

Financial Year
2024-25

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:

Dec-24

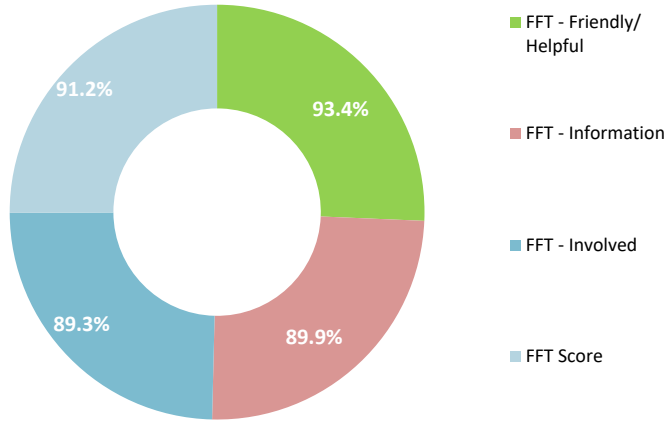
Chief Executive: Michele Moran

Prepared by: Business Intelligence Team

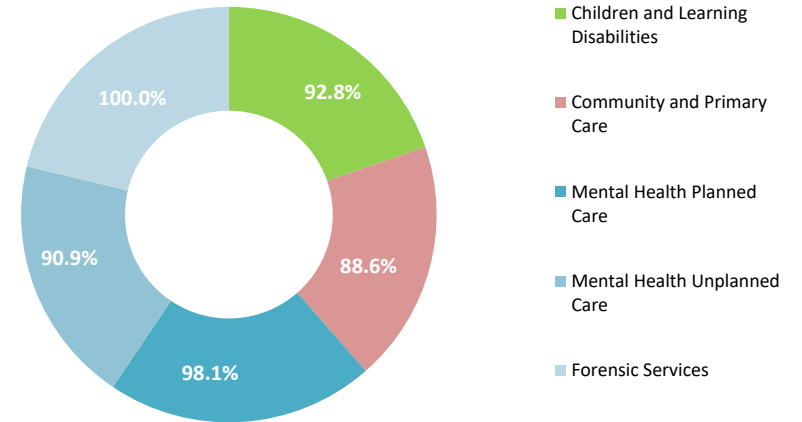
Caring, Learning and Growing



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

