
NHS Trusts that have had an inspection at the time of producing this update of Intelligent Monitoring have not been assigned a banding; all other indicator analysis results are shown in their report. "Recently inspected" is stated for these trusts. This is to reflect the fact that CQC's new comprehensive inspections will provide its definitive judgements for each organisation.

Further details of the analysis applied are explained in the accompanying guidance document.

What guidance is available?

We have published a document setting out the definition and full methodology for each indicator. If you have any queries or need more information, please email enquiries@cqc.org.uk or use the contact details at www.cqc.org.uk/contact-us

Trust Summary



Priority banding for inspection	3
Number of 'Risks'	7
Number of 'Elevated risks'	1
Overall Risk Score	9
Number of Applicable Indicators	95
Percentage Score	4.74%
Maximum Possible Risk Score	190

Elevated risk	The proportion of cases assessed as achieving compliance with all nine standards of care measured within the National Hip Fracture Database. (01-Apr-12 to 31-Mar-13)
Risk	Composite of Central Alerting System (CAS) safety alerts indicators (01-Apr-04 to 30-Apr-14)
Risk	Composite indicator: In-hospital mortality - Nephrological conditions
Risk	Composite indicator: Referral to treatment (01-Mar-14 to 31-Mar-14)
Risk	TDA - Escalation score (01-Mar-14 to 31-Mar-14)
Risk	NHS Staff Survey - KF9. The proportion of staff reported receiving support from immediate managers (01-Sep-13 to 31-Dec-13)
Risk	NHS Staff Survey - KF15. The proportion of staff who stated that the incident reporting procedure was fair and effective (01-Sep-13 to 31-Dec-13)
Risk	NHS Staff Survey - KF21. The proportion of staff reporting good communication between senior management and staff (01-Sep-13 to 31-Dec-13)

Tier One Indicators

Section	ID	Indicators	Observed	Expected	Risk?
Never Events	STEISNE	Never Event incidence (01-May-13 to 30-Apr-14)	0	-	No evidence of risk
Avoidable infections	CDIFF	Incidence of Clostridium difficile (C.difficile) (01-Apr-13 to 31-Mar-14)	31	37.13	No evidence of risk
	MRSA	Incidence of Meticillin-resistant Staphylococcus aureus (MRSA) (01-Apr-13 to 31-Mar-14)	1	3	No evidence of risk
Deaths in low risk diagnosis groups	MORTLOWR	Dr Foster Intelligence: Mortality rates for conditions normally associated with a very low rate of mortality (01-Oct-12 to 30-Sep-13)	Within expected range	-	No evidence of risk
Patient safety incidents	NRLSL03	Proportion of reported patient safety incidents that are harmful (01-Feb-13 to 31-Jan-14)	0.22	0.29	No evidence of risk
	NRLSL04	Potential under-reporting of patient safety incidents resulting in death or severe harm (01-Feb-13 to 31-Jan-14)	28	50.29	No evidence of risk
	NRLSL05	Potential under-reporting of patient safety incidents (01-Feb-13 to 31-Jan-14)	7591	8445.62	No evidence of risk
Central Alerting System	COM_CASIM	Composite of Central Alerting System (CAS) safety alerts indicators (01-Apr-04 to 30-Apr-14)	-	-	Risk
	CASIM01A01	<i>The number of alerts which CAS stipulated should have been closed by trusts during the preceding 12 months, but which were still open on the date CQC extracted data from the CAS system (01-May-13 to 30-Apr-14)</i>	0 alerts still open	-	No evidence of risk
	CASIM01B01	<i>The number of alerts which CAS stipulated should have been closed by trusts more than 12 months before, but which were still open on the date CQC extracted data from the CAS system (01-Apr-04 to 30-Apr-13)</i>	0 alerts still open	-	No evidence of risk
	CASIM01C01	<i>Percentage of CAS alerts with closing dates during the preceding 12 months which the trust has closed late (01-May-13 to 30-Apr-14)</i>	<50% & >=25% alerts closed late	-	Risk
Venous Thromboembolism	VTERA03	Proportion of patients risk assessed for Venous Thromboembolism (VTE) (01-Oct-13 to 31-Dec-13)	0.95	0.95	No evidence of risk
Mortality: Trust Level	SHMI01	Summary Hospital-level Mortality Indicator (01-Oct-12 to 30-Sep-13)	Trust's mortality rate is 'As Expected'	-	No evidence of risk
	COM_HSMR	Dr Foster Intelligence: Composite of Hospital Standardised Mortality Ratio indicators (01-Oct-12 to 30-Sep-13)	-	-	No evidence of risk
	HSMR	<i>Dr Foster Intelligence: Hospital Standardised Mortality Ratio (01-Oct-12 to 30-Sep-13)</i>	Within expected range	-	No evidence of risk
	HSMRWKDAY	<i>Dr Foster Intelligence: Hospital Standardised Mortality Ratio (Weekday) (01-Oct-12 to 30-Sep-13)</i>	Within expected range	-	No evidence of risk
	HSMRWKEND	<i>Dr Foster Intelligence: Hospital Standardised Mortality Ratio (Weekend) (01-Oct-12 to 30-Sep-13)</i>	Within expected range	-	No evidence of risk

