

# For Reading – CQC Insight Report

## 4 June 2019



Agenda Item No: 14.1

## Trust Board Report

<b>Meeting Date:</b>	4 June 2019
<b>Title:</b>	CQC Insight report for RWT (April 19)
<b>Executive Summary:</b>	<p>The Insight report contains quality, performance and activity information from various data streams. This information held by CQC is used to monitor Trusts and to inform decisions on local intervention and inspections. The report is produced monthly for Trust to utilise for local redress actions.</p> <p>All Core Services are required to review the data contained having regard to any proactive or reactive redress needed.</p> <p>The report is broken down into 4 main sections and is shown by Trust (overall), by site location and by each Core Service. The four main sections are:</p> <p><u>Facts, Figures and ratings</u> – Shows contextual information linked to Core Services.</p> <p><u>Trust and Core Service analysis</u> – Shows the latest and previous data held (data may be quarterly or annual) using a 5 point scale (from much worst to much better than National comparison) taken from the data provider. Some data is not amenable to change over time so contain no arrows.</p> <p><u>Featured data sources</u> – Contains various data inputs from National Learning and reporting system (NRLS), Safety Thermometer, Mortality, National audits, Patient/Staff Survey etc.</p> <p><u>Definitions</u> – Provides a key to ratings, performance levels and changes within the report.</p> <p>The Trust composite score is created from 12 specific indicators in the insight report; it is used to assess/monitor Trust performance and is linked to a likelihood of ratings for similar scoring Trusts.</p> <p><b>Some key features in April 19 report:</b></p> <p><b>Page 19 Trust Composite score – No change</b>, remains in the middle 50% of acute trusts.</p> <p><b>Page 18 – No change in April 19 report:</b></p> <p><b>Much better than national – Same</b> - Sick days for medical and dental staff</p> <p><b>Much worse than national – Added</b> - Stability of other clinical staff</p> <p><b>Improved – No change</b> - Never Events (total events with rule-based risk assessment and with statistical comparison to bed days), NRLS Consistency of reporting, Patient-led assessment of environment for dementia care (%), Patient-led assessment of food (%)</p> <p><b>Declined – Added</b> - Stability of other clinical staff</p> <p><b>Page 41 – Safety Thermometer</b> – (same as Mar 19 apart from highest rate of PUs per 100 patient changed to C24 from C18 in Mar 19.</p> <p><b>National Audits - Page 45</b> No change to Mar 19 Insight report.</p> <p><b>Staff and Patient survey</b> - No data refresh</p>

<b>Action Requested:</b>	<b>Receive and note,</b>
<b>For the attention of the Board</b>	
<b>Assure</b>	<ul style="list-style-type: none"> <li>• The CQC Insight report is reviewed and communicated for local redress.</li> <li>• Work stream in place to address alerting areas for Mortality, Cancer Performance, Falls etc are reported separately.</li> </ul>
<b>Advise</b>	<ul style="list-style-type: none"> <li>• Due to old data periods/time lag the compliance status on various indicators may not be the latest known and acted upon by the relevant service.</li> <li>• Data periods may be different between indicators</li> </ul>
<b>Alert</b>	<ul style="list-style-type: none"> <li>• Staff Survey results Mar 19 have not been refreshed in the April Insight report.</li> <li>• The Insight report is considered at monthly meetings held with CQC relationship manager/CQC Inspector and may prompt follow up inquiries made to Division/Directorate/Specialties to account for data.</li> </ul>
<b>Author + Contact Details:</b>	Tel 01902 698121 Email <a href="mailto:maria.arthur@nhs.net">maria.arthur@nhs.net</a>
<b>Links to Trust Strategic Objectives</b>	<ol style="list-style-type: none"> <li>1. Create a culture of compassion, safety and quality</li> <li>2. Proactively seek opportunities to develop our services</li> <li>3. To have an effective and well integrated local health and care system that operates efficiently</li> <li>4. Attract, retain and develop our staff, and improve employee engagement</li> <li>5. Maintain financial health – Appropriate investment to patient services</li> <li>6. Be in the top 25% of all key performance indicators</li> </ol>
<b>Resource Implications:</b>	None
<b>Report Data Caveats</b>	See the advise section above. Data may be subject to cleansing and revision.
<b>CQC Domains</b>	<p><b>Safe:</b> patients, staff and the public are protected from abuse and avoidable harm.</p> <p><b>Effective:</b> care, treatment and support achieves good outcomes, helping people maintain quality of life and is based on the best available evidence.</p> <p><b>Caring:</b> staff involve and treat everyone with compassion, kindness, dignity and respect.</p> <p><b>Responsive:</b> services are organised so that they meet people's needs.</p> <p><b>Well-led:</b> the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.</p>
<b>Equality and Diversity Impact</b>	No adverse impact on PPCs
<b>Risks: BAF/ TRR</b>	TRR 3644 – Failure to improve CQC Compliance gaps
<b>Public or Private:</b>	
<b>Other formal bodies involved:</b>	
<b>References</b>	The Health and Social Care Act 2008 (Regulated Activities) Regulations 2015

<b>NHS Constitution:</b>	In determining this matter, the Board should have regard to the Core principles contained in the Constitution of: <ul style="list-style-type: none"><li>• Equality of treatment and access to services</li><li>• High standards of excellence and professionalism</li><li>• Service user preferences</li><li>• Cross community working</li><li>• Best Value</li><li>• Accountability through local influence and scrutiny</li></ul>
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<b>Appendices</b>	
Appendix 1 – CQC Insight report – RWT (April 19)	

**Appendix 1**

# CQC Insight for Acute NHS Trusts

## The Royal Wolverhampton NHS Trust

### What's new in the April release of CQC Insight for Acute Trusts ...

#### Facts and figures

Refreshed data streams:

- Trust – Bed numbers
- A&E – A&E Quality Indicators
- Activity figures from HES
- Workforce Statistics

#### Featured data sources

Refreshed pages:

- Trust - Patient Safety Thermometer, Ambulance Turnaround, A&E Sitreps, HSMR, SHMI, Incidents
- Outliers

#### Trust and core service analysis

Refreshed data streams:

- Trust – STEIS Never Events, Whistleblowing, NRLS, SOF, FFCEs, HSMR, ESR, GMC Enhanced Monitoring, SHMI
- A&E – A&E Quality Indicators, A&E Sitreps, Ambulance Turnaround, FFT, STEIS Never Events, CAS
- Medicine – FFT, STEIS Never Events, RTT, Safety Thermometer
- Surgery – STEIS Never Events, Safety Thermometer, RTT, FFT
- Critical Care – STEIS Never Events, Bed Occupancy, HES
- Maternity – FFT, STEIS Never Events, Outliers, ESR
- CYP – STEIS Never Events, Critical Care Bed Occupancy
- Outpatients – Diagnostic Waiting Times, STEIS Never Events, RTT, HES Outpatients, FFT

#### Sharing with Trusts

Next date for sharing: week commencing 20 May 2019

Please note:

The latest NHS staff survey data was published on 26th February and will be included in future iterations of Acute Insight following a period of development.

### Facts, figures and ratings

<b>FACTS, FIGURES &amp; RATINGS</b>		<b>TRUST &amp; CORE SERVICE ANALYSIS</b>			<b>FEATURED DATA SOURCES</b>			<b>DEFINITIONS</b>		
TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
<ul style="list-style-type: none"> <li>Activity levels at trust, location and core service level</li> <li>Capacity (staffing, beds)</li> <li>Financial information</li> </ul>						<ul style="list-style-type: none"> <li>Population served</li> <li>Ratings overview - latest ratings with indication of changes in intelligence</li> </ul>				

### Trust and core service analysis

<b>FACTS, FIGURES &amp; RATINGS</b>		<b>TRUST &amp; CORE SERVICE ANALYSIS</b>			<b>FEATURED DATA SOURCES</b>			<b>DEFINITIONS</b>		
OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
<ul style="list-style-type: none"> <li>Intelligence overview of key messages</li> <li>Trust composite indicator</li> </ul>						<ul style="list-style-type: none"> <li>Indicator detail pages - trust wide and for each core service</li> </ul>				

### Featured data sources

<b>FACTS, FIGURES &amp; RATINGS</b>		<b>TRUST &amp; CORE SERVICE ANALYSIS</b>			<b>FEATURED DATA SOURCES</b>			<b>DEFINITIONS</b>		
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS			
<ul style="list-style-type: none"> <li>Incident reporting (NRLS)</li> <li>Safety thermometer</li> <li>Maternity and Mortality Outliers</li> <li>Mortality (SHMI and HSMR)</li> </ul>						<ul style="list-style-type: none"> <li>National Clinical Audits (HQIP)</li> <li>A&amp;E waits</li> <li>Surveys - NHS Staff Survey, Staff friends and family and Inpatient Survey</li> </ul>				

### Definitions

<b>FACTS, FIGURES &amp; RATINGS</b>		<b>TRUST &amp; CORE SERVICE ANALYSIS</b>			<b>FEATURED DATA SOURCES</b>			<b>DEFINITIONS</b>		
KEY										
<ul style="list-style-type: none"> <li>Key of symbols and colours</li> </ul>										

# The Royal Wolverhampton NHS Trust

## Facts and figures > Trust level

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Trust level rating:

Date of last inspection: 20/03/2018

Safe	Effective	Caring	Responsive	Well led	Overall
<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

### Trust organisation history

Under development

### Registered locations

- Alfred Squire Road Health Centre
- West Park Rehabilitation Hospital
- New Cross Hospital
- The Phoenix Walk in Centre
- Lakeside Medical Centre
- Ettingshall Medical Centre
- Warstones Health Centre
- Penn Manor Medical Practice
- Thornley Street Medical Centre
- Cannock Chase Hospital
- West Park Surgery
- Lea Road Medical Practice
- Coalway Road Medical Practice
- The Royal Wolverhampton NHS Trust Community Services

### Population estimate: 358,103

These experimental population estimates have been calculated by PHE derived from HES admissions and small area population estimates for 2013. Estimates are only presented for non-specialist trusts.

Activity	Previous	Latest	Change	National comparison
Inpatient admissions	110,952 Jan 17 - Dec 17	111,209 Jan 18 - Dec 18	(0%)	
Outpatient appointments	1,004,124 Jan 17 - Dec 17	1,011,746 Jan 18 - Dec 18	(+1%)	
A&E attendances	187,501 Jan 17 - Dec 17	181,636 Jan 18 - Dec 18	(-3%)	
Number of deliveries	5,060 Jan 17 - Dec 17	4,775 Jan 18 - Dec 18	(-6%)	
Number of deaths	1,937 Jan 17 - Dec 17	2,037 Jan 18 - Dec 18	(+5%)	

Capacity	Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>				
Number of general and acute beds	802 Oct 17 - Dec 17	823 Oct 18 - Dec 18	(+3%)	
Number of maternity beds	36 Oct 17 - Dec 17	36 Oct 18 - Dec 18	(0%)	
Number of critical care beds	42 Jan 18	42 Jan 19	(0%)	
Number of bed days	331,665 Jan 17 - Dec 17	324,672 Jan 18 - Dec 18	(-2%)	
Number of staff (WTE):	Not applicable	7,687		
Medical	Not applicable	886 Dec 18		
Nursing	Not applicable	1,892 Dec 18		
Other(s)	Not applicable	4,909 Dec 18		
Care hours	Data not yet available	Data not yet available		

Finance and governance	Previous	Latest	Change	National comparison
Projected surplus [£000s] (deficit)		11,210	NA	
Turnover [£000s]	535,044	548,538	(+3%)	
NHSI financial special measures	No	No	NA	
NHSI Single Oversight Framework segmentation	NA	Providers offered targeted support.	NA	



# The Royal Wolverhampton NHS Trust

## Facts and figures > Trust level inpatient admissions

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Trust level rating:

Date of last inspection: 20/03/2018

	<b>Safe</b>	<b>Effective</b>	<b>Caring</b>	<b>Responsive</b>	<b>Well led</b>	<b>Overall</b>
	<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

### Trust organisation history

Under development

### Registered locations

- Alfred Squire Road Health Centre
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### Population estimate: 358,103

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	Inpatient admissions	Previous	Latest	Change	National comparison
	Inpatient admissions (total)	110,952	111,209	(0%)	
<b>Service</b>	Children	8,462	7,761	(-8%)	
	Medicine	60,109	61,989	(+3%)	
	Surgery	31,971	32,020	(0%)	
<b>Condition (Top 3)</b>	Oncology	24,575	24,411	(-1%)	
	Gastroenterology and hepatology	14,722	15,423	(+5%)	
	Miscellaneous	11,263	10,841	(-4%)	
<b>Age group (%)</b>	Under 1	2.3%	2.0%	(0%)	
	1 to 3	2.3%	2.2%	(0%)	
	4 to 15	4.7%	4.2%	(-1%)	
	16 to 17	0.7%	0.7%	(0%)	
	18 to 74	66.1%	66.0%	(0%)	
	75 and over	24.0%	24.9%	(+1%)	
<b>Ethnicity (%)</b>	White	77.0%	78.0%	(+1%)	
	Asian	9.1%	9.5%	(0%)	
	Not stated	7.4%	5.9%	(-2%)	
	Black	3.8%	3.8%	(0%)	
	Mixed	1.7%	1.7%	(0%)	
	Other	1.0%	1.0%	(0%)	
		Jan 17 - Dec 17	Jan 18 - Dec 18		

# The Royal Wolverhampton NHS Trust

## Facts and figures > Locations

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Location level rating:

	Safe	Effective	Caring	Responsive	Well led	Overall
Overall	<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018
Cannock Chase Hospital	<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>RI</b> 27/6/2018	<b>RI</b> 27/6/2018
New Cross Hospital	<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

Activity	Cannock Chase Hospital	New Cross Hospital			
Inpatient admissions Jan 18 - Dec 18	19,006	92,139			
Outpatient appointments Jan 18 - Dec 18	158,328	852,187			
Number of deaths (under development)					
Location level facilities	Cannock Chase Hospital	New Cross Hospital			
Neonatal unit type	-	NICU			

# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > Urgent and emergency care

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

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TRUST	LOCATION	<b>URGENT &amp; EMERGENCY</b>	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Location ratings for urgent and emergency care:

Cannock Chase Hospital

Safe: NA    Effective: NA    Caring: NA    Responsive: NA    Well led: NA    Overall: NA

New Cross Hospital

RI 27/6/2018    G 27/6/2018    G 27/6/2018    G 27/6/2018    G 27/6/2018    G 27/6/2018

### Current enforcement and regulatory action

Under development

### Outstanding practice

Under development

### Registered locations where urgent and emergency care service has been rated

- New Cross Hospital

Activity	Previous	Latest	Change	National comparison
A&E attendances (total)	187,501 Jan 17 - Dec 17	181,636 Jan 18 - Dec 18	(-3%)	
Children attending A&E (total)	40,401 Jan 17 - Dec 17	36,368 Jan 18 - Dec 18	(-10%)	
Attendees arriving by ambulance (total)	43,089	43,800	(+2%)	
% of total attendances	23.0% Jan 17 - Dec 17	24.1% Jan 18 - Dec 18	(+1%)	
Number of A&E attendances admitted	26,395	1,739	(-93%)	
% of total attendances	14.1% Jan 17 - Dec 17	1.0% Jan 18 - Dec 18	(-13%)	
Patients left without being seen (%)			NA	
Reattendances within 7 days (%)	8.6% Jan 18	10.5% Jan 19	(+2%)	

Source(s): Hospital Episode Statistics; NHS Digital - A&E Quality

Capacity	Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>				
Under development				

Source(s):

# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > Medical care

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

TRUST	LOCATION	URGENT & EMERGENCY	<b>MEDICAL CARE</b>	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Location ratings for medicine:

	Safe	Effective	Caring	Responsive	Well led	Overall
Cannock Chase Hospital	<b>G</b> 1/10/2018	<b>G</b> 1/10/2018	<b>G</b> 1/10/2018	<b>G</b> 1/10/2018	<b>G</b> 1/10/2018	<b>G</b> 1/10/2018
New Cross Hospital	<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

Current enforcement and regulatory action	Activity	Previous	Latest	Change	National comparison
Under development	Admissions (total)	60,109	61,989	(+3%)	
Outstanding practice	Elective admissions	956	844	(-12%)	
	Emergency admissions	18,374	20,284	(+10%)	
Under development	Day case	40,779	40,861	(0%)	
Registered locations where medicine service has been rated	By specialty (top 3):				
	General medicine	28,396	30,152	(+6%)	
	Clinical oncology	8,237	8,235	(0%)	
	Clinical haematology	8,138	7,066	(-13%)	
	Average length of stay (days)	7.9	7.6	(-5%)	
Source(s): Hospital Episode Statistics					
Capacity		Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>					
	Medical wards (number)	Data not yet available	Data not yet available		
	Medical beds (number)	Data not yet available	Data not yet available		
	Medical consultants (WTE)	Not applicable	114 Dec 18		
Source(s): NHS Digital - Workforce statistics					

# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > Surgery

FACTS, FIGURES & RATINGS

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DEFINITIONS

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TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	<b>SURGERY</b>	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Location ratings for surgery:

	Safe	Effective	Caring	Responsive	Well led	Overall
Cannock Chase Hospital	<b>RI</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018
New Cross Hospital	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

### Current enforcement and regulatory action

Under development

### Outstanding practice

Under development

### Registered locations where surgery service has been rated

- Cannock Chase Hospital
- New Cross Hospital

Activity	Previous	Latest	Change	National comparison
Elective admissions (number)	4,715 Jan 17 - Dec 17	4,815 Jan 18 - Dec 18	(+2%)	
Emergency admissions (number)	8,507 Jan 17 - Dec 17	8,800 Jan 18 - Dec 18	(+3%)	
Day admissions (number)	18,749 Jan 17 - Dec 17	18,405 Jan 18 - Dec 18	(-2%)	
Operations (number)	Data not yet available	Data not yet available		
Source(s): Hospital Episode Statistics				
Capacity	Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>				
Operating theatres (number)	Data not yet available	Data not yet available		
Number of wards (number)	Data not yet available	Data not yet available		
Inpatient beds (number)	Data not yet available	Data not yet available		
Day case beds (number)	Data not yet available	Data not yet available		
Consultant surgeons (WTE)	Not applicable	126 Dec 18		
Source(s): NHS Digital - Workforce statistics				

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

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TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	<b>CRITICAL CARE</b>	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Location ratings for critical care:

	Safe	Effective	Caring	Responsive	Well led	Overall
Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
New Cross Hospital	RI 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	RI 13/12/2016	RI 13/12/2016

### Is there a critical care outreach team?

Data not available

### Current enforcement and regulatory action

Under development

### Outstanding practice

Under development

### Registered locations where critical care service has been rated

- New Cross Hospital

Activity	Previous	Latest	Change	National comparison
Discharges (number)	2,765 Jan 17 - Dec 17	2,837 Jan 18 - Dec 18	(+3%)	
Deaths (number)	199 Jan 17 - Dec 17	208 Jan 18 - Dec 18	(+5%)	
Source(s): Hospital Episode Statistics				
Capacity	Previous	Latest	Change	National comparison
Beds (total)	Data not yet available	Data not yet available		
Level 1	Data not yet available	Data not yet available		
Level 2	Data not yet available	Data not yet available		
Level 3	Data not yet available	Data not yet available		
Consultants (WTE)	Data not yet available	Data not yet available		
Registered nurses (WTE)	Data not yet available	Data not yet available		
Source(s): NHS Digital - Workforce statistics				

# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > Maternity

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	<b>MATERNITY</b>	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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### Location ratings for maternity:

	Safe	Effective	Caring	Responsive	Well led	Overall
Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
New Cross Hospital	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>O</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

### Current enforcement and regulatory action

Under development

### Outstanding practice

Under development

### Registered locations where maternity service has been rated

- New Cross Hospital

Activity	Previous	Latest	Change	National comparison
Deliveries (number)	5,060 Jan 17 - Dec 17	4,775 Jan 18 - Dec 18	(-6%)	
Caesarean sections rate (%)	27.4% Jan 17 - Dec 17	29.3% Jan 18 - Dec 18	(+2%)	
Instrumental delivery rate (%)	10.5% Jan 17 - Dec 17	9.4% Jan 18 - Dec 18	(-1%)	
Non-interventional delivery rate (%)	61.7% Jan 17 - Dec 17	61.2% Jan 18 - Dec 18	(-1%)	

Source(s): Hospital Episode Statistics

Capacity	Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>				
Antenatal beds (number)	Data not yet available	Data not yet available		
Beds on labour suites (number)	Data not yet available	Data not yet available		
Postnatal beds (number)	Data not yet available	Data not yet available		
Midwives (WTE)	Not applicable	184 Dec 18		
Consultant obstetricians/gynaecologists (WTE)	Not applicable	17 Dec 18		

