Financial Year
2024-25

NHS
Humber Teaching
NHS Foundation Trust

Quality Dashboard

This document provides a high level summary of the performance measures stemming from the Integrated Quality and Performance Tracker.

The purpose of this report is to present to the Board a thematic review of the performance for a select number of indicators for the last 24 months including Statistical Process Control charts (SPC) with upper and lower control limits.

Reporting Month:
Feb-25

Chief Executive: Michele Moran

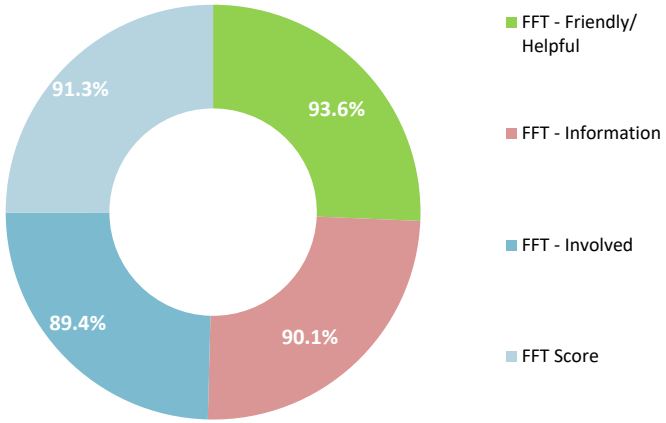
Prepared by: Business Intelligence Team

Domain

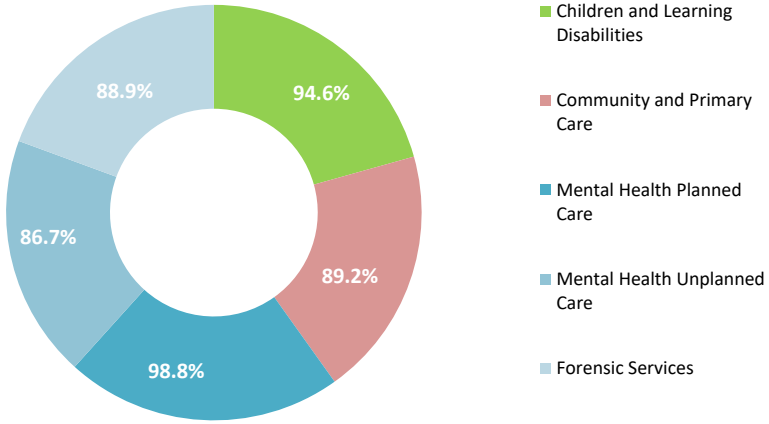
Patient / Carer Experience

Quality Report

Friends and Family Year to Date Satisfaction Results



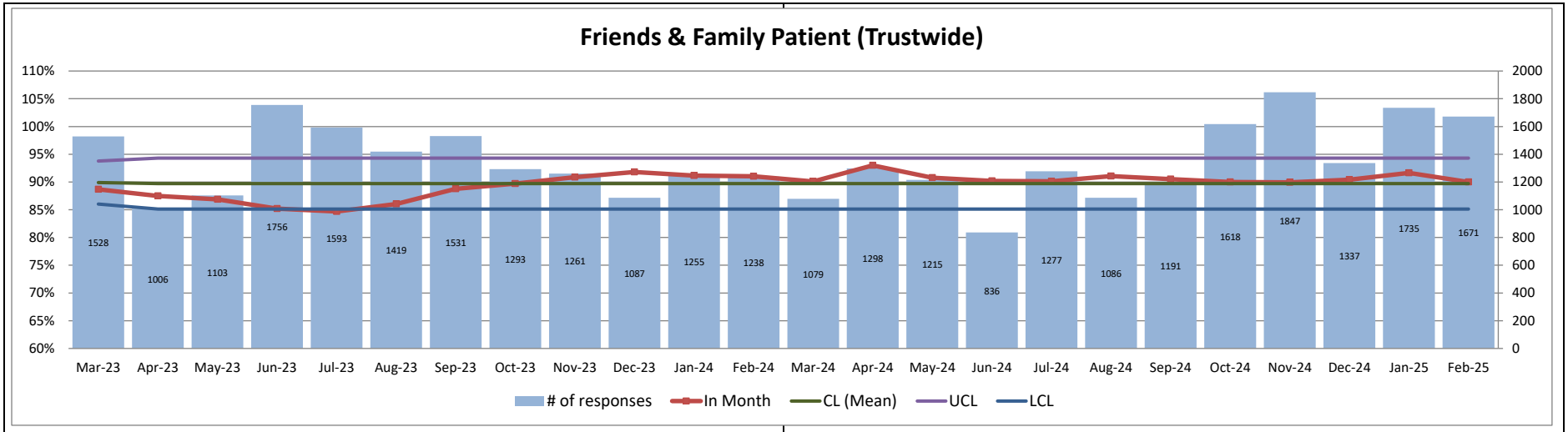
Friends and Family Satisfaction by Division Current Month

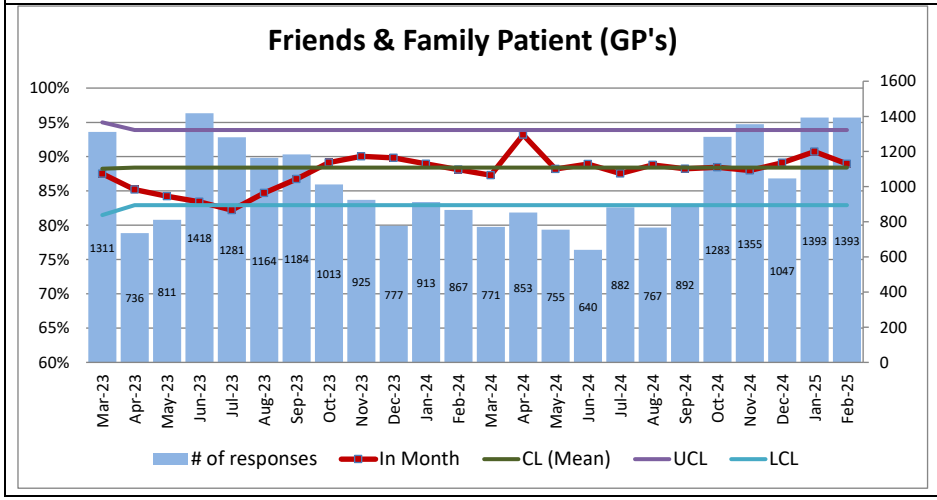


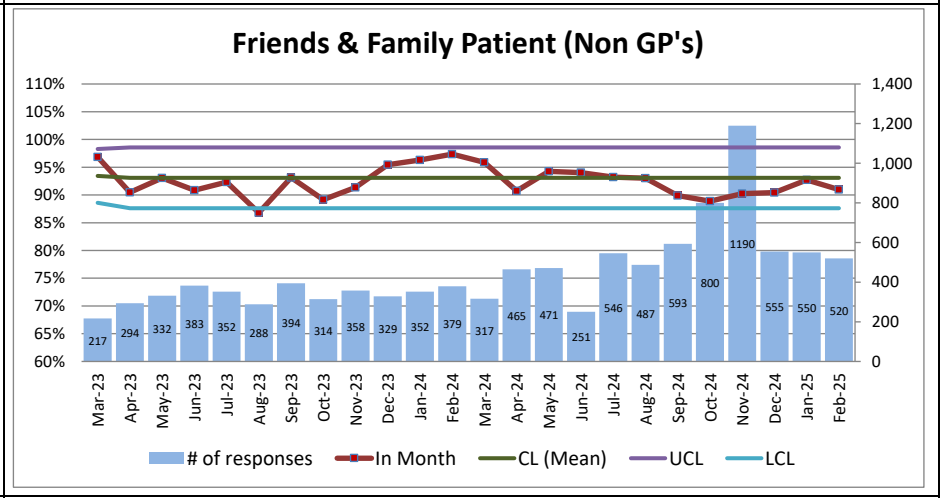
Overall Experience Score for CMHT (Community Mental Health Team) Patient Survey - 2023	National Benchmark (Upper Quartile)
	67%
	Trust Result
	68.4%

Quality Dashboard

Section 1.1.1 Patient / Carer Experience - Trustwide / GP / Non GP Services — Friends and Family

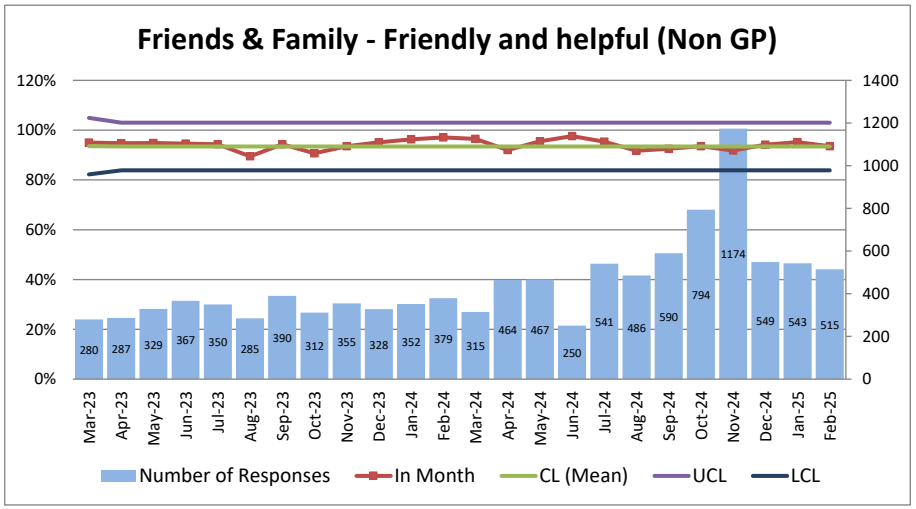


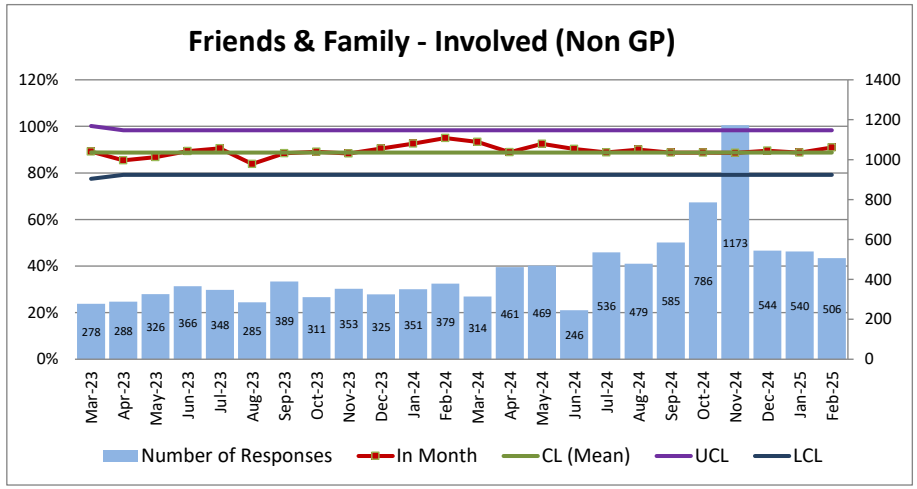


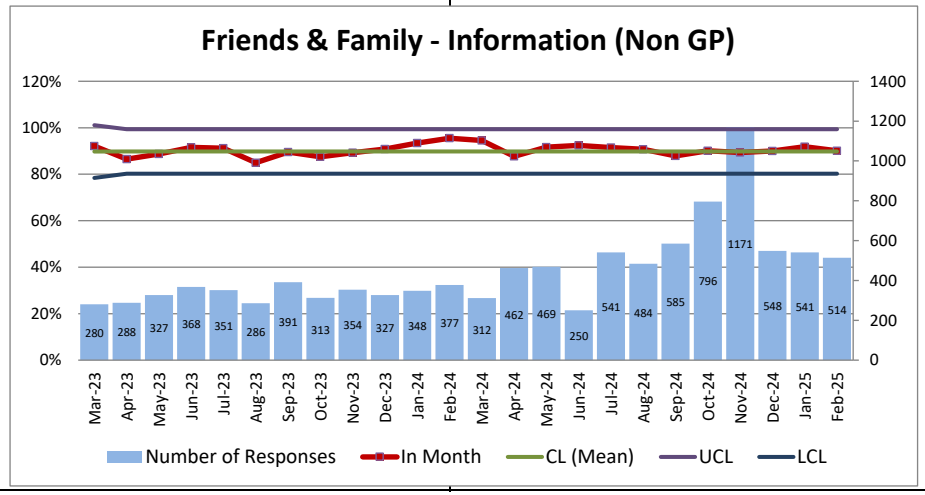


Quality Dashboard

Section 1.1.2 Patient / Carer Experience - Core Questions (Non GP Services) — Friends and Family

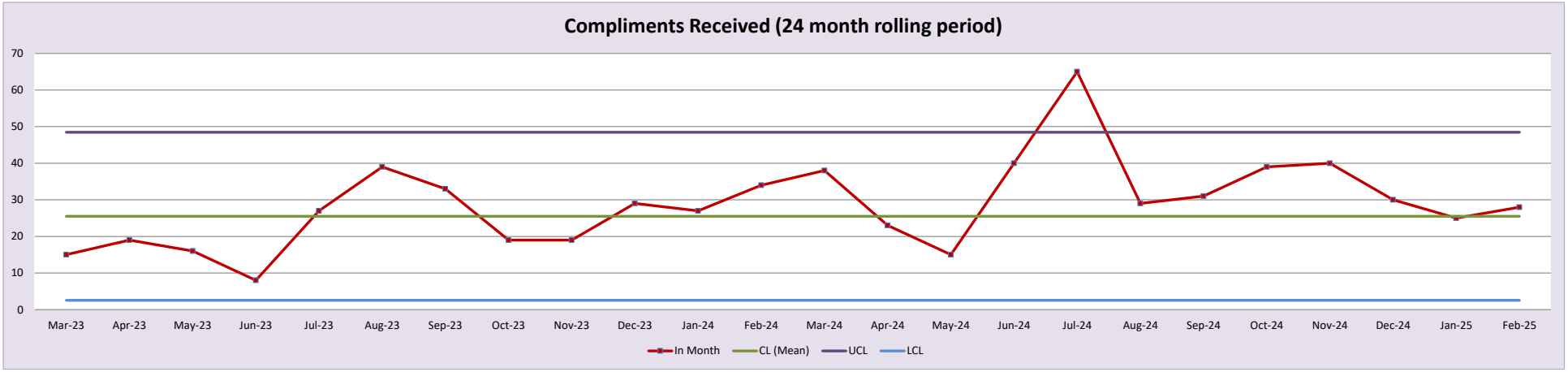


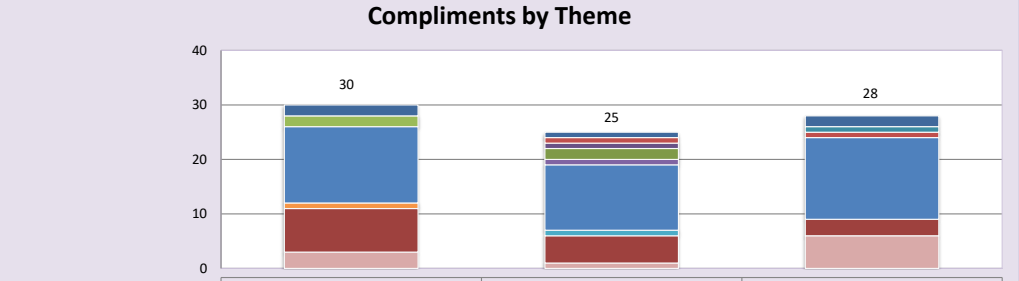




Quality Dashboard

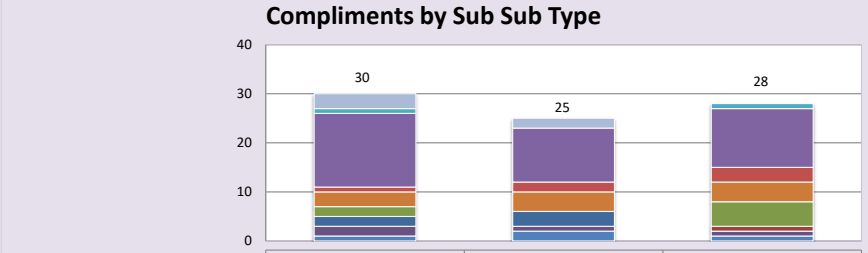
Section 1.2 Patient / Carer Experience — Overall Trust Position





	Dec-24	Jan-25	Feb-25
Access to care	2	1	2
Admission and Discharge	0	0	1
Appointments	0	1	1
Carer involvement	2	0	0
Communications	0	1	0
End of Life Care	0	2	0
Facilities	0	1	0
Patient Care/Treatment	14	12	15
Prescribing	1	0	0
Privacy, dignity and wellbeing	0	1	0
Trust admin policies/procedures	0	0	0
Values and Behaviours of staff	8	5	3
Waiting times	0	0	0
Other	3	1	6

Patient Experience Indicators	Dec-24	Jan-25	Feb-25
Eliminating Mixed Sex Accommodation	0	0	0
Duty of Candour Compliance	100%	100%	100%