Section	ID	Indicators	Observed	Expected	Risk?
	COM_CARDI	Composite indicator: In-hospital mortality - Cardiological conditions and procedures	-	-	No evidence of risk
	HESMORT24CU	<i>In-hospital mortality: Cardiological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	<i>No evidence of risk</i>
	MORTAMI	<i>Mortality outlier alert: Acute myocardial infarction (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTARRES	<i>Mortality outlier alert: Cardiac arrest and ventricular fibrillation (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTCABGI	<i>Mortality outlier alert: CABG (isolated first time) (01-Apr-12 to 14-Jul-14)</i>	Not included	Not included	Not included
	MORTCABGO	<i>Mortality outlier alert: CABG (other) (01-Apr-12 to 14-Jul-14)</i>	Not included	Not included	Not included
	MORTCASUR	<i>Mortality outlier alert: Adult cardiac surgery (01-Apr-12 to 14-Jul-14)</i>	Not included	Not included	Not included
	MORTCATH	<i>Mortality outlier alert: Coronary atherosclerosis and other heart disease (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTCHF	<i>Mortality outlier alert: Congestive heart failure; nonhypertensive (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTDYSRH	<i>Mortality outlier alert: Cardiac dysrhythmias (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTHVD	<i>Mortality outlier alert: Heart valve disorders (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTPHD	<i>Mortality outlier alert: Pulmonary heart disease (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	COM_CEREB	Composite indicator: In-hospital mortality - Cerebrovascular conditions	-	-	No evidence of risk
	HESMORT21CU	<i>In-hospital mortality: Cerebrovascular conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	<i>No evidence of risk</i>
	MORTACD	<i>Mortality outlier alert: Acute cerebrovascular disease (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	COM_DERMA	Composite indicator: In-hospital mortality - Dermatological conditions	-	-	No evidence of risk
	HESMORT35CU	<i>In-hospital mortality: Dermatological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	<i>No evidence of risk</i>
	MORTSKINF	<i>Mortality outlier alert: Skin and subcutaneous tissue infections (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTSKULC	<i>Mortality outlier alert: Chronic ulcer of skin (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	COM_ENDOC	Composite indicator: In-hospital mortality - Endocrinological conditions	-	-	No evidence of risk
	HESMORT29CU	<i>In-hospital mortality: Endocrinological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	<i>No evidence of risk</i>
	MORTDIABWC	<i>Mortality outlier alert: Diabetes mellitus with complications (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTDIABWOC	<i>Mortality outlier alert: Diabetes mellitus without complications (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTFLUID	<i>Mortality outlier alert: Fluid and electrolyte disorders (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	COM_GASTR	Composite indicator: In-hospital mortality - Gastroenterological and hepatological conditions and procedures	-	-	No evidence of risk
	HESMORT27CU	<i>In-hospital mortality: Gastroenterological and hepatological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	<i>No evidence of risk</i>
	MORTALCLIV	<i>Mortality outlier alert: Liver disease, alcohol-related (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTBILIA	<i>Mortality outlier alert: Biliary tract disease (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTGASHAE	<i>Mortality outlier alert: Gastrointestinal haemorrhage (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTGASN	<i>Mortality outlier alert: Noninfectious gastroenteritis (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTINTOBS	<i>Mortality outlier alert: Intestinal obstruction without hernia (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTOGAS	<i>Mortality outlier alert: Other gastrointestinal disorders (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTOLIV	<i>Mortality outlier alert: Other liver diseases (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTOPEJ	<i>Mortality outlier alert: Operations on jejunum (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTPERI	<i>Mortality outlier alert: Peritonitis and intestinal abscess (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTTEPBI	<i>Mortality outlier alert: Therapeutic endoscopic procedures on biliary tract (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTTEPLGI	<i>Mortality outlier alert: Therapeutic endoscopic procedures on lower GI tract (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTTEPUGI	<i>Mortality outlier alert: Therapeutic endoscopic procedures on upper GI tract (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>
	MORTTOJI	<i>Mortality outlier alert: Therapeutic operations on jejunum and ileum (01-Apr-12 to 14-Jul-14)</i>	-	-	<i>No evidence of risk</i>