Source(s): NHS Digital - Workforce statistics

# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > Children and young people

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### Location ratings for children and young people:

Cannock Chase Hospital

Safe	Effective	Caring	Responsive	Well led	Overall
NA	NA	NA	NA	NA	NA

New Cross Hospital

<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016
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### Current enforcement and regulatory action

Under development

### Outstanding practice

Under development

### Registered locations where children and young people service has been rated

• New Cross Hospital

Activity	Previous	Latest	Change	National comparison
Admissions (total)	11,020	10,212	(-7%)	
Under 1	2,504	2,251	(-10%)	
1 to 3	2,508	2,495	(-1%)	
4 to 15	5,227	4,654	(-11%)	
16 to 17	781	812	(+4%)	

Source(s): Hospital Episode Statistics

Capacity	Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>				
Wards (number)	Data not yet available	Data not yet available		
Beds (number)	Data not yet available	Data not yet available		
Paediatric consultants (WTE)	Not applicable			
Paediatric nurses (WTE)	Not applicable	75 Dec 18		
Neonatal cots (total)	Data not yet available	Data not yet available		
Level 1	Data not yet available	Data not yet available		
Level 2	Data not yet available	Data not yet available		
Level 3	Data not yet available	Data not yet available		

Source(s): NHS Digital - Workforce statistics



# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > End of life care

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### Location ratings for end of life care:

	Safe	Effective	Caring	Responsive	Well led	Overall
Cannock Chase Hospital	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016
New Cross Hospital	<b>RI</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016	<b>G</b> 13/12/2016

Service availability	Activity	Previous	Latest	Change	National comparison
Data not yet available					
<b>Current enforcement and regulatory action</b>					
Under development	In-hospital deaths (number)	1,937 Jan 17 - Dec 17	2,037 Jan 18 - Dec 18	(+5%)	
	Referrals to specialist palliative care team (number)	Data not yet available	Data not yet available		
	Cancer referrals (number)	Data not yet available	Data not yet available		
	Non-cancer referrals (number)	Data not yet available	Data not yet available		
<b>Outstanding practice</b>	Source(s): Hospital Episode Statistics				
Under development					
<b>Registered locations where end of life care service has been rated</b>	<b>Capacity</b>	<b>Previous</b>	<b>Latest</b>	<b>Change</b>	<b>National comparison</b>
	<b>National Guardian Freedom to Speak Up</b>				
	Specialist palliative care consultants (WTE)	Not applicable	0		
	Specialist palliative care nurses (WTE)	Data not yet available	Data not yet available		
	Source(s): NHS Digital - Workforce statistics				

# The Royal Wolverhampton NHS Trust

## Facts and figures > Core services > Outpatients

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### Location ratings for outpatients:

	Safe	Effective	Caring	Responsive	Well led	Overall
Cannock Chase Hospital	<b>RI</b> 13/12/2016	<b>NA</b>	<b>G</b> 13/12/2016	<b>RI</b> 13/12/2016	<b>RI</b> 13/12/2016	<b>RI</b> 13/12/2016
New Cross Hospital	<b>G</b> 27/6/2018	<b>NA</b>	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018	<b>G</b> 27/6/2018

### Current enforcement and regulatory action

Under development

### Outstanding practice

Under development

### Registered locations where outpatient service has been rated

- Cannock Chase Hospital
- New Cross Hospital

Activity	Previous	Latest	Change	National comparison
Number of appointments (total)	1,004,124	1,011,746	(+1%)	
Ophthalmology	110,656	107,572	(-3%)	
Dermatology	43,658	37,751	(-14%)	
Medical specialties	402,490	396,056	(-2%)	
Surgical specialties	186,342	189,883	(+2%)	
Oncology	39,076	41,693	(+7%)	
Other(s)	221,902	238,791	(+8%)	
	Jan 17 - Dec 17	Jan 18 - Dec 18		
Number of outpatient clinics held per week	Data not yet available	Data not yet available		

Source(s): Hospital Episode Statistics

Capacity	Previous	Latest	Change	National comparison
<b>National Guardian Freedom to Speak Up</b>				
Under development				

Source(s):

# The Royal Wolverhampton NHS Trust

## Ratings overview

National Guardian  
Freedom to Speak Up



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		<p>This page displays the latest ratings and the direction of travel for core service and trust level key question intelligence indicators. Click on the arrows to see the indicator detail.</p>												
								Safe	Effective	Caring	Responsive	Well led	Overall	
								→	→	→	→	→	→	
		<b>Overall</b>						RI 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	
		<b>Urgent and emergency care</b>						NA	NA	NA	NA	NA	NA	
		Cannock Chase Hospital						RI 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	↑
		New Cross Hospital												
		<b>Medical care</b>						G 1/10/2018	G 1/10/2018	G 1/10/2018	G 1/10/2018	G 1/10/2018	G 1/10/2018	→
		Cannock Chase Hospital						RI 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	
		New Cross Hospital												
		<b>Surgery</b>						RI 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	→
		Cannock Chase Hospital						G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	
		New Cross Hospital												
		<b>Critical care</b>						NA	NA	NA	NA	NA	NA	→
		Cannock Chase Hospital						RI 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	RI 13/12/2016	RI 13/12/2016	
		New Cross Hospital												
		<b>Maternity</b>						NA	NA	NA	NA	NA	NA	→
		Cannock Chase Hospital						G 27/6/2018	G 27/6/2018	O 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	
		New Cross Hospital												
		<b>Children and young people</b>						NA	NA	NA	NA	NA	NA	NA
		Cannock Chase Hospital						G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	
		New Cross Hospital												
		<b>End of life care</b>						G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	NA
		Cannock Chase Hospital						RI 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	
		New Cross Hospital												
		<b>Outpatients</b>						RI 13/12/2016	NA	G 13/12/2016	RI 13/12/2016	RI 13/12/2016	RI 13/12/2016	↓
		Cannock Chase Hospital						G 27/6/2018	NA	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	
		New Cross Hospital												

TRUST	LOCATION	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS	RATINGS
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This page displays the latest ratings and the direction of travel for additional services and trust level key question intelligence indicators. Click on the arrows to see the indicator detail.

### Key messages

		Safe	Effective	Caring	Responsive	Well led	Overall
		→	→	→	→	→	→
	Overall	RI 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018	G 27/6/2018
Key messages	<b>People experiencing poor mental health (including people with dementia)</b>						
	Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
	New Cross Hospital	NA	NA	NA	NA	NA	NA
	<b>Families, children and young people</b>						
	Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
	New Cross Hospital	NA	NA	NA	NA	NA	NA
	<b>Older people</b>						
	Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
	New Cross Hospital	NA	NA	NA	NA	NA	NA
	<b>Working age people (including those recently retired and students)</b>						
	Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
	New Cross Hospital	NA	NA	NA	NA	NA	NA
	<b>People with long term conditions</b>						
	Cannock Chase Hospital	NA	NA	NA	NA	NA	NA
New Cross Hospital	NA	NA	NA	NA	NA	NA	
<b>Minor injuries unit</b>							
Cannock Chase Hospital	G 13/12/2016	RI 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	G 13/12/2016	
New Cross Hospital	NA	NA	NA	NA	NA	NA	
<b>People whose circumstances may make them vulnerable</b>							
Cannock Chase Hospital	NA	NA	NA	NA	NA	NA	
New Cross Hospital	NA	NA	NA	NA	NA	NA	

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Intelligence indicates that										
<ul style="list-style-type: none"> <li>Overall performance for this trust is about the same</li> <li>Caring, Effective, Responsive, Safe, Well led performance is stable</li> <li>Urgent and emergency care performance is improving</li> <li>Outpatients and diagnostic imaging performance is declining</li> <li>Critical care, Maternity and gynaecology, Medical care, Surgery performance is stable</li> </ul>										
		<b>Diagnostic imaging</b>	Cannock Chase Hospital New Cross Hospital		NA G 27/6/2018	NA NA	NA G 27/6/2018	NA G 27/6/2018	NA G 27/6/2018	NA G 27/6/2018

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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### Trust level rating:

Date of last inspection: 20/03/2018



### Trust composite of key indicators Jan-18 to Apr-19

- The current composite indicator score is similar to other acute trusts that were more likely to be rated as requires improvement
- This trust's composite score is within the middle 50% of acute trusts

### Outliers, trust wide and core service indicators

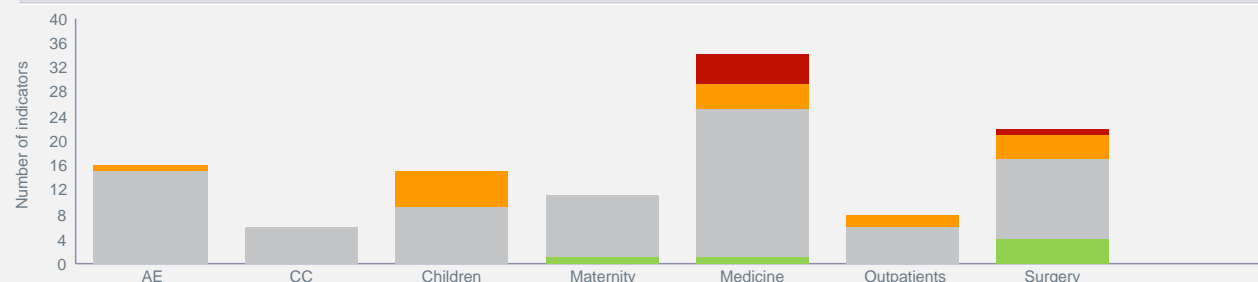
- There are currently 0 active outliers for maternity and 9 for mortality. For maternity 0 are with the panel and 0 are with the regional team. For mortality 6 are with the panel and 3 are with the regional team.

Of the 77 trust wide indicators, 1 (1%) are categorised as much better, 0 (0%) as better, 3 (4%) as worse and 5 (6%) as much worse. 63 indicators have been compared to data from 12 months previous, of which 4 (6%) have shown an improvement and 3 (5%) have shown a decline

Much better compared nationally	Much worse compared nationally	Improved	Declined
<ul style="list-style-type: none"> <li>Sick days for medical and dental staff-[set target 3.5%] (%)</li> </ul>	<ul style="list-style-type: none"> <li>Hospital Standardised Mortality Ratio (HSMR)</li> <li>Stability of other clinical staff</li> <li>Hospital Standardised Mortality Ratio (Weekend)</li> <li>Summary Hospital-level Mortality Indicator (SHMI)</li> <li>Hospital Standardised Mortality Ratio (Weekday)</li> </ul>	<ul style="list-style-type: none"> <li>Never Events (total events with rule-based risk assessment)</li> <li>Never Events (total events with statistical comparison to bed days)</li> <li>Patient-led assessment of environment for dementia care (%)</li> <li>Patient-led assessment of food (%)</li> </ul>	<ul style="list-style-type: none"> <li>Deaths in Low-Risk Diagnosis Groups</li> <li>Stability of other clinical staff</li> <li>Flu vaccination uptake (%)</li> </ul>

For each core service, there are different numbers of indicators. When compared nationally, each has been categorised as much better, better, about the same, worse or much worse. The graph shows the number of Indicators for each core service and the number within each category:

National comparisons of indicators by core service (much better to much worse)



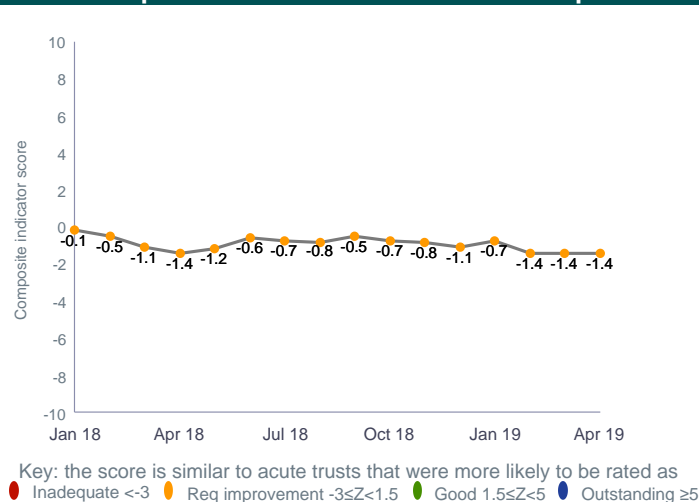
# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Trust composite of key indicators

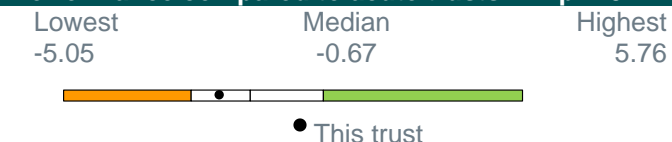
The trust composite is a pilot indicator created from 12 specific indicators within Insight. The composite indicator score helps to assess a trust's overall performance but it is not a rating nor a judgement. The composite should be used alongside other evidence in monitoring trusts.

- The latest trust rating is good published on 27/6/2018 (last inspection date 20/03/2018)
- This trust's composite score is within the middle 50% of acute trusts

### Trust composite indicator score Jan-18 to Apr-19



### Performance compared to acute trusts in Apr-19



Indicator	Performance			National comparison
	Previous	Latest	Change	
<b>Flu vaccination uptake (%)</b> NHS England - Flu Vac (22 Jun 2018)	71.7% Sep 16 - Feb 17	52.9% Sep 17 - Feb 18	↓	W
<b>Patients spending less than 4 hours in major A&amp;E (%)</b> NHS England - A&E SitReps (20 Mar 2019)	76.1% Feb 18	81.3% Feb 19	↑	W
<b>In-hospital mortality: Infectious diseases</b> Hospital Episode Statistics - HES - Mortality by CCS group (26 Feb 2019)	111.0 Oct 16 - Sep 17	124.4 Oct 17 - Sep 18	→	S
<b>Advice at the start of labour</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	8.5 Feb 17	8.3 Feb 18	→	S
<b>Confidence and trust in the doctors</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	8.9 Jul 16	8.9 Jul 17	→	S
<b>Treatment with respect and dignity</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	9.1 Jul 16	9.0 Jul 17	→	S
<b>Patient-led assessment of privacy, dignity, and well being (%)</b> NHS Digital - PLACE (01 Sep 2018)	79.6% Mar 17 - Jun 17	81.8% Mar 18 - Jun 18	→	S
<b>Fairness and effectiveness of reporting (1-5)</b> NHS Staff Surveys - NHS Staff Survey Weighted (26 Apr 2018)	3.76 Sep 16 - Dec 16	3.75 Sep 17 - Dec 17	→	S
<b>Support from immediate managers (1-5)</b> NHS Staff Surveys - NHS Staff Survey Weighted (26 Apr 2018)	3.74 Sep 16 - Dec 16	3.77 Sep 17 - Dec 17	→	S
<b>Communication between senior management and staff (%)</b> NHS Staff Surveys - NHS Staff Survey Unweighted (26 Apr 2018)	37.9% Sep 16 - Dec 16	35.9% Sep 17 - Dec 17	→	S
<b>Ambulances remaining at hospital for more than 60 minutes (%)</b> National Ambulance Information Group - Ambulance Turnaround (26 Feb 2019)	4.7% Jan 18	2.8% Jan 19	→	S
<b>Cancelled operations as a percentage of elective activity (%)</b> NHS England - FFCEs (14 Feb 2019)	0.6% Oct 17 - Dec 17	0.5% Oct 18 - Dec 18	→	S

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Trust-wide indicators

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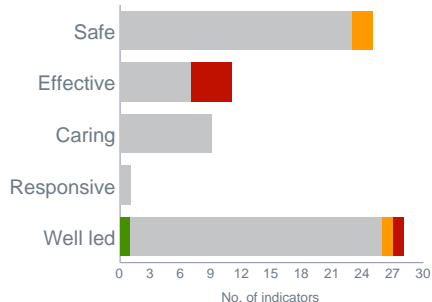
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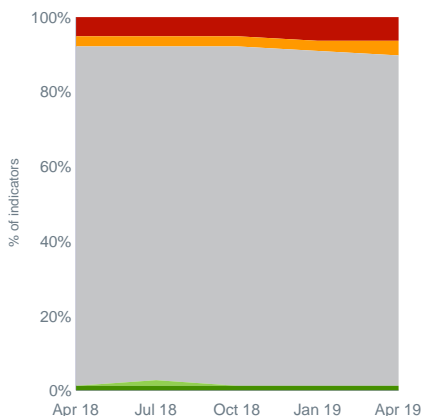
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### What's the current performance of trust wide indicators?



### How has the trust-wide indicator performance changed over time?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S1	<b>Clostridium difficile infection alert in three months?</b> Public Health England - PHE - CDIFF (07 Mar 2019)	-	NA	No Oct 18 - Dec 18	NA	S
	S1	<b>Clostridium difficile infections (trust-apportioned)</b> Public Health England - PHE - CDIFF (07 Mar 2019)	-	NA	26 Jan 18 - Dec 18	NA	S
	S1	<b>E. coli bacteraemia rate (cases per 100,000 bed days)</b> Public Health England - PHE - Hospital Onset E. Coli (20 Nov 2017)	-	25.2 Apr 15 - Mar 16	27.0 Apr 16 - Mar 17	NA	S
	S1	<b>MRSA bacteraemia (trust-apportioned)</b> Public Health England - PHE - MRSA (27 Feb 2019)	-	NA	0 Jan 18 - Dec 18	NA	S
	S1	<b>MRSA bacteraemia alert in three months?</b> Public Health England - PHE - MRSA (27 Feb 2019)	-	NA	No Oct 18 - Dec 18	NA	S
	S1	<b>Patient-led assessment of cleanliness of environment (%)</b> NHS Digital - PLACE (01 Sep 2018)	98.4%	97.2% Mar 17 - Jun 17	99.1% Mar 18 - Jun 18	➔	S
	S1	<b>Patient-led assessment of environment for dementia care (%)</b> NHS Digital - PLACE (01 Sep 2018)	78.2%	72.9% Mar 17 - Jun 17	82.2% Mar 18 - Jun 18	⬆	S
	S1	<b>Patient-led assessment of facilities (%)</b> NHS Digital - PLACE (01 Sep 2018)	94.1%	91.8% Mar 17 - Jun 17	93.6% Mar 18 - Jun 18	➔	S
	S2	<b>Ratio of consultant to non-consultant doctors</b> Electronic Staff Record - ESR: Contracted FTEs - Medical and Dental (23 Mar 2019)	0.74	0.68 Dec 17	0.67 Dec 18	➔	S
	S2	<b>Ratio of occupied beds to medical and dental staff</b> Electronic Staff Record - ESR: Contracted FTEs - All Staff (23 Mar 2019)	4.14	4.49 Jan 17 - Dec 17	4.14 Jan 18 - Dec 18	➔	S
	S2	<b>Ratio of occupied beds to nursing staff</b> Electronic Staff Record - ESR: Contracted FTEs - All Staff (23 Mar 2019)	2.11	2.12 Jan 17 - Dec 17	2.08 Jan 18 - Dec 18	➔	S
	S2	<b>Ratio of occupied beds to other clinical staff</b> Electronic Staff Record - ESR: Contracted FTEs - All Staff (23 Mar 2019)	1.79	1.75 Jan 17 - Dec 17	1.57 Jan 18 - Dec 18	➔	S
	S2	<b>Ratio of senior staff nurses to staff nurses</b> Electronic Staff Record - ESR: Contracted FTEs - Nursing and Midwifery (23 Mar 2019)	0.53	0.50 Dec 17	0.54 Dec 18	➔	S
	S2	<b>Ratio of ward manager nurses to senior and staff nurses</b> Electronic Staff Record - ESR: Contracted FTEs - Nursing and Midwifery (23 Mar 2019)	0.20	0.13 Dec 17	0.13 Dec 18	➔	W
S2	<b>Ward staff who are registered nurses (%)</b> Electronic Staff Record - ESR: Contracted FTEs - All Staff (23 Mar 2019)	66.1%	62.5% Dec 17	62.5% Dec 18	➔	S	



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## Trust and core service analysis > Trust-wide indicators