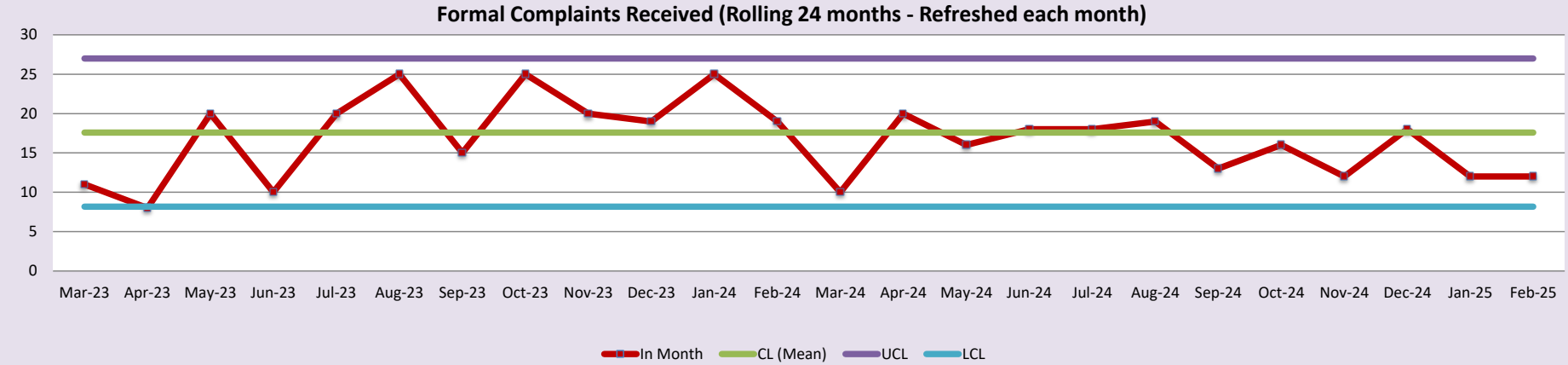


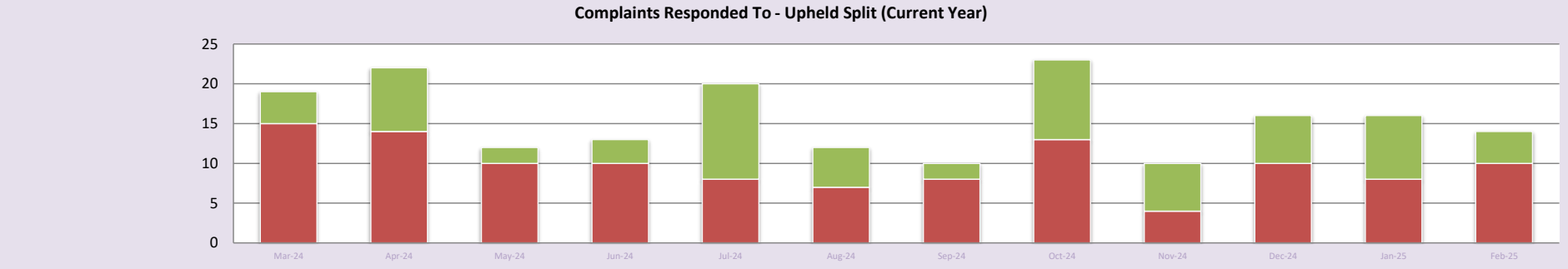
	Dec-24	Jan-25	Feb-25
Caring	3	2	0
Friendly	1	0	1
General thank you	15	11	12
Going the extra mile	1	2	3
Kindness, Compassion and Empathy	3	4	4
Knowledgeable	0	0	0
Listening and understanding	2	0	5
Professional	2	3	0
Respectful	0	0	1
Responsive	2	1	1
Welcoming	1	2	1

Quality Dashboard

Domain

Section 1.3.1	Patient / Carer Experience	Overall Trust Position



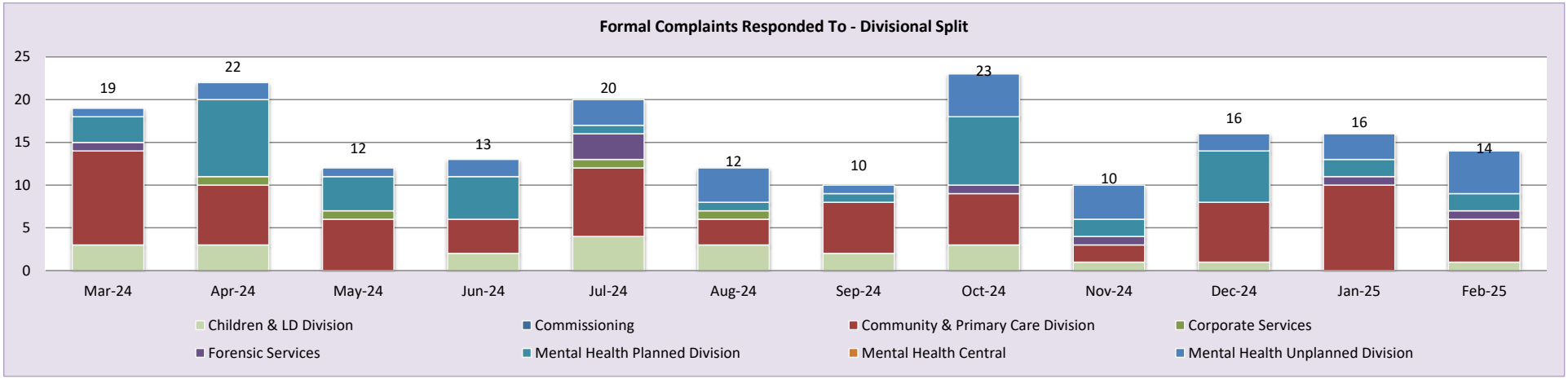


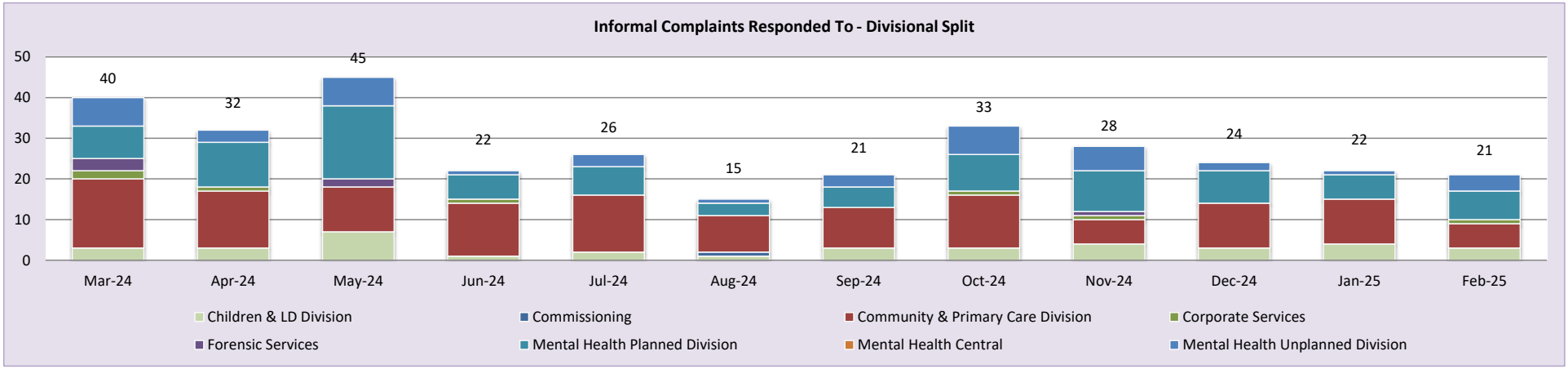
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Complaints Not Upheld	4	8	2	3	12	5	2	10	6	6	8	4
Complaints Upheld Fully/Partly	15	14	10	10	8	7	8	13	4	10	8	10

Quality Dashboard

Domain

Section 1.3.1 Patient / Carer Experience — **Overall Trust Position**





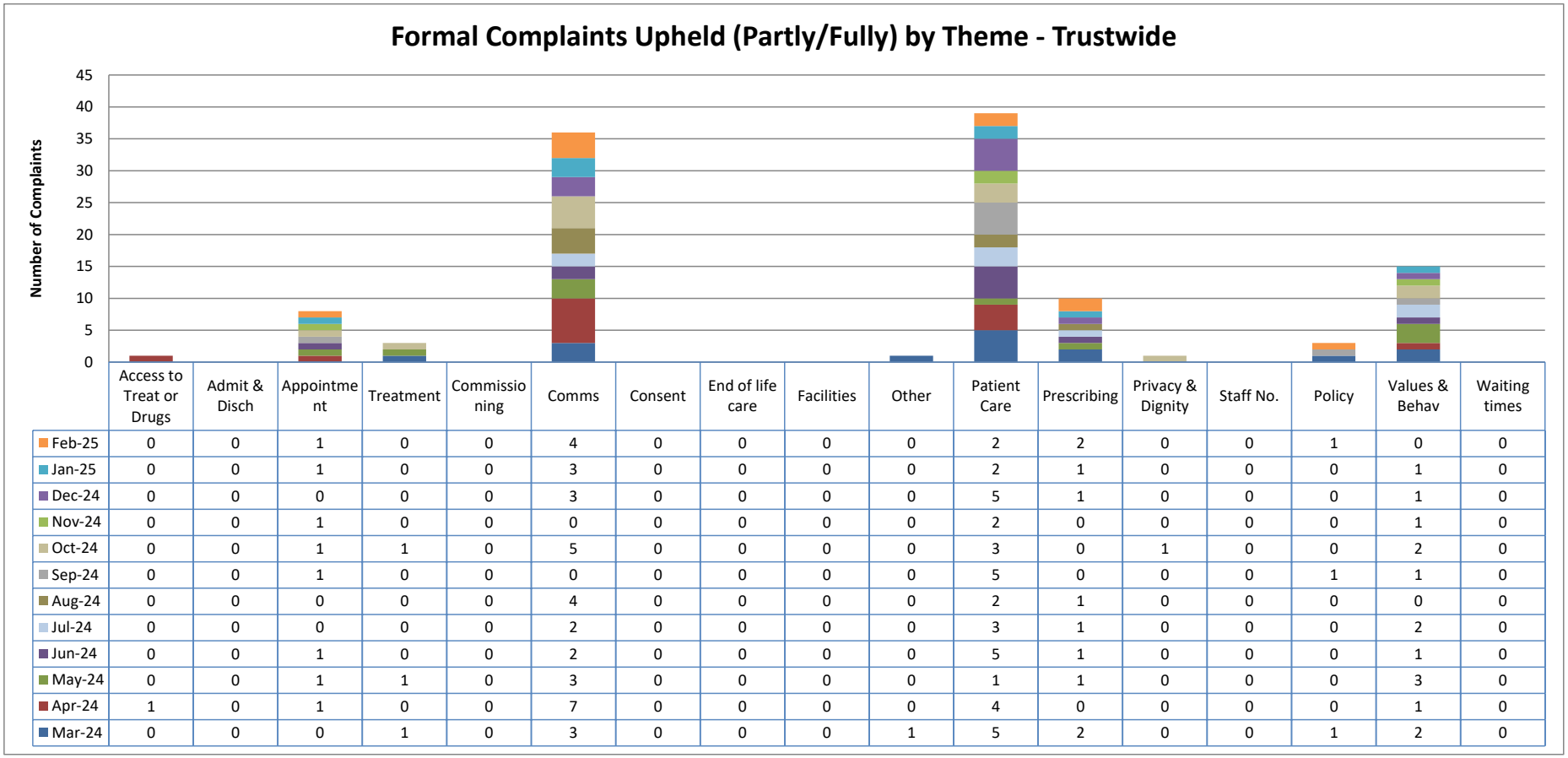
Withdrawn Complaints

	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Formal Complaints Withdrawn	0	1	0	1	1	0	0	1	0	2	0	0
Informal Complaints Withdrawn	0	0	0	0	0	0	0	1	0	0	0	0

Quality Dashboard

Domain

Section 1.3.2 Complaints Themes — Overall Trust Position

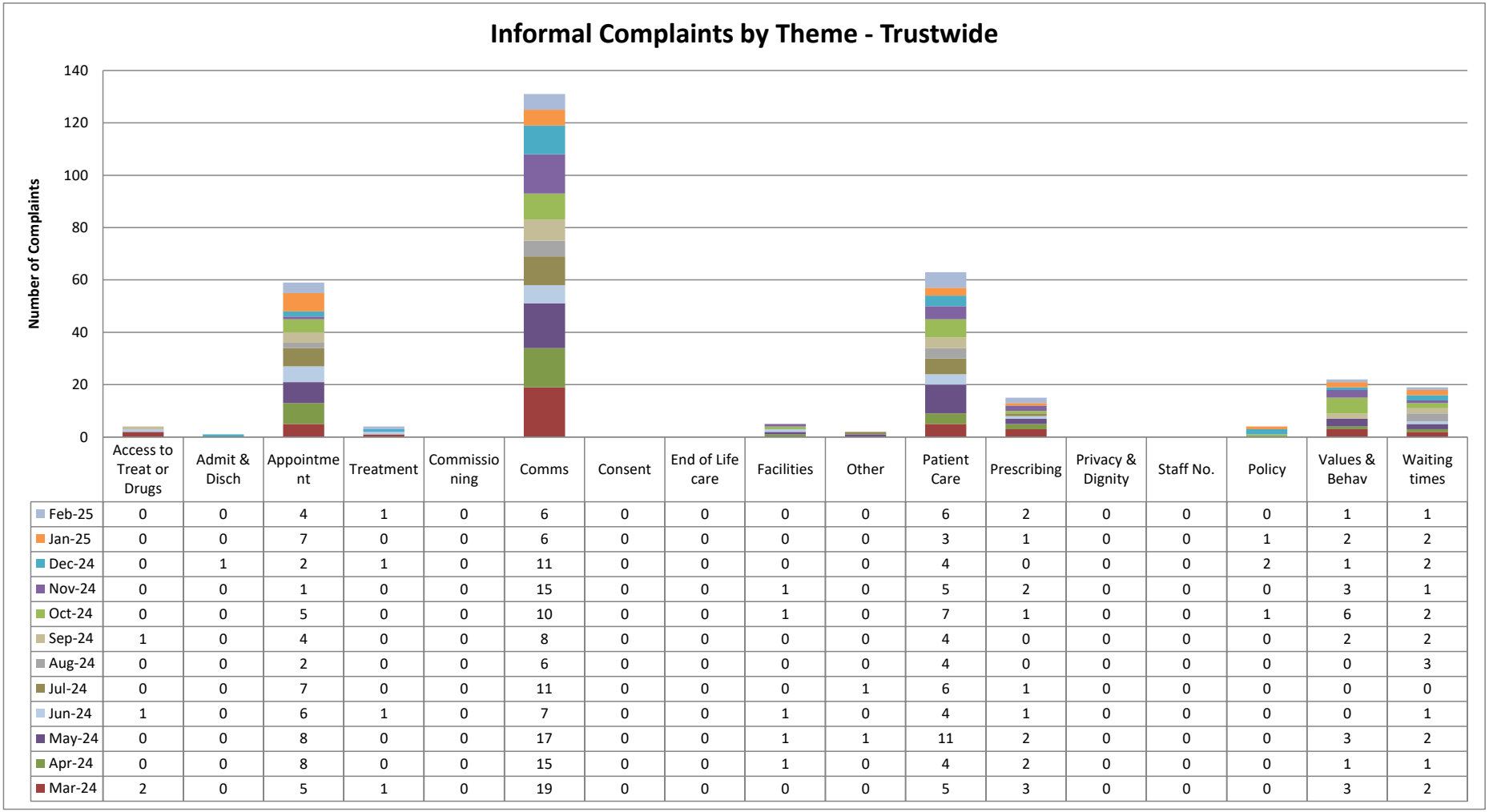


	Access to Treat or Drugs	Admit & Disch	Appointment	Treatment	Commissioning	Comms	Consent	End of life care	Facilities	Other	Patient Care	Prescribing	Privacy & Dignity	Staff No.	Policy	Values & Behav	Waiting times
Feb-25	0	0	1	0	0	4	0	0	0	0	2	2	0	0	1	0	0
Jan-25	0	0	1	0	0	3	0	0	0	0	2	1	0	0	0	1	0
Dec-24	0	0	0	0	0	3	0	0	0	0	5	1	0	0	0	1	0
Nov-24	0	0	1	0	0	0	0	0	0	0	2	0	0	0	0	1	0
Oct-24	0	0	1	1	0	5	0	0	0	0	3	0	1	0	0	2	0
Sep-24	0	0	1	0	0	0	0	0	0	0	5	0	0	0	1	1	0
Aug-24	0	0	0	0	0	4	0	0	0	0	2	1	0	0	0	0	0
Jul-24	0	0	0	0	0	2	0	0	0	0	3	1	0	0	0	2	0
Jun-24	0	0	1	0	0	2	0	0	0	0	5	1	0	0	0	1	0
May-24	0	0	1	1	0	3	0	0	0	0	1	1	0	0	0	3	0
Apr-24	1	0	1	0	0	7	0	0	0	0	4	0	0	0	0	1	0
Mar-24	0	0	0	1	0	3	0	0	0	1	5	2	0	0	1	2	0