Section	ID	Indicators	Observed	Expected	Risk?
Mortality	COM_GENIT	Composite indicator: In-hospital mortality - Genito-urinary conditions	-	-	No evidence of risk
	HESMORT31CU	<i>In-hospital mortality: Genito-urinary conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTUTI	<i>Mortality outlier alert: Urinary tract infections (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_HAEMA	Composite indicator: In-hospital mortality - Haematological conditions	-	-	No evidence of risk
	HESMORT28CU	<i>In-hospital mortality: Haematological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTDEFI	<i>Mortality outlier alert: Deficiency and other anaemia (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_INFEC	Composite indicator: In-hospital mortality - Infectious diseases	-	-	No evidence of risk
	HESMORT26CU	<i>In-hospital mortality: Infectious diseases (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTSEPT	<i>Mortality outlier alert: Septicaemia (except in labour) (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_MENTA	Composite indicator: In-hospital mortality - Conditions associated with Mental health	-	-	No evidence of risk
	HESMORT33CU	<i>In-hospital mortality: Conditions associated with Mental health (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTSENI	<i>Mortality outlier alert: Senility and organic mental disorders (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_MUSCU	Composite indicator: In-hospital mortality - Musculoskeletal conditions	-	-	No evidence of risk
	HESMORT36CU	<i>In-hospital mortality: Musculoskeletal conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTPATH	<i>Mortality outlier alert: Pathological fracture (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_NEPHR	Composite indicator: In-hospital mortality - Nephrological conditions	-	-	Risk
	HESMORT30CU	<i>In-hospital mortality: Nephrological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	Risk
	MORTRENA	<i>Mortality outlier alert: Acute and unspecified renal failure (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTRENC	<i>Mortality outlier alert: Chronic renal failure (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_NEURO	Composite indicator: In-hospital mortality - Neurological conditions	-	-	No evidence of risk
	HESMORT34CU	<i>In-hospital mortality: Neurological conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTEPIL	<i>Mortality outlier alert: Epilepsy, convulsions (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_PAEDI	Composite indicator: In-hospital mortality - Paediatric and congenital disorders and perinatal mortality	-	-	No evidence of risk
	HESMORT32CU	<i>In-hospital mortality: Paediatric and congenital disorders (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MATPERIMOR	<i>Maternity outlier alert: Perinatal mortality (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_RESPI	Composite indicator: In-hospital mortality - Respiratory conditions	-	-	No evidence of risk
	HESMORT25CU	<i>In-hospital mortality: Respiratory conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTASTHM	<i>Mortality outlier alert: Asthma (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTBRONC	<i>Mortality outlier alert: Acute bronchitis (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTCOPD	<i>Mortality outlier alert: Chronic obstructive pulmonary disease and bronchiectasis (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
MORTPLEU	<i>Mortality outlier alert: Pleurisy, pneumothorax, pulmonary collapse (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk	
MORTPNEU	<i>Mortality outlier alert: Pneumonia (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk	