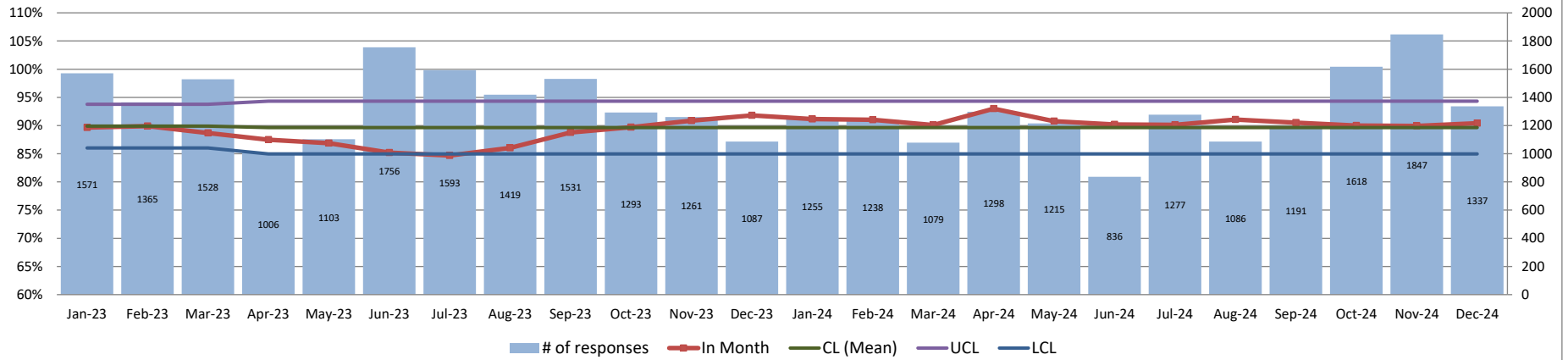
68.4%

Quality Dashboard

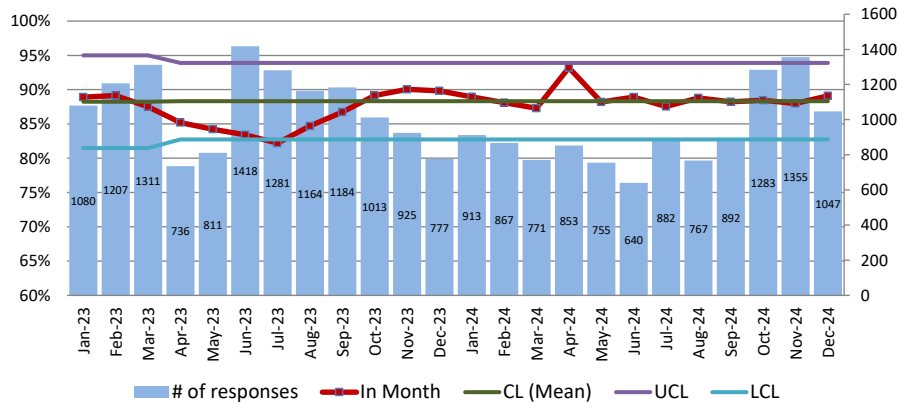
Section 1.1.1 Patient / Carer Experience - Trustwide / GP / Non GP Services

Friends and Family

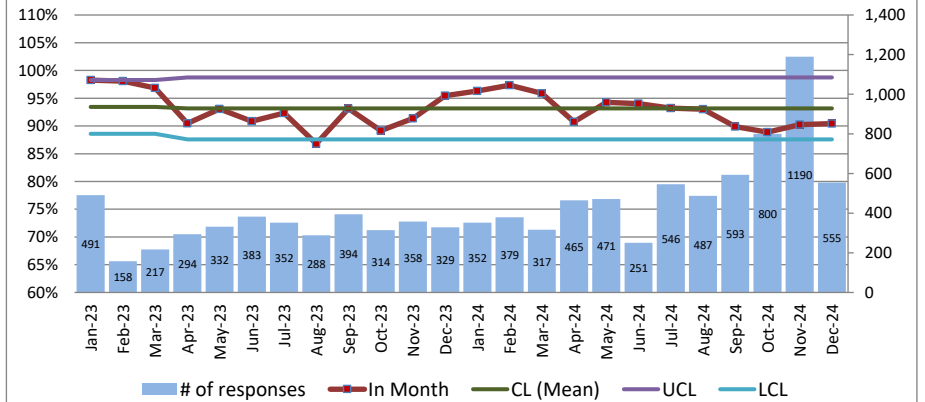
Friends & Family Patient (Trustwide)



Friends & Family Patient (GP's)