Quality Dashboard

Domain

Section 1.3.2 Complaints Themes — Overall Trust Position



	Access to Treat or Drugs	Admit & Disch	Appointment	Treatment	Commissioning	Comms	Consent	End of Life care	Facilities	Other	Patient Care	Prescribing	Privacy & Dignity	Staff No.	Policy	Values & Behav	Waiting times
Feb-25	0	0	4	1	0	6	0	0	0	0	6	2	0	0	0	1	1
Jan-25	0	0	7	0	0	6	0	0	0	0	3	1	0	0	1	2	2
Dec-24	0	1	2	1	0	11	0	0	0	0	4	0	0	0	2	1	2
Nov-24	0	0	1	0	0	15	0	0	1	0	5	2	0	0	0	3	1
Oct-24	0	0	5	0	0	10	0	0	1	0	7	1	0	0	1	6	2
Sep-24	1	0	4	0	0	8	0	0	0	0	4	0	0	0	0	2	2
Aug-24	0	0	2	0	0	6	0	0	0	0	4	0	0	0	0	0	3
Jul-24	0	0	7	0	0	11	0	0	0	1	6	1	0	0	0	0	0
Jun-24	1	0	6	1	0	7	0	0	1	0	4	1	0	0	0	0	1
May-24	0	0	8	0	0	17	0	0	1	1	11	2	0	0	0	3	2
Apr-24	0	0	8	0	0	15	0	0	1	0	4	2	0	0	0	1	1
Mar-24	2	0	5	1	0	19	0	0	0	0	5	3	0	0	0	3	2

Quality Dashboard

Domain

Section 1.3.3 — **Formal Complaints Upheld by Team (24 month rolling)** — **Overall Team Position**

Due to the number of teams involved over the 24 month rolling period, only teams with TWO OR MORE complaints are shown here

	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Rolling Total
Humber Primary Care Practice	3	2	4	0	4	3	2	8	6	2	2	0	3	1	4	0	2	1	1	1	1	3	1	2	**56**
Market Weighton Practice	0	0	1	0	1	1	0	0	1	0	1	1	2	3	0	2	0	1	0	3	0	1	3	0	**21**
Hull CMHT - Management, Non Clinical and Psychology	0	0	1	1	2	0	0	1	0	0	0	0	0	3	1	0	0	0	0	3	0	2	0	1	**15**
King Street Medical Centre	0	0	0	0	0	0	0	0	0	0	2	0	3	0	2	0	1	0	3	0	0	0	1	2	**14**
Mental Health Crisis Intervention	0	0	1	0	1	1	1	1	0	2	1	0	0	1	1	0	1	0	0	0	1	1	1	0	**14**
Hull CMHT - Clinical	0	0	0	0	0	0	1	0	1	0	0	1	2	3	0	0	0	0	0	1	0	0	0	0	**9**
Westlands Unit Nursing	1	0	0	0	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	1	1	0	0	0	**6**
Beverley and Haltemprice OP CMHT	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	1	0	2	0	0	**5**
Community Core Team - Rivendell	0	1	0	0	0	1	0	1	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	**5**
Scarborough Core	0	1	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	**5**
Hull and East Riding CAMHS	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	**4**
Neuro Front Door	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	0	1	0	0	0	0	**4**
Newbridges Residential Unit	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	**4**
Specialist Psychotherapy Service	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	**4**
ER Talking Therapies	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	**3**
Hull Community Learning Disability	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	0	**3**
Mill View Court Adult	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	**3**
Whitby Core	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	**3**
Avondale - Wards	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Beverley Mental Health	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	**2**
CAMHS Crisis	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	**2**
Facilities Management	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	**2**
Haltemprice Mental Health	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	**2**
Hull and ER - Triage and Assessment	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	**2**
Humber - Recovery Support Team - EIP	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	**2**
Miranda House - PICU	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	**2**
Pocklington Core	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	**2**
Townend Court	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Total	**5**	**5**	**9**	**2**	**13**	**9**	**5**	**14**	**9**	**6**	**8**	**8**	**14**	**13**	**10**	**8**	**7**	**4**	**7**	**13**	**4**	**10**	**6**	**9**	**198**

Quality Dashboard

Domain

Section 1.3.4 — **Informal Complaints Responded to by Team (24 month rolling)** — **Overall Team Position**

Due to the number of teams involved over the 24 month rolling period, only teams with TWO OR MORE complaints are shown here

	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Rolling Total
Humber Primary Care Practice	8	9	1	7	5	15	9	11	7	7	8	4	6	5	4	7	4	7	3	8	2	6	7	1	**151**
Hull CMHT - Management, Non Clinical and Psychology	2	2	3	4	3	1	4	3	3	4	0	4	2	4	7	2	2	3	4	4	7	3	2	6	**79**
King Street Medical Centre	1	1	1	3	0	1	1	4	3	2	1	9	6	4	4	3	3	1	3	0	2	3	2	1	**59**
Market Weighton Practice	4	3	1	4	1	1	4	2	2	1	3	1	4	3	3	2	4	1	3	5	0	1	2	2	**57**
Mental Health Crisis Intervention	1	3	0	7	4	3	0	2	2	2	1	0	6	2	3	0	0	0	2	4	4	0	0	1	**47**
Hull CMHT - Clinical	0	1	2	3	1	0	1	1	0	0	2	1	3	3	5	2	3	0	1	1	1	1	2	0	**34**
Neuro Diagnostic	4	1	4	3	1	0	0	0	0	1	1	1	1	0	1	0	0	0	1	0	0	0	1	0	**20**
ER Talking Therapies	0	0	0	0	1	0	1	1	0	1	0	3	3	0	2	0	0	0	0	0	0	0	0	0	**12**
Hull and ER - Triage and Assessment	0	0	1	0	0	0	0	1	1	0	0	0	0	0	1	0	1	0	0	1	1	1	2	1	**11**
Neuro Front Door	1	0	1	1	0	0	0	1	2	0	0	1	0	1	1	0	0	0	0	1	0	0	1	0	**11**
Scarborough Core	1	0	1	1	0	0	1	0	0	0	0	2	0	1	0	0	0	0	1	0	1	0	0	2	**11**
Community Core Team - Rivendell	0	0	0	0	2	1	1	1	0	0	1	1	0	1	1	0	0	0	0	0	0	1	0	0	**10**
Avondale - Wards	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	1	0	2	0	1	**9**
Facilities Management	0	0	0	0	0	1	1	0	0	1	0	0	0	1	0	1	0	0	0	1	1	0	0	1	**8**
Haltemprice Mental Health	0	0	0	1	0	0	0	1	0	1	1	0	0	0	0	0	1	0	0	0	1	1	0	0	**7**
Hull and East Riding CAMHS	1	0	0	0	0	1	0	1	0	0	0	0	0	1	1	1	0	0	0	0	1	0	0	0	**7**
Mill View Court Adult	2	0	0	0	0	2	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	**6**
Specialist Psychotherapy Service	0	0	0	0	0	0	0	0	0	2	0	0	0	1	0	0	0	0	0	0	1	0	1	1	**6**
Childrens S&LT Hull & East Riding Service	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	**5**
Goole Mental Health	0	1	0	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	**5**
Westlands Unit Nursing	0	1	0	0	1	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**5**
Bridlington & Driffield Mental Health	0	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	**4**
Community Core Team - Rivendell	0	0	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	**4**
Humber Centre - Swale	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**4**
0-19 Health Visitors & School Nurses - East Riding North	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	**3**
Beverley Mental Health	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	**3**
East Riding Community Learning Disability	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	**3**
Holderness Mental Health	0	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	**3**
Hull Adult Autism Diagnosis Service	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	1	**3**
Hull Community Learning Disability	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	**3**
Hull Integrated Care Team for Older People	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	0	0	0	**3**
Lot 2 ER Specialist Clinical	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	**3**
Mental Health Liaison Service	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	**3**

Quality Dashboard

Domain

Section 1.3.4 — **Informal Complaints Responded to by Team (24 month rolling)** — **Overall Team Position**

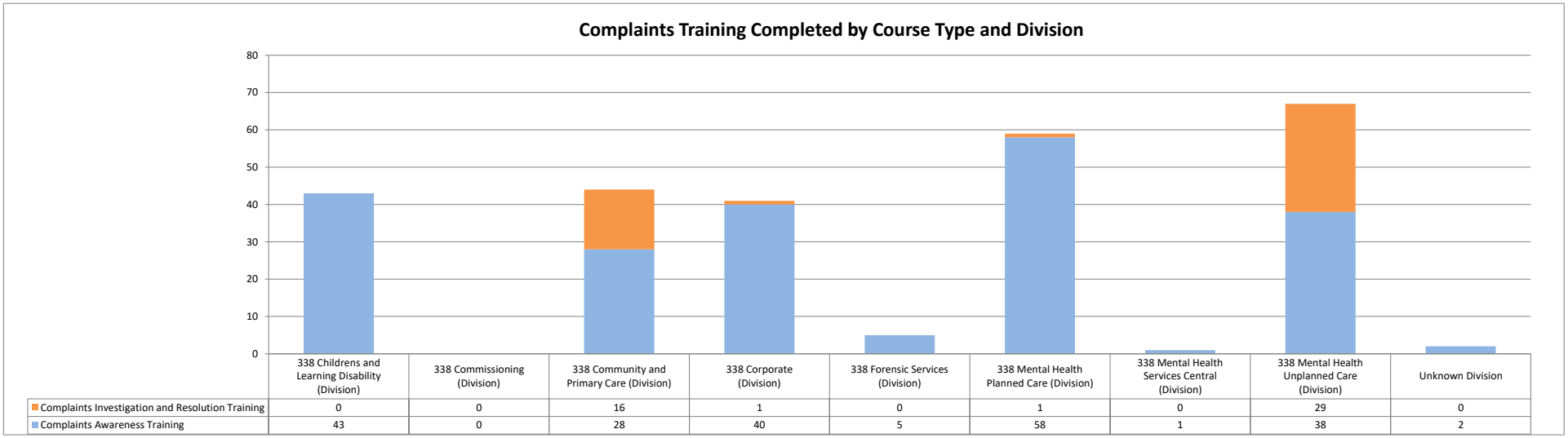
Due to the number of teams involved over the 24 month rolling period, only teams with TWO OR MORE complaints are shown here

	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Rolling Total
Newbridges Residential Unit	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	0	0	0	**3**
PCN CMHT East Riding	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	0	0	**3**
Pine View	0	0	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	**3**
CAMHS Contact Point	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	**2**
Crisis and Intervention for Older People	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	**2**
Early Intervention Contact Point	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	**2**
Forensic Management	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	**2**
Hull Older Peoples MH Memory Services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	**2**
Humber - Recovery Support Team - EIP	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Humber Centre - Derwent	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	**2**
Humber Centre - Ouse	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	**2**
Humber Centre - Ullswater	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	**2**
Inspire Multi-Disciplinary	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Maister Lodge Nursing	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	**2**
Malton Ward	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	**2**
STaRS Ward	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	**2**
Whitby UTC	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Whitby Ward	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	**2**
Total	**31**	**27**	**20**	**39**	**21**	**30**	**27**	**33**	**22**	**26**	**22**	**29**	**37**	**30**	**41**	**22**	**23**	**14**	**21**	**33**	**27**	**21**	**22**	**20**	**638**

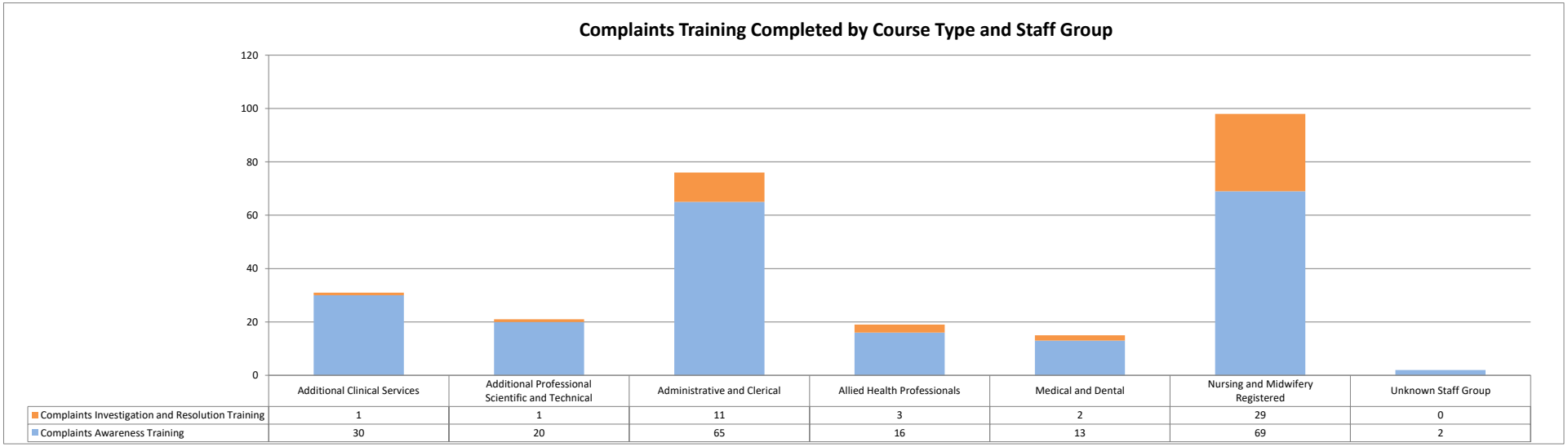
Quality Dashboard

Domain

Section 1.3.5 Complaints Training — 12 months rolling data



	338 Childrens and Learning Disability (Division)	338 Commissioning (Division)	338 Community and Primary Care (Division)	338 Corporate (Division)	338 Forensic Services (Division)	338 Mental Health Planned Care (Division)	338 Mental Health Services Central (Division)	338 Mental Health Unplanned Care (Division)	Unknown Division
Complaints Investigation and Resolution Training	0	0	16	1	0	1	0	29	0
Complaints Awareness Training	43	0	28	40	5	58	1	38	2



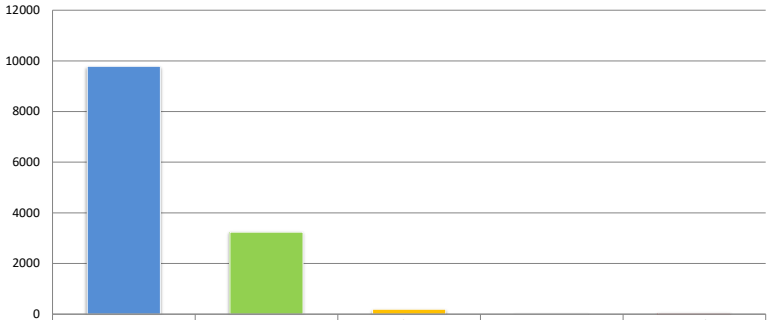
	Additional Clinical Services	Additional Professional Scientific and Technical	Administrative and Clerical	Allied Health Professionals	Medical and Dental	Nursing and Midwifery Registered	Unknown Staff Group
Complaints Investigation and Resolution Training	1	1	11	3	2	29	0
Complaints Awareness Training	30	20	65	16	13	69	2

Domain

Clinical Risk

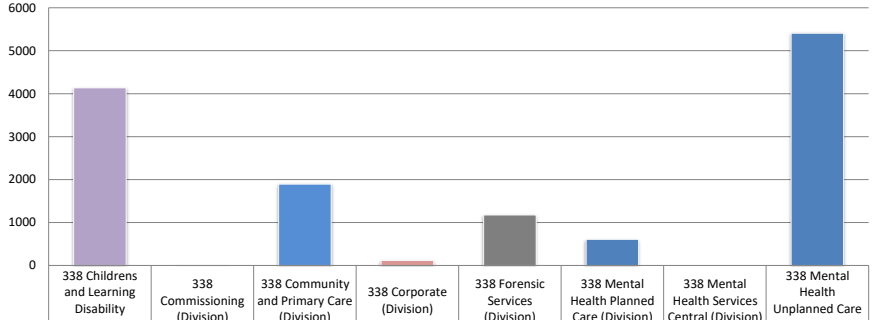
Quality Report

Category of Harms Severity - Year to Date



	No Harm	Low Harm	Mod Harm	Severe Harm	Death
YTD	9785	3237	193	13	44

Incidents by Division - Year to Date

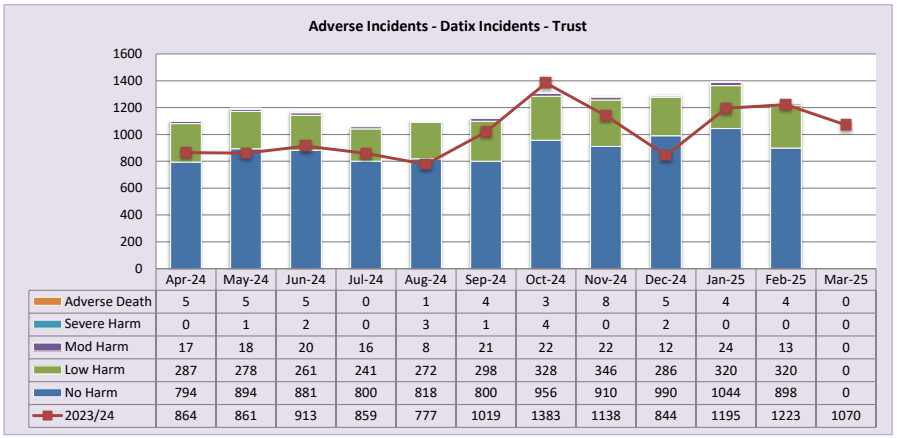


	338 Childrens and Learning Disability (Division)	338 Commissioning (Division)	338 Community and Primary Care (Division)	338 Corporate (Division)	338 Forensic Services (Division)	338 Mental Health Planned Care (Division)	338 Mental Health Services Central (Division)	338 Mental Health Unplanned Care (Division)
YTD	4136	1	1894	117	1176	610	0	5408