National Guardian  
Freedom to Speak Up



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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
Safety	S5	<b>Never event alert in the last three months?</b> NHS Improvement - OBIEE NRLS STEIS (04 Apr 2019)		NA	No Dec 18 - Feb 19	NA	S			
	S5	<b>Never Events (total events with rule-based risk assessment)</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019)	-	5 Mar 17 - Feb 18	4 Mar 18 - Feb 19	↑	S			
	S5	<b>Never Events (total events with statistical comparison to bed days)</b> NHS Improvement - OBIEE NRLS STEIS (04 Apr 2019)	-	5 Mar 17 - Feb 18	4 Mar 18 - Feb 19	↑	S			
	S5	<b>NRLS - Proportion of reported patient safety incidents that are harmful (%)</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019)	22.4%	14.6% Feb 17 - Jan 18	12.2% Feb 18 - Jan 19	→	S			
	S6	<b>CAS alerts closed late in preceding 12 months</b> MHRA - CAS Alerts (04 Apr 2019)		< 25% of alerts closed late Mar 17 - Feb 18	< 25% of alerts closed late Mar 18 - Feb 19	→	S			
	S6	<b>CAS alerts not closed by the trust in the preceding 12 months</b> MHRA - CAS Alerts (04 Apr 2019)		NA	1-4 alerts still open Mar 18 - Feb 19	NA	W			
	S6	<b>CAS alerts not closed by the trust more than 12 months before</b> MHRA - CAS Open Alerts (04 Apr 2019)		NA	0 alerts still open Jan 12 - Feb 18	NA	S			
	S6	<b>Fairness and effectiveness of reporting (1-5)</b> NHS Staff Surveys - NHS Staff Survey Weighted (26 Apr 2018)	-	3.76 Sep 16 - Dec 16	3.75 Sep 17 - Dec 17	→	S			
	S6	<b>NRLS - Potential under-reporting of patient safety incidents</b> NHS Improvement - OBIEE NRLS STEIS (04 Apr 2019)	1.00	0.82 Feb 17 - Jan 18	0.87 Feb 18 - Jan 19	→	S			
	S6	<b>NRLS - Potential under-reporting of patient safety incidents resulting in death or severe harm</b> NHS Improvement - OBIEE NRLS STEIS (04 Apr 2019)	1.00	0.88 Feb 17 - Jan 18	0.83 Feb 18 - Jan 19	→	S			
	S6	<b>NRLS- Consistency of reporting</b> NRLS OPSIR - Combined (28 Mar 2019)		6 months of reporting Apr 17 - Sep 17	6 months of reporting Apr 18 - Sep 18	→	S			
	Effective	E1	<b>Help with eating</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	7.2 Jul 16	7.6 Jul 17	→	S		
E1		<b>Patient-led assessment of food (%)</b> NHS Digital - PLACE (01 Sep 2018)	89.8%	88.6% Mar 17 - Jun 17	94.4% Mar 18 - Jun 18	↑	S			
E2		<b>Deaths in Low-Risk Diagnosis Groups</b> Dr Foster - Dr Foster - Mortality in low risk conditions (02 Apr 2019)	0.49	0.39 Oct 16 - Sep 17	0.70 Oct 17 - Sep 18	↓	S			
E2		<b>Hospital Standardised Mortality Ratio (HSMR)</b> Dr Foster - Dr Foster - HSMR (02 Apr 2019)	100.0	122.5 Oct 16 - Sep 17	130.6 Oct 17 - Sep 18	→	MW			

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
Caring	E2	<b>Hospital Standardised Mortality Ratio (Weekday)</b> Dr Foster - Dr Foster - HSMR (02 Apr 2019)	100.0	120.0 Oct 16 - Sep 17	126.0 Oct 17 - Sep 18	➔	MW			
	E2	<b>Hospital Standardised Mortality Ratio (Weekend)</b> Dr Foster - Dr Foster - HSMR (02 Apr 2019)	100.0	135.5 Oct 16 - Sep 17	144.6 Oct 17 - Sep 18	➔	MW			
	E2	<b>Summary Hospital-level Mortality Indicator (SHMI)</b> NHS Digital - SHMI (02 Apr 2019)	1.00	1.18 Oct 16 - Sep 17	1.22 Oct 17 - Sep 18	➔	MW			
	E3	<b>Active professional registration (medical and dental) (%)</b> Electronic Staff Record - ESR: Valid Registrations - Medical and Dental (23 Mar 2019)	99.1%	100.0% Dec 17	100.0% Dec 18	➔	S			
	E3	<b>Active professional registration (nursing and midwifery) (%)</b> Electronic Staff Record - ESR: Valid Registrations - Nursing and Midwifery (23 Mar 2019)	98.6%	99.7% Dec 17	99.8% Dec 18	➔	S			
	E3	<b>Staff appraised in last 12 months (%)</b> NHS Staff Surveys - NHS Staff Survey Unweighted (26 Apr 2018)	-	82.6% Sep 16 - Dec 16	85.9% Sep 17 - Dec 17	➔	S			
	E3	<b>Support from immediate managers (1-5)</b> NHS Staff Surveys - NHS Staff Survey Weighted (26 Apr 2018)	-	3.74 Sep 16 - Dec 16	3.77 Sep 17 - Dec 17	➔	S			
	C1	<b>Confidence and trust in the doctors</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	8.9 Jul 16	8.9 Jul 17	➔	S			
	C1	<b>Confidence and trust in the nurses</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	8.8 Jul 16	8.8 Jul 17	➔	S			
	C1	<b>Emotional support from hospital staff</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	6.8 Jul 16	7.2 Jul 17	➔	S			
	C1	<b>Overall experience as an inpatient</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	8.1 Jul 16	8.3 Jul 17	➔	S			
	C1	<b>Patients recommending the trust - Inpatients (%)</b> NHS England - FFT Inpatients by Trust (20 Mar 2019)	-	91.6% Nov 17 - Jan 18	92.5% Nov 18 - Jan 19	➔	S			
	C1	<b>Speaking to staff about worries and fears</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	5.79 Jul 16	5.34 Jul 17	➔	S			
	C2	<b>Involvement in decisions</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	7.4 Jul 16	7.0 Jul 17	➔	S			
C3	<b>Pain control by staff</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	7.9 Jul 16	8.4 Jul 17	➔	S				
C3	<b>Patient-led assessment of privacy, dignity, and well being (%)</b> NHS Digital - PLACE (01 Sep 2018)	83.1%	79.6% Mar 17 - Jun 17	81.8% Mar 18 - Jun 18	➔	S				

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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
Responsive	C3	<b>Treatment with respect and dignity</b> PICKER - Inpatient Survey - Benchmarking (02 Aug 2018)	-	9.1 Jul 16	9.0 Jul 17	➔	S			
	R3	<b>Ratio of delayed transfers and number of occupied beds</b> NHS England - Delayed Transfers of Care (24 Nov 2018)	0.02	0.02 Jul 17 - Sep 17	0.01 Jul 18 - Sep 18	➔	S			
	W1	<b>Communication between senior management and staff (%)</b> NHS Staff Surveys - NHS Staff Survey Unweighted (26 Apr 2018)	-	37.9% Sep 16 - Dec 16	35.9% Sep 17 - Dec 17	➔	S			
Well led	W3	<b>Flu vaccination uptake (%)</b> NHS England - Flu Vac (22 Jun 2018)	71.4%	71.7% Sep 16 - Feb 17	52.9% Sep 17 - Feb 18	⬇	W			
	W3	<b>GMC - Enhanced monitoring</b> General Medical Council - GMC Enhanced Monitoring (28 Mar 2019)		NA	No concerns Mar 19	NA	S			
	W3	<b>Overall trainee satisfaction (trust score compared to doctors' scores)</b> General Medical Council - GMC National Training Survey (30 Jul 2018)		In middle 50% of scores Mar 17 - May 17	In middle 50% of scores Mar 18 - May 18	➔	S			
	W3	<b>Sick days due to back problems (%)</b> Electronic Staff Record - ESR: Sicknesss Absence by Reason (23 Mar 2019)	0.23%	0.28% Jan 17 - Dec 17	0.27% Jan 18 - Dec 18	➔	S			
	W3	<b>Sick days due to stress (%)</b> Electronic Staff Record - ESR: Sicknesss Absence by Reason (23 Mar 2019)	0.91%	0.81% Jan 17 - Dec 17	0.89% Jan 18 - Dec 18	➔	S			
	W3	<b>Sick days for medical and dental staff-[set target 3.5%] (%)</b> Electronic Staff Record - ESR: Sicknesss Absence by Staff Group (23 Mar 2019)	1.17%	1.18% Jan 17 - Dec 17	1.34% Jan 18 - Dec 18	➔	MB			
	W3	<b>Sick days for non-clinical staff (%)</b> Electronic Staff Record - ESR: Sicknesss Absence by Staff Group (23 Mar 2019)	4.34%	4.34% Jan 17 - Dec 17	3.96% Jan 18 - Dec 18	➔	S			
	W3	<b>Sick days for nursing and midwifery staff (%)</b> Electronic Staff Record - ESR: Sicknesss Absence by Staff Group (23 Mar 2019)	4.32%	4.79% Jan 17 - Dec 17	4.58% Jan 18 - Dec 18	➔	S			
	W3	<b>Sick days for other clinical staff (%)</b> Electronic Staff Record - ESR: Sicknesss Absence by Staff Group (23 Mar 2019)	4.77%	4.86% Jan 17 - Dec 17	4.88% Jan 18 - Dec 18	➔	S			
	W3	<b>Stability of Medical and Dental staff</b> Electronic Staff Record - ESR: Stability - Period End (23 Mar 2019)	0.90	0.86 Jan 17 - Dec 17	0.83 Jan 18 - Dec 18	➔	S			
	W3	<b>Stability of non clinical staff</b> Electronic Staff Record - ESR: Stability - Period End (23 Mar 2019)	0.84	0.89 Jan 17 - Dec 17	0.86 Jan 18 - Dec 18	➔	S			

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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
W3		<b>Stability of Nursing and Midwifery staff</b> Electronic Staff Record - ESR: Stability - Period End (23 Mar 2019)	0.88	0.87 Jan 17 - Dec 17	0.87 Jan 18 - Dec 18	→	S			
W3		<b>Stability of other clinical staff</b> Electronic Staff Record - ESR: Stability - Period End (23 Mar 2019)	0.85	0.88 Jan 17 - Dec 17	0.73 Jan 18 - Dec 18	↓	MW			
W3		<b>Staff experiencing harassment, bullying or abuse from staff (%)</b> NHS Staff Surveys - NHS Staff Survey Unweighted (26 Apr 2018)	-	25.5% Sep 16 - Dec 16	23.5% Sep 17 - Dec 17	→	S			
W3		<b>Staff experiencing physical violence from staff (%)</b> NHS Staff Surveys - NHS Staff Survey Unweighted (26 Apr 2018)	-	2.0% Sep 16 - Dec 16	2.2% Sep 17 - Dec 17	→	S			
W3		<b>Staff recommendation of the trust for work or care (1-5)</b> NHS Staff Surveys - NHS Staff Survey Weighted (26 Apr 2018)	-	3.84 Sep 16 - Dec 16	3.83 Sep 17 - Dec 17	→	S			
W3		<b>Turnover rate for medical and dental staff (%)</b> Electronic Staff Record - ESR: Stability - Turnover Leavers All (23 Mar 2019)	7.2%	7.9% Jan 17 - Dec 17	7.7% Jan 18 - Dec 18	→	S			
W3		<b>Turnover rate for nursing and midwifery staff (%)</b> Electronic Staff Record - ESR: Stability - Turnover Leavers All (23 Mar 2019)	11.3%	11.8% Jan 17 - Dec 17	10.7% Jan 18 - Dec 18	→	S			
W3		<b>Turnover rate for other clinical staff (%)</b> Electronic Staff Record - ESR: Stability - Turnover Leavers All (23 Mar 2019)	12.7%	10.6% Jan 17 - Dec 17	10.0% Jan 18 - Dec 18	→	S			
W3		<b>Turnover rate for other non-clinical staff (%)</b> Electronic Staff Record - ESR: Stability - Turnover Leavers All (23 Mar 2019)	12.6%	10.0% Jan 17 - Dec 17	9.9% Jan 18 - Dec 18	→	S			
W3		<b>Whistleblowing alerts</b> Care Quality Commission - OBIEE Notifications/Whistle Blowing/Complaints (04 Apr 2019)		NA	Zero Apr 19	NA	S			
W4		<b>Identified level of potential support needs by the provider shadow segmentation</b> NHS Improvement - SOF (23 Mar 2019)	-	NA	Providers offered targeted support. Mar 19	NA	S			
W6		<b>Data Quality Maturity Index Percentage Score</b> NHS Digital - NHS Digital - Data Quality Maturity Index (23 Feb 2019)	95.8%	97.8% Jul 17 - Sep 17	99.0% Jul 18 - Sep 18	→	S			
W6		<b>Digital maturity capabilities score (%)</b> NHS England - NHS England - Digital Maturity (18 Nov 2017)	43.5%	-	64.0% Nov 15 - Jan 16	NA	S			

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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
	W6	<b>Digital maturity infrastructure score (%)</b> NHS England - NHS England - Digital Maturity (18 Nov 2017)	67.5%	-	80.0% Nov 15 - Jan 16	NA	Ⓢ			
	W6	<b>Digital maturity readiness score (%)</b> NHS England - NHS England - Digital Maturity (18 Nov 2017)	74.7%	-	95.0% Nov 15 - Jan 16	NA	Ⓢ			
	W7	<b>Inpatient response rate (%)</b> NHS England - FFT Inpatients by Trust (20 Mar 2019)	-	27.6% Feb 17 - Jan 18	29.5% Feb 18 - Jan 19	➡				
	W7	<b>Overall engagement (1-5)</b> NHS Staff Surveys - NHS Staff Survey Weighted (26 Apr 2018)	-	3.86 Sep 16 - Dec 16	3.82 Sep 17 - Dec 17	➡	Ⓢ			

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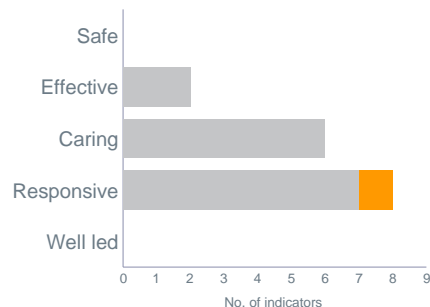
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### What's the current performance of urgent and emergency care indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S2	<b>Time from arrival by ambulance to initial assessment</b> NHS Digital - A&E Quality (14 Mar 2019)	-	3 Jan 18	2 Jan 19	NA	
	S5	<b>Never events in urgent and emergency care</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019)		1 Mar 17 - Feb 18	0 Mar 18 - Feb 19	↑	
Effective	E1	<b>Knowing who to contact after leaving hospital</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	7.3 Jan 14 - Mar 14	7.2 Sep 16	NA	S
	E2	<b>Unplanned reattendance to A&amp;E within 7 days (%)</b> NHS Digital - A&E Quality (14 Mar 2019)	8.4%	8.6% Jan 18	10.5% Jan 19	→	S
Caring	C1	<b>Confidence and trust in the doctors and nurses</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	8.4 Jan 14 - Mar 14	8.6 Sep 16	NA	S
	C1	<b>Patients recommending the trust - A&amp;E (%)</b> NHS England - FFT A&E (20 Mar 2019)	-	81.6% Nov 17 - Jan 18	86.5% Nov 18 - Jan 19	→	
	C3	<b>Getting help when needed</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	8.1 Jan 14 - Mar 14	8.2 Sep 16	NA	S
	C3	<b>Pain control by staff</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	7.5 Jan 14 - Mar 14	7.5 Sep 16	NA	S
	C3	<b>Privacy during examination or treatment</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	9.2 Jan 14 - Mar 14	9.3 Sep 16	NA	S
	C3	<b>Reassurance by staff when distressed</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	6.6 Jan 14 - Mar 14	6.2 Sep 16	NA	S
	C3	<b>Treatment with respect and dignity</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	8.9 Jan 14 - Mar 14	8.9 Sep 16	NA	S
Responsive	R2	<b>Total median time in A&amp;E (all patients)</b> NHS Digital - A&E Quality (14 Mar 2019)	1.0	0.9 Jan 18	0.9 Jan 19	→	S
	R3	<b>A&amp;E Attendees spending more than 12 hours from decision to admit to admission</b> NHS England - A&E SitReps (20 Mar 2019)	-	0 Feb 18	0 Feb 19	→	S
	R3	<b>Admissions waiting 4-12 hours from the decision to admit (%)</b> NHS England - A&E SitReps (20 Mar 2019)	19%	19% Feb 18	11% Feb 19	↑	S
	R3	<b>Ambulances remaining at hospital for more than 60 minutes (%)</b> National Ambulance Information Group - Ambulance Turnaround (26 Feb 2019)	7.5%	4.7% Jan 18	2.8% Jan 19	→	S

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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
	R3	<b>Patients spending less than 4 hours in (any type of) A&amp;E (%)</b> NHS England - A&E SitReps (20 Mar 2019)	81.8%	86.3% Feb 18	88.4% Feb 19	→	S			
	R3	<b>Patients spending less than 4 hours in major A&amp;E (%)</b> NHS England - A&E SitReps (20 Mar 2019)	75.7%	76.1% Feb 18	81.3% Feb 19	↑	W			
	R3	<b>Patients spending less than 4 hours in type 3 A&amp;E, including MIUs (%)</b> NHS England - A&E SitReps (20 Mar 2019)	98.5%	98.2% Feb 18	97.8% Feb 19	→	S			
	R3	<b>Time to treatment (minutes)</b> NHS Digital - A&E Quality (14 Mar 2019)	-	39.0 Jan 18	45.0 Jan 19	NA				
	R3	<b>Waiting time from arrival to examination by doctor or nurse</b> Care Quality Commission - A&E Survey - Benchmarking (10 Apr 2018)	-	6.5 Jan 14 - Mar 14	6.5 Sep 16	NA	S			



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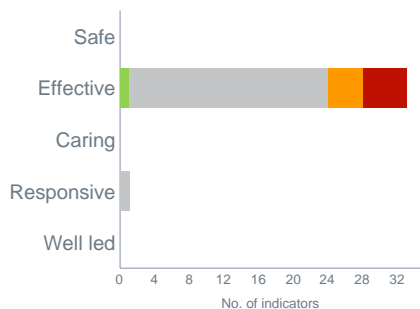
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### What's the current performance of medicine indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S5	<b>Falls with harm in medical wards (per 100 patients sampled)</b> NHS Digital - Safety Thermometer (22 Mar 2019)	-	0.3 Dec 17 - Feb 18	0.4 Dec 18 - Feb 19	NA	
	S5	<b>Never events in medical care</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019)		0 Mar 17 - Feb 18	0 Mar 18 - Feb 19	➔	
	S5	<b>New pressure ulcers in medical wards (per 100 patients sampled)</b> NHS Digital - Safety Thermometer (22 Mar 2019)	-	1.4 Dec 17 - Feb 18	1.4 Dec 18 - Feb 19	NA	
	S5	<b>New UTIs in catheterised patients on medical wards (per 100 patients sampled)</b> NHS Digital - Safety Thermometer (22 Mar 2019)	-	0.1 Dec 17 - Feb 18	0.1 Dec 18 - Feb 19	NA	
Effective	E1	<b>Case mix adjusted percentage of fit patients with advanced Non Small Cell Lung Cancer (NSCLC) receiving Systemic Anti-Cancer Treatment (%)</b> Royal College of Physicians - National Lung Cancer Audit version 2 (06 Dec 2018)	62.0%	NA	62.9% Jan 16 - Dec 16	NA	S
	E1	<b>Case mix adjusted percentage of patients with Non Small Cell Lung Cancer (NSCLC) receiving surgery (%)</b> Royal College of Physicians - National Lung Cancer Audit version 2 (06 Dec 2018)	17.5%	NA	23.1% Jan 16 - Dec 16	NA	B
	E1	<b>Case mix adjusted percentage of patients with Small Cell Lung Cancer (SCLC) receiving chemotherapy (%)</b> Royal College of Physicians - National Lung Cancer Audit version 2 (06 Dec 2018)	68.0%	NA	75.1% Jan 16 - Dec 16	NA	S
	E1	<b>SSNAP Domain 2: overall team-centred rating score for key stroke unit indicator</b> Royal College of Physicians - Sentinel Stroke National Audit Programme (SSNAP) - New Cross Hospital (17 Jan 2019)		Level C Apr 17 - Jul 17	Level C Jul 18 - Sep 18	NA	S
	E2	<b>Case mix adjusted one year relative survival rate (%)</b> Royal College of Physicians - National Lung Cancer Audit version 2 (06 Dec 2018)	37.0%	NA	32.5% Jan 16 - Dec 16	NA	S
	E2	<b>Emergency readmissions: Acute and unspecified renal failure</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	97.7 Oct 16 - Sep 17	105.2 Oct 17 - Sep 18	➔	S
	E2	<b>Emergency readmissions: Acute bronchitis</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	85.3 Oct 16 - Sep 17	93.1 Oct 17 - Sep 18	➔	S