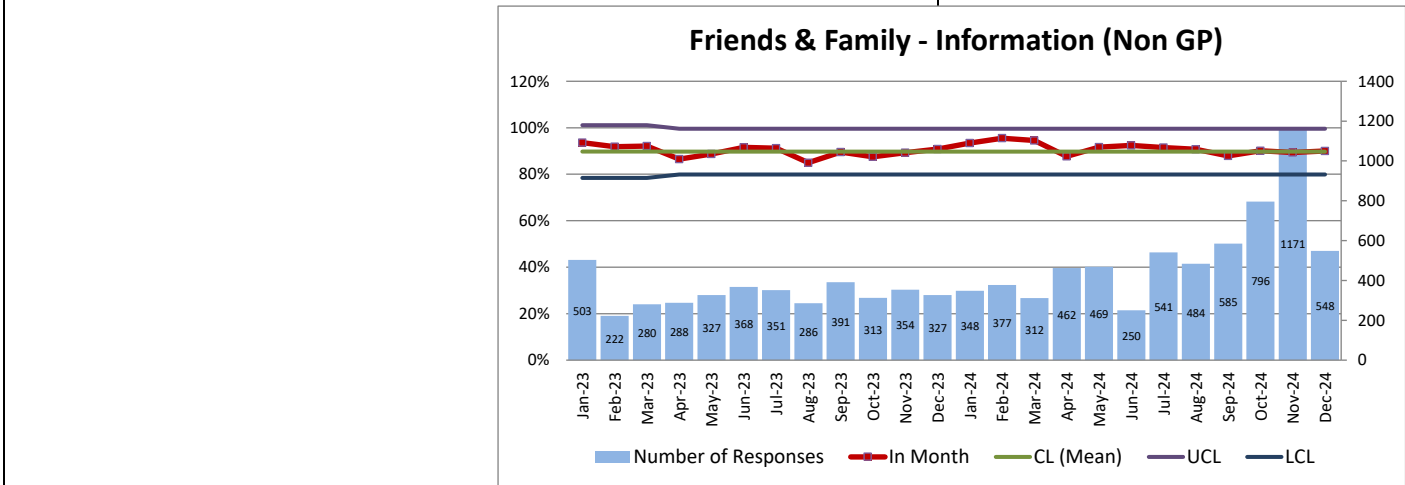
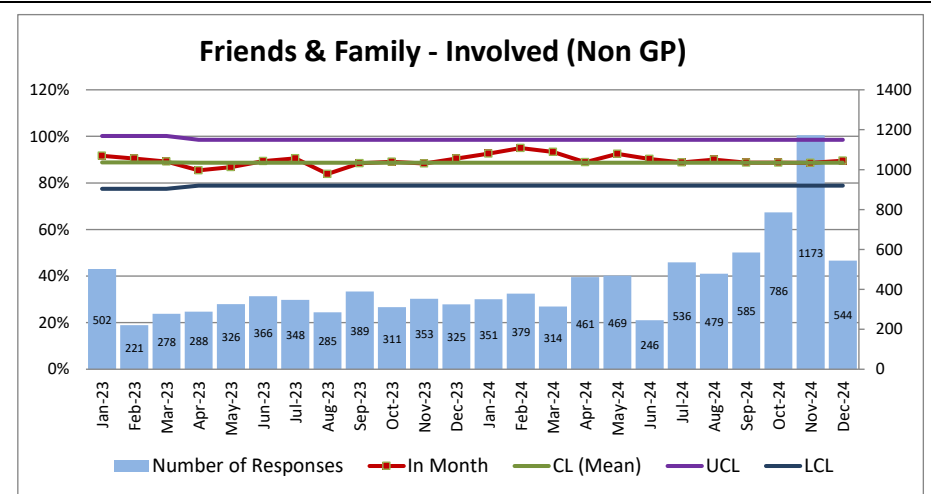
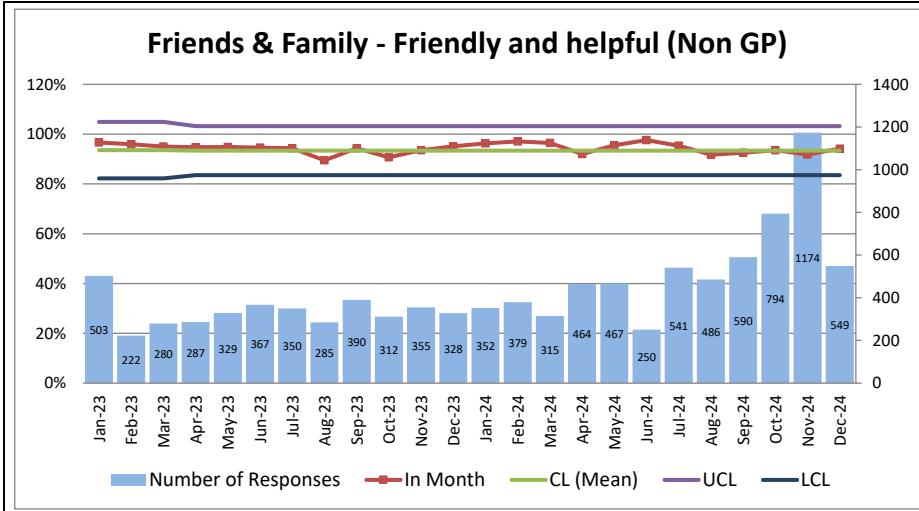
Friends & Family Patient (Non GP's)