Section	ID	Indicators	Observed	Expected	Risk?
	COM_TRAUM	Composite indicator: In-hospital mortality - Trauma and orthopaedic conditions and procedures	-	-	No evidence of risk
	HESMORT37CU	<i>In-hospital mortality: Trauma and orthopaedic conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTCRAN	<i>Mortality outlier alert: Craniotomy for trauma (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTFNOF	<i>Mortality outlier alert: Fracture of neck of femur (hip) (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTHFREP	<i>Mortality outlier alert: Head of femur replacement (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTHIPREP	<i>Mortality outlier alert: Hip replacement (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTINTINJ	<i>Mortality outlier alert: Intracranial injury (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTOFRA	<i>Mortality outlier alert: Other fractures (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTREDFB	<i>Mortality outlier alert: Reduction of fracture of bone (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTREDFBL	<i>Mortality outlier alert: Reduction of fracture of bone (upper/lower limb) (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTREDFNOF	<i>Mortality outlier alert: Reduction of fracture of neck of femur (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTSHUN	<i>Mortality outlier alert: Shunting for hydrocephalus (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	COM_VASCU	Composite indicator: In-hospital mortality - Vascular conditions and procedures	-	-	No evidence of risk
	HESMORT23CU	<i>In-hospital mortality: Vascular conditions (01-Dec-12 to 30-Nov-13)</i>	-	-	No evidence of risk
	MORTAMPUT	<i>Mortality outlier alert: Amputation of leg (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTANEUR	<i>Mortality outlier alert: Aortic, peripheral, and visceral artery aneurysms (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTCLIP	<i>Mortality outlier alert: Clip and coil aneurysms (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTOFB	<i>Mortality outlier alert: Other femoral bypass (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
	MORTPVA	<i>Mortality outlier alert: Peripheral and visceral atherosclerosis (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk
MORTREPAAA	<i>Mortality outlier alert: Repair of abdominal aortic aneurysm (AAA) (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk	
MORTTOFA	<i>Mortality outlier alert: Transluminal operations on the femoral artery (01-Apr-12 to 14-Jul-14)</i>	-	-	No evidence of risk	
Maternity and women's health	MATELECCS	Maternity outlier alert: Elective Caesarean section (01-Apr-12 to 11-Jul-14)	-	-	No evidence of risk
	MATEMERCs	Maternity outlier alert: Emergency Caesarean section (01-Apr-12 to 11-Jul-14)	-	-	No evidence of risk
	MATSEPSIS	Maternity outlier alert: Puerperal sepsis and other puerperal infections (01-Apr-12 to 11-Jul-14)	-	-	No evidence of risk
Re-admissions	MATMATRE	Maternity outlier alert: Maternal readmissions (01-Apr-12 to 11-Jul-14)	-	-	No evidence of risk
	MATNEORE	Maternity outlier alert: Neonatal readmissions (01-Apr-12 to 11-Jul-14)	-	-	No evidence of risk
	COM_ELRE_ON	Composite indicator: Emergency readmissions with an overnight stay following an elective admission (01-Nov-12 to 31-Oct-13)	-	-	No evidence of risk
	HESELRE_ON	<i>Emergency readmissions with an overnight stay following an elective admission (Cross sectional) (01-Nov-12 to 31-Oct-13)</i>	486	589.97	No evidence of risk
	HESELRECU_ON	<i>Emergency readmissions with an overnight stay following an elective admission (CUSUM) (01-Jul-13 to 31-Oct-13)</i>	-	-	No evidence of risk
	COM_EMRE_ON	Composite indicator: Emergency readmissions with an overnight stay following an emergency admission (01-Nov-12 to 31-Oct-13)	-	-	No evidence of risk
	HESEMRE_ON	<i>Emergency readmissions with an overnight stay following an emergency admission (Cross sectional) (01-Nov-12 to 31-Oct-13)</i>	3456	3710.11	No evidence of risk
HESEMRECU_ON	<i>Emergency readmissions with an overnight stay following an emergency admission (CUSUM) (01-Jul-13 to 31-Oct-13)</i>	-	-	No evidence of risk	