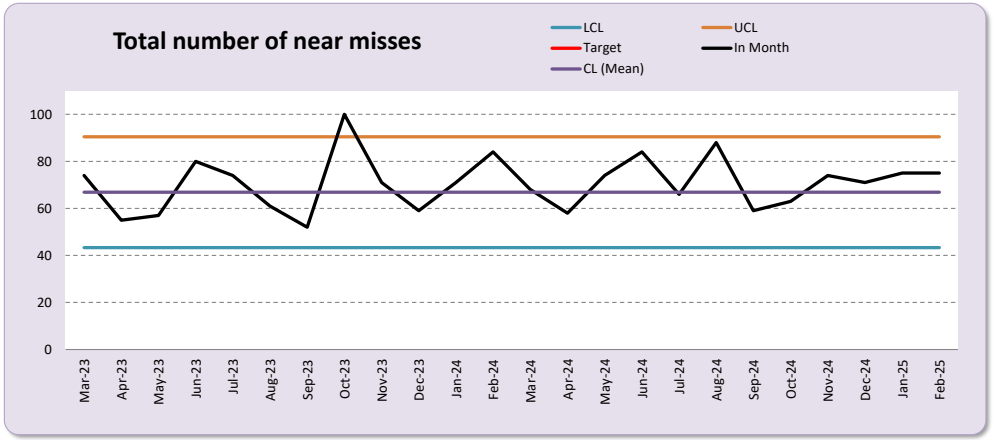
Quality Dashboard

Domain

Section 2.1 Clinical Risk — Overall Trust Position

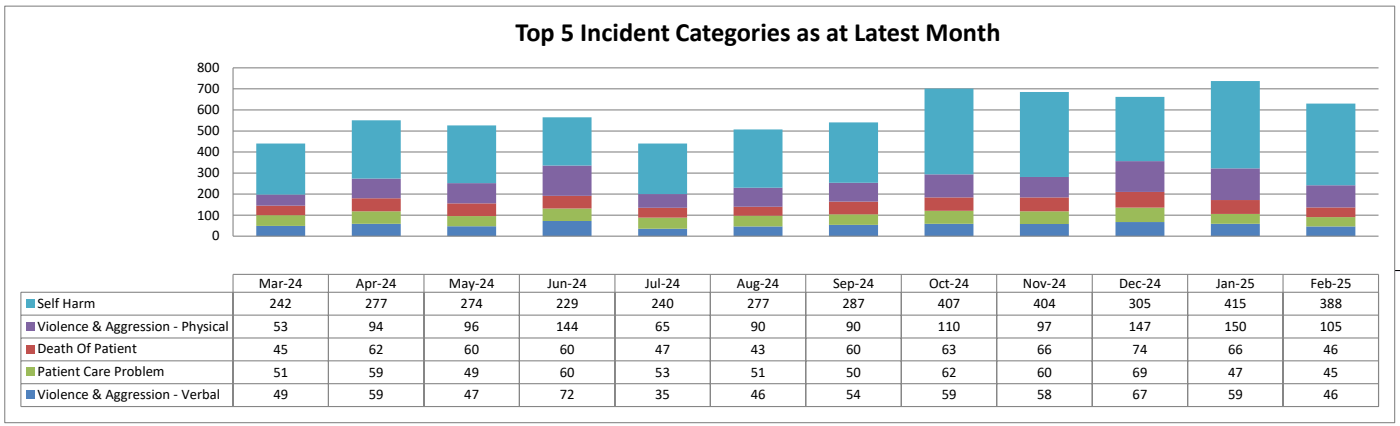


	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
Adverse Death	5	5	5	0	1	4	3	8	5	4	4	0
Severe Harm	0	1	2	0	3	1	4	0	2	0	0	0
Mod Harm	17	18	20	16	8	21	22	22	12	24	13	0
Low Harm	287	278	261	241	272	298	328	346	286	320	320	0
No Harm	794	894	881	800	818	800	956	910	990	1044	898	0
2023/24	864	861	913	859	777	1019	1383	1138	844	1195	1223	1070

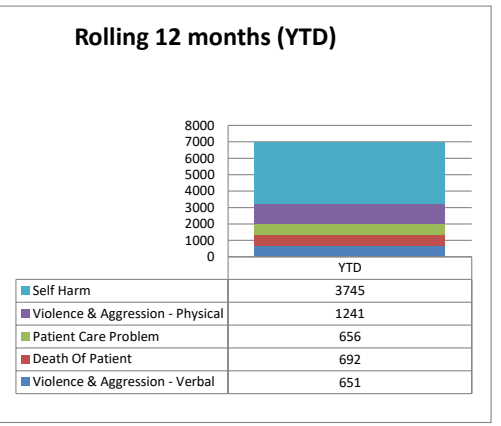


National Safety Alerts : Central Alert System (CAS)	Jan-25	Feb-25
Number issued in month	0	0
Number applicable to HTFT	0	0
Number open pending action	0	0
Number closed in the month	0	0
Number of breaches	0	0

Incident Analysis	Jan-25	Feb-25
Never Events	0	0
% of Harm Free Care	99.4%	99.4%
% of incidents that resulted in Severe Harm or Death	0.3%	0.3%



	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Self Harm	242	277	274	229	240	277	287	407	404	305	415	388
Violence & Aggression - Physical	53	94	96	144	65	90	90	110	97	147	150	105
Death Of Patient	45	62	60	60	47	43	60	63	66	74	66	46
Patient Care Problem	51	59	49	60	53	51	50	62	60	69	47	45
Violence & Aggression - Verbal	49	59	47	72	35	46	54	59	58	67	59	46



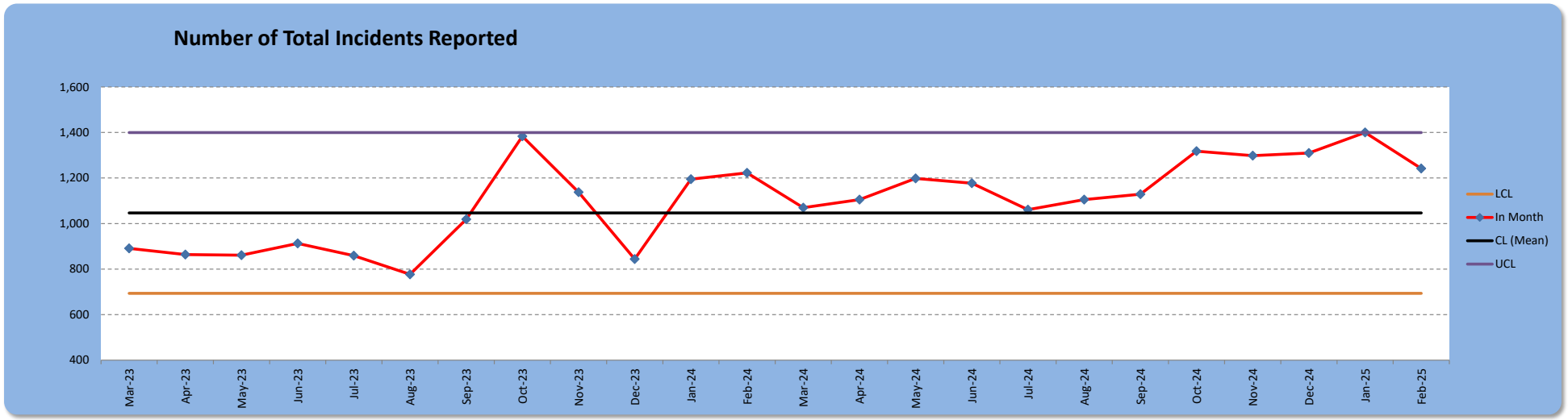
	YTD
Self Harm	3745
Violence & Aggression - Physical	1241
Patient Care Problem	656
Death Of Patient	692
Violence & Aggression - Verbal	651

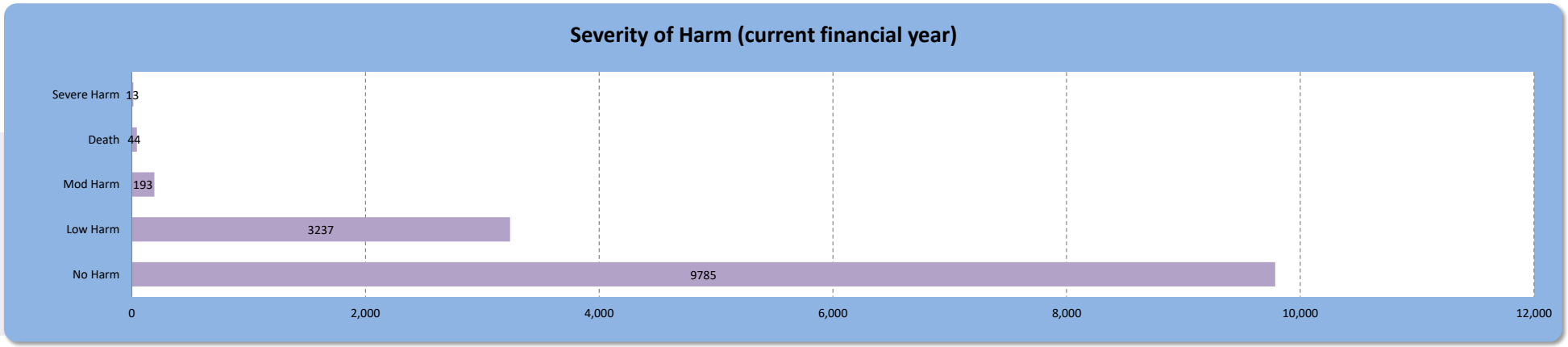
Quality Dashboard

Domain

Section 2.1	Clinical Risk	Overall Trust Position

Total Incidents Reported and Severity of incidents reported in the current financial year (YTD)

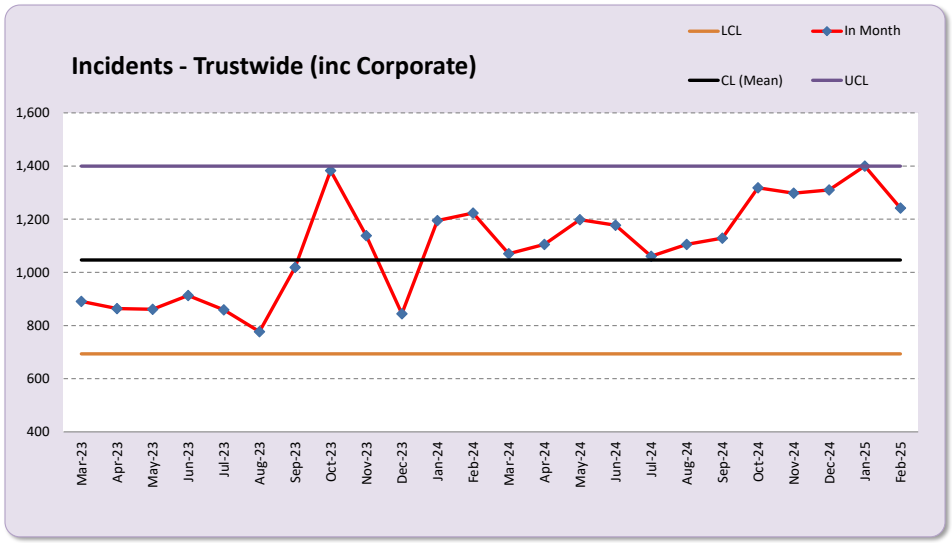


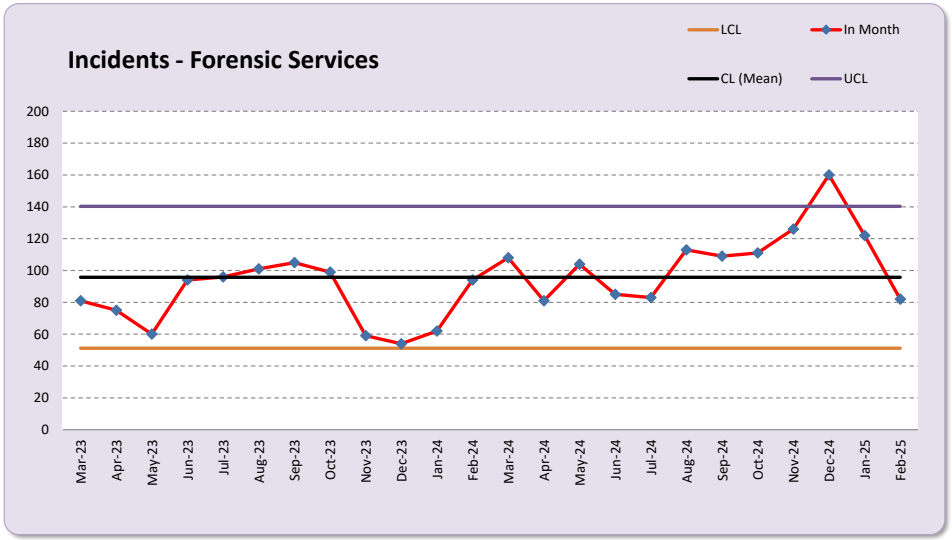


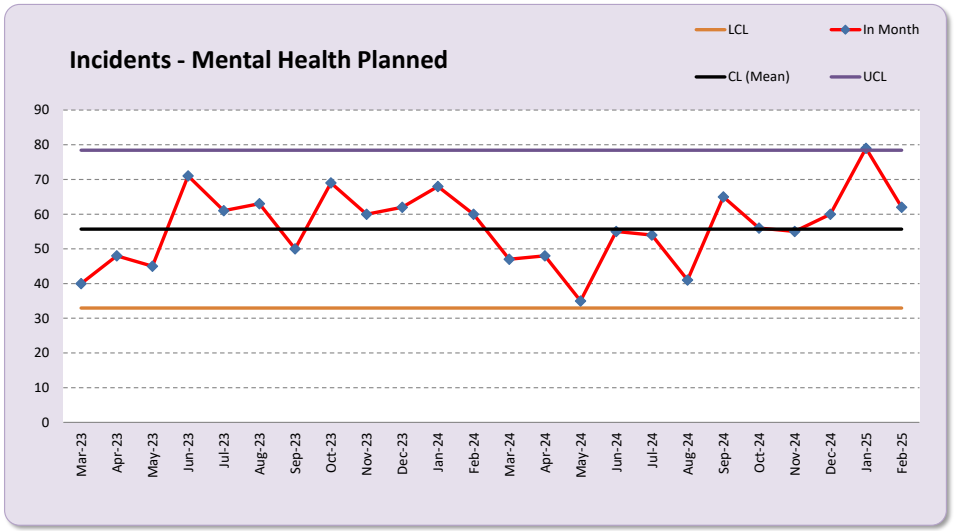
Quality Dashboard

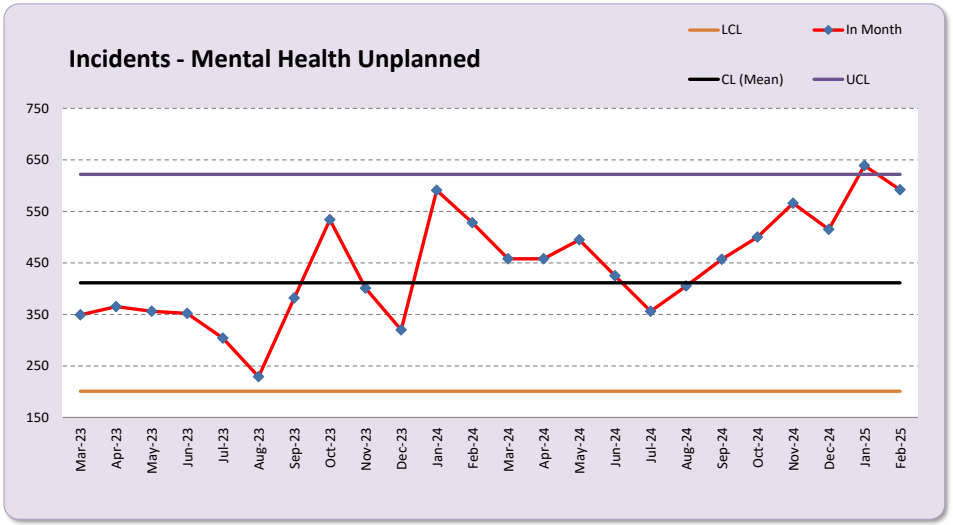
Domain

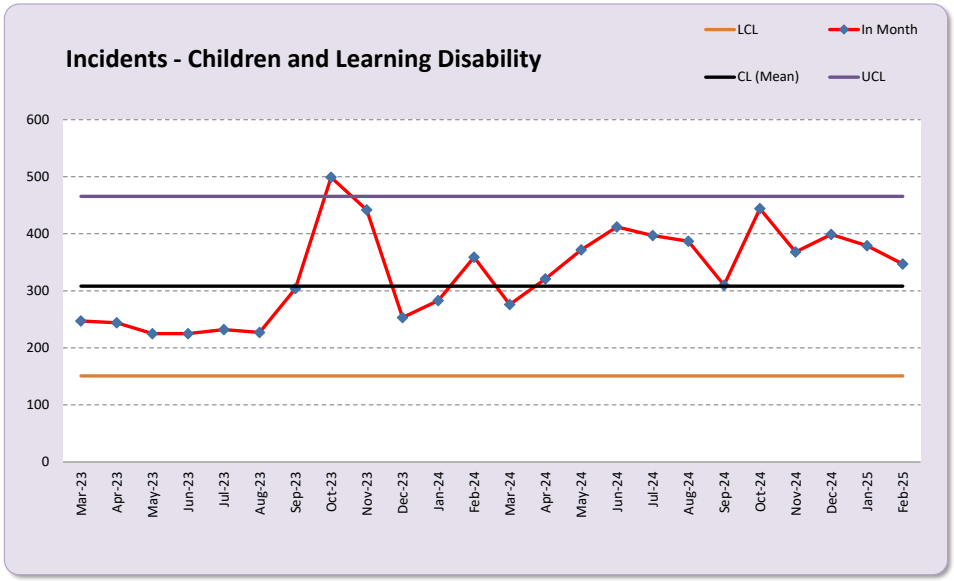
Section 2.3	Clinical Risk	Incidents Registered by Division (Statistical Process Charts)	Incidents - Division SPCs

