

Aggregated Scorecard Q1

Ind No.	Area of Practice	Quality Requirement	Threshold	Royal Bournemouth and Christchurch				Poole Hospital				Dorset County Hospital				Dorset Healthcare University NHS Foundation Trust				Comment	
				Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4		
	Emergency Department	12 hour trolley waits	0 = Green 1 or above = Red	0				0					0								
		Number of handovers between ambulance and A&E taking between 30 and 60 minutes	0	66				40						100							
		Number of handovers between ambulance and A&E taking place over 60 minutes	0	9				1						21							
	Stoke Services	Overall SSNAP score	C or above (>60)	C				D					D								
	Mortality	Summary hospital level mortality indicator (score)	<1 - Green	1.027				0.99						1.08							
		Summary hospital level mortality indicator (Band)		2				2						2							
		Hospital Standardised Mortality rate	<100 = Green																		
	Learning Disability	Compliance with Monitor requirements in relation to services for people with a learning disability	Red/Amber or Green	Green				Green					Green								
	Surgical Checklist	Percentage compliance with WHO Check list	100% - Green	90.1%				90.3%					99.4%								
	Risk Assessments and Screening	Percentage of FALLS assessments completed within 24 hours of admission		90%				97%					Au						98%		
		Percentage of VTE risk assessments completed upon admission		95%				98%					97%						96%		
		Percentage of admissions screened for NUTRITION within 24 hours of admission to hospital	95% - Green 85% - Amber Under 95% - Amber Under 85% - Red		87%				83%										93%		
		Percentage of admissions that have a PRESSURE ULCER risk assessment completed within 6 hours of admission		94%				99%											98%		
		Percentage of patients screened for MRSA						86%						97%					86%		
	Pressure ulcers	Number of all provider acquired pressure Ulcers	N/A	369				45					20						111		
		Number of all provider inherited pressure ulcers	N/A	693				144					84						239		
	Staffing	Staffing Levels Publicly displayed	Yes/No	Yes				Yes					Yes						Yes		
		Staff turnover		12.7%				1.1%					9.4%								
		Staff appraisal rate	90% - Green 80% - Amber Under 90% - Amber Under 80% - Red	8.5%				83.0%					85.0%								
		Mandatory training rate		77.2%				83.0%					80.1%								
		Sickness rate	Internal Trust target	4.1%				4					3.2%								
		Percentage of eligible staff Annual Flu Vaccination	Internal Trust target																		
	Mixed Sex accomodation Breach	Number of non-clinically indicated mixed sex accomodation breaches	0 = Green or above = Red 1	0				0					0						0		
	Infection Control	MRSA Bacteraemia	0 = Green or above = Red 1	0				0					0						0		
		Clostridium Difficile	As per contract	0				4					1						5		
	VTE	Percentage of eligible pateints who have a VTE risk assesment completed upon admission	95% or above - Green 90% - 95% - Amber Under 90% - Red	95.4%				98.0%					97.0%						97.0%		
		Percentage of patients who receive appropriate VTE prophylaxis	100% - Green 90% - 95% - Amber Under 90% - Red	94.1%				99.0%					91						NA		
		No Harm		157				183					56						51		

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	Medication Errors	Low Harm		35				69				19				9					
		Moderate Harm		3				1				1				0					
		Severe Harm		1				0				0				0					
		Death		0				0				0				0					
		Number of medication errors relating to controlled drugs		42				34				*				40					
	Duty of Candour	Number of times duty of candour used	N/A	100%				14				10				8					
	Never Events	Number of Never Events	0	0	1			0	1			0	1			0	0				
	Serious Incidents	Number of serious incidents relating to Pressure Ulcers		3				3				2									
		Number of serious incidents relating to Falls		5				7				2									
		Number of serious incidents - other	N/A	5				7				6									
	Incidents	Number of incidents by harms:																			
		No Harm		1126				1399				1045									
		Low Harm		438				793				743									
		Moderate Harm		17				45				283									
		Severe Harm		0				0				10									
		Death		1				0				2									
	Early Warning Score	Percentage of observations and scores completed	95%					99.0%				98.0%				94.0%					
	Safeguarding	Percentage of eligible staff trained in Level 1 Safeguarding Children		83.0%				90.0%				100.0%				99.6%					
		Percentage of eligible staff trained in Level 2 Safeguarding Children		82.0%				89.0%				58.0%				90.0%					
		Percentage eligible staff trained in Level 3 Safeguarding Children	90-100% - Green 80%	79.0%				92.0%				66.0%				96.0%					
		Percentage staff trained in Safeguarding Adults Level 1	90% - Amber Under 80% - Red	83.0%				72.0%				74.0%				93.0%					
		Percentage staff trained in Safeguarding Adults Level 2		32.0%				75.0%				68.0%				90.0%					
		Percentage staff trained in relation to Mental Capacity Act and DOLs		*				70.0%				79.0%				90.0%					
	COPD	Percentage of patients of eligible pateints discharged with a completed COPD bundle	80% = Green 70 - 80% =Amber under 70% = Red	82.0%				*			*				1						
	Complaints	Number of complaints received	N/A	87				27				201			91						
		Percentage of complaints acknowledged within 3 operational days	100% - Green 90% - 99% - Amber Under 90% - Red	93.0%				57.0%				98.0%			90.0%						
		Percentage of complaints responded to within agreed timescales		51.0%				9.0%				43.0%			58.0%						
		Date when last complaints summary published on website	N/A									#####									