Section	ID	Indicators	Observed	Expected	Risk?
PROMs	PROMS52	PROMs EQ-5D score: Groin Hernia Surgery (01-Apr-13 to 31-Dec-13)	Nil significance	-	No evidence of risk
	PROMS_HIP	Composite of hip related PROMS indicators (01-Apr-13 to 31-Dec-13)	-	-	No evidence of risk
	PROMS53	PROMs EQ-5D score: Hip Replacement (PRIMARY) (01-Apr-13 to 31-Dec-13)	Nil significance	-	No evidence of risk
	PROMS54	PROMs Oxford score: Hip Replacement (PRIMARY) (01-Apr-13 to 31-Dec-13)	Nil significance	-	No evidence of risk
	PROMS_KNEE	Composite of knee related PROMS indicators (01-Apr-13 to 31-Dec-13)	-	-	No evidence of risk
	PROMS55	PROMs EQ-5D score: Knee Replacement (PRIMARY) (01-Apr-13 to 31-Dec-13)	Nil significance	-	No evidence of risk
	PROMS56	PROMs Oxford score: Knee Replacement (PRIMARY) (01-Apr-13 to 31-Dec-13)	Nil significance	-	No evidence of risk
Audit	MINAP22	Proportion of patients who received all the secondary prevention medications for which they were eligible (01-Apr-12 to 31-Mar-13)	0.98	0.90	No evidence of risk
	NHFD01	The proportion of cases assessed as achieving compliance with all nine standards of care measured within the National Hip Fracture Database. (01-Apr-12 to 31-Mar-13)	0	0.6	Elevated risk
	SSNAPD02	SSNAP Domain 2: overall team-centred rating score for key stroke unit indicator (01-Oct-13 to 31-Dec-13)	Level B	-	No evidence of risk
Compassionate care	IPSURTALKWOR	Inpatient Survey Q34 "Did you find someone on the hospital staff to talk to about your worries and fears?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	5.58	-	No evidence of risk
	IPSURSUPEMOT	Inpatient Survey Q35 "Do you feel you got enough emotional support from hospital staff during your stay?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	7.12	-	No evidence of risk
Meeting physical needs	IPSURHELPEAT	Inpatient Survey Q23 "Did you get enough help from staff to eat your meals?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	7.18	-	No evidence of risk
	IPSURINVDECI	Inpatient Survey Q32 "Were you involved as much as you wanted to be in decisions about your care and treatment?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	7.01	-	No evidence of risk
	IPSURCNTPAIN	Inpatient Survey Q39 "Do you think the hospital staff did everything they could to help control your pain?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	8.09	-	No evidence of risk
Overall experience	IPSUROVERALL	Inpatient Survey Q68 "Overall..." (I had a very poor/good experience) (Score out of 10) (01-Jun-13 to 31-Aug-13)	7.73	-	No evidence of risk
	FFTNHSESCORE	NHS England inpatients score from Friends and Family Test (Score out of 100) (01-Apr-13 to 31-Mar-14)	81.33	-	No evidence of risk
Treatment with dignity and respect	IPSURRSPDIGN	Inpatient Survey Q67 "Overall, did you feel you were treated with respect and dignity while you were in the hospital?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	8.88	-	No evidence of risk
Trusting relationships	IPSURCONFDOC	Inpatient Survey Q25 "Did you have confidence and trust in the doctors treating you?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	8.67	-	No evidence of risk
	IPSURCONFNUR	Inpatient Survey Q28 "Did you have confidence and trust in the nurses treating you?" (Score out of 10) (01-Jun-13 to 31-Aug-13)	8.83	-	No evidence of risk