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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
E2		<b>Emergency readmissions: Acute cerebrovascular disease</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	70.1 Oct 16 - Sep 17	91.5 Oct 17 - Sep 18	→	S			
E2		<b>Emergency readmissions: Acute myocardial infarction</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	89.6 Oct 16 - Sep 17	85.0 Oct 17 - Sep 18	→	S			
E2		<b>Emergency readmissions: Chronic obstructive pulmonary disease and bronchiectasis</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	95.4 Oct 16 - Sep 17	98.2 Oct 17 - Sep 18	→	S			
E2		<b>Emergency readmissions: Fluid and electrolyte disorders</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	91.3 Oct 16 - Sep 17	89.9 Oct 17 - Sep 18	→	S			
E2		<b>Emergency readmissions: Fracture of neck of femur (hip)</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	60.4 Oct 16 - Sep 17	109.9 Oct 17 - Sep 18	↓	S			
E2		<b>Emergency readmissions: Pneumonia</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	93.4 Oct 16 - Sep 17	104.3 Oct 17 - Sep 18	→	S			
E2		<b>Emergency readmissions: Septicaemia (except in labour)</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	86.6 Oct 16 - Sep 17	92.9 Oct 17 - Sep 18	→	S			
E2		<b>Emergency readmissions: Urinary tract infections</b> Hospital Episode Statistics - HES - Readmissions by CCS group (27 Feb 2019)	100	104.3 Oct 16 - Sep 17	91.1 Oct 17 - Sep 18	→	S			
E2		<b>In-hospital mortality: Acute and unspecified renal failure</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	169.1 Oct 16 - Sep 17	142.5 Oct 17 - Sep 18	↑	S			
E2		<b>In-hospital mortality: Acute bronchitis</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	169.5 Oct 16 - Sep 17	127.0 Oct 17 - Sep 18	→	S			
E2		<b>In-hospital mortality: Acute cerebrovascular disease</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	132.4 Oct 16 - Sep 17	144.3 Oct 17 - Sep 18	↓	MW			

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Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
E2		<b>In-hospital mortality: Acute myocardial infarction</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	115.9 Oct 16 - Sep 17	117.3 Oct 17 - Sep 18	→	S			
E2		<b>In-hospital mortality: Chronic obstructive pulmonary disease and bronchiectasis</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	104.4 Oct 16 - Sep 17	146.9 Oct 17 - Sep 18	↓	W			
E2		<b>In-hospital mortality: Fluid and electrolyte disorders</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	268.6 Oct 16 - Sep 17	143.1 Oct 17 - Sep 18	↑	S			
E2		<b>In-hospital mortality: Fracture of neck of femur (hip)</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	88.5 Oct 16 - Sep 17	123.5 Oct 17 - Sep 18	→	S			
E2		<b>In-hospital mortality: Pneumonia</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	155.3 Oct 16 - Sep 17	122.0 Oct 17 - Sep 18	↑	S			
E2		<b>In-hospital mortality: Septicaemia (except in labour)</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	114.7 Oct 16 - Sep 17	121.8 Oct 17 - Sep 18	→	S			
E2		<b>In-hospital mortality: Urinary tract infections</b> Hospital Episode Statistics - CQC - HES Mortality (05 Feb 2019)	100	124.4 Oct 16 - Sep 17	157.4 Oct 17 - Sep 18	→	S			
E2		<b>Mortality outlier alert: Acute cerebrovascular disease</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Action plans being followed up by CQC Apr 19	NA	W			
E2		<b>Mortality outlier alert: Chronic obstructive pulmonary disease and bronchiectasis</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	New case, pending assessment by CQC Apr 19	NA	S			
E2		<b>Mortality outlier alert: Deficiency and other anaemia</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Case being pursued with the trust by CQC Apr 19	NA	MW			
E2		<b>Mortality outlier alert: Other psychoses</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Action plans being followed up by CQC Apr 19	NA	W			

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15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
	E2	<b>Mortality outlier alert: Pneumonia</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Action plans being followed up by CQC Apr 19	NA				
	E2	<b>Mortality outlier alert: Senility and organic mental disorders</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Case being pursued with the trust by CQC Apr 19	NA				
	E2	<b>Mortality outlier alert: Septicaemia (except in labour)</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Case being pursued with the trust by CQC Apr 19	NA				
	E2	<b>Mortality outlier alert: Skin and subcutaneous tissue infections</b> Care Quality Commission - CQC - Outliers (03 Apr 2019)	-	NA	Case being pursued with the trust by CQC Apr 19	NA				
Caring	C1	<b>Patients recommending the trust - Medical care inpatients (%)</b> NHS England - FFT Inpatients by Ward (20 Mar 2019)	-	90.8% Nov 17 - Jan 18	90.2% Nov 18 - Jan 19	➔				
Responsive	R3	<b>Referral to treatment, on completed admitted pathways in Medicine, within 18 weeks (%)</b> NHS England - RTT Admitted (19 Mar 2019)	87.0%	96.9% Jan 18	95.1% Jan 19	➔				
Well led	W7	<b>Response rate - Medical inpatients (%)</b> NHS England - FFT Inpatients by Ward (20 Mar 2019)	-	26.8% Feb 17 - Jan 18	23.9% Feb 18 - Jan 19	➔				

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Surgery indicators

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

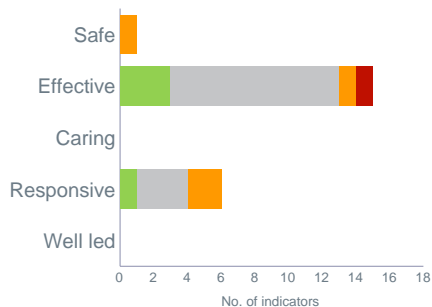
FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	<b>SURGERY</b>	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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### What's the current performance of surgery indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S5	<b>Crude percentage of patients documented as not developing a pressure ulcer (%)</b> Royal College of Physicians - National Hip Fracture Database - New Cross Hospital (14 Jan 2019)	95.6%	76.8% Jan 16 - Dec 16	91.5% Jan 17 - Dec 17	➔	W
	S5	<b>Falls with harm in surgical wards (per 100 patients sampled)</b> NHS Digital - Safety Thermometer (22 Mar 2019)	-	0.1 Dec 17 - Feb 18	0.2 Dec 18 - Feb 19	NA	
	S5	<b>Never events in Surgery</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019) <b>National Guardian Freedom to Speak Up</b>		2 Mar 17 - Feb 18	3 Mar 18 - Feb 19	⬇	
	S5	<b>New pressure ulcers in surgical wards (per 100 patients sampled)</b> NHS Digital - Safety Thermometer (22 Mar 2019)	-	0.9 Dec 17 - Feb 18	0.7 Dec 18 - Feb 19	NA	
	S5	<b>New UTIs in catheterised patients on surgical wards (per 100 patients sampled)</b> NHS Digital - Safety Thermometer (22 Mar 2019)	-	0.5 Dec 17 - Feb 18	0.2 Dec 18 - Feb 19	NA	
Effective	E1	<b>Crude proportion of cases with access to theatres within clinically appropriate time frames</b> Royal College of Anaesthetists - National Emergency Laparotomy Audit - New Cross Hospital (01 Mar 2019)	82.0%	84.2% Dec 15 - Nov 16	86.2% Dec 16 - Nov 17	⬆	B
	E1	<b>Crude proportion of cases with pre-operative documentation of risk of death</b> Royal College of Anaesthetists - National Emergency Laparotomy Audit - New Cross Hospital (01 Mar 2019)	74.6%	39.0% Dec 15 - Nov 16	23.2% Dec 16 - Nov 17	➔	MW
	E1	<b>Crude proportion of high-risk cases (=5% predicted mortality) with consultant surgeon and anaesthetist present in theatre</b> Royal College of Anaesthetists - National Emergency Laparotomy Audit - New Cross Hospital (01 Mar 2019)	82.5%	98.1% Dec 15 - Nov 16	97.9% Dec 16 - Nov 17	➔	B
	E1	<b>Crude proportion of patients having perioperative medical assessment (%)</b> Royal College of Physicians - National Hip Fracture Database - New Cross Hospital (14 Jan 2019)	88.6%	82.7% Jan 16 - Dec 16	87.6% Jan 17 - Dec 17	➔	W
	E2	<b>PROMs: Groin Hernia Surgery EQ-5D score (16-17) - Final</b> NHS Digital - PROMS 2016-17 - Groin Hernia and Varicose Vein (13 Mar 2018)		NA	Nil Significance Apr 16 - Mar 17	NA	S
	E2	<b>PROMs: Primary Hip Replacement EQ-5D score (16-17) - Final</b> NHS Digital - PROMS 1617FinYr (22 Sep 2018)		NA	Nil Significance Apr 16 - Mar 17	NA	S
	E2	<b>PROMs: Primary Hip Replacement EQ-5D score (17-18) - Provisional (finalised Aug 2019)</b> NHS Digital - PROMS 1718FinYr (16 Feb 2019)		NA	Nil Significance Apr 17 - Mar 18	NA	S

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Surgery indicators

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
Key question	KLOE	Indicator	National average	Performance			National comparison			
				Previous	Latest	Change				
E2		<b>PROMs: Primary Hip Replacement Oxford score (16-17) - Final</b> NHS Digital - PROMS 1617FinYr (22 Sep 2018)		NA	Nil Significance Apr 16 - Mar 17	NA	S			
		<b>PROMs: Primary Hip Replacement Oxford score (17-18) - Provisional (finalised Aug 2019)</b> NHS Digital - PROMS 1718FinYr (16 Feb 2019)		NA	Nil Significance Apr 17 - Mar 18	NA	S			
		<b>PROMs: Primary Knee Replacement EQ-5D score (16-17) - Final</b> NHS Digital - PROMS 1617FinYr (22 Sep 2018)		NA	Nil Significance Apr 16 - Mar 17	NA	S			
		<b>PROMs: Primary Knee Replacement EQ-5D score (17-18) - Provisional (finalised Aug 2019)</b> NHS Digital - PROMS 1718FinYr (16 Feb 2019)		NA	Nil Significance Apr 17 - Mar 18	NA	S			
		<b>PROMs: Primary Knee Replacement Oxford score (16-17) - Final</b> NHS Digital - PROMS 1617FinYr (22 Sep 2018)		NA	Upper 95% Apr 16 - Mar 17	NA	B			
		<b>PROMs: Primary Knee Replacement Oxford score (17-18) - Provisional (finalised Aug 2019)</b> NHS Digital - PROMS 1718FinYr (16 Feb 2019)		NA	Nil Significance Apr 17 - Mar 18	NA	S			
		<b>Risk adjusted 30-day mortality rate (%)</b> Royal College of Anaesthetists - National Emergency Laparotomy Audit - New Cross Hospital (01 Mar 2019)	9.5%	10.6% Dec 15 - Nov 16	11.9% Dec 16 - Nov 17	➔	S			
		<b>Risk-adjusted 30-day mortality rate (%)</b> Royal College of Physicians - National Hip Fracture Database - New Cross Hospital (14 Jan 2019)	6.9%	5.6% Jan 16 - Dec 16	7.2% Jan 17 - Dec 17	➔	S			
Caring	C1	<b>Patients recommending the trust - Surgery inpatients (%)</b> NHS England - FFT Inpatients by Ward (20 Mar 2019)	-	92.2% Nov 17 - Jan 18	94.1% Nov 18 - Jan 19	➔				
Responsive	R3	<b>Cancelled operations as a percentage of elective activity (%)</b> NHS England - Cancelled Operations (14 Feb 2019)	1.0%	0.6% Oct 17 - Dec 17	0.5% Oct 18 - Dec 18	➔	S			
	R3	<b>Cancelled operations not treated within 28 days of non-clinical cancellation (%)</b> NHS England - Cancelled Operations (14 Feb 2019)	8.3%	0.0% Oct 17 - Dec 17	0.0% Oct 18 - Dec 18	➔	B			
	R3	<b>Crude overall hospital length of stay</b> Royal College of Physicians - National Hip Fracture Database - New Cross Hospital (14 Jan 2019)	20.0	28.4 Jan 16 - Dec 16	24.5 Jan 17 - Dec 17	➔	W			
	R3	<b>Crude proportion of highest-risk cases (&gt;10% predicted mortality) admitted to critical care post-operatively</b> Royal College of Anaesthetists - National Emergency Laparotomy Audit - New Cross Hospital (01 Mar 2019)	86.8%	68.0% Dec 15 - Nov 16	77.0% Dec 16 - Nov 17	➔	W			

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Surgery indicators

15 April 2019

FACTS, FIGURES & RATINGS	TRUST AND CORE SERVICE ANALYSIS	FEATURED DATA SOURCES	DEFINITIONS
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OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	<b>SURGERY</b>	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
	R3	<b>Crude proportion of patients having surgery on the day or day after admission (%)</b> Royal College of Physicians - National Hip Fracture Database - New Cross Hospital (14 Jan 2019)	69.5%	72.6% Jan 16 - Dec 16	74.9% Jan 17 - Dec 17	➔	Ⓢ
	R3	<b>Referral to treatment, on completed admitted pathways in Surgery, within 18 weeks (%)</b> NHS England - RTT Admitted (19 Mar 2019)	65.1%	63.9% Jan 18	65.7% Jan 19	➔	Ⓢ
Well led	W7	<b>Response rate - Surgery inpatients (%)</b> NHS England - FFT Inpatients by Ward (20 Mar 2019)	-	27.6% Feb 17 - Jan 18	32.7% Feb 18 - Jan 19	⬆	

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Critical care indicators

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

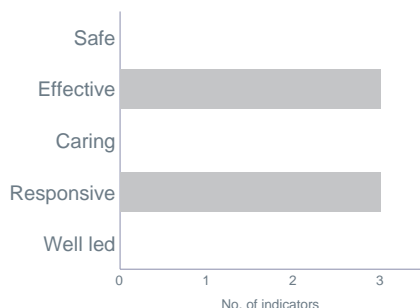
FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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### What's the current performance of critical care indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S5	<b>Never events in critical care</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019) <b>National Guardian Freedom to Speak Up</b>		0 Mar 17 - Feb 18	0 Mar 18 - Feb 19	→	
	E2	<b>Risk-adjusted hospital mortality ratio</b> ICNARC - ICNARC - New Cross Hospital, Integrated Critical Care Unit (23 Feb 2019)	1.00	0.99 Apr 16 - Mar 17	1.16 Apr 17 - Mar 18	→	S
Effective	E2	<b>Risk-adjusted hospital mortality ratio for patients with predicted risk of death &lt;20% (lower risk)</b> ICNARC - ICNARC - New Cross Hospital, Integrated Critical Care Unit (23 Feb 2019)	1.00	1.00 Apr 16 - Mar 17	1.51 Apr 17 - Mar 18	→	S
	E4	<b>Crude, non-delayed, out-of-hours discharge to ward proportion (%)</b> ICNARC - ICNARC - New Cross Hospital, Integrated Critical Care Unit (23 Feb 2019)	2.0%	0.8% Apr 16 - Mar 17	1.3% Apr 17 - Mar 18	→	S
	R1	<b>Crude non-clinical transfers (%)</b> ICNARC - ICNARC - New Cross Hospital, Integrated Critical Care Unit (23 Feb 2019)	0.30%	0.15% Apr 16 - Mar 17	0.21% Apr 17 - Mar 18	→	S
Responsive	R3	<b>Crude delayed discharge (% bed-days occupied by patients with discharge delayed &gt;8 hours) (%)</b> ICNARC - ICNARC - New Cross Hospital, Integrated Critical Care Unit (23 Feb 2019)	4.6%	5.1% Apr 16 - Mar 17	3.7% Apr 17 - Mar 18	→	S
	R3	<b>Full bed occupancy levels for adult critical care beds</b> NHS England - Critical Care Bed Occupancy (04 Apr 2019)		0-1 month of full occupancy Nov 17 - Jan 18	0-1 month of full occupancy Nov 18 - Jan 19	→	S



# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Maternity indicators

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

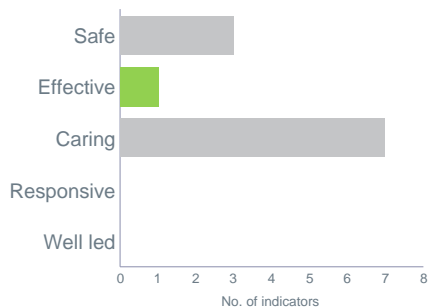
FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	<b>MATERNITY</b>	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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### What's the current performance of maternity indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S1	<b>Cleanliness of rooms and wards</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	9.1 Feb 17	8.9 Feb 18	➔	S
	S2	<b>Ratio of births to midwifery staff</b> Electronic Staff Record - ESR: Contracted FTEs - Midwifery (04 Apr 2019)	24.58	26.56 Jan 17 - Dec 17	23.90 Jan 18 - Dec 18	➔	S
	S2	<b>Ratio of senior midwives to midwives</b> Electronic Staff Record - ESR: Contracted FTEs - Midwifery (23 Mar 2019)	0.24	0.24 Dec 17	0.23 Dec 18	➔	S
	S5	<b>Never events in maternity or gynaecology</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019) <b>National Guardian Freedom to Speak Up</b>	-	1 Mar 17 - Feb 18	0 Mar 18 - Feb 19	⬆️	S
Effective	E2	<b>Stabilised and risk-adjusted extended perinatal mortality rate (per 1,000 births)</b> MBRRACE-UK - MBRRACE - Perinatal Mortality Surveillance (27 Jul 2018)	6.2	7.1 Jan 15 - Dec 15	6.1 Jan 16 - Dec 16	⬆️	B
Caring	C1	<b>Being left alone</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	7.2 Feb 17	7.0 Feb 18	➔	S
	C1	<b>Patients recommending the trust - Maternity delivery (%)</b> NHS England - FFT Birth (18 Mar 2019)	-	93.3% Oct 17 - Jan 18	100.0% Nov 18 - Jan 19	⬆️	S
	C1	<b>Patients recommending the trust - Postnatal community (%)</b> NHS England - FFT PostNatal in Community (18 Mar 2019)	-	-	98.0% Nov 18 - Jan 19	NA	S
	C1	<b>Patients recommending the trust - Postnatal ward (%)</b> NHS England - FFT PostNatal on Ward (18 Mar 2019)	-	96.7% Oct 17 - Jan 18	98.1% Nov 18 - Jan 19	➔	S
	C1	<b>Raising concerns</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	8.5 Feb 17	8.1 Feb 18	➔	S
	C1	<b>Staff introduction</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	9.5 Feb 17	9.0 Feb 18	⬇️	S
	C2	<b>Advice at the start of labour</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	8.5 Feb 17	8.3 Feb 18	➔	S
	C2	<b>Information or explanations given after birth</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	7.8 Feb 17	7.3 Feb 18	➔	S
	C2	<b>Moving during labour</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	8.9 Feb 17	7.8 Feb 18	⬇️	S
	C3	<b>Treatment with respect and dignity</b> Care Quality Commission - Maternity Survey - Benchmarking (07 Feb 2019)	-	9.4 Feb 17	9.4 Feb 18	➔	S



# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Children and young people indicators

National Guardian  
Freedom to Speak Up

Insight  
Care Quality  
Commission

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

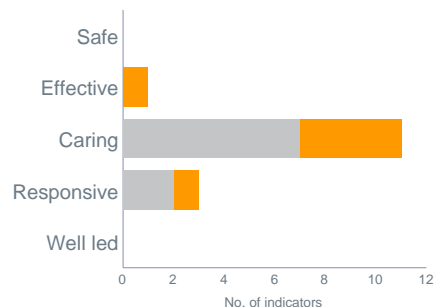
FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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What's the current performance of children and young people indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S5	<b>Never events in children and young people</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019)		0 Mar 17 - Feb 18	1 Mar 18 - Feb 19	↓	
Effective	E1	<b>Case mix adjusted mean HbA1c; blood glucose control</b> Royal College of Paediatrics and Child Health - National Paediatric Diabetes Audit - New Cross Hospital (28 Feb 2019)	67.3	70.5 Apr 15 - Mar 16	70.4 Apr 16 - Mar 17	↓	W
Caring	C1	<b>Being well looked after</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.7 Nov 16 - Dec 16	NA	S
	C1	<b>Confidence and trust</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.1 Nov 16 - Dec 16	NA	W
	C1	<b>Parents view of child being well looked after</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	7.9 Nov 16 - Dec 16	NA	W
	C2	<b>Explanations parents and carers could understand</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.5 Nov 16 - Dec 16	NA	W
	C2	<b>Information about next steps</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.2 Nov 16 - Dec 16	NA	S
	C2	<b>Involvement</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	6.4 Nov 16 - Dec 16	NA	S
	C2	<b>Parent and carer involvement</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	7.9 Nov 16 - Dec 16	NA	S
	C2	<b>Parents and carers being given information about next steps</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.0 Nov 16 - Dec 16	NA	S
	C2	<b>Understanding what staff say</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.4 Nov 16 - Dec 16	NA	S
	C3	<b>Pain management</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.7 Nov 16 - Dec 16	NA	S
Responsive	C3	<b>Parent and carer views on pain management</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	7.4 Nov 16 - Dec 16	NA	W
	R1	<b>Appropriate equipment or adaptations</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	8.2 Nov 16 - Dec 16	NA	W
	R1	<b>Type of ward stayed on</b> PICKER - CQC CYP Survey (18 Jan 2018)	-	NA	9.9 Nov 16 - Dec 16	NA	S
	R3	<b>Full bed occupancy levels for neonatal intensive care beds</b> NHS England - Critical Care Bed Occupancy (04 Apr 2019)		0-1 month of full occupancy Nov 17 - Jan 18	0-1 month of full occupancy Nov 18 - Jan 19	→	S