Quality Dashboard

Section 1.1.2 Patient / Carer Experience - Core Questions (Non GP Services)

Friends and Family

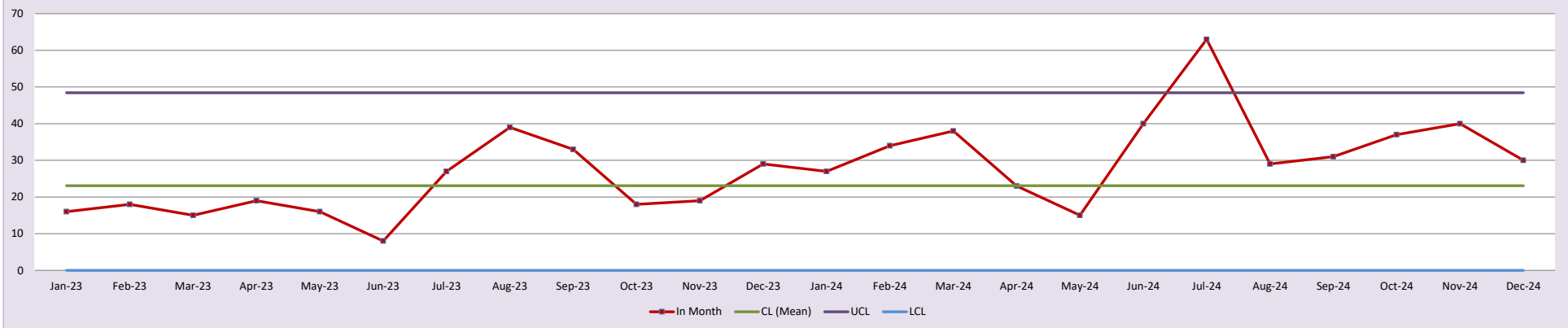


Quality Dashboard

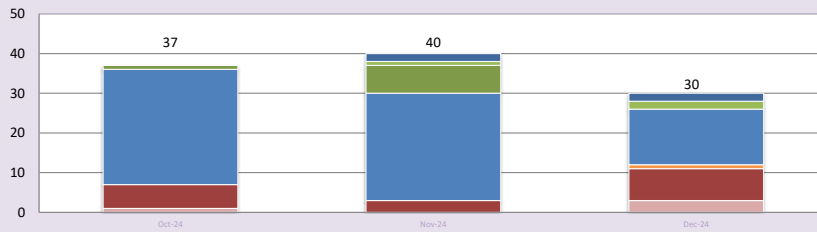
Section 1.2 Patient / Carer Experience

Overall Trust Position

Compliments Received (24 month rolling period)



Compliments by Theme



	Oct-24	Nov-24	Dec-24
Access to care	0	2	2
Admission and Discharge	0	0	0
Appointments	0	0	0
Carer involvement	0	1	2
Communications	0	0	0
End of Life Care	1	7	0
Facilities	0	0	0
Patient Care/Treatment	29	27	14
Prescribing	0	0	1
Privacy, dignity and wellbeing	0	0	0
Trust admin policies/procedures	0	0	0
Values and Behaviours of staff	6	3	8
Waiting times	0	0	0
Other	1	0	3

Patient Experience Indicators	Oct-24	Nov-24	Dec-24
Eliminating Mixed Sex Accommodation	0	0	0
Duty of Candour Compliance	100%	100%	100%