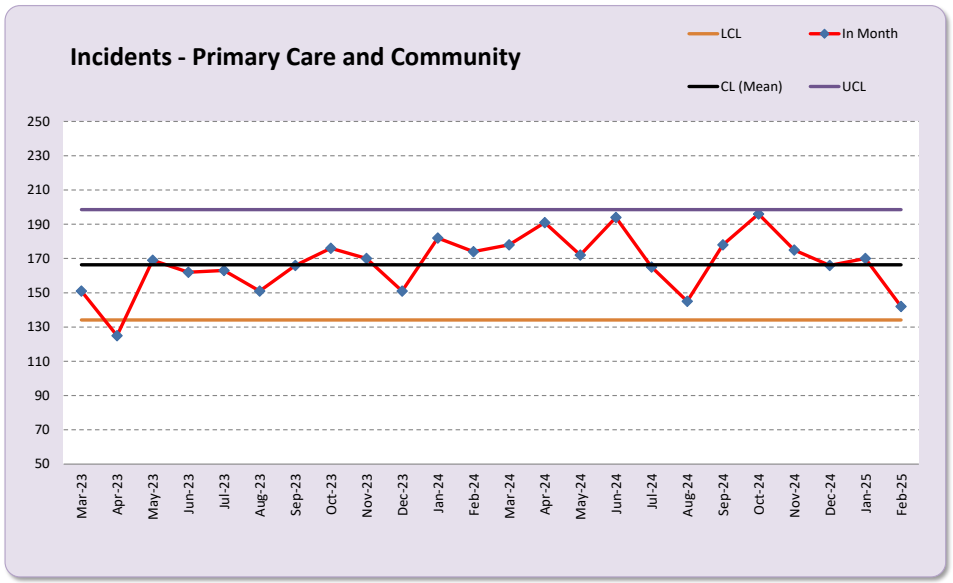









Incidents - Children and Learning Disability
LCL
In Month
CL (Mean)
UCL
600
500
400
300
200
100
0
Mar-23
Apr-23
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
May-24
Jun-24
Jul-24
Aug-24
Sep-24
Oct-24
Nov-24
Dec-24
Jan-25
Feb-25

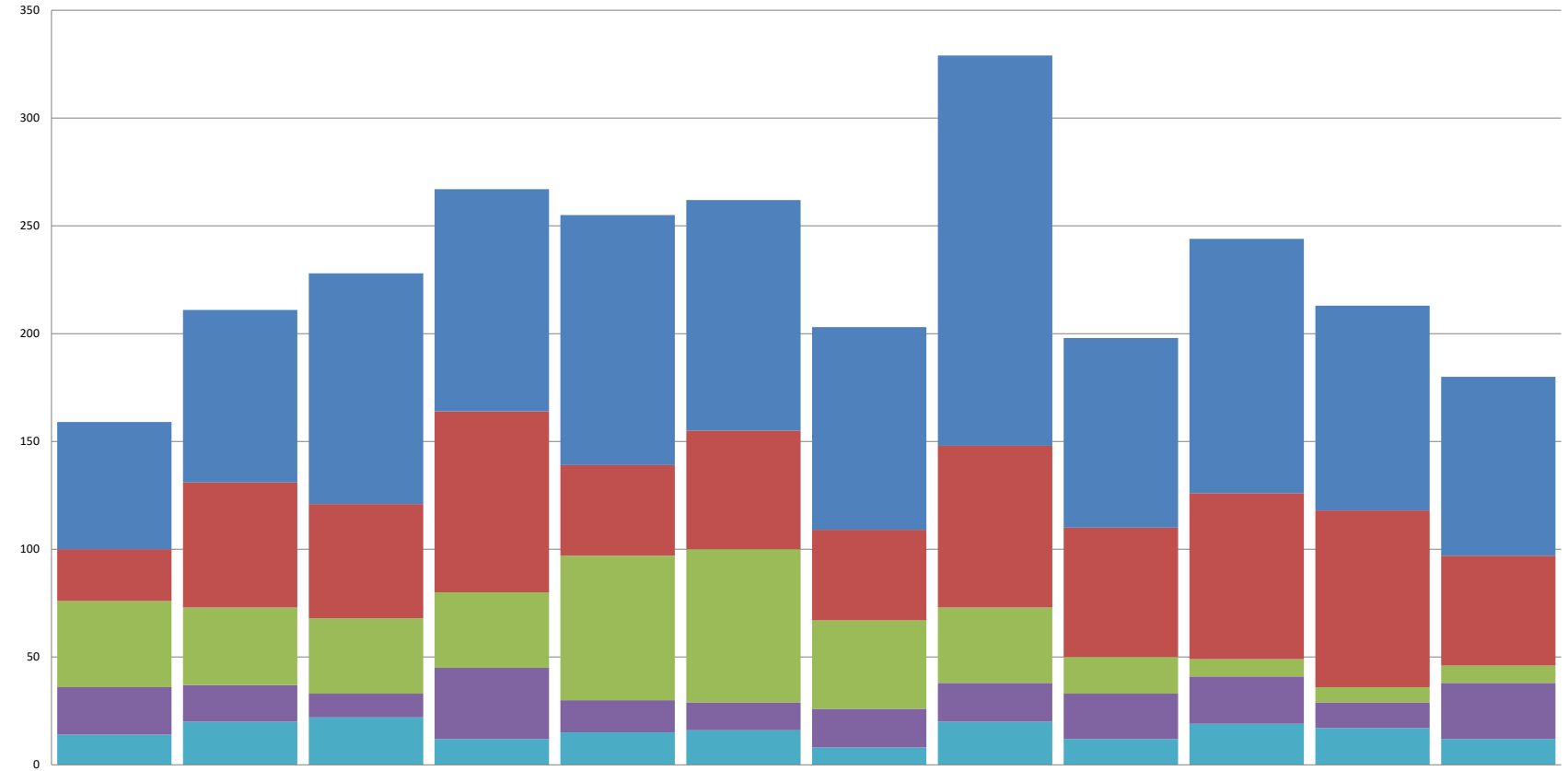

Incidents - Primary Care and Community
LCL
In Month
CL (Mean)
UCL
250
230
210
190
170
150
130
110
90
70
50
Mar-23
Apr-23
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
May-24
Jun-24
Jul-24
Aug-24
Sep-24
Oct-24
Nov-24
Dec-24
Jan-25
Feb-25

Quality Dashboard

Domain

Section 2.3 **Clinical Risk** | **Incidents by Care Group (Division) - Top 5 Categories** | **Incidents - Division**

Childrens and Learning Disability (Division)



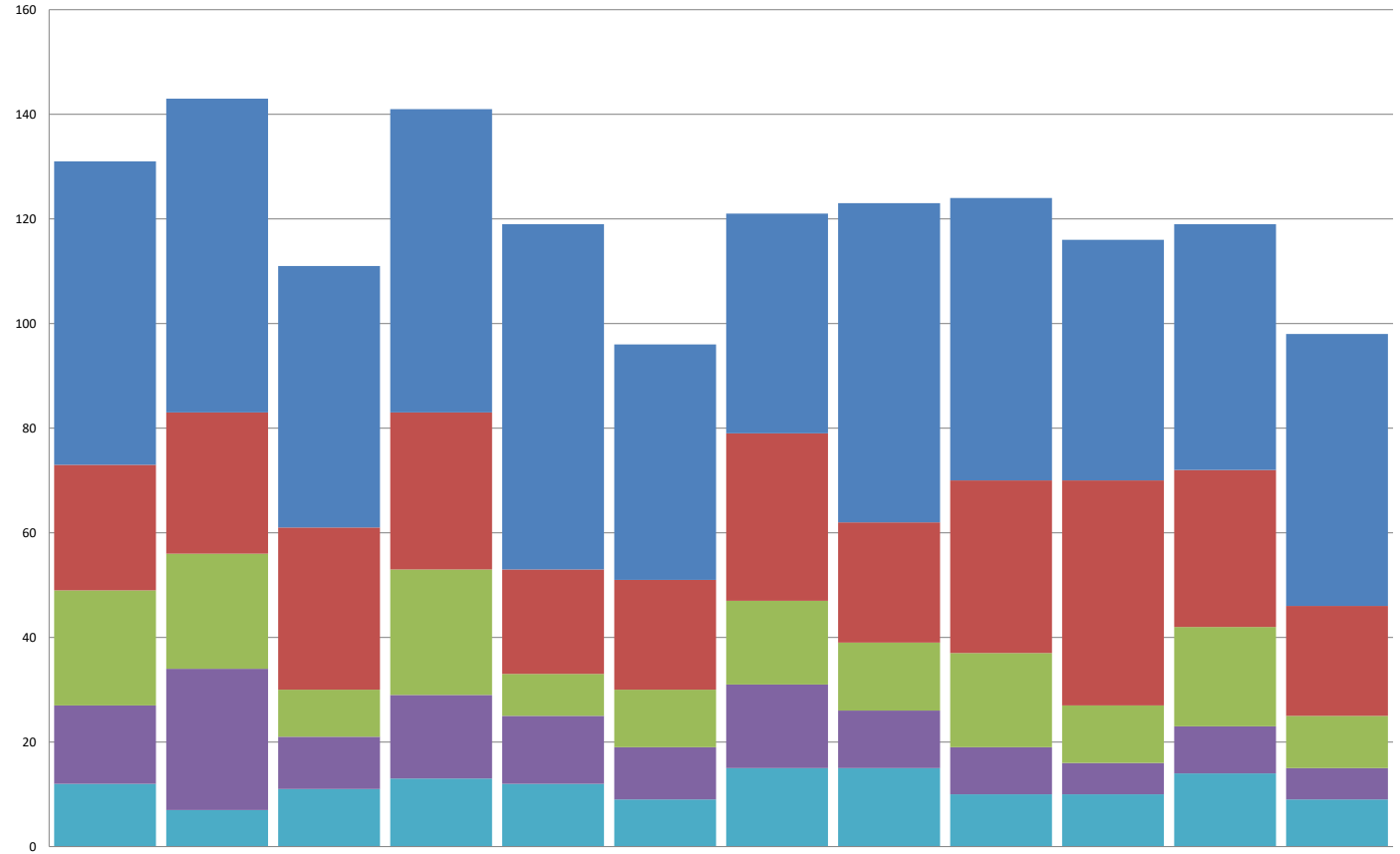
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Self Harm	59	80	107	103	116	107	94	181	88	118	95	83
Violence & Aggression - Physical	24	58	53	84	42	55	42	75	60	77	82	51
Miscellaneous. Physical or MH Problems	40	36	35	35	67	71	41	35	17	8	7	8
Violence & Aggression - Verbal	22	17	11	33	15	13	18	18	21	22	12	26
Patient Information	14	20	22	12	15	16	8	20	12	19	17	12

Quality Dashboard

Domain

Section 2.3 **Clinical Risk** | **Incidents by Care Group (Division) - Top 5 Categories** | **Incidents - Division**

Community & Primary Care (Division)



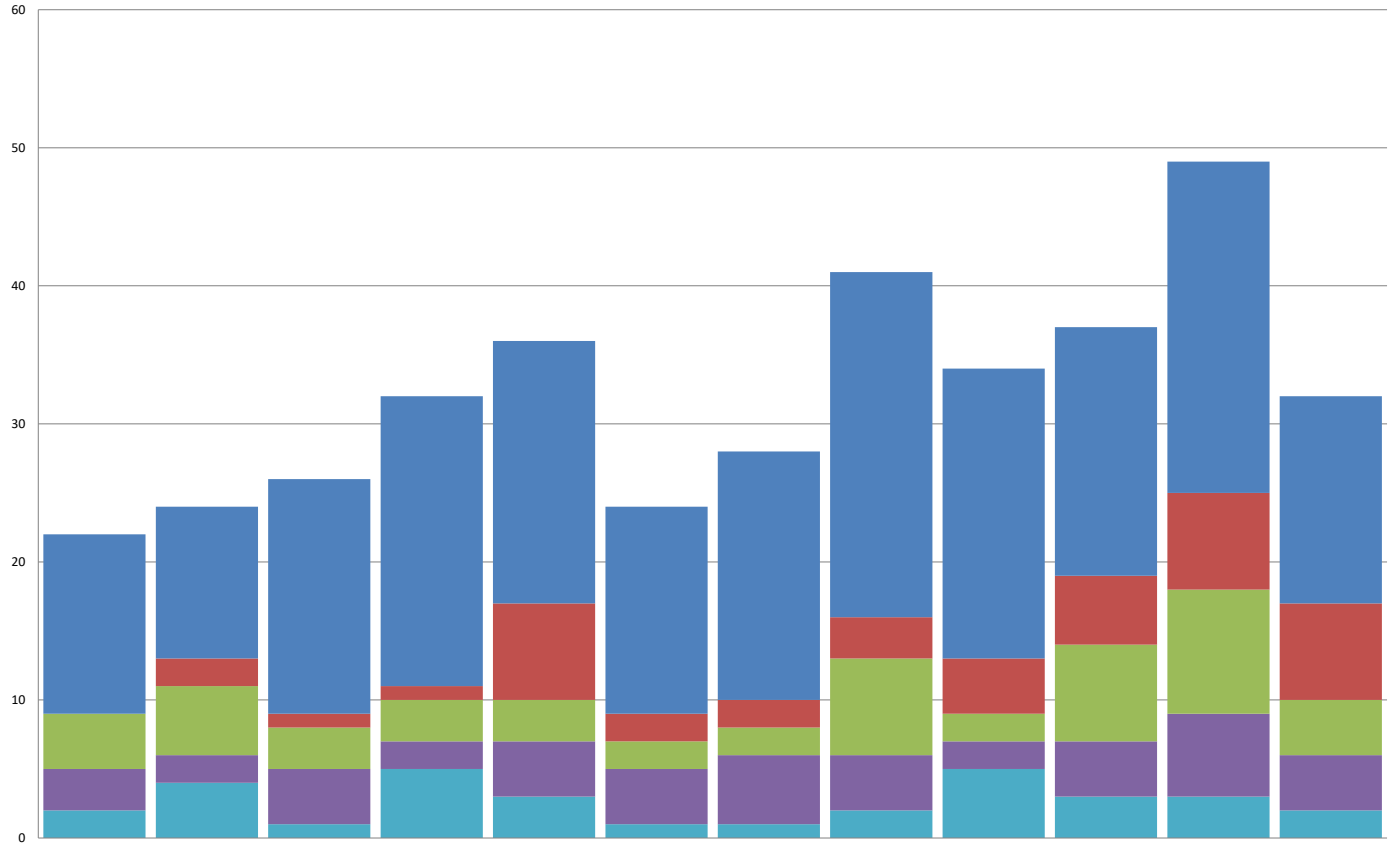
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Pressure Ulcer	58	60	50	58	66	45	42	61	54	46	47	52
Death Of Patient	24	27	31	30	20	21	32	23	33	43	30	21
Problems with Admission / Discharge / Transfer	22	22	9	24	8	11	16	13	18	11	19	10
Patient Care Problem	15	27	10	16	13	10	16	11	9	6	9	6
Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	12	7	11	13	12	9	15	15	10	10	14	9

Quality Dashboard

Domain

Section 2.3 **Clinical Risk** | **Incidents by Care Group (Division) - Top 5 Categories** | **Incidents - Division**

Mental Health Planned (Division)