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > End of life care indicators

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

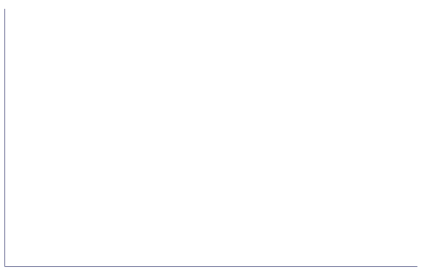
15 April 2019

OVERVIEW	TRUST COMPOSITE INDICATOR	TRUST WIDE	URGENT & EMERGENCY	MEDICAL CARE	SURGERY	CRITICAL CARE	MATERNITY	CHILDREN & YOUNG PEOPLE	END OF LIFE CARE	OUTPATIENTS
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**What's the current performance of end of life care indicators?**

Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	

Under development



No. of indicators

# The Royal Wolverhampton NHS Trust

## Trust and core service analysis > Outpatients indicators

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

OVERVIEW

TRUST COMPOSITE INDICATOR

TRUST WIDE

URGENT & EMERGENCY

MEDICAL CARE

SURGERY

CRITICAL CARE

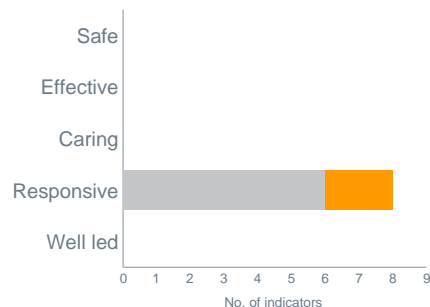
MATERNITY

CHILDREN & YOUNG PEOPLE

END OF LIFE CARE

OUTPATIENTS

### What's the current performance of outpatients indicators?



Key question	KLOE	Indicator	National average	Performance			National comparison
				Previous	Latest	Change	
Safe	S5	<b>Never events in outpatients and diagnostic imaging</b> NHS Improvement - OBIEE NRLS STEIS (30 Mar 2019) <b>National Guardian Freedom to Speak Up</b>		0 Mar 17 - Feb 18	0 Mar 18 - Feb 19	→	
Caring	C1	<b>Patients recommending the trust - Outpatients (%)</b> NHS England - FFT Outpatients (20 Mar 2019)	-	93.8% Oct 17 - Jan 18	94.8% Nov 18 - Jan 19	→	
Responsive	R3	<b>Cancer - First treatment in 31 days of decision to treat (%)</b> NHS England - Cancer Waits 31 Days All Cancers (14 Feb 2019)	96.7%	97.6% Oct 17 - Dec 17	89.4% Oct 18 - Dec 18	↓	W
	R3	<b>Cancer - First treatment in 62 days of urgent GP/dentist referral (%)</b> NHS England - Cancer Waits 62 Days All Cancers (14 Feb 2019)	79.6%	76.0% Oct 17 - Dec 17	67.4% Oct 18 - Dec 18	↓	W
	R3	<b>Cancer - First treatment in 62 days of urgent national screening referral (%)</b> NHS England - Cancer Waits 62 Days Screening (14 Feb 2019)	88.3%	84.7% Oct 17 - Dec 17	81.7% Oct 18 - Dec 18	→	S
	R3	<b>Cancer - Seen by specialist in 14 days of urgent GP/dentist referral (%)</b> NHS England - Cancer Waits 14 Days All Cancers (14 Feb 2019)	92.8%	92.5% Oct 17 - Dec 17	85.6% Oct 18 - Dec 18	↓	S
	R3	<b>Outpatient DNAs (%)</b> Hospital Episode Statistics - HES Outpatients (04 Apr 2019)	7.8%	9.2% Dec 17	8.0% Dec 18	→	S
	R3	<b>Patients waiting over 6 weeks for diagnostic test (%)</b> NHS England - Diagnostics Waiting Times (19 Mar 2019)	3.7%	0.8% Jan 18	1.7% Jan 19	→	S
	R3	<b>Referral to treatment, on incomplete pathways, within 18 weeks (%)</b> NHS England - RTT Incomplete (20 Mar 2019)	86.2%	90.3% Jan 18	90.1% Jan 19	→	S
	R3	<b>Referral to treatment, on non-admitted pathways, within 18 weeks (%)</b> NHS England - RTT NonAdmitted (20 Mar 2019)	86.4%	89.5% Jan 18	89.2% Jan 19	→	S

INCIDENTS

SAFETY THERMOMETER

MATERNITY & MORTALITY OUTLIERS

MORTALITY

NATIONAL CLINICAL AUDITS

A&E WAITING TIMES

PATIENT SURVEYS

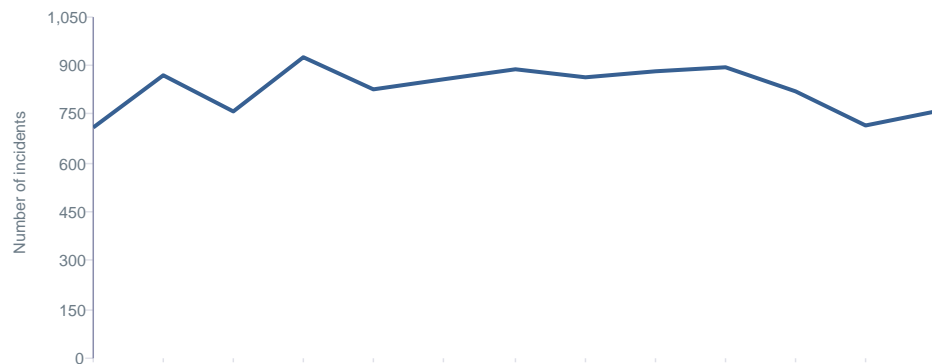
STAFF SURVEYS

### Key messages

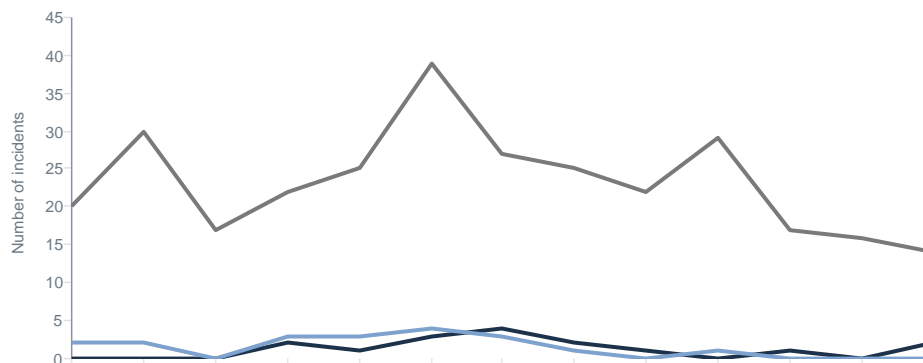
- The median time taken to report incidents was 24 days for this organisation compared to 30 for all trusts between Apr 18 and Sep 18

■ This trust  
■ Highest 25% of reporters  
■ Middle 50% of reporters  
■ Lowest 25% of reporters  
... Median

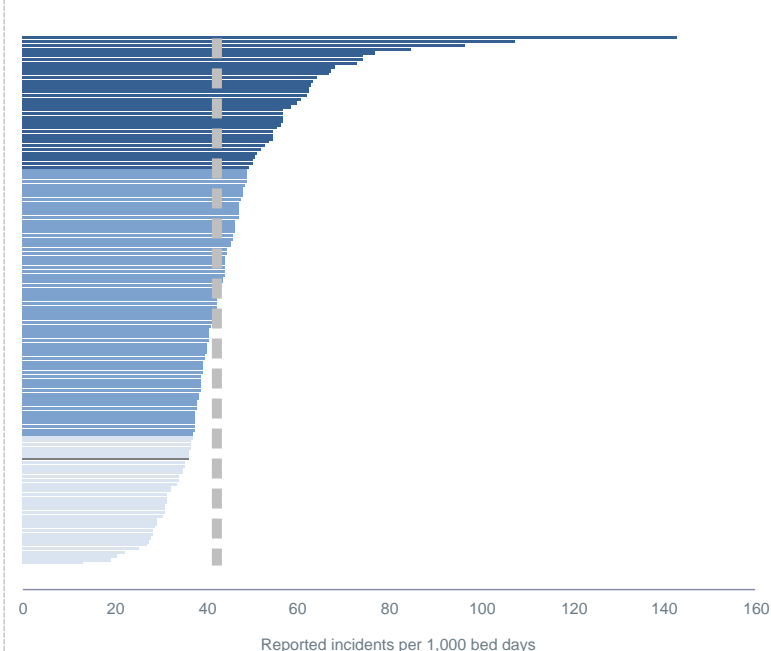
All reported incidents



Reported incidents that resulted in moderate, severe harm or death



Comparative reporting rate for incidents in all acute trusts



	Year-month	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	2018-11	2018-12
1. Death		0	0	0	2	1	3	4	2	1	0	1	0	2
2. Severe		2	2	0	3	3	4	3	1	0	1	0	0	0
3. Moderate		20	30	17	22	25	39	27	25	22	29	17	16	14
4. Low		86	98	82	90	102	88	88	72	63	75	54	58	68
5. No Harm		602	738	662	807	699	724	766	764	795	787	747	643	678
6. Total		710	868	761	924	830	858	888	864	881	892	819	717	762

Indicator	Trend	Performance
NRLS - Proportion of reported patient safety incidents that are harmful (%)	➔	S
NRLS - Potential under-reporting of patient safety incidents resulting in death or severe harm	➔	S
NRLS - Potential under-reporting of patient safety incidents	➔	S

- INCIDENTS
- SAFETY THERMOMETER**
- MATERNITY & MORTALITY OUTLIERS
- MORTALITY
- NATIONAL CLINICAL AUDITS
- A&E WAITING TIMES
- PATIENT SURVEYS
- STAFF SURVEYS

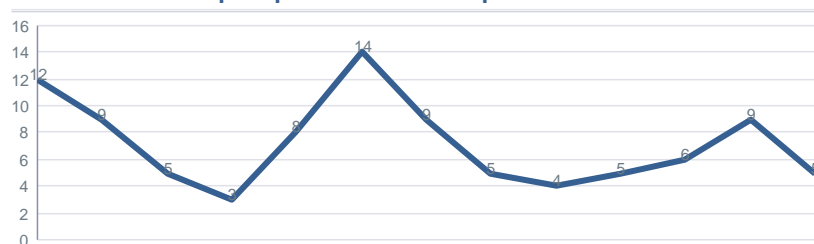
### Key messages

- The ward with the highest rate of pressure ulcers is C24 with 2.50 per 100 patients sampled

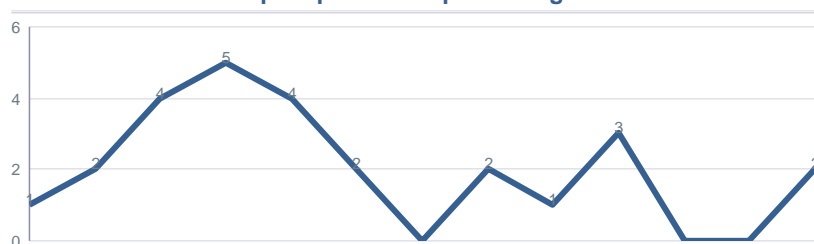
- The ward with the highest rate of falls is FAIROAK with 1.80 per 100 patients sampled
- The ward with the highest rate of catheter acquired UTIs is DEANESLY WARD with 0.96 per 100 patients sampled

Indicator Summary: Under development

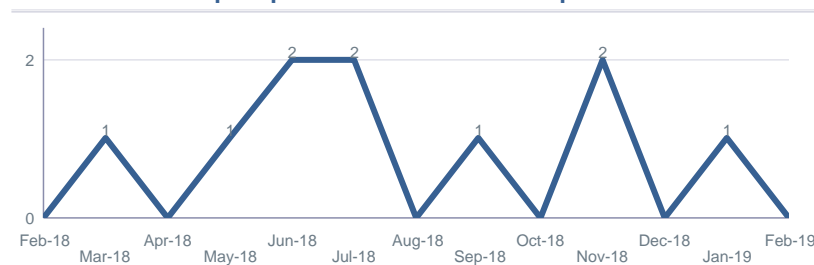
Sampled patients with new pressure ulcers



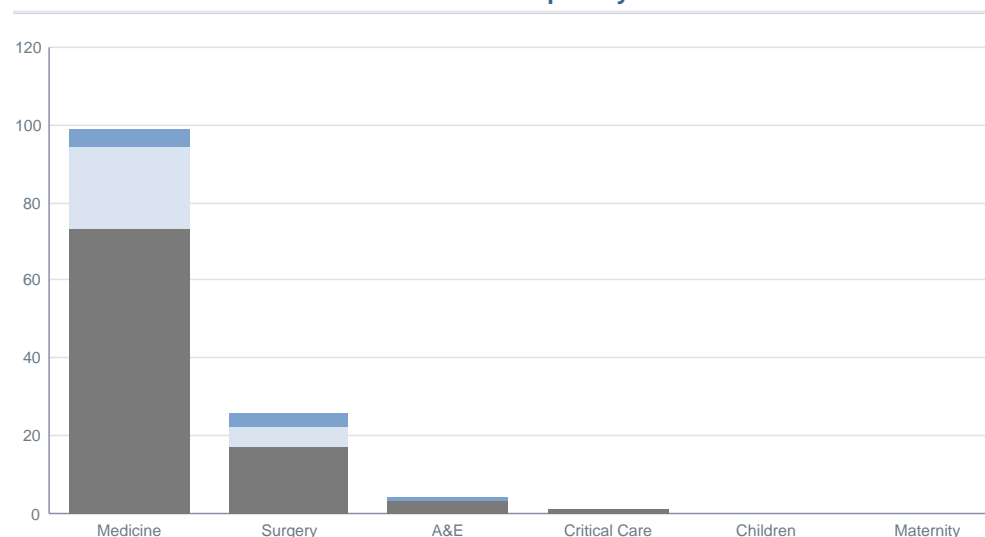
Sampled patients experiencing a fall



Sampled patients with catheter acquired UTI



Incidents recorded in samples by core service



- 1 Pressure ulcers, includes levels 2, 3 and 4
- 2 Falls with harm levels 3 to 6
- 3 Catheter acquired urinary tract infection level 3 only

Core service	PUs <sup>1</sup>	Falls <sup>2</sup>	UTIs <sup>3</sup>	Patients surveyed
Medicine	73 (1.38)	21 (0.40)	5 (0.09)	5,277
Surgery	17 (0.69)	5 (0.20)	4 (0.16)	2,471
A&E	3 (0.58)	0 (0.00)	1 (0.19)	515
Critical Care	1 (0.45)	0 (0.00)	0 (0.00)	223
Children	0 (0.00)	0 (0.00)	0 (0.00)	488
Maternity	0 (0.00)	0 (0.00)	0 (0.00)	568

INCIDENTS	SAFETY THERMOMETER	<b>MATERNITY &amp; MORTALITY OUTLIERS</b>	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### Key messages

- There are currently 9 active mortality alerts for this trust.
- There are currently 0 active maternity alerts for this trust.

Number of outlier alerts for this trust as at 2 April 19

	Active alerts			Closed cases	Total
	Cases under consideration by Outliers Panel	Cases where action plans are being followed up by local inspection team	Cases for review by inspection team		
<b>Mortality</b>	6	3	0	19	28
<b>Maternity</b>	0	0	0	1	1

### Mortality outliers – Active alerts

#### Cases under consideration by Outliers panel

- Acute cerebrovascular disease (Dr Foster, Dec 18) - New case - pending consideration
- Senility and organic mental disorders (CQC, Aug 18) - Letter sent (info request) - pending response
- Septicaemia (except in labour) (Dr Foster, Jul 18) - Letter sent (info request) - pending response
- Chronic obstructive pulmonary disease and bronchiectasis (Dr Foster, Mar 19) - New case - pending consideration
- Deficiency and other anaemia (Dr Foster, Jul 18) - Letter sent (info request) - pending response
- Skin and subcutaneous tissue infections (Dr Foster, Jul 18) - Letter sent (info request) - pending response

#### Cases where action plans are being followed up by local inspection team

- Acute cerebrovascular disease (Dr Foster, Dec 17) - Action plans being followed up by inspection team
- Other psychoses (Dr Foster, Mar 18) - Action plans being followed up by inspection team
- Pneumonia (except that caused by tuberculosis or sexually transmitted disease) (CQC, May 17) - Action plans being followed up by inspection team

#### Cases for review by inspection team

- There are currently no mortality alerts for review by inspection team

### Maternity outliers – Active alerts

#### Cases under consideration by Outliers panel

- There are currently no maternity alerts under consideration by Outliers panel

#### Cases where action plans are being followed up by local inspection team

- There are currently no maternity alerts where action plans are being followed up by the local inspection team

#### Cases for review by inspection team

# The Royal Wolverhampton NHS Trust

## Featured data sources > Maternity and mortality outliers

15 April 2019

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INCIDENTS	SAFETY THERMOMETER	<b>MATERNITY &amp; MORTALITY OUTLIERS</b>	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

- There are currently no maternity alerts for review by inspection team

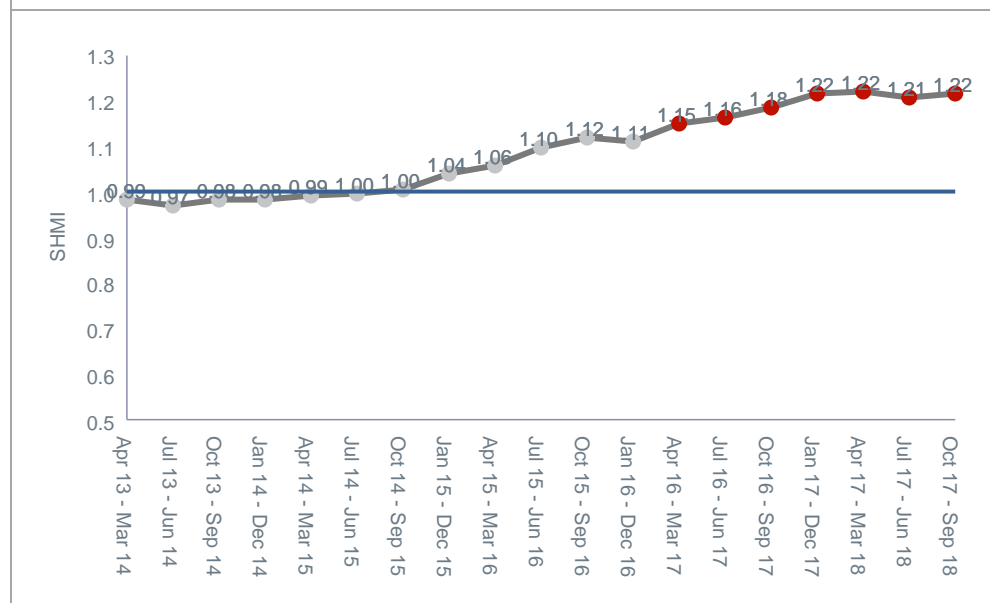
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	<b>MORTALITY</b>	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### Key messages

- For the 12-month period from Oct 17 - Sep 18, SHMI was higher than expected.
- For the 12-month period from Oct 17 - Sep 18, HSMR was higher than expected.