Section	ID	Indicators	Observed	Expected	Risk?
Maternity Survey	MATSVBIRADV	Maternity Survey C1 "At the very start of your labour, did you feel that you were given appropriate advice and support when you contacted a midwife or the hospital?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	9.15	-	No evidence of risk
	MATSVBIRCOM	Maternity Survey C2 "During your labour, were you able to move around and choose the position that made you most comfortable?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	8.33	-	No evidence of risk
	MATSVCARBAT	Maternity Survey D6 "Thinking about your stay in hospital, how clean were the toilets and bathrooms you used?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	8.23	-	No evidence of risk
	MATSVCARINF	Maternity Survey D3 "Thinking about the care you received in hospital after the birth of your baby, were you given the information or explanations you needed?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	7.97	-	No evidence of risk
	MATSVSFINT	Maternity Survey C12 "Did the staff treating and examining you introduce themselves?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	9.19	-	No evidence of risk
	MATSVSTAFCON	Maternity Survey C14 "If you raised a concern during labour and birth, did you feel that it was taken seriously?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	9.17	-	No evidence of risk
	MATSVSTFDIG	Maternity Survey C18 "Thinking about your care during labour and birth, were you treated with respect and dignity?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	9.66	-	No evidence of risk
	MATSVSTFWOR	Maternity Survey C13 "Were you and/or your partner or a companion left alone by midwives or doctors at a time when it worried you?" (Score out of 10) (01-Feb-13 to 28-Feb-13)	7.97	-	No evidence of risk
Access measures	COM_AD_A&E	Composite indicator: A&E waiting times more than 4 hours (05-Jan-14 to 30-Mar-14)	-	-	No evidence of risk
	AD_A&E13	Proportion of patients spending more than 4 hours in Type 1 only A&E departments from arrival to discharge, transfer or admission (05-Jan-14 to 30-Mar-14)	0.09	0.05	No evidence of risk
	AD_A&E14	Proportion of patients spending more than 4 hours in Type 2 only A&E departments from arrival to discharge, transfer or admission (05-Jan-14 to 30-Mar-14)	0	0.05	No evidence of risk
	AD_A&E15	Proportion of patients spending more than 4 hours in Type 3 only A&E departments from arrival to discharge, transfer or admission (05-Jan-14 to 30-Mar-14)	0	0.05	No evidence of risk
	COM_RTT	Composite indicator: Referral to treatment (01-Mar-14 to 31-Mar-14)	-	-	Risk
	RTT_01	Monthly Referral to Treatment (RTT) waiting times for completed admitted pathways (on an adjusted basis): percentage within 18 weeks (01-Mar-14 to 31-Mar-14)	77.0%	90.0%	Risk
	RTT_02	Monthly Referral to Treatment (RTT) waiting times for completed non-admitted pathways: percentage within 18 weeks (01-Mar-14 to 31-Mar-14)	93.0%	95.0%	No evidence of risk
	RTT_03	Monthly Referral to Treatment (RTT) waiting times for incomplete pathways: percentage within 18 weeks (01-Mar-14 to 31-Mar-14)	89.7%	92.0%	No evidence of risk
	DIAG6WK01	Diagnostics waiting times: patients waiting over 6 weeks for a diagnostic test (01-Mar-14 to 31-Mar-14)	0.002	0.016	No evidence of risk
	WT_CAN26	All cancers: 62 day wait for first treatment from urgent GP referral (01-Jan-14 to 31-Mar-14)	0.8	0.85	No evidence of risk
	WT_CAN27	All cancers: 62 day wait for first treatment from NHS cancer screening referral (01-Jan-14 to 31-Mar-14)	0.96	0.9	No evidence of risk
	WT_CAN22	All cancers: 31 day wait from diagnosis (01-Jan-14 to 31-Mar-14)	0.97	0.96	No evidence of risk
	CND_OPS02	The proportion of patients whose operation was cancelled (01-Jan-14 to 31-Mar-14)	0.017	0.009	No evidence of risk
CND_OPS01	The number of patients not treated within 28 days of last minute cancellation due to non-clinical reason (01-Jan-14 to 31-Mar-14)	0.008	0.047	No evidence of risk	
AMBTURN06	Proportion of ambulance journeys where the ambulance vehicle remained at hospital for more than 60 minutes (01-Apr-14 to 30-Apr-14)	0.009	0.024	No evidence of risk	