Quality Dashboard

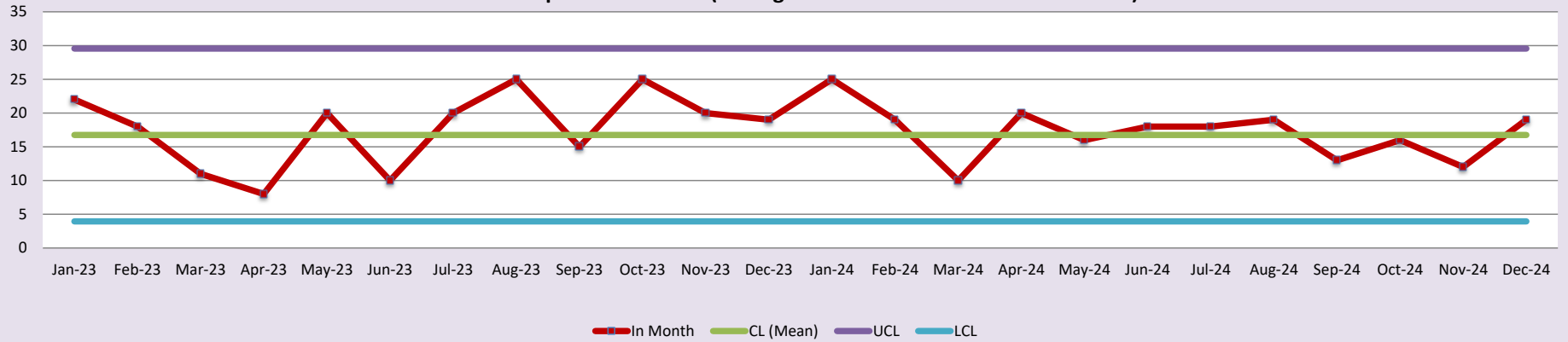
Domain

Section 1.3.1

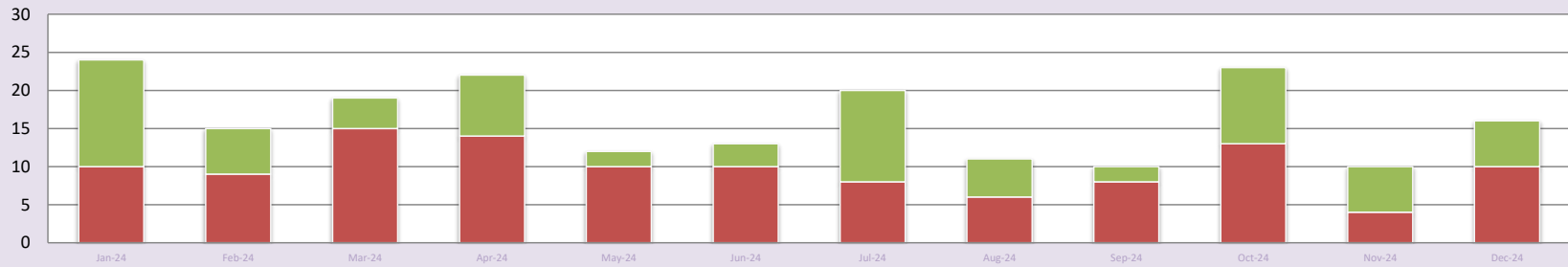
Patient / Carer Experience

Overall Trust Position

Formal Complaints Received (Rolling 24 months - Refreshed each month)



Complaints Responded To - Upheld Split (Current Year)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Complaints Not Upheld	14	6	4	8	2	3	12	5	2	10	6	6
Complaints Upheld Fully/Partly	10	9	15	14	10	10	8	6	8	13	4	10