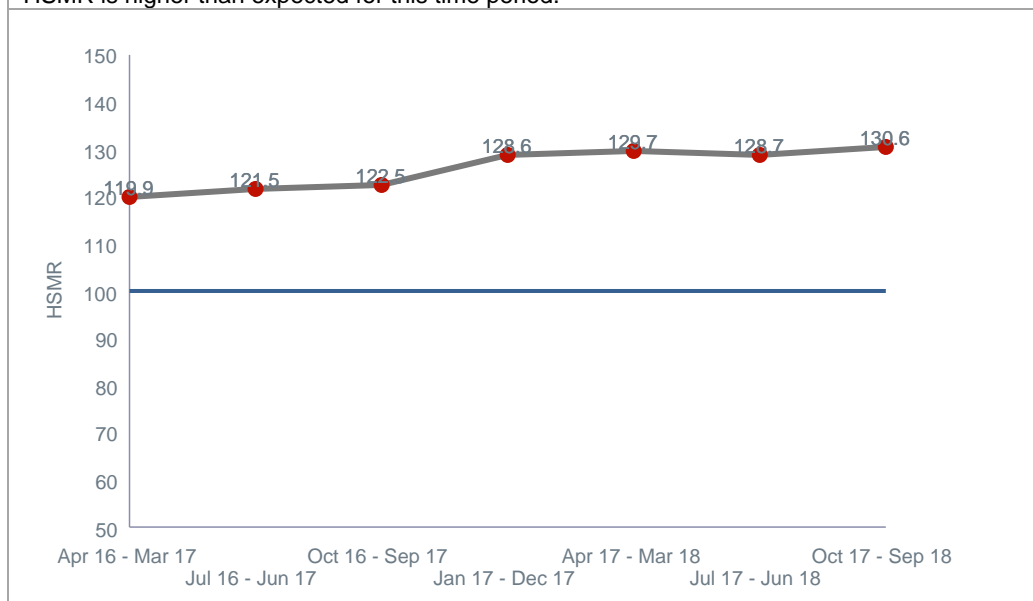
### Summary Hospital-level Mortality indicator (SHMI)

For the 12-month period from Oct 17 - Sep 18, SHMI was higher than expected with a value of 1.22 (compared to 1.0 for England) and 2,715 deaths compared to an expected 2,230 deaths SHMI has remained within the higher than expected banding since 2016.



### Hospital Standardised Mortality Ratio (HSMR)

For the 12-month period from Oct 17 - Sep 18, HSMR was higher than expected with a value of 130.63 (compared to 100 for England) and 1,731 deaths compared to an expected 1,325 deaths. HSMR has remained within the higher than expected banding since 2014. Weekend HSMR is higher than expected for this time period.



Note: From the period July 2014 to June 2015 onwards, HSMR indicators have been updated by DFI on a quarterly, rather than annual, basis.

- England standardised mortality ratio
- This trust
- Higher than expected
- Within expected range
- Lower than expected



INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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National clinical audits are priority information to inform discussions about quality improvement. The table below provides a high-level summary 'at a glance' of the key clinically relevant indicators which best reflect trust performance. Click on the links to see extra site and ward-level audit results to inform monitoring conversations.

- Audit results should be followed-up during engagement meetings:
  - Better or worse than expected performance should be used to drive quality improvement
  - Where performance is much worse than expected we would expect this to prompt an investigation by the trust
- National clinical audits are reported here only if the trust participated
- More audits will be added each quarter and inspectors will soon receive information on audit outliers and audit data quality concerns

Core Service	Audit Name	Location	Date last refreshed	Insight indicator national comparison				
				Much Worse	Worse	About the same	Better	Much Better
Children and young people	<a href="#">Neonatal Audit</a>	New Cross Hospital	09/18	see link	see link	see link	see link	see link
Children and young people	<a href="#">National Paediatric Diabetes Audit</a>	New Cross Hospital	02/19	0	1	0	0	0
Urgent and emergency care	<a href="#">Consultant Sign off Clinical Audit</a>	New Cross Hospital		see link	see link	see link	see link	see link
Urgent and emergency care	<a href="#">Moderate and Acute Severe Asthma Adult and Paediatric Clinical Audit</a>	New Cross Hospital		see link	see link	see link	see link	see link
Urgent and emergency care	<a href="#">Severe Sepsis and Septic Shock Audit</a>	New Cross Hospital	05/17	see link	see link	see link	see link	see link
Medical care	<a href="#">National Lung Cancer Audit</a>	The Royal Wolverhampton NHS Trust	12/18	0	0	3	1	0
Medical care	<a href="#">Stroke Audit</a>	New Cross Hospital	01/19	0	0	1	0	0
Surgery	<a href="#">National Emergency Laparotomy Audit</a>	New Cross Hospital	03/19	1	1	1	2	0
Surgery	<a href="#">National Hip Fracture Database</a>	New Cross Hospital	01/19	0	3	2	0	0
Surgery	<a href="#">National Oesophago-gastric Cancer Audit</a>	The Royal Wolverhampton NHS Trust	09/18	see link	see link	see link	see link	see link
Critical care	<a href="#">ICNARC</a>	New Cross Hospital*	02/19	0	0	5	0	0
Maternity	<a href="#">MBRRACE-UK</a>	The Royal Wolverhampton NHS Trust	07/18	0	0	0	1	0

\*May be an aggregate of more than one ward's results

Do you have a query or suggestion for national clinical audits? [Contact us.](#)

# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Lung cancer audit



15 April 2019

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INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

### The Royal Wolverhampton NHS Trust

	Metric	CQC Key Question	2016 Report <sup>1</sup>	2017 Report <sup>2</sup>	National Aggregate (England and Wales)	National Audit Standard	Comparison to other hospitals
All patients 247 cases	Crude proportion of patients seen by a Cancer Nurse Specialist	Responsive	85.9%	<b>83.4%</b>	n/a	90%*	Does not meet the audit aspirational standard of 90%
	Case mix adjusted one year relative survival rate	Effective	Not significantly different from the national level	<b>32.5%</b>	<b>37.0%</b>	none	Within expected range
NSCLC 247 cases	Case mix adjusted percentage of patients with Non Small Cell Lung Cancer (NSCLC) receiving surgery	Effective	Significantly better than the national level	<b>23.1%</b>	<b>17.5%</b>	17%*	Good Practice
NSCLC 50 cases	Case mix adjusted percentage of fit patients with advanced Non Small Cell Lung Cancer (NSCLC) receiving Systemic Anti-Cancer Treatment	Effective	Significantly worse than the national level	<b>62.9%</b>	<b>62.0%</b>	65%*	Within expected range
SCLC 30 cases	Case mix adjusted percentage of patients with Small Cell Lung Cancer (SCLC) receiving chemotherapy	Effective	Not significantly different from the national level	<b>75.1%</b>	<b>68.0%</b>	70%*	Within expected range

All trusts in England participate in the audit, and data is submitted for approximately 100% of patients. Case ascertainment is therefore not presented separately.



<sup>1</sup> Jan 15 - Dec 15  
<sup>2</sup> Jan 16 - Dec 16

\*Audit standard based on NICE guideline

# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Hip fracture audit



FACTS, FIGURES & RATINGS

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### New Cross Hospital

	Metric	CQC Key Question	2017 <sup>1</sup> Report	2018 <sup>2</sup> Report	National Aggregate (England and Wales)	National Aspirational Standard	Comparison to other hospitals
461 cases	Case ascertainment All eligible patients	Well Led	97.2%	<b>96.2%</b>	<b>100.7%</b>	100%*	
461 cases	Crude proportion of patients having surgery on the day or day after admission	Responsive	72.6%	<b>74.9%</b>	<b>69.5%</b>	85%*	
461 cases	Crude perioperative medical assessment rate	Effective	82.7%	<b>87.6%</b>	<b>88.6%</b>	100%*	
461 cases	Crude proportion of patients documented as not developing a pressure ulcer	Safe	76.8%	<b>91.5%</b>	<b>95.6%</b>	100%*	
461 cases	Crude overall hospital length of stay	Responsive	28.4 days	<b>24.5 days</b>	<b>20.0 days</b>	none	
461 cases	Risk-adjusted 30-day mortality rate	Effective	5.6%	<b>7.2%</b>	<b>6.9%**</b>	none	

**Key:**

- Better than expected (below 95% CL)
- Within expected range
- Worse than expected (above 95% CL)
- Trust
- Positive outlier (below 99.8% control limit)
- Negative outlier (above 99.8% CL)
- Bottom 25%
- Top 25%
- Min
- Max



<sup>1</sup> Jan 16 - Dec 16

<sup>2</sup> Jan 17 - Dec 17

\*Audit recommendation based on NICE guideline

\*\*England only

# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Bowel cancer audit



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### THE ROYAL WOLVERHAMPTON NHS TRUST

	Metric	CQC Key Question	2017 Report	2018 Report	National Aggregate (England and Wales)	National Aspirational Standard	Comparison to other hospitals
41 operations	Case ascertainment	Well Led	88.4% <sup>1</sup>	<b>15.0%<sup>4</sup></b>	<b>93.0%</b>	none	Poor (less than 50%)
Not Reported	Risk-adjusted post-operative length of stay >5 days after major resection*	Responsive	85.7% <sup>1</sup>	<b>Not Reported<sup>4</sup></b>	<b>64.0%</b>	none	Not Reported
Not Reported	Risk-adjusted 90-day post-operative mortality rate	Effective	1.6% <sup>1</sup>	<b>Not Reported<sup>4</sup></b>	<b>3.3%</b>	none	Not reported
150 operations	Risk-adjusted 2-year post-operative mortality rate	Effective	16.1% <sup>2</sup>	<b>17.6%<sup>5</sup></b>	<b>18.9%</b>	none	0 Within expected range 50
	Risk-adjusted 30-day unplanned readmission rate	Effective	8.7% <sup>1</sup>	<b>Not Reported<sup>4</sup></b>	<b>10.6% *</b>	none	Not reported
112 operations	Risk-adjusted 18-month temporary stoma rate in rectal cancer patients undergoing major resection	Effective	48.7% <sup>3</sup>	<b>45.3%<sup>6</sup></b>	<b>52.0% *</b>	none	0 Within expected range 90



**Key:**

- Positive outlier (below 99.8% control limit)
- Trust
- Negative outlier (above 99.8% CL)
- Better than expected (below 95% CL)
- Worse than expected (above 95% CL)

<sup>1</sup> Apr 15 - Mar 16

<sup>2</sup> Apr 13 - Mar 14

<sup>3</sup> Apr 12 - Mar 15

\*England only

<sup>4</sup> Apr 16 - Mar 17

<sup>5</sup> Apr 14 - Mar 15

<sup>6</sup> Apr 13 - Mar 16

FACTS, FIGURES & RATINGS		TRUST AND CORE SERVICE ANALYSIS		FEATURED DATA SOURCES		DEFINITIONS	
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

### New Cross Hospital, Integrated Critical Care Unit

Metric	CQC Key Question	2016/17 <sup>1</sup> Report	2017/18 <sup>2</sup> Report	National Aggregate (England, Wales & N. Ireland)	National Aspirational Standard	Comparison to other hospitals
Case Ascertainment All eligible patients	Well Led	Not reported for this audit		none	n/a	
940 admissions Crude non-clinical transfers	Responsive	0.1%	<b>0.2%</b>	<b>0.3%</b>	0%*	0.0 Within expected range 10.0
691 admissions Crude, non-delayed, out-of-hours discharge to ward proportion	Responsive	0.8%	<b>1.3%</b>	<b>2.0%</b>	0%*	0.0 Within expected range 100.0
5475 available critical care bed days Crude delayed discharge (% bed-days occupied by patients with discharge delayed >8 hours)	Responsive	5.1%	<b>3.7%</b>	<b>4.6%</b>	0%*	Not in the worst 5% of units
875 admissions Risk-adjusted hospital mortality ratio (all patients)	Effective	1.0	<b>1.2</b>	<b>1.0</b>	none	0.3 Within expected range 2.0
583 admissions Risk-adjusted hospital mortality ratio for patients with predicted risk of death <20% (lower risk)	Effective	1.0	<b>1.5</b>	<b>1.0</b>	none	-0.2 Within expected limits 5.0



**KEY:**

- Positive outlier (below 99.8% control limit)
- Better than expected (below 95% CL)
- Trust
- Within expected range
- Worse than expected (above 95% CL)
- Negative outlier (above 99.8% CL)

<sup>1</sup> Apr 16- Mar 17  
<sup>2</sup> Apr 17- Mar 18

\* FICM/ICS guideline

# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > National vascular registry



15 April 2019

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# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Emergency Laparotomy Audit



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### New Cross Hospital

	Metric	CQC Key Question	Year 3 <sup>1</sup>	Year 4 <sup>2</sup>	National Aggregate (England & Wales)	National Standard	Hospital performance	
	250 cases	Case Ascertainment	Well Led	100%	<b>94%</b>	82.7%*	85%	Higher than 85%
Proportion of patients for which each process of care was met	250 cases	Crude proportion of cases with pre-operative documentation of risk of death	Effective	39%	<b>23%</b>	74.6%	85%	Less than 55%
	188 cases	Crude proportion of cases with access to theatres within clinically appropriate time frames	Responsive	84%	<b>86%</b>	82.0%	85%	Higher than 85%
	145 cases	Crude proportion of high-risk cases (greater than or equal to 5% predicted mortality) with consultant surgeon and anaesthetist present in theatre	Effective	98%	<b>98%</b>	82.5%	85%	Higher than 85%
	100 cases	Crude proportion of highest-risk cases (greater than 10% predicted mortality) admitted to critical care post-operatively	Safe	68%	<b>77%</b>	86.8%	85%	Between 55% and 85%
	250 cases	Risk adjusted 30-day mortality	Effective	11%	<b>12%</b>	9.5%	none	Within expected range



**Key:**

- Positive outlier (below 99.8% control limit)
- Negative outlier (above 99.8% CL)
- Better than expected (below 95% CL)
- Worse than expected (above 95% CL)
- Trust
- Within expected range

<sup>1</sup> Dec 15 - Nov 16

<sup>2</sup> Dec 16 - Nov 17

\*England only

# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Paediatric Diabetes Audit



FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

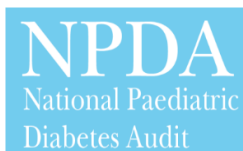
DEFINITIONS

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INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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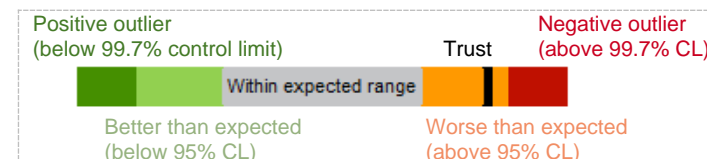
### New Cross Hospital

	Metric	CQC Key Question	2015/16 <sup>1</sup> Report	2016/17 <sup>2</sup> Report	National Aggregate (England & Wales)	National Aspirational Standard	Comparison to other units	
Process measures	98 cases	Completion rate for key health checks for patients aged 12+	Effective	Not reported	91.5%	84.0%	n/a	48% Better than expected 100%
	174 cases	<b>Organisation compared with nationally:</b> Case-mix adjusted mean HbA1c (mmol/mol)	Effective	Within expected range	70.4	67.3	n/a	58 Worse than expected 76
Blood glucose diabetes control (HbA1c)	176 cases	<b>Organisational performance compared between years:</b> Median HbA1c (mmol/mol)	Effective	70.5	69.4	64.0	n/a	Clinically significant improvement



HbA1c levels are an indicator of how well an individual's blood glucose levels are controlled over time. Higher values indicate poorer control.

Key:



<sup>1</sup> Apr 15 - Mar 16

<sup>2</sup> Apr 16 - Mar 17



FACTS, FIGURES & RATINGS

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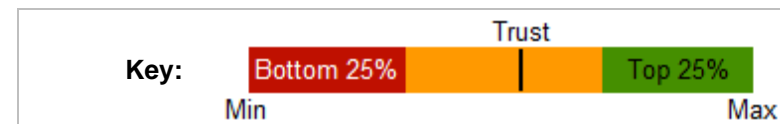
### New Cross Hospital

#### Key messages

Comparing this provider to other trusts on the 2016/17 Severe Sepsis and Septic Shock Audit, performance was better in 0 metric(s), worse in 6 metric(s) and similar in 2 metric(s). In this context, 'similar' means that the trust's performance fell within the middle 50% of results. The national standard was met in 0 of 8 of the relevant metrics.

Metric	CQC Key Question	2013/14 Report	2016/17 Report	National Aggregate (UK)	National Standard	Comparison to other units
Number of records submitted to the audit		50	<b>100</b>	N/A		
Standard 1: Respiratory rate, oxygen saturations (SaO2), supplemental oxygen requirement, temperature, blood pressure, heart rate, level of consciousness (AVPU or GCS) and capillary blood glucose recorded on arrival	Effective	N/A	<b>9.0%</b>	69.1%	100%*	0% 50% 91% 100%
Standard 2: Review by a senior (ST4+ or equivalent) ED medic or involvement of Critical Care medic (including the outreach team or equivalent) before leaving the ED	Effective	N/A	<b>24.0%</b>	64.6%	100%*	8% 52% 76% 100%
Standard 3: O2 was initiated to maintain SaO2>94% (unless there is a documented reason not to):Within one hour of arrival	Effective	10.0%	<b>3.1%</b>	30.4%	100%*	0% 10% 59% 100%

Please scroll down for more metrics



\*Based on the NICE guidance

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

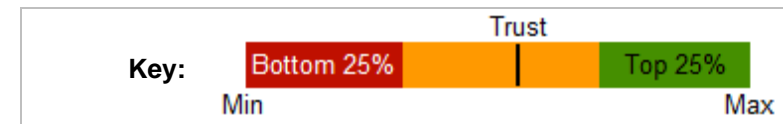
FEATURED DATA SOURCES

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INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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Metric	CQC Key Question	2013/14 Report	2016/17 Report	National Aggregate (UK)	National Standard	Comparison to other units
Standard 4: Serum lactate measured: Within one hour of arrival	Effective	38.0%	<b>47.0%</b>	60.0%	100%*	0% 37% 72% 100%
Standard 5: Blood cultures obtained: Within one hour of arrival	Effective	8.0%	<b>28.0%</b>	44.9%	100%*	0% 25% 62% 100%
Standard 6: Fluids – first intravenous crystalloid fluid bolus (up to 30 mL/Kg) given: Within one hour of arrival	Effective	28.0%	<b>19.0%</b>	43.2%	100%*	0% 25% 57% 96%
Standard 7: Antibiotics administered: Within one hour of arrival	Effective	16.0%	<b>17.0%</b>	44.4%	100%*	0% 28% 58% 94%
Standard 8: Urine output measurement/fluid balance chart instituted within four hours of arrival	Effective	N/A	<b>1.0%</b>	18.4%	100%*	0% 6% 38% 91%



\*Based on the NICE guidance

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

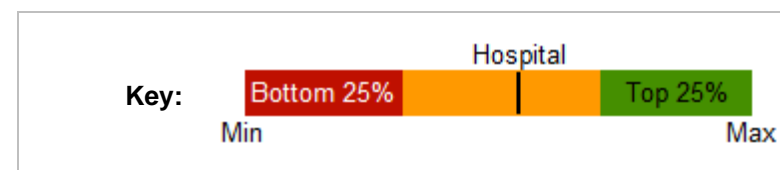
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### New Cross Hospital

#### Key messages

- Comparing this hospital to other hospitals on the 2016/17 Consultant Sign-off Audit, performance was better in 1 metrics, worse in 0 metrics and similar in 2 metrics. In this context, 'similar' means that the hospital's performance fell within the middle 50% of results. The RCEM standard was met in 0 of 3 of the relevant metrics.

Metric	CQC Key Question	2016/17 Report	National Aggregate (UK)	RCEM Standard	Comparison to other units
Number of records submitted to the audit	Well-led	<b>170</b>			
The following high-risk patient groups should be reviewed by a consultant in EM prior to discharge from the ED:					
Atraumatic chest pain in patients aged 30 years and over	Seen by Consultant	<b>30.8%</b>	11%	100%	
	Seen by an ST4 or above	<b>50.0%</b>	43%		
Fever in children under 1 year of age	Seen by Consultant	<b>Not reported</b>	8%	100%	<b>Not reported</b>
	Seen by an ST4 or above	<b>Not reported</b>	48%		
Patients making an unscheduled return to the ED with the same condition within 72 hours of discharge	Seen by Consultant	<b>10.4%</b>	12%	100%	
	Seen by an ST4 or above	<b>29.2%</b>	46%		
Abdominal pain in patients aged 70 years and over	Seen by Consultant	<b>15.9%</b>	10%	100%	
	Seen by an ST4 or above	<b>29.0%</b>	40%		



FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

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15 April 2019

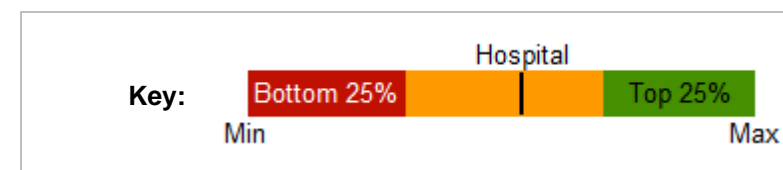
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### New Cross Hospital

#### Key messages

- Comparing this hospital to other hospitals on the 2016/17 Moderate and Acute Severe Asthma Audit (Adult and Paediatrics), performance was better in 0 metrics, worse in 2 metrics and similar in 5 metrics. In this context, 'similar' means that the hospital's performance fell within the middle 50% of results. The RCEM standard was met in 0 of 7 of the relevant metrics.