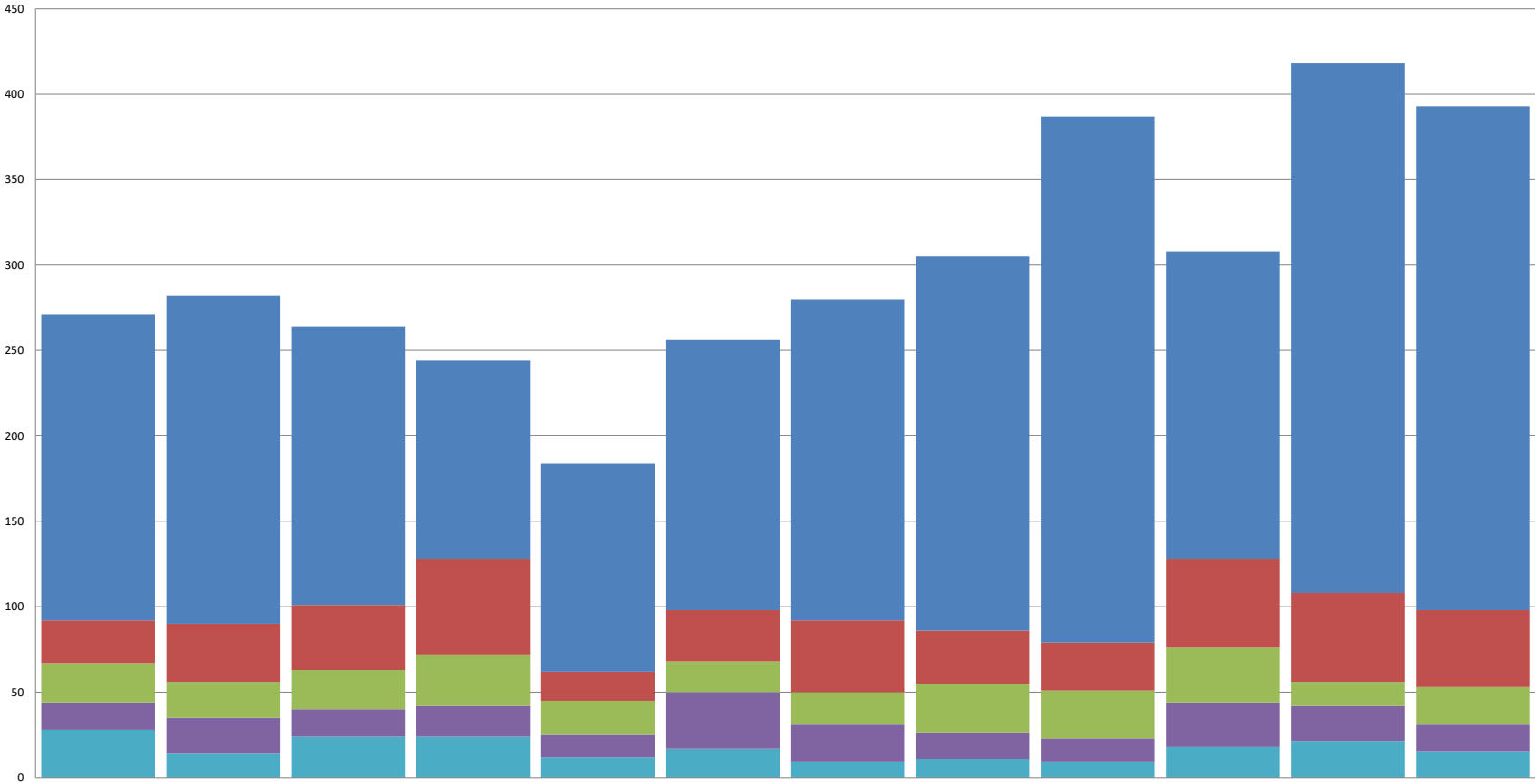
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Death Of Patient	13	11	17	21	19	15	18	25	21	18	24	15
Patient Care Problem	0	2	1	1	7	2	2	3	4	5	7	7
Concern for Person(s) (inc. Neglect / Emotional Harm)	4	5	3	3	3	2	2	7	2	7	9	4
Patient Information	3	2	4	2	4	4	5	4	2	4	6	4
Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	2	4	1	5	3	1	1	2	5	3	3	2

Quality Dashboard

Domain

Section 2.3 | Clinical Risk | Incidents by Care Group (Division) - Top 5 Categories | Incidents - Division

Mental Health Unplanned (Division)



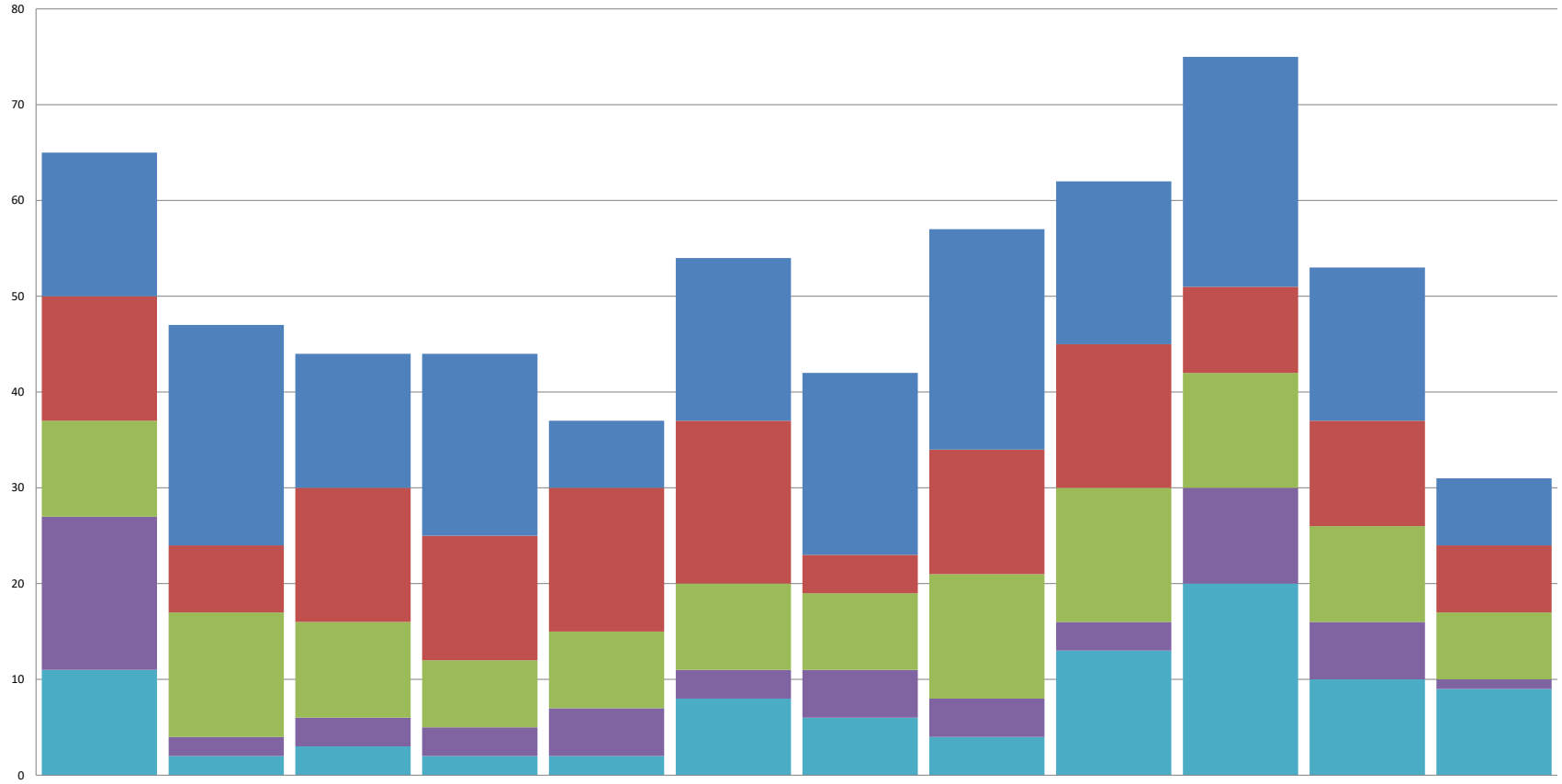
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Self Harm	179	192	163	116	122	158	188	219	308	180	310	295
Violence & Aggression - Physical	25	34	38	56	17	30	42	31	28	52	52	45
Patient Care Problem	23	21	23	30	20	18	19	29	28	32	14	22
Inappropriate behaviour (not violent)	16	21	16	18	13	33	22	15	14	26	21	16
Violence & Aggression - Non-Physical	28	14	24	24	12	17	9	11	9	18	21	15

Quality Dashboard

Domain

Section 2.3 | Clinical Risk | Incidents by Care Group (Division) - Top 5 Categories | Incidents - Division

Secure Services (Division)



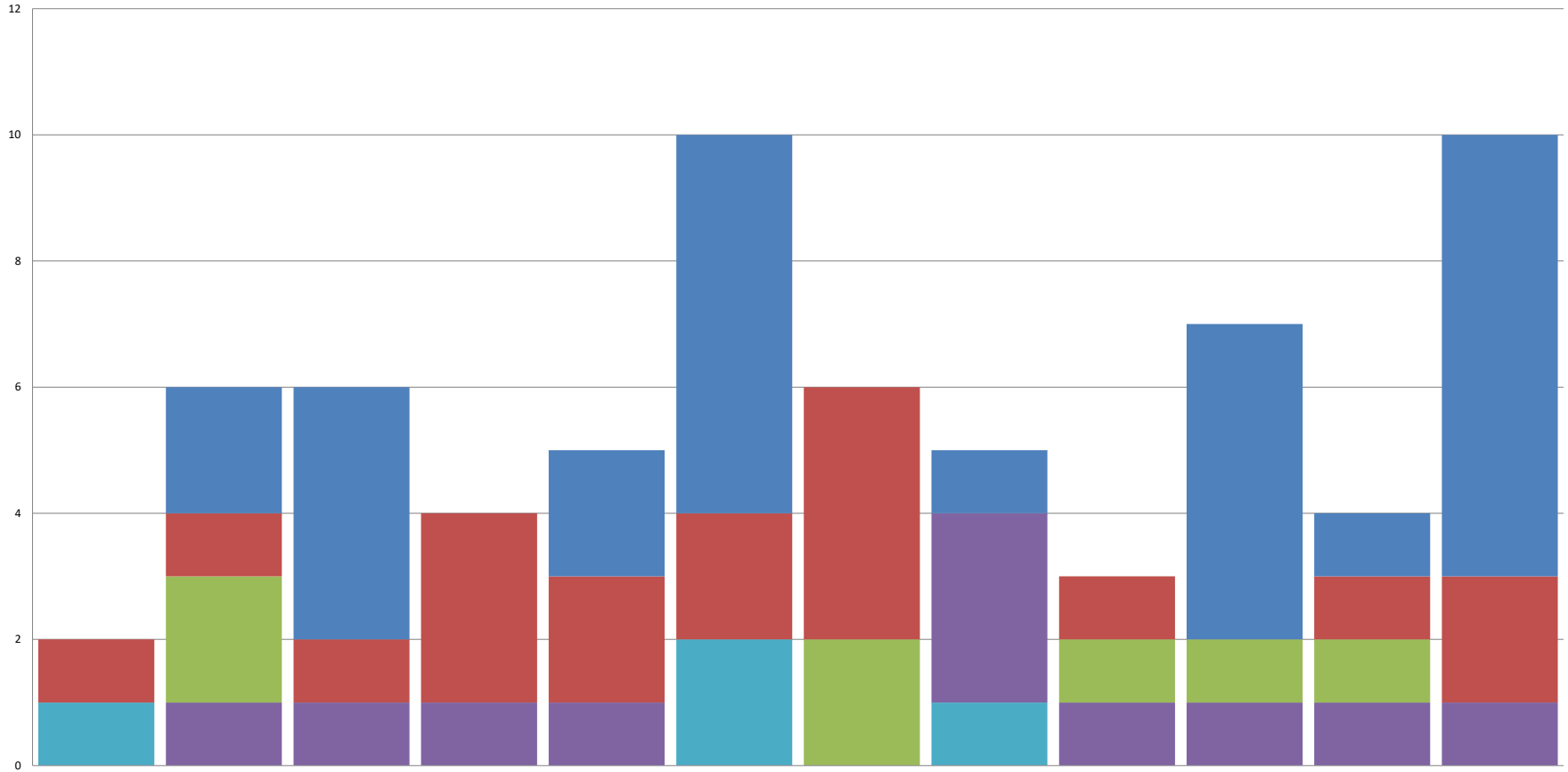
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Violence & Aggression - Verbal	15	23	14	19	7	17	19	23	17	24	16	7
Inappropriate behaviour (not violent)	13	7	14	13	15	17	4	13	15	9	11	7
Security Incident	10	13	10	7	8	9	8	13	14	12	10	7
Staffing Level Shortage	16	2	3	3	5	3	5	4	3	10	6	1
Violence & Aggression - Non-Physical	11	2	3	2	2	8	6	4	13	20	10	9

Quality Dashboard

Domain

Section 2.3 **Clinical Risk** | **Incidents by Care Group (Division) - Top 5 Categories** | **Incidents - Division**

Corporate (Division)



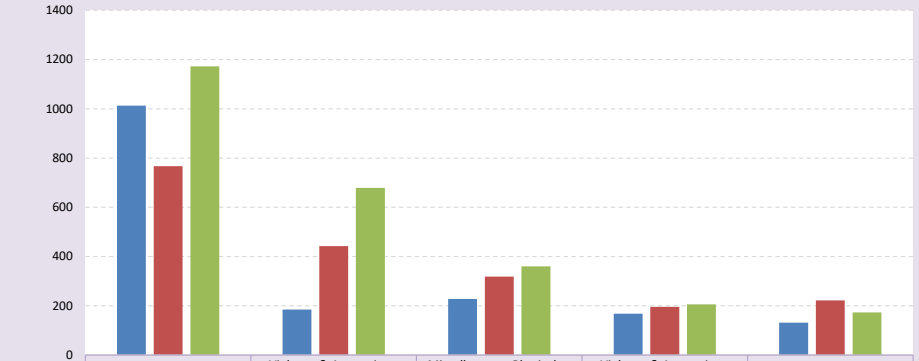
	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25
Patient Information	0	2	4	0	2	6	0	1	0	5	1	7
Information Incident	1	1	1	3	2	2	4	0	1	0	1	2
Network / System security	0	2	0	0	0	0	2	0	1	1	1	0
Security Incident	0	1	1	1	1	0	0	3	1	1	1	1
Service Delivery Issue	1	0	0	0	0	2	0	1	0	0	0	0

Quality Dashboard

Domain

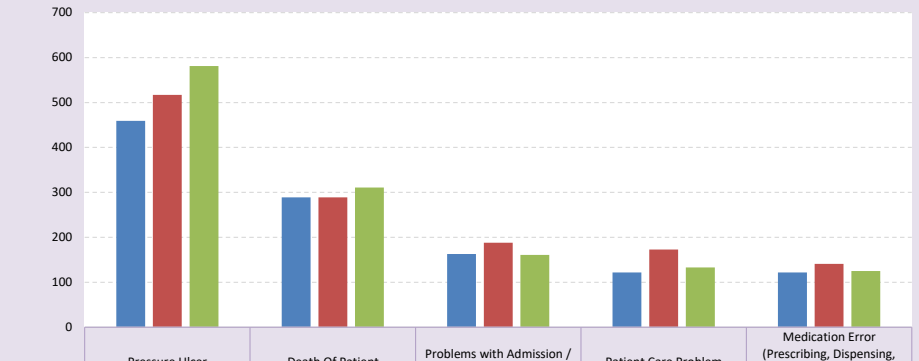
Section 2.3	Clinical Risk	Incidents Registered by Division (by financial year)	Incidents - Division (by year)

Childrens and Learning Disability (Division)



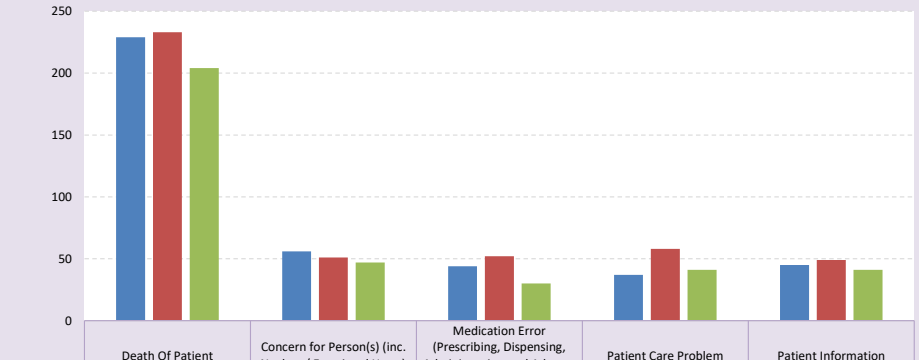
	Self Harm	Violence & Aggression - Physical	Miscellaneous. Physical or MH Problems	Violence & Aggression - Verbal	Patient Information
2022-2023	1013	185	228	168	132
2023-2024	767	442	319	196	222
2024-2025	1172	679	360	206	173

Community and Primary Care (Division)



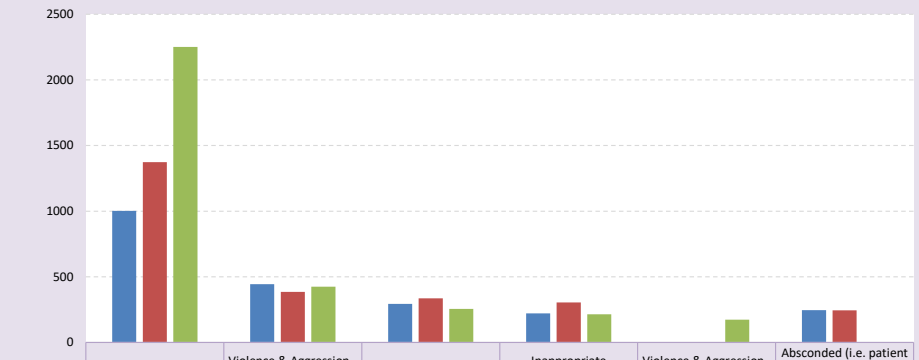
	Pressure Ulcer	Death Of Patient	Problems with Admission / Discharge / Transfer	Patient Care Problem	Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)
2022-2023	459	289	163	122	122
2023-2024	517	289	188	173	141
2024-2025	581	311	161	133	125