Quality Dashboard

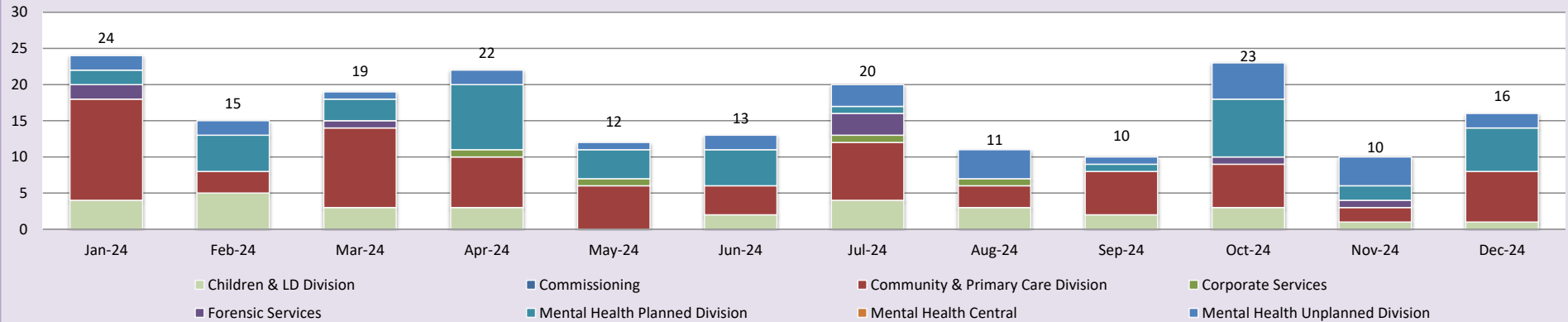
Domain

Section 1.3.1

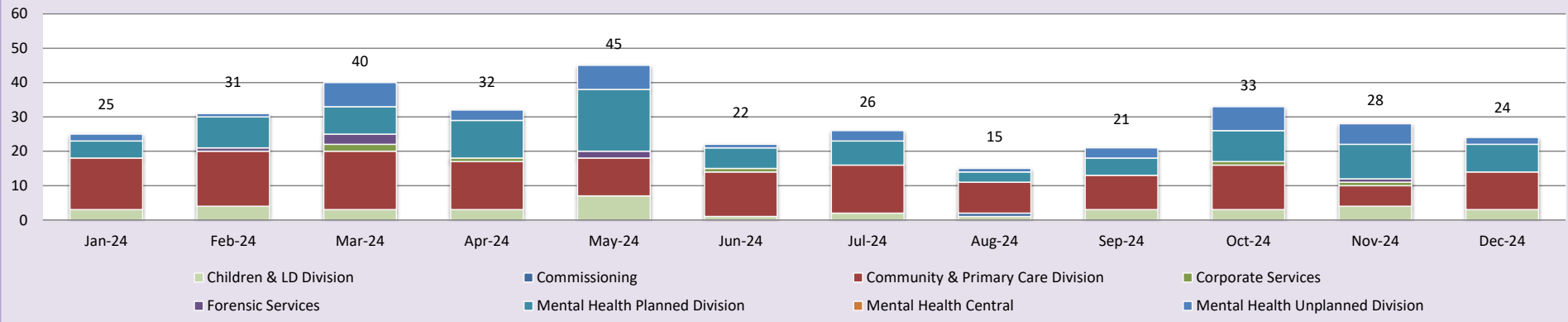
Patient / Carer Experience

Overall Trust Position

Formal Complaints Responded To - Divisional Split



Informal Complaints Responded To - Divisional Split



Withdrawn Complaints

Formal Complaints Withdrawn
Informal Complaints Withdrawn

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