Metric	CQC Key Question	2016/17 Report	National Aggregate (UK)	RCEM Standard	Comparison to other units
Number of records submitted to the audit	Well-led	<b>100</b>			
Standard 1a: O2 should be given on arrival to maintain sats 94-98%	Effective	<b>12.0%</b>	19%	100%	0.0 12.0 30.0 100.0
Standard 2a: Vital signs should be measured and recorded on arrival at the ED	Effective	<b>11.0%</b>	26%	100%	0.0 15.4 40.0 100.0
Standard 3: High dose nebulised β2 agonist bronchodilator should be given within 10 minutes of arrival at the ED	Effective	<b>27.0%</b>	25%	100%	0.0 12.0 36.3 96.0
Standard 4: Add nebulised Ipratropium to nebulised β2 agonist bronchodilator therapy	Effective	<b>67.2%</b>	77%	100%	4.0 68.4 87.1 100.0
Standard 5: If not already given before arrival to the ED, steroids should be given as soon as possible:	5a: Within one hour of arrival (acute severe)	<b>15.6%</b>	19%	100%	0.0 6.3 32.3 100.0
	5b: Within four hours (moderate)	<b>38.2%</b>	28%	100%	0.0 11.9 42.5 90.5
Standard 9: Discharged patients should have oral prednisolone prescribed according to guidelines	Effective	<b>64.4%</b>	52%	100%	0.0 39.8 71.1 100.0



FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### The Royal Wolverhampton NHS Trust

#### Key messages

- Comparing this provider to other trusts with similar service provision in the 2018 MBRRACE-UK Perinatal Mortality Surveillance Report for Births in 2016, performance was better than expected for stabilised and risk-adjusted extended perinatal mortality rate. There is currently no national aspirational standard for this audit.

	Metric	CQC Key Question	2017 <sup>1</sup> Report	2018 <sup>2</sup> Report	Comparator group average (UK)	National Aspirational Standard	Comparison to other trusts with similar service provision
4,921 births	Stabilised and risk-adjusted extended perinatal mortality rate (per 1,000 births)	Effective	7.11 (5.74 to 9.51)*	6.10 (5.21 to 8.02)*	6.20	n/a	Up to 10% lower than the average for the comparator group (Level 3 Neonatal Intensive Care Unit)



<sup>1</sup> Jan 15 - Dec 15

<sup>2</sup> Jan 16 - Dec 16

\* Upper and lower 95% confidence intervals

FACTS, FIGURES & RATINGS		TRUST AND CORE SERVICE ANALYSIS		FEATURED DATA SOURCES		DEFINITIONS	
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

# The Royal Wolverhampton NHS Trust





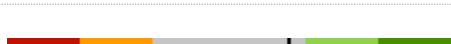

## Featured data sources > National audits > Neonatal Audit

FACTS, FIGURES & RATINGS		TRUST AND CORE SERVICE ANALYSIS		FEATURED DATA SOURCES		DEFINITIONS	
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

### NEW CROSS HOSPITAL

#### Key messages

- Comparing this unit to other units in the 2018 National Neonatal Audit, performance was better in 0, worse in 0 metrics and similar in 7 metrics. In this context, 'similar' means that the hospital's performance fell within the expected range, or fell within the middle 50% of units.
- The audit standard was met in 1 of 6 of the relevant metrics.

Cases	Metric	Core Service	CQC Key Question	2017 <sup>1</sup> Report	2018 <sup>2</sup> Report	National Aggregate (England & Wales)	Audit Standard	Comparison
168	Mothers who deliver babies between 24 and 34 weeks gestation and were given any dose of antenatal steroids	Maternity	Safe	82.5%	<b>89.2%</b>	89.1%	85%*	 Within expected range
57	Mothers who deliver babies below 30 weeks gestation given Magnesium Sulphate in the 24 hours prior to delivery	Maternity	Safe	37.8%	<b>62.5%</b>	65.1%	none	 Within expected range
92	Babies <32 weeks gestation who had temperature taken within an hour of admission that was 36.5°C-37.5°C	Children and young people	Safe	57.4%	<b>61.7%</b>	64.5%	90%*	 Within expected range
434	Documented consultation with parents/carers by a senior member of the neonatal team within 24 hours of admission	Children and young people	Caring	83.1%	<b>90.7%</b>	94.7%	100%*	 Within expected range
85	Babies of very low birthweight or <32 weeks gestation who receive appropriate screening for retinopathy of prematurity	Children and young people	Effective	97.2%	<b>98.3%</b>	94.4%	100%**	 Within expected range
31	Babies with gestation at birth <30 weeks who had received documented follow-up at 2 years gestationally corrected age	Children and young people	Effective	37.0%	<b>62.1%</b>	62.3%	100%*	 Within expected range

Please scroll down for more metrics

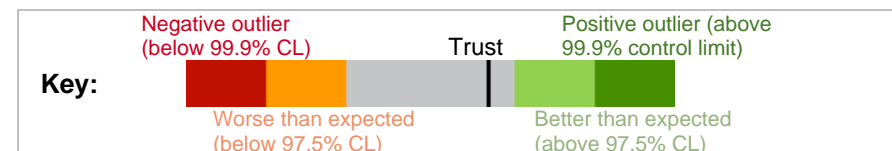
# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Neonatal Audit

15 April 2019

FACTS, FIGURES & RATINGS		TRUST AND CORE SERVICE ANALYSIS		FEATURED DATA SOURCES		DEFINITIONS	
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

Cases	Metric	Core Service	CQC Key Question	2017 <sup>1</sup> Report	2018 <sup>2</sup> Report	National Aggregate (England & Wales)	Audit Standard	Comparison
66	Babies born at less than 27 weeks who were born in a hospital with a Neonatal Intensive Care Unit onsite	Children and young people	Effective	Not Reported	68.2%	73.2%	85%*	<p>Within expected range</p>



<sup>1</sup> Jan 16 - Dec 16

<sup>2</sup> Jan 17 - Dec 17

\*Audit recommendation

\*\*Audit recommendation based on specialist guideline



# The Royal Wolverhampton NHS Trust

## Featured data sources > National audits > Stroke Audit

15 April 2019

FACTS, FIGURES & RATINGS		TRUST AND CORE SERVICE ANALYSIS		FEATURED DATA SOURCES		DEFINITIONS	
INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### New Cross Hospital

#### Key messages

Comparing this site to other sites on the 2018 National Maternity and Perinatal Audit:

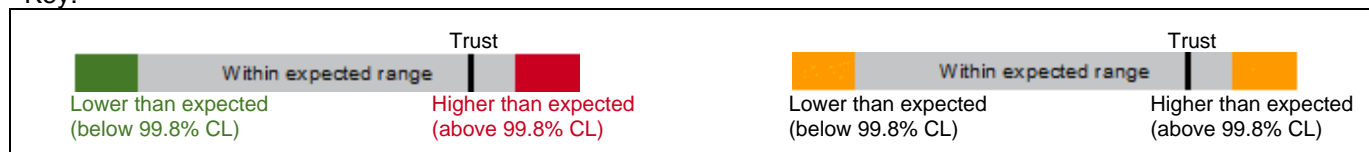
- Case ascertainment met the national standard of 95%.
- The 'case-mix adjusted overall caesarean section rate for single, term babies' was higher than expected.
- For the other metrics, rates were higher in 0, lower in 0 and similar in 3 metric(s) where benchmarking has been applied. In this context, 'similar' means within expected range. For these metrics, higher rates can be interpreted as worse performance, and lower rates can be interpreted as better performance.
- For all metrics, particularly low rates may reflect poor detection/measurement.

	Metric	CQC Key Question	2018 <sup>1</sup> Report	National Aggregate	National Standard	Comparison to other sites	
	4,552 cases	Case ascertainment	Well-Led	99.9%	92.0%	95%	
Ante-natal	327 cases	Case-mix adjusted proportion of small-for-gestational-age babies (birthweight below 10th centile) who are not delivered before their due date	Effective	50.4%	55.3%	N/A	
Intra-partum	454 cases	Case-mix adjusted proportion of elective deliveries (caesarean or induction) between 37 and 39 weeks with no documented clinical indication for early delivery	Effective	34.3%	26.0%	N/A	
	4,035 cases	Case-mix adjusted overall caesarean section rate for single, term babies	Effective	28.7%	24.5%	N/A	

Please scroll down for more metrics



Key:



<sup>1</sup> Apr 15 - Mar 16

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	<b>NATIONAL CLINICAL AUDITS</b>	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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### Key messages

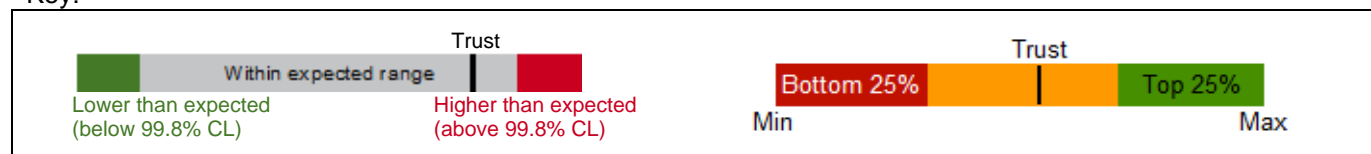
Comparing this site to other sites on the 2018 National Maternity and Perinatal Audit:

- The site was in the middle 50% of providers for the 'Proportion of live born babies who received breast milk for the first feed and at discharge from the maternity unit'
- For all metrics, particularly low rates may reflect poor detection/measurement.

	Metric	CQC Key Question	2018 <sup>1</sup> Report	National Aggregate	National Standard	Comparison to other sites	
Intra-Partum	n/a	Case-mix adjusted proportion of single, term infants with a 5-minute Apgar score of less than 7	Effective	n/a	1.2%	N/A	Not applicable
	2,966 cases	Case-mix adjusted proportion of vaginal births with a 3rd/4th degree perineal tear	Safe	4.0%	3.6%	N/A	1.4 Within expected range 6.5
	n/a	Case-mix adjusted proportion of birth episodes with severe PPH of greater than or equal to 1500 ml	Safe	n/a	2.7%	N/A	Not applicable
Post-Partum	4,284 cases	Proportion of live born babies who are breastfed for the first feed and at discharge from the maternity unit	Effective	65.9%	74.1%	N/A	45.8 Middle 50% 96.0



Key:



<sup>1</sup> Apr 15 - Mar 16

# The Royal Wolverhampton NHS Trust

## Featured data sources > A&E waiting times

FACTS, FIGURES & RATINGS

TRUST AND CORE SERVICE ANALYSIS

FEATURED DATA SOURCES

DEFINITIONS

15 April 2019

INCIDENTS

SAFETY  
THERMOMETER

MATERNITY & MORTALITY  
OUTLIERS

MORTALITY

NATIONAL  
CLINICAL AUDITS

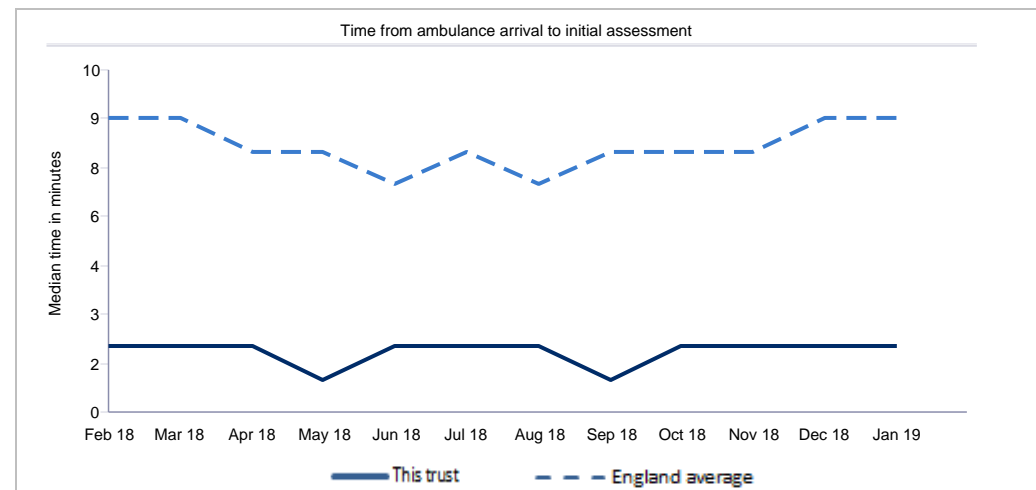
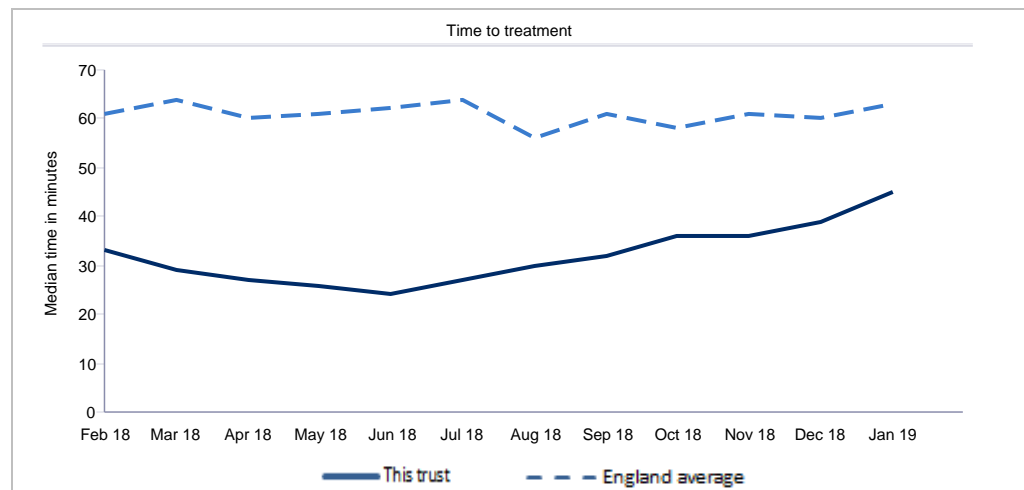
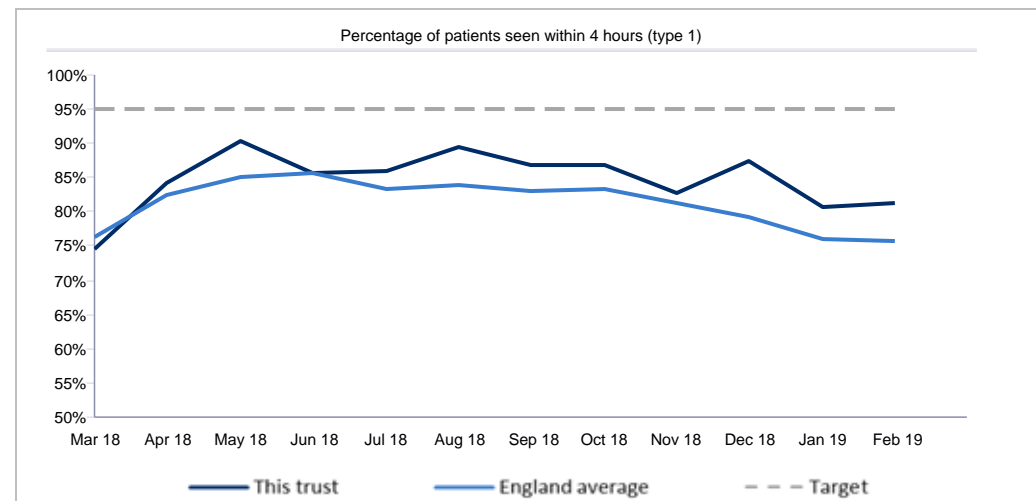
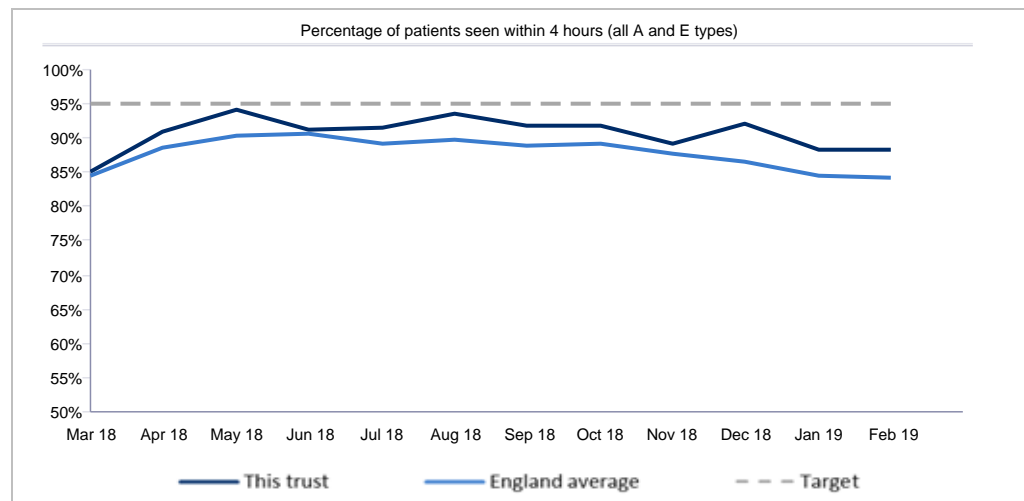
A&E WAITING  
TIMES

PATIENT  
SURVEYS

STAFF  
SURVEYS

### Key messages

- 91% Patients spending less than 4 hours in A&E (all types) in 12 months.
- 85% Patients spending less than 4 hours in A&E (type 1) in 12 months.



INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	<b>PATIENT SURVEYS</b>	STAFF SURVEYS
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Concern status:

2015

2016

2017

- No concern
- Concern
- High concern

Click [here](#) to contact the Surveys Team to discuss survey data

Concerns live	Escalated to inspector	Action taken	Closed
Under development			

Concerns are flagged where a high proportion of people told us their experience of care was in line with the worst possible answer to a wide range of questions across the entire survey.