Mental Health Planned Care (Division)



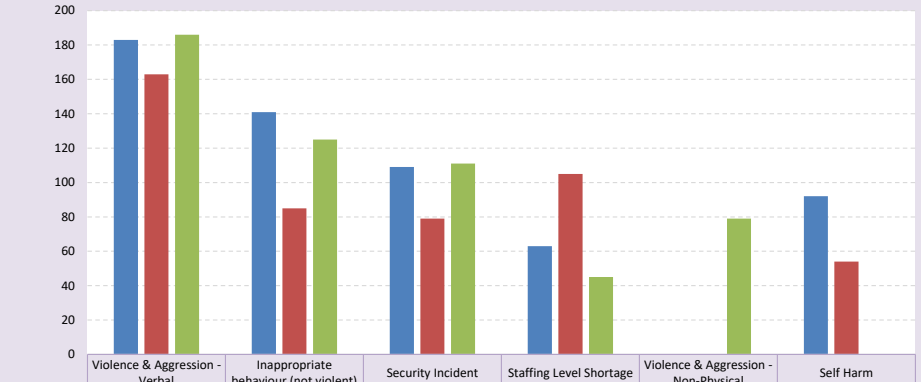
	Death Of Patient	Concern for Person(s) (inc. Neglect / Emotional Harm)	Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	Patient Care Problem	Patient Information
2022-2023	229	56	44	37	45
2023-2024	233	51	52	58	49
2024-2025	204	47	30	41	41

Mental Health Unplanned Care (Division)



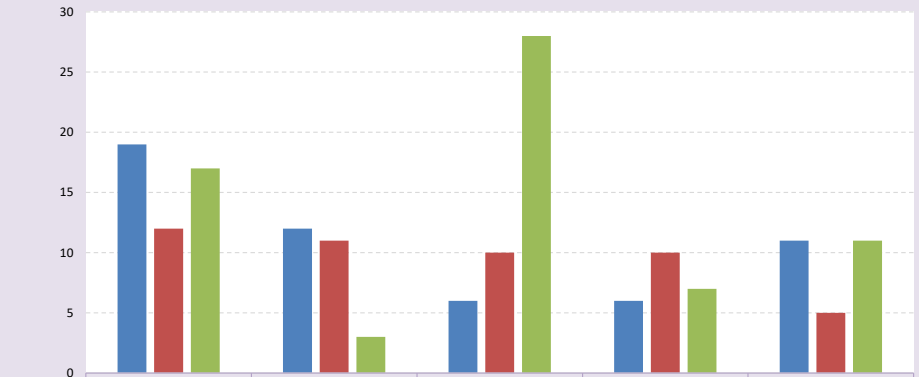
	Self Harm	Violence & Aggression - Physical	Patient Care Problem	Inappropriate behaviour (not violent)	Violence & Aggression - Non-Physical	Absconded (i.e. patient left ward / service without permission)
2022-2023	1002	444	294	221		246
2023-2024	1373	385	336	305		244
2024-2025	2251	425	256	215	174	0

Forensic Services (Division)



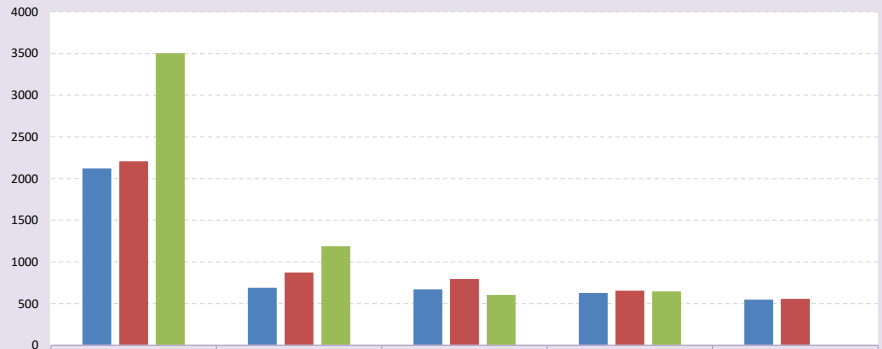
	Violence & Aggression - Verbal	Inappropriate behaviour (not violent)	Security Incident	Staffing Level Shortage	Violence & Aggression - Non-Physical	Self Harm
2022-2023	183	141	109	63		92
2023-2024	163	85	79	105		54
2024-2025	186	125	111	45	79	0

Corporate (Division)



	Information Incident	Service Delivery Issue	Patient Information	Network / System security	Security Incident
2022-2023	19	12	6	6	11
2023-2024	12	11	10	10	5
2024-2025	17	3	28	7	11

Trustwide

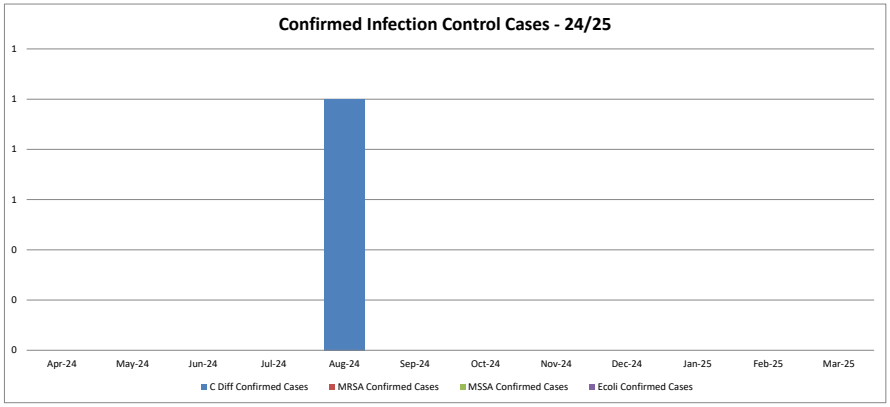


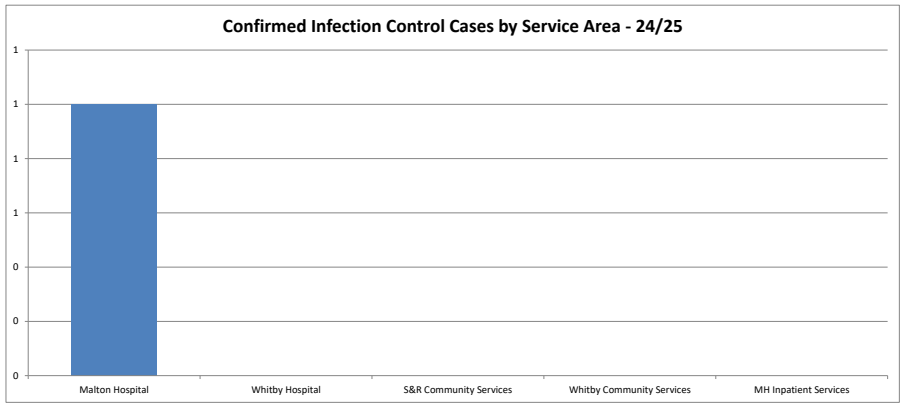
	Self Harm	Violence & Aggression - Physical	Patient Care Problem	Death Of Patient	Inappropriate behaviour (not violent)
2022-2023	2121	691	671	628	549
2023-2024	2208	872	795	656	556
2024-2025	3503	1188	605	647	0

Quality Dashboard

Domain

Section 2.4 Clinical Risk - Infection Control (Report by Exception) Quality Dashboard



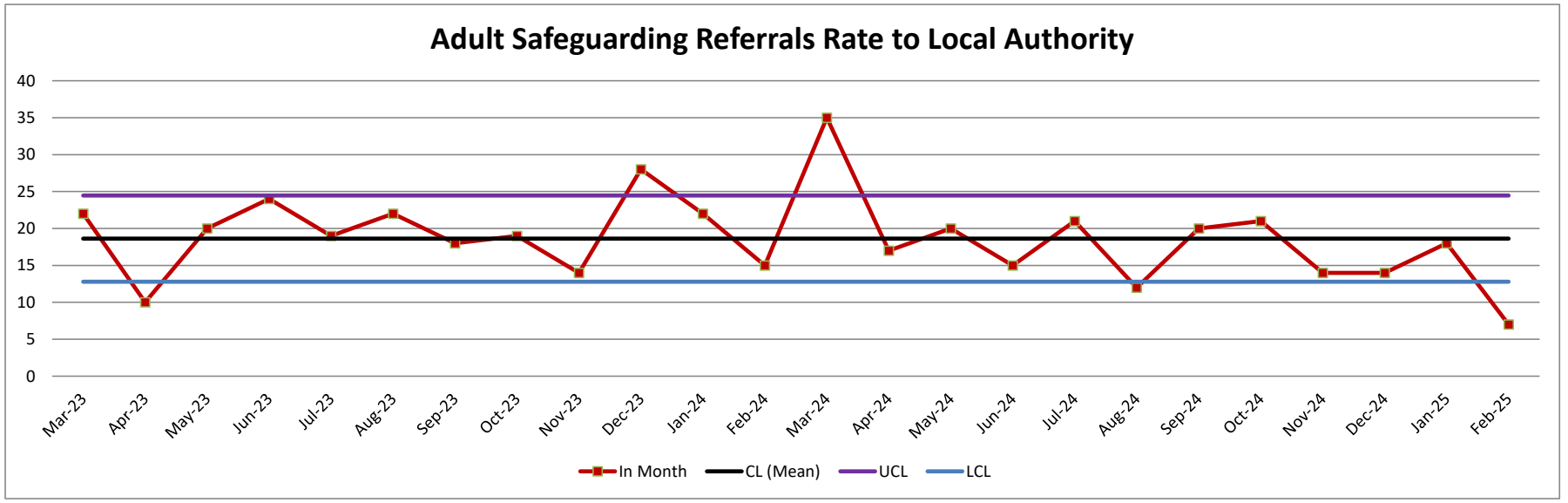


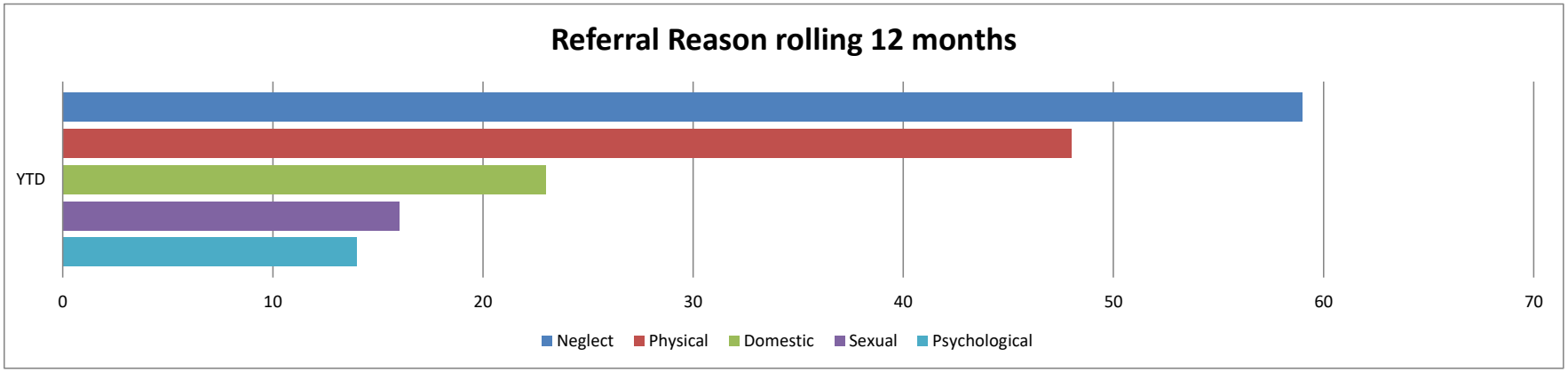
Narrative, Updates and Conclusions
Q1
None reported
Q2
1 patient residing at Fitzwilliam Unit (August) yielded a positive Clostridiodes difficile result. An 'after action review' is underway and any learning will be included in the next months report. The patient has recovered and has been discharged home. Learning from the After Action Review completed following the notification of a Clostridioides difficile toxin positive result yielded from a faecal sample sent from an in-patient residing on Fitzwilliam Ward. Malton Hospital (August 2024). All care and the management received by the patient was in accordance with the local Trust C. difficile policy and NICE national prescribing algorithm. The patient recovered and was discharged to place of residence Environmental cleanliness noted to be good – mirrored in the domestic cleanliness audit results at the time of acquisition. Positive feedback provided from the patient re the level of care received. Inconsistencies were noted with the quality of documentation however. This is currently being addressed within the unit.
Q3
Q4

Quality Dashboard

Domain

Section 2.5	Clinical Risk	Adult Safeguarding Referrals

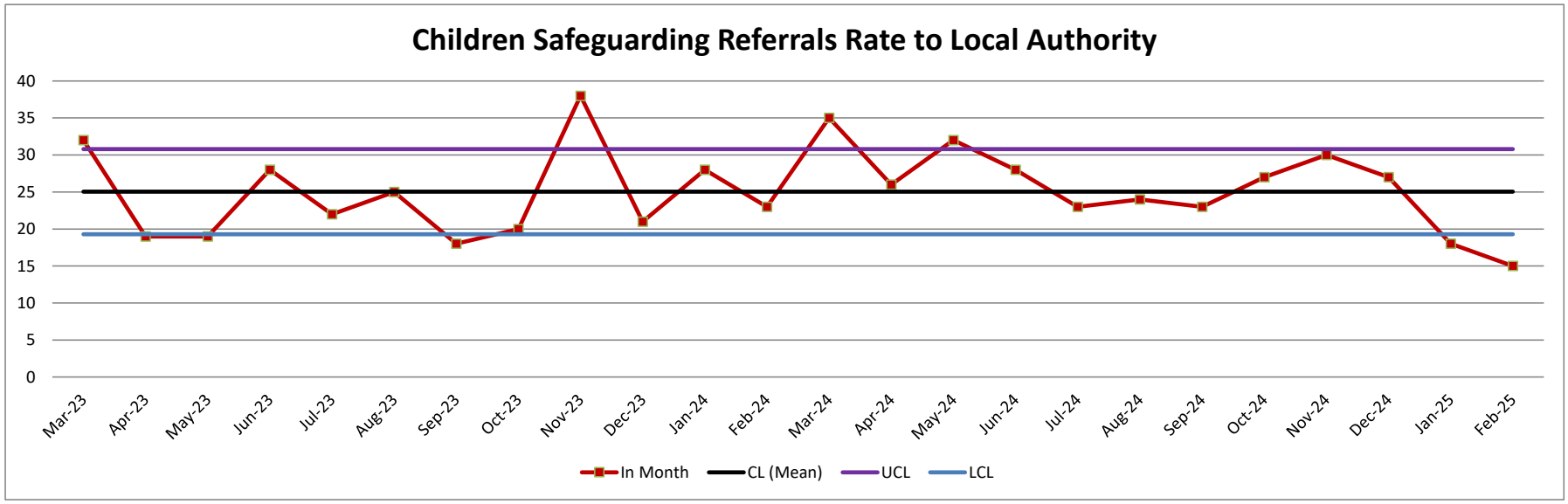


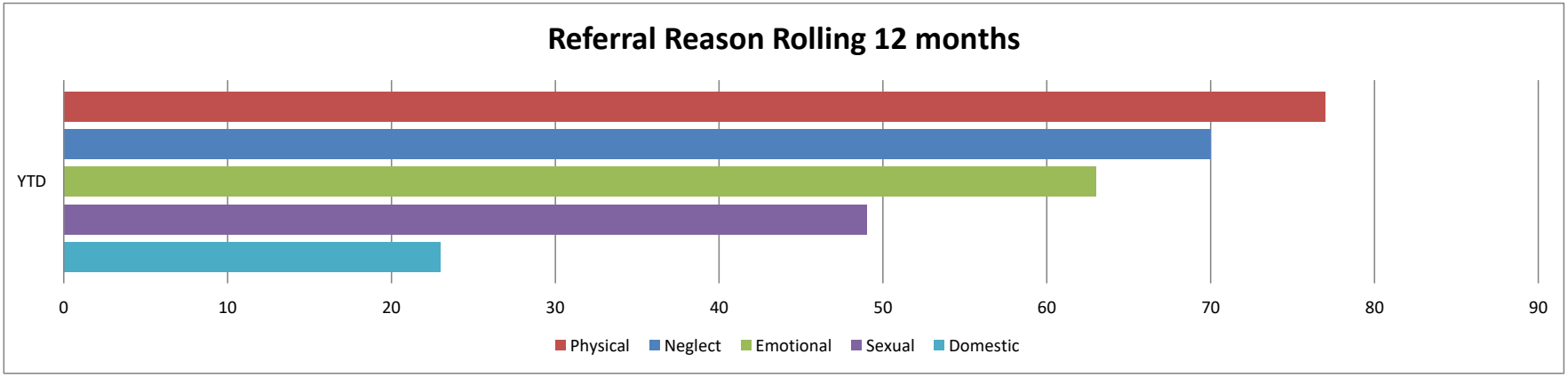


Quality Dashboard

Domain

Section 2.5	Clinical Risk	Children Safeguarding Referrals





HUMBER TEACHING NHS FOUNDATION TRUST
SAFER STAFFING INPATIENT DASHBOARD

Staffing and Quality Indicators	
Contract Period:	2024-25
Reporting Month:	Jan-25