Section	ID	Indicators	Observed	Expected	Risk?
Discharge and Integration	DTC40	Ratio of the total number of days delay in transfer from hospital to the total number of occupied beds (01-Jan-14 to 31-Mar-14)	0.023	0.023	No evidence of risk
Patient-led assessments of the care environment	COM_PLACE	Composite of PLACE indicators (01-Apr-13 to 30-Jun-13)	-	-	No evidence of risk
	PLACE01	PLACE score for cleanliness of environment (01-Apr-13 to 30-Jun-13)	0.98	0.96	No evidence of risk
	PLACE02	PLACE score for food (01-Apr-13 to 30-Jun-13)	0.78	0.84	No evidence of risk
	PLACE03	PLACE score for privacy, dignity and well being (01-Apr-13 to 30-Jun-13)	0.86	0.88	No evidence of risk
	PLACE04	PLACE score for facilities (01-Apr-13 to 30-Jun-13)	0.84	0.89	No evidence of risk
Reporting culture	NRLS14	Consistency of reporting to the National Reporting and Learning System (NRLS) (01-Apr-13 to 30-Sep-13)	6 months of reporting	-	No evidence of risk
	COM_SUSDQ	Data quality of trust returns to the HSCIC (01-Apr-13 to 28-Feb-14)	-	-	No evidence of risk
	SUSA&E02	Percentage of Secondary Uses Service (SUS) records for Accident and Emergency care with valid entries in mandatory fields. (01-Apr-13 to 28-Feb-14)	99.5%	96.6%	No evidence of risk
	SUSAPC02	Percentage of Secondary Uses Service (SUS) records for inpatient care with correct entries in mandatory fields. (01-Apr-13 to 28-Feb-14)	99.8%	97.3%	No evidence of risk
	SUSOP02	Percentage of Secondary Uses Service (SUS) records for outpatient care with valid entries in mandatory fields. (01-Apr-13 to 28-Feb-14)	99.7%	97.6%	No evidence of risk
	FFTRESP02	Inpatients response percentage rate from NHS England Friends and Family Test (01-Apr-13 to 31-Mar-14)	19.3%	29.1%	No evidence of risk
Partners	MONITOR01	Monitor - Governance risk rating (27-May-14 to 27-May-14)	Not included	Not included	Not included
	MONITOR02	Monitor - Continuity of service rating (27-May-14 to 27-May-14)	Not included	Not included	Not included
	TDA01	TDA - Escalation score (01-Mar-14 to 31-Mar-14)	4. Material issue	-	Risk
	NTS12	GMC National Training Survey – trainee's overall satisfaction (26-Mar-14 to 08-May-14)	Within the middle quartile (Q2/IQR)	-	No evidence of risk
Staff survey	STASURBG01	NHS Staff Survey - The proportion of staff who would recommend the trust as a place to work or receive treatment (01-Sep-13 to 31-Dec-13)	0.59	0.65	No evidence of risk
	NHSSTAFF04	NHS Staff Survey - KF7. The proportion of staff who were appraised in last 12 months (01-Sep-13 to 31-Dec-13)	0.78	0.83	No evidence of risk
	NHSSTAFF06	NHS Staff Survey - KF9. The proportion of staff reported receiving support from immediate managers (01-Sep-13 to 31-Dec-13)	0.63	0.65	Risk
	NHSSTAFF07	NHS Staff Survey - KF10. The proportion of staff receiving health and safety training in last 12 months (01-Sep-13 to 31-Dec-13)	0.65	0.75	No evidence of risk
	NHSSTAFF11	NHS Staff Survey - KF15. The proportion of staff who stated that the incident reporting procedure was fair and effective (01-Sep-13 to 31-Dec-13)	0.60	0.62	Risk
	NHSSTAFF16	NHS Staff Survey - KF21. The proportion of staff reporting good communication between senior management and staff (01-Sep-13 to 31-Dec-13)	0.22	0.29	Risk