Feedback from adult inpatients (aged 16 or over) who spent at least one night in hospital during July 2017

### Where has patient experience improved from 2016 to 2017?

3 areas have improved:

- ▲ Staff explaining purpose of medication
- ▲ Time between arrival and getting a bed on a ward
- ▲ Length of time on waiting list before being admitted to hospital

### Where has patient experience declined from 2016 to 2017?

1 area has declined

- ▼ Cleanliness of room or ward

### Where has patient experience continued to be better?

There were no areas better than expected in both years

### Where has patient experience continued to be worse?

There were no areas worse than expected in both years

# The Royal Wolverhampton NHS Trust

## Featured data sources > Patient surveys > Inpatient survey

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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Key:	0 2 4 6 8 10	→	No significant change
	As expected	+ +	
	Worse	+ +	2017 score is <b>significantly lower</b> than 2016 score
	Better	+ +	2017 score is <b>significantly higher</b> than 2016 score

Question	2014	2015	2016	2017		Trend	
	Score out of 10			Threshold between 'As expected' and			
				Worse	Better		
Q3. While you were in the A&E Department, how much information about your condition or treatment was given to you?	8.3	8.5	8.1	8.6	7.9	8.9	→
Q4. Were you given enough privacy when being examined or treated in the A&E Department?	8.7	8.8	9.0	9.1	8.4	9.3	→
Q6. How do you feel about the length of time you were on the waiting list before your admission to hospital?	8.8	8.4	7.6	8.4	7.3	9.0	↑
Q7. Was your admission date changed by the hospital?	9.4	9.4	9.3	9.5	8.8	9.5	→
Q8. Had the hospital specialist been given all necessary information about your condition/illness from the person who referred you?	9.2	9.4	9.1	8.8	8.6	9.5	→
Q9. From the time you arrived at the hospital, did you feel that you had to wait a long time to get to a bed on a ward?	7.4	7.7	7.3	8.1	6.6	8.8	↑
Q11. While in hospital, did you ever share a sleeping area, for example a room or bay, with patients of the opposite sex?	-	-	-	9.3	8.7	9.7	NA
Q13. Did the hospital staff explain the reasons for being moved in a way you could understand?	-	-	-	7.1	5.9	7.9	NA
Q14. Were you ever bothered by noise at night from other patients?	6.1	6.1	6.0	6.5	5.2	7.2	→
Q15. Were you ever bothered by noise at night from hospital staff?	7.8	7.9	7.9	8.3	7.5	8.7	→
Q16. In your opinion, how clean was the hospital room or ward that you were in?	8.9	9.2	9.3	9.0	8.5	9.4	↓
Q17. Did you get enough help from staff to wash or keep yourself clean?	-	-	8.2	8.1	7.5	8.8	→
Q18. If you brought your own medication with you to hospital, were you able to take it when you needed to?	-	-	7.2	7.8	6.5	8.0	→
Q19. How would you rate the hospital food?	5.5	6.0	5.9	5.7	4.9	6.6	→
Q20. Were you offered a choice of food?	8.8	8.9	8.9	8.8	8.1	9.4	→
Q21. Did you get enough help from staff to eat your meals?	7.3	7.6	7.2	7.6	6.5	8.2	→
Q22. During your time in hospital, did you get enough to drink?	-	-	-	9.3	9.0	9.8	NA
Q23. When you had important questions to ask a doctor, did you get answers that you could understand?	8.3	8.5	8.3	8.2	7.7	8.8	→
Q24. Did you have confidence and trust in the doctors treating you?	8.9	9.1	8.9	8.9	8.6	9.4	→
Q25. Did doctors talk in front of you as if you weren't there?	8.5	8.8	8.4	8.7	8.2	9.1	→
Q26. When you had important questions to ask a nurse, did you get answers that you could understand?	8.3	8.5	8.3	8.1	7.8	8.9	→
Q27. Did you have confidence and trust in the nurses treating you?	8.8	8.9	8.8	8.8	8.5	9.3	→



# The Royal Wolverhampton NHS Trust

## Featured data sources > Patient surveys > Inpatient survey

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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Key:	0 2 4 6 8 10	→	No significant change
	As expected	+ +	2017 score is <b>significantly lower</b> than 2016 score
	Worse	+ +	2017 score is <b>significantly higher</b> than 2016 score
	Better	+ +	

Question	2014	2015	2016	2017		Trend	Score out of 10
	Score out of 10			Threshold between 'As expected' and			
				Worse	Better		
Q28. Did nurses talk in front of you as if you weren't there?	8.7	8.8	8.9	8.8	8.6	9.4	→
Q29. In your opinion, were there enough nurses on duty to care for you in hospital?	7.2	7.3	7.3	7.4	6.8	8.3	→
Q30. Did you know which nurse was in charge of looking after you?	-	-	6.6	6.4	5.6	7.6	→
Q31. Did you have confidence and trust in any other clinical staff treating you?	-	-	-	8.7	8.3	9.1	NA
Q32. In your opinion, did the members of staff caring for you work well together?	-	9.1	8.6	8.6	8.3	9.2	→
Q33. Did a member of staff say one thing and another say something different?	8.1	8.2	7.9	8.0	7.7	8.6	→
Q34. Were you involved as much as you wanted to be in decisions about your care and treatment?	7.3	7.6	7.4	7.0	6.8	8.0	→
Q35. Did you have confidence in the decisions made about your condition or treatment?	8.5	8.5	8.4	8.3	7.9	8.9	→
Q36. How much information about your condition or treatment was given to you?	8.2	8.1	7.9	9.0	8.5	9.2	NA
Q37. Did you find someone on the hospital staff to talk to about your worries and fears?	6.2	5.7	5.8	5.3	4.8	6.5	→
Q38. Do you feel you got enough emotional support from hospital staff during your stay?	7.5	7.5	6.8	7.2	6.5	7.9	→
Q39. Were you given enough privacy when discussing your condition or treatment?	8.4	8.6	8.5	8.4	8.1	9.0	→
Q40. Were you given enough privacy when being examined or treated?	9.5	9.5	9.5	9.5	9.3	9.7	→
Q42. Do you think the hospital staff did everything they could to help control your pain?	8.0	8.1	7.9	8.4	7.8	8.8	→
Q43. If you needed attention, were you able to get a member of staff to help you within a reasonable time?	-	-	-	7.7	7.2	8.6	NA
Q45. Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?	8.6	8.9	8.7	9.0	8.6	9.3	→
Q46. Beforehand, were you told how you could expect to feel after you had the operation or procedure?	7.5	7.5	7.4	7.8	7.1	8.1	→
Q47. Afterwards, did a member of staff explain how the operation or procedure had gone?	8.2	8.1	8.1	8.4	7.6	8.5	→
Q48. Did you feel you were involved in decisions about your discharge from hospital?	6.6	7.2	6.9	6.8	6.3	7.6	→
Q49. Were you given enough notice about when you were going to be discharged?	7.2	7.2	7.4	7.1	6.6	7.9	→
Q51. Discharge delayed due to wait for medicines/to see doctor/for ambulance	5.6	6.0	5.9	6.0	5.5	7.2	→
Q52. How long was the delay?	7.0	7.3	7.3	7.2	6.8	8.3	→

# The Royal Wolverhampton NHS Trust

## Featured data sources > Patient surveys > Inpatient survey

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	STAFF SURVEYS
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Key:	0 2 4 6 8 10	→	No significant change
	As expected	+	+
	Worse	+	+
	Better	+	+
		↓	2017 score is <b>significantly lower</b> than 2016 score
		↑	2017 score is <b>significantly higher</b> than 2016 score

Question	2014	2015	2016	2017		Trend	
	Score out of 10			Threshold between 'As expected' and			
				Worse	Better		
Q54. Did you get enough support from health or social care professionals to help you recover and manage your condition?	-	6.7	6.5	6.5	6.1	7.4	→
Q55. When you left hospital, did you know what would happen next with your care?	-	-	6.8	6.8	6.4	7.4	→
Q56. Were you given any written or printed information about what you should or should not do after leaving hospital?	7.4	7.1	6.3	6.9	5.7	7.3	NA
Q57. Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?	8.2	8.0	7.8	8.3	7.8	8.8	↑
Q58. Did a member of staff tell you about medication side effects to watch for when you went home?	4.7	4.8	4.2	4.8	4.0	5.7	→
Q59. Were you told how to take your medication in a way you could understand?	8.3	8.0	7.8	8.3	7.8	8.9	→
Q60. Were you given clear written or printed information about your medicines?	8.5	8.3	7.9	8.0	7.4	8.6	→
Q61. Did a member of staff tell you about any danger signals you should watch for after you went home?	5.9	5.4	4.9	5.6	4.6	6.3	→
Q62. Did hospital staff take your family or home situation into account when planning your discharge?	7.4	7.0	7.1	7.3	6.5	7.9	→
Q63. Did the doctors or nurses give your family, friends or carers all the information they needed to help care for you?	-	-	-	6.2	5.7	7.0	NA
Q64. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	8.1	7.8	7.6	8.1	7.0	8.6	→
Q65. Did hospital staff discuss with you whether additional equipment or adaptations were needed in your home?	8.1	8.5	7.8	8.0	7.4	9.0	→
Q66. Did hospital staff discuss with you whether you may need any further health or social care services after leaving hospital?	8.7	8.5	8.0	8.1	7.7	8.8	→
Q67. Overall, did you feel you were treated with respect and dignity while you were in the hospital?	9.0	9.0	9.1	9.0	8.7	9.5	→
Q68. Overall experience	8.0	8.2	8.1	8.3	7.8	8.6	→
Q69. During your hospital stay, were you ever asked to give your views on the quality of your care?	1.7	1.3	1.2	1.2	1.2	2.7	→
Q70. Did you see, or were you given, any information explaining how to complain to the hospital about the care you received?	2.3	1.9	2.1	2.0	1.8	3.4	→
Q71. Did you feel well looked after by the non-clinical hospital staff?	-	-	-	9.1	8.8	9.6	NA





INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	<b>PATIENT SURVEYS</b>	STAFF SURVEYS
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**Site level results - key messages**

- A high proportion of results were better than expected for Cannock Chase Hospital
- The majority of results for New Cross Hospital were as expected

	Number of questions:		
	Worse	As expected	Better
Cannock Chase Hospital	0	34	10
New Cross Hospital	1	61	0
West Park Rehabilitation Hospital	0	0	0

Full site level results are available [here](#).

**Cannock Chase Hospital**

**10 questions were better than expected:**

- Confidence and trust in doctors
- Confidence and trust in other clinical staff
- Staff work well together
- Enough privacy when being examined
- Being offered a choice of food
- Getting enough to drink
- Got enough help from staff to wash & clean self
- Staff answering questions before operation/procedure
- Written instructions provided for after leaving hospital
- Family/friends/carers given information to continue care

**There were no questions worse than expected**

**West Park Rehabilitation Hospital**

**There were no questions better than expected**

**There were no questions worse than expected**

**New Cross Hospital**

**There were no questions better than expected**

**1 questions were worse than expected:**

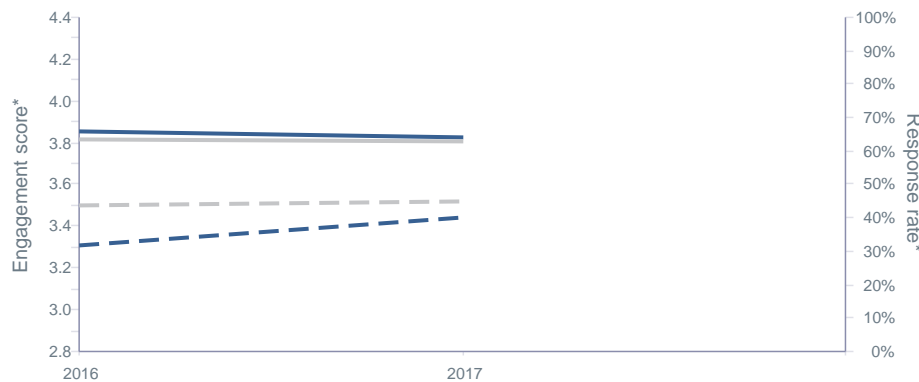
- Asked to give views on quality of care

### Key messages

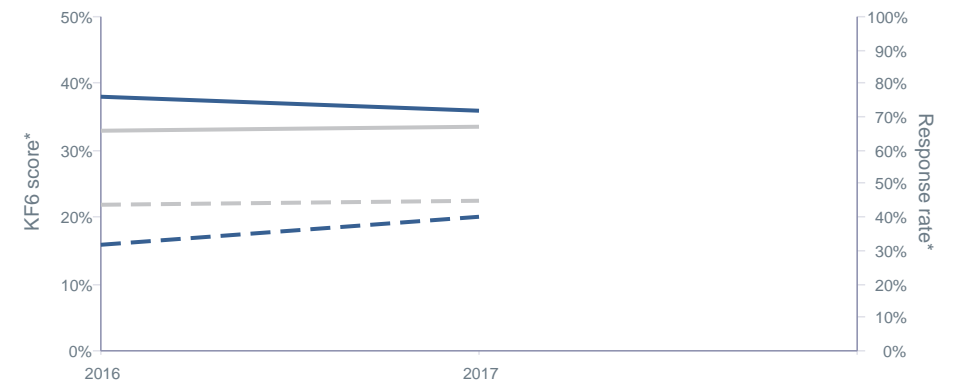
Comparing 2017 results for The Royal Wolverhampton NHS Trust to all acute trusts:

- Engagement score was 'about the same'
- Recommendation rates were 'higher'
- Communication was 'higher'
- Bullying and harassment was 'about the same'

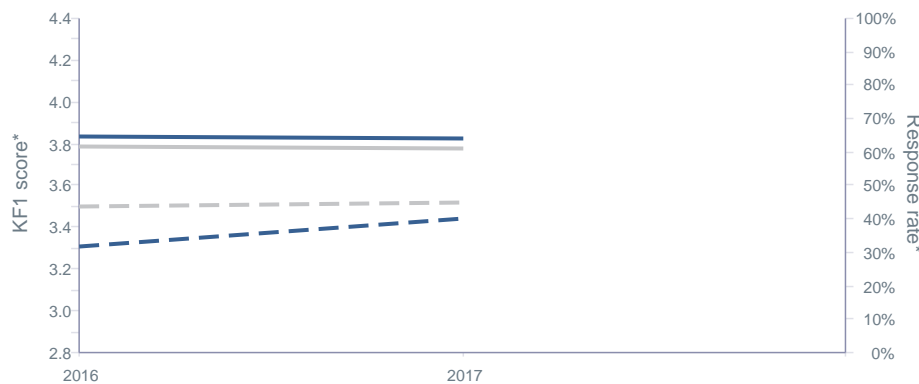
Overall engagement score



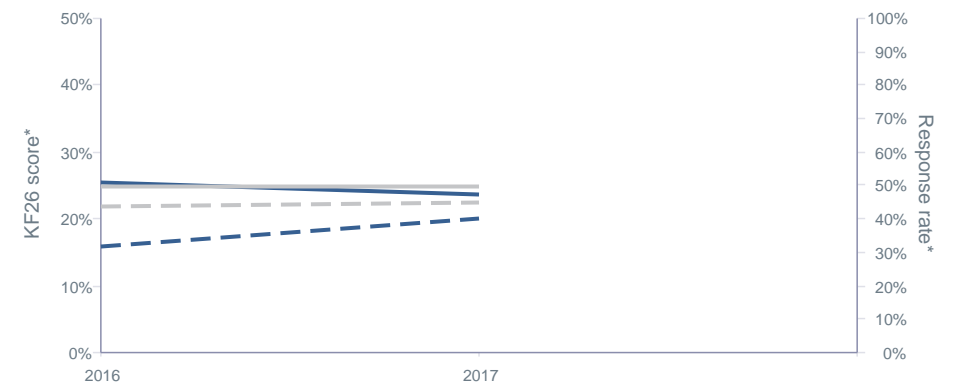
KF6. % staff reporting good communication



KF1. Staff recommendation of the organisation score



KF26. % staff experiencing harassment, bullying or abuse from other staff



Acute trusts

This trust

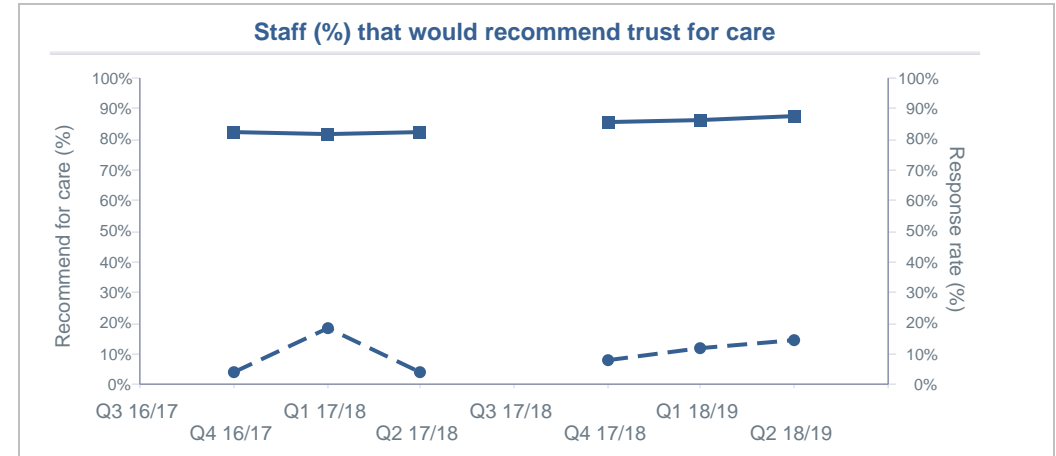
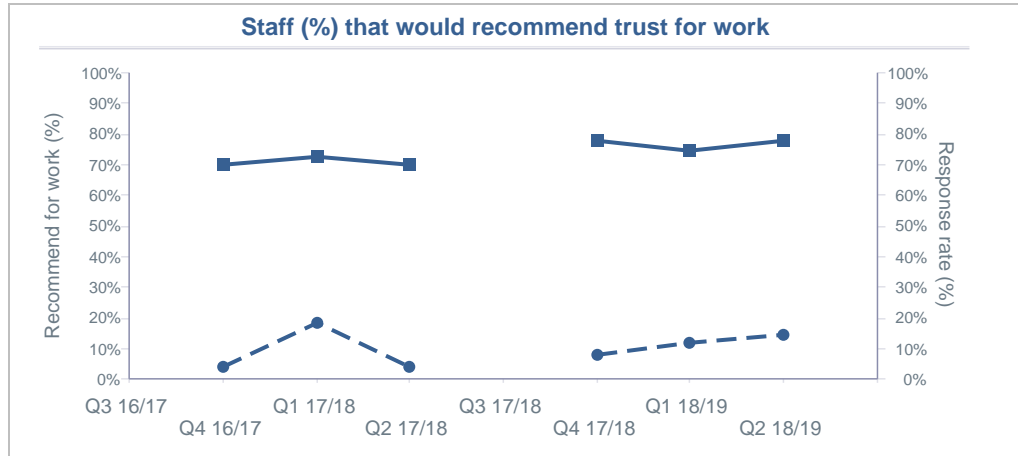
Response rate for acute trusts

Response rate for this trust

### Key messages

- The percentage of staff that would recommend this trust as a place to work in Q2 18/19 increased when compared to the same time last year.

- The percentage of staff that would recommend this trust as a place to receive care in Q2 18/19 increased when compared to the same time last year.



■ This trust

■ ■ ■ ■ ■ Response rate for this trust

Please note: Data is not collected during Q3 each year because the Staff Survey is conducted during this time

# The Royal Wolverhampton NHS Trust

## Featured data sources > Staff surveys > Workforce race equality standard

INCIDENTS	SAFETY THERMOMETER	MATERNITY & MORTALITY OUTLIERS	MORTALITY	NATIONAL CLINICAL AUDITS	A&E WAITING TIMES	PATIENT SURVEYS	<b>STAFF SURVEYS</b>
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### Key messages

- In the latest survey the responses from BME staff and white staff were significantly different for KF26, KF21, Q17b
- The total response rate was lower than both the England average and the minimum recommended response rate of 50%

NHS Staff Survey Indicator		Proportion of respondents answering "Yes"		% difference between BME and white staff	
		BME staff	White staff		
KF25. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	Trust	27.0%	25.9%	●	-1.1%
	England	27.7%	26.7%		-1.0%
KF26. Percentage of staff experiencing harassment, bullying or abuse from staff the last 12 months	Trust	27.9%	22.0%	●	-6.0%
	England	28.6%	24.2%		-4.4%
KF21. Percentage of staff believing that the trust provides equal opportunities for career progression or promotion	Trust	76.1%	88.6%	●	12.4%
	England	71.6%	87.1%		15.5%
Q17b. In the last 12 months have you personally experienced discrimination at work from a manager / team leader or other colleagues?	Trust	12.8%	6.6%	●	-6.2%
	England	15.5%	6.6%		-8.9%

Key for % difference between BME and white staff	
●	Statistically significant
●	Not statistically significant
○	Statistical analysis of results was not undertaken. Trusts were only included in our analysis if at least 50 BME and 50 White staff responded, or the trust carried out a census.

Sampling method	Trust	Previous	Latest	Average number of respondents across the 4 WRES questions	Trust	BME		White		Total
		Basic	Census			569	(19.6%)	2,325	(80.4%)	2,893
Total number of recipients *(ineligible staff removed)	Trust	1,250	8,160		England	50,805	(17.1%)	246,456	(82.9%)	297,261
Response rate from total recipients	Trust	31.7%	40.1%							
	England	42.7%	43.7%							

Trusts are encouraged to perform a census rather than a basic or extended sample in order to understand experiences for different staff groups. We encourage the trust to get more respondents to really understand issues affecting staff. It would also be helpful for inspection staff to follow up on what the trust is doing to understand the potential underlying causes and improve the experience for staff.

### KEY

#### Performance level

- MB Much better
- B Better
- S About the same
- W Worse
- MW Much worse
- ! Non-submission
- No data

#### Performance change

- ↑ Improving
- About the same
- ↓ Declining

#### Ratings

- O Outstanding
- G Good
- RI Requires improvement
- I Inadequate
- NR\* Inspected but not formally rated
- NA Not rated

#### Others

National Guardian  
Freedom to Speak Up

Data that is relevant for 'speaking up'

#### Understanding data

##### What do these boxes show?



The boxes represent all Acute NHS trusts from smallest to largest in five groups, or quintiles. The purple highlighted box shows you where this trust lies relative to the other trusts. If the smallest box is highlighted this trust is in the group of the smallest trust or lowest activity level, and if the second largest box is highlighted the trust is in the second largest group, or quintile, for higher activity levels.

##### What do N/A, \*, and - mean when they are used for data values?

- n/a** Value is not applicable
- Data is not available for trust or time period.
- \*** Suppressed values between 1 and 5. We apply a strict statistical disclosure control in accordance with the HES protocol to all published data. This requires that small numbers are suppressed to prevent individuals being identified and to ensure that patient confidentiality is maintained.