NHS Humber Teaching NHS Foundation Trust

Shown one month in arrears

Units						Bank/Agency Hours				Average Safer Staffing Fill Rates				High Level Indicators											
										Day		Night		QUALITY INDICATORS (YTD)										Indicator Totals	
Speciality	Ward	Speciality	WTE	OBDs (including leave)	CHPPD Hours (Nurse)	Improvement	Bank % Filled	Improvement	Agency % Filled	Improvement	Registered	Un Registered	Registered	Un Registered	Staffing Incidents (Poor Staffing Levels)	Incidents of Physical Violence / Aggression	Complaints (Upheld/ partly upheld)	Failed S17 Leave	Clinical Supervision	Mandatory Training (ALL)	Mandatory Training (ILS)	Mandatory Training (BLS)	Sickness Levels (clinical)	WTE Vacancies (RNs only)	Dec-24	Jan-25
Adult MH	Avondale	Adult MH Assessment	32.0	79%	12.1	↓	19.4%	↓	2.6%	↓	102%	119%	102%	121%	0	41	4	0	80.6%	91.1%	93.3%	81.3%	6.9%	0.0	1	1
	New Bridges	Adult MH Treatment (M)	37.0	100%	8.4	↓	24.0%	↑	0.6%	↓	95%	106%	107%	110%	1	33	4	0	88.9%	96.8%	88.9%	94.7%	8.5%	-1.0	2	2
	Westlands	Adult MH Treatment (F)	36.0	97%	7.9	↓	29.3%	↓	1.2%	↑	92%	81%	99%	107%	2	50	3	0	89.7%	89.5%	88.2%	83.3%	4.8%	-1.6	1	1
	Mill View Court	Adult MH Treatment	33.4	100%	7.4	↓	20.9%	↓	2.8%	↑	103%	93%	98%	102%	4	34	2	0	93.3%	87.8%	83.3%	81.3%	8.6%	0.8	2	2
	STARS	Adult MH Rehabilitation	16.8	100%	16.5	↓	33.0%	↓	0.9%	↑	110%	85%	100%	108%	7	6	1	0	68.8%	92.8%	50.0%	83.3%	18.1%	1.0	2	4
	PICU	Adult MH Acute Intensive	33.3	94%	22.3	↓	37.6%	↓	1.6%	↑	100%	117%	94%	146%	0	94	1	2	N/R	91.2%	87.5%	94.1%	10.8%	1.6	0	3
OP MH	Maister Lodge	Older People Dementia Treatment	31.8	75%	16.1	↓	26.0%	↓	0.9%	↑	124%	89%	100%	137%	1	122	0	0	N/R	94.4%	100.0%	91.3%	9.9%	1.5	1	2
	Mill View Lodge	Older People Treatment	31.1	102%	13.6	↓	18.6%	↓	2.2%	↑	66%	80%	101%	107%	1	22	0	0	67.9%	96.9%	91.7%	80.0%	14.4%	4.0	2	4
	Maister Court	Older People Treatment	15.4	100%	14.2	↓	38.1%	↓	3.8%	↓	84%	82%	100%	97%	0	6	0	0	94.1%	89.0%	57.1%	90.0%	10.2%	2.0	2	3
	Pine View	Forensic Low Secure	26.9	73%	9.3	↓	33.8%	↑	0.0%	→	102%	51%	97%	92%	2	1	0	8	100.0%	90.8%	78.6%	81.3%	16.2%	1.1	2	2
	Derwent	Forensic Medium Secure	29.9	63%	23.3	↑	36.2%	↑	0.0%	→	108%	89%	101%	163%	8	21	0	0	92.3%	93.5%	91.7%	77.8%	11.5%	-1.0	1	1
	Ouse	Forensic Medium Secure	25.6	88%	7.7	↑	15.4%	↓	0.0%	→	95%	112%	106%	95%	5	4	4	0	95.5%	94.9%	100.0%	80.0%	12.4%	-0.8	2	1
	Swale	Personality Disorder Medium Secure	25.5	87%	10.0	↑	32.3%	↓	0.0%	→	99%	93%	104%	106%	3	4	2	0	96.0%	97.9%	90.0%	100.0%	7.7%	1.0	2	1
	Ullswater (10 Beds)	Learning Disability Medium Secure	28.2	90%	16.3	↑	34.6%	↓	0.0%	→	106%	156%	120%	149%	3	38	1	2	96.4%	93.6%	81.8%	76.5%	12.5%	-0.7	1	1
Child & LD	Townend Court	Learning Disability	49.1	43%	31.3	↑	17.7%	↓	4.9%	↓	49%	95%	100%	101%	7	597	0	0	100.0%	92.3%	75.0%	68.6%	13.2%	2.4	2	2
	Inspire	CAMHS	50.0	44%	38.6	↑	13.6%	↑	4.4%	↑	97%	121%	105%	132%	1	19	0	0	N/R	91.9%	89.5%	85.7%	5.3%	-0.5	1	2
	Granville Court	Learning Disability Nursing Care	51.1	70%	19.6	↓	24.6%	↓	0.0%	→	111%	96%	106%	103%	0	2	0	0	95.8%	97.2%	78.6%	92.5%	17.7%	-1.4	1	1
CH	Whitby Hospital	Physical Health Community Hospital	30.1	95%	7.7	↓	4.4%	↓	0.0%	→	81%	83%	99%	97%	6	1	0	0	90.0%	91.2%	76.5%	36.8%	9.1%	1.3	1	3
	Malton Hospital	Physical Health Community Hospital	31.8	94%	6.7	↓	13.1%	↑	0.0%	→	83%	91%	106%	95%	2	1	1	0	100.0%	90.5%	93.3%	82.4%	2.3%	0.7	0	2

Key			
	Target met	Within 5% of target	Target not met

Exception Reporting and Operational Commentary

Safer Staffing Dashboard Narrative : Jan

17 units are flagging red for sickness in January, up from 16 in December. The number of units with sickness rates above 10% has increased to 10 from 8 in December with 3 units with a sickness rate above 15% (STaRS, Pine View and Granville Court).

There are no units with 5 red flags.

CHPPD is strong for most units however Westlands, MVC and Whitby inpatient unit are slightly below their target in December. 6 month averages for these units remain strong. Malton, as noted in previous months, continues to flag red for CHPPD but benchmark positively against model health system peers. The introduction of the revised Safe Nursing Care Tool (SNCT) during 2025 will support HTFT in determining an evidence based CHPPD on local acuity/dependency data.

Despite challenges with sickness, fill rates remain strong with the exception of MVL and TEC who are under the lower target threshold of 75% for RNs on days. TEC continue to have low bed occupancy (43%) and a strong CHPPD (31.3) and MVL CHPPD remains consistently above their CHPPD target. Pine view are under target for unregistered staff on days, however their RN fill rates exceed 100%, CHPPD is strong, and bed occupancy stands at 73%.

Mandatory training (all) is again above 85% for all units.

Whitby is below the lower threshold for BLS, however the resuscitation team have carried out ILS and BLS training at Whitby over two days in March so these figures will show an improvement in March's data. Westlands and MVC have recovered their position to above 80% for BLS. ILS compliance is above target for all unit with the exception of STaRS which remains under target for the third month, impacted by consistently high level of sickness (above 15%) and Maister Court has fallen below target in December.

Clinical supervision has to date remained consistently strong however there were a number of units with nil returns in December which has been escalated to the matrons.

The CHPPD RAG ratings are following discussions with and agreed by EMT in November 2022. Breakdowns are as follows:

Red RAG falls below the lowest rating, Green RAG is greater than the highest rating. Amber RAG falls between

Red RAG	Green RAG	Units applied (Note: Some thresholds were changed for June data (Townend, Ullswater and Malton)
<=4.3	>=5.3	STaRS
<=5.3	>=6.3	Pine view, Ouse
<=7	>=8	New Bridges, Westlands, Mill View Court, Swale, Whitby, Malton
<=8	>=9	Avondale
<=9.3	>=10.3	Maister Lodge, Maister Court, Derwent, Inspire, Granville
<=10.5	>=11.5	Mill View Lodge
<=11.0	>=12.0	Ullswater
<=15.6	>=16.6	PICU
<=27.0	>=28.0	Townend Court

Registered Nurse Vacancy Rates (Rolling 12 months)

Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25
11.00%	9.56%	9.10%	9.59%	9.66%	10.20%	10.28%	8.92%	6.80%	6.30%	7.39%	7.77%

Slips/Trips and Falls (Rolling 3 months)

	Nov-24	Dec-24	Jan-25
Maister Lodge	17	16	5
Millview Lodge	1	4	2
Malton IPU	4	1	2
Whitby IPU	3	5	5

Malton Sickness % is provided from ESR as they are not on Health Roster

HUMBER TEACHING NHS FOUNDATION TRUST
SAFER STAFFING COMMUNITY DASHBOARD

Staffing and Quality Indicators	
Contract Period:	2024-25
Reporting Month:	Jan

NHS Humber Teaching NHS Foundation Trust

			Workforce Indicators					Quality Indicators						Trend	
Area	Team	Speciality	WTE in post	Vacancies Budget - WTE	Sickness	Bank Spend £	Agency Spend £	Mandatory Training Overall	Clinical Supervision	Friends and Family YTD Responses	Friends and Family YTD %	Serious Incidents (reported to STEIS) YTD	Complaints Upheld (wholly or in part) YTD	Dec-24	Jan-25
Adult MH Services	Mental Health Response Service	Adult Crisis	62.9	8.4%	8.8%	£37,787	£3,632	90.8%	87.5%	9	88.9%	0	1	3	1
	Hull East Mental Health Team	Hull Adult MHT	30.5	22.4%	15.7%	£226	£0	86.7%	N/R	0	NS	0	0	3	1
	Hull West Mental Health Team	Hull Adult MHT	12.5	13.8%	7.4%	£0	£0	93.5%	N/R	0	NS	0	0	2	1
	Beverley Mental Health Team	ER Adult MHT	6.6	10.4%	3.4%	£1,672	£0	94.7%	100.0%	5	100.0%	0	0	0	0
	Goole Mental Health Team	ER Adult MHT	9.4	1.6%	0.0%	£841	£0	93.9%	100.0%	5	100.0%	0	0	0	0
	Haltemprice Mental Health Team	ER Adult MHT	11.0	-5.5%	0.5%	£896	£0	96.8%	100.0%	0	NS	0	0	1	0
	Holderness Mental Health Team	ER Adult MHT	12.0	-1.3%	5.6%	£690	£0	95.6%	100.0%	0	NS	0	0	1	1
	Bridlington & Driffield MHT	ER Adult MHT	15.7	2.1%	0.9%	£264	£0	96.6%	64.7%	0	NS	0	0	0	1
Older People MH Services	Crisis Intervention Team for Older People (CITOP)	OP Crisis	20.1	22.4%	3.9%	£6,458	£0	97.8%	100.0%	6	100.0%	0	0	1	0
	Hull Intensive Care Team for Older People (HICTOP)	Hull OP CMHT	21.5	9.4%	2.7%	£0	£0	93.1%	100.0%	17	100.0%	0	0	0	0
	Beverley and Haltemprice OP CMHT	ER OP CMHT	7.4	14.2%	3.6%	£686	£0	98.3%	100.0%	1	100.0%	0	0	0	0
	Bridlington & Driffield OP CMHT	ER OP CMHT	7.3	10.7%	19.6%	£0	£0	95.2%	100.0%	3	100.0%	0	0	1	1
	Goole & Pocklington OP CMHT	ER OP CMHT	7.1	0.0%	1.2%	£0	£0	94.9%	100.0%	2	100.0%	0	0	0	0
	Holderness OP Community Team	ER OP CMHT	4.4	17.4%	5.9%	£0	£0	96.1%	100.0%	0	NS	0	0	1	1
Universal	Early Intervention in Psychosis	14-65 MHT	25.9	15.9%	7.1%	£0	£0	88.0%	100.0%	1	100.0%	0	0	1	1
	Hospital Mental Health Team	Liaison Services	36.0	8.4%	3.6%	£0	£33,865	92.4%	90.9%	4	100.0%	0	0	2	0
Community Services	Ryedale Team	Comm Services	22.0	-3.8%	1.8%	£0	£0	94.9%	90.9%	11	100.0%	0	0	0	0
	Scarborough Hub	Comm Services	60.5	13.5%	9.8%	£14,530	£1,847	88.3%	79.1%	0	NS	0	0	1	2
	Whitby Community Nurses	Comm Services	29.5	11.1%	4.5%	£1,103	£0	93.3%	100.0%	0	NS	0	0	0	0
	Pocklington Nurses	Comm Services	18.9	2.1%	3.0%	£1,951	£0	83.0%	100.0%	0	NS	0	0	1	0

Points of Note:

Complaints - Zero figures indicate at least one complaint was made but not upheld. Figures above zero indicate these complaints were either Upheld or Partly Upheld. These incur a Red flag.

Active Caseload - patients seen at least once for treatment within the team. ER Adult Teams do not have the local authority staffing numbers included.

No returns for clinical supervision will incur a Red Flag

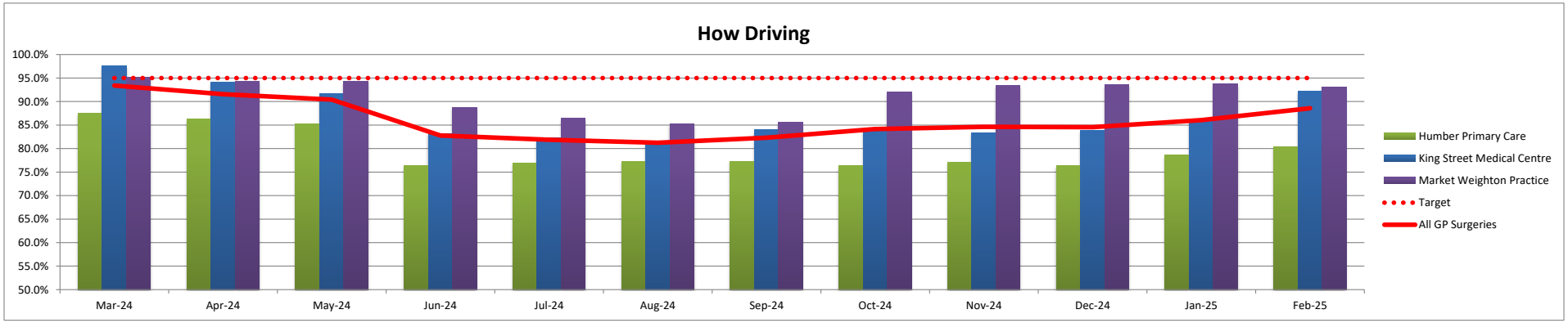
FFT % results based on the number of responses received with a satisfactory outcome

Waiting Assessment - Total number of patients not seen for assessment

Quality Dashboard

All GP Surgeries - Overall QOF Results

Reporting Month February 2025



	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Trend
Humber Primary Care	490.9 / 561	483.9 / 561	478.1 / 561	428.5 / 561	431.7 / 561	433.5 / 561	433.8 / 561	428.1 / 561	432.7 / 561	428.1 / 561	441.2 / 561	451.4 / 561	
QOF Predicted (How Driving)	87.5%	86.3%	85.2%	76.4%	77.0%	77.3%	77.3%	76.3%	77.1%	76.3%	78.6%	80.5%	
King Street Medical Centre	547.2 / 561	528.2 / 561	514.1 / 561	467.0 / 561	461.4 / 561	455.4 / 561	471.2 / 561	471.8 / 561	467.9 / 561	470.4 / 561	481.0 / 561	517.1 / 561	
QOF Predicted (How Driving)	97.5%	94.2%	91.6%	83.2%	82.2%	81.2%	84.0%	84.1%	83.4%	83.9%	85.7%	92.2%	
Market Weighton Practice	534 / 561	529.1 / 561	529.3 / 561	497.8 / 561	484.8 / 561	478.4 / 561	480.3 / 561	516.4 / 561	523.7 / 561	524.8 / 561	526.0 / 561	522.1 / 561	
QOF Predicted (How Driving)	95.2%	94.3%	94.3%	88.7%	86.4%	85.3%	85.6%	92.0%	93.4%	93.5%	93.8%	93.1%	
All GP Surgeries	93.4%	91.6%	90.4%	82.8%	81.9%	81.2%	82.3%	84.2%	84.6%	84.6%	86.0%	88.6%	
Number of GP Practices	3	3	3	3	3	3	3	3	3	3	3	3	

Humber Teaching
NHS Foundation Trust

Divisional General Managers

Children's and Learning Disability : Justine Rooke
Primary Care and Community Services : Matthew Handley
Mental Health Services Planned : Sarah Bradshaw
Mental Health Services Unplanned : Adrian Elsworth
Specialist Services : Paula Phillips