Section	ID	Indicators	Observed	Expected	Risk?
Staffing	ESRSIC	Composite risk rating of ESR items relating to staff sickness rates (01-Apr-13 to 31-Mar-14)	-	-	No evidence of risk
	ESRSIC01	Proportion of days sick due to back problems in the last 12 months (01-Apr-13 to 31-Mar-14)	0.003	0.002	No evidence of risk
	ESRSIC02	Proportion of days sick due to stress in the last 12 months (01-Apr-13 to 31-Mar-14)	0.007	0.007	No evidence of risk
	ESRSIC03	Proportion of days sick in the last 12 months for Medical and Dental staff (01-Apr-13 to 31-Mar-14)	0.018	0.035	No evidence of risk
	ESRSIC04	Proportion of days sick in the last 12 months for Nursing and Midwifery staff (01-Apr-13 to 31-Mar-14)	0.044	0.042	No evidence of risk
	ESRSIC05	Proportion of days sick in the last 12 months for other clinical staff (01-Apr-13 to 31-Mar-14)	0.045	0.045	No evidence of risk
	ESRSIC06	Proportion of days sick in the last 12 months for non-clinical staff (01-Apr-13 to 31-Mar-14)	0.044	0.039	No evidence of risk
	ESRReg	Composite risk rating of ESR items relating to staff registration (31-Mar-14 to 31-Mar-14)	-	-	No evidence of risk
	ESRREG01	Proportion of Medical and Dental staff that hold an active professional registration (31-Mar-14 to 31-Mar-14)	1	0.99	No evidence of risk
	ESRREG02	Proportion of Nursing and Midwifery staff that hold an active professional registration (31-Mar-14 to 31-Mar-14)	1	0.99	No evidence of risk
	ESRTO	Composite risk rating of ESR items relating to staff turnover (01-Apr-13 to 31-Mar-14)	-	-	No evidence of risk
	ESRTURO1	Turnover rate (leavers) for Medical and Dental staff (01-Apr-13 to 31-Mar-14)	0.11	0.1	No evidence of risk
	ESRTURO2	Turnover rate (leavers) for Nursing and Midwifery staff (01-Apr-13 to 31-Mar-14)	0.06	0.11	No evidence of risk
	ESRTURO3	Turnover rate (leavers) for other clinical staff (01-Apr-13 to 31-Mar-14)	0.09	0.12	No evidence of risk
	ESRTURO4	Turnover rate (leavers) for all other staff (01-Apr-13 to 31-Mar-14)	0.08	0.11	No evidence of risk
	ESRSTAB	Composite risk rating of ESR items relating to staff stability (01-Apr-13 to 31-Mar-14)	-	-	No evidence of risk
	ESRSTA01	Stability Index for Medical and Dental staff (01-Apr-13 to 31-Mar-14)	0.94	0.94	No evidence of risk
	ESRSTA02	Stability Index for Nursing and Midwifery staff (01-Apr-13 to 31-Mar-14)	0.93	0.91	No evidence of risk
	ESRSTA03	Stability Index for other clinical staff (01-Apr-13 to 31-Mar-14)	0.93	0.9	No evidence of risk
	ESRSTA04	Stability Index for non clinical staff (01-Apr-13 to 31-Mar-14)	0.94	0.91	No evidence of risk
	ESRSUP	Composite risk rating of ESR items relating to staff support/ supervision (31-Mar-14 to 31-Mar-14)	-	-	No evidence of risk
	ESRSUP01	Ratio of Band 6 Nurses to Band 5 Nurses (31-Mar-14 to 31-Mar-14)	0.39	0.4	No evidence of risk
	ESRSUP02	Ratio of Charge Nurse/ Ward Sister (Band 7) to Band 5/6 Nurses (31-Mar-14 to 31-Mar-14)	0.15	0.18	No evidence of risk
	ESRSUP03	Proportion of all ward staff who are registered nurses (31-Mar-14 to 31-Mar-14)	0.65	0.68	No evidence of risk
	ESRSUP04	Ratio of consultant doctors to non-consultant doctors (31-Mar-14 to 31-Mar-14)	0.73	0.67	No evidence of risk
	ESRSUP05	Ratio of band 7 Midwives to band 5/6 Midwives (31-Mar-14 to 31-Mar-14)	0.25	0.25	No evidence of risk
	ESRSTAFF	Composite risk rating of ESR items relating to ratio: Staff vs bed occupancy (31-Mar-14 to 31-Mar-14)	-	-	No evidence of risk
	ESRRATO1	Ratio of all medical and dental staff to occupied beds (31-Mar-14 to 31-Mar-14)	5.7	4.53	No evidence of risk
	ESRRATO2	Ratio of all nursing staff to occupied beds (31-Mar-14 to 31-Mar-14)	2.76	2.18	No evidence of risk
	ESRRATO3	Ratio of all other clinical staff to occupied beds (31-Mar-14 to 31-Mar-14)	2.38	2.02	No evidence of risk
	ESRRATO4	Ratio of all midwifery staff to births (31-Mar-14 to 31-Mar-14)	25.46	28.56	No evidence of risk
FLUVAC01	Healthcare Worker Flu vaccination uptake (01-Sep-13 to 31-Dec-13)	0.66	0.58	No evidence of risk	

Section	ID	Indicators	Observed	Expected	Risk?
Qualitative intelligence	WHISTLEBLOW	Whistleblowing alerts (22-Mar-13 to 02-Jun-14)	0	-	No evidence of risk
	GMC	GMC - Enhanced monitoring (01-Mar-09 to 21-Apr-14)	-	-	No evidence of risk
	SAFEGUARDING	Safeguarding concerns (23-May-13 to 22-May-14)	-	-	No evidence of risk
	SYE	CQC Share Your Experience - the number of negative comments is high relative to positive comments (01-Feb-13 to 31-Jan-14)	9	6.18	No evidence of risk
	NHSCHOICES	NHS Choices - the number of negative comments is high relative to positive comments (31-Jan-13 to 30-Jan-14)	18	18.04	No evidence of risk
	P_OPINION	Patient Opinion - the number of negative comments is high relative to positive comments (22-Feb-13 to 21-Feb-14)	44	2404.02	No evidence of risk
	CQC_COM	CQC complaints (23-May-13 to 22-May-14)	22	36.52	No evidence of risk
	PROV_COM	Provider complaints (01-Apr-12 to 31-Mar-13)	671	577.36	No evidence of risk