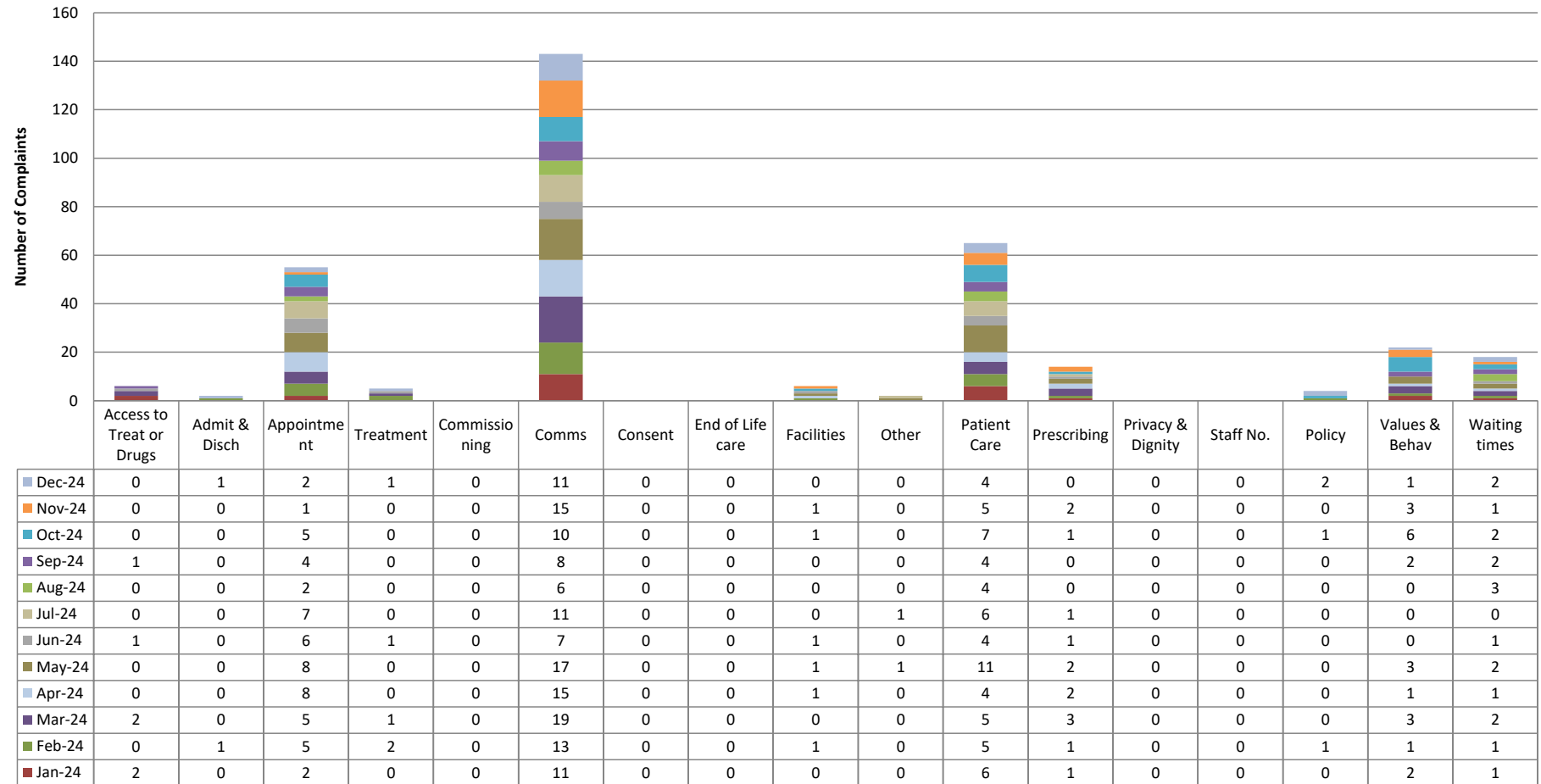
Quality Dashboard

Domain

Section 1.3.2 Complaints Themes

Overall Trust Position

Informal Complaints by Theme - Trustwide



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

	Jan-23	Feb-23	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	Rolling Total
Humber Primary Care Practice	3	0	3	2	4	0	4	3	2	8	6	2	2	0	3	1	4	0	2	1	1	1	1	3	56
Market Weighton Practice	2	0	0	0	1	0	1	1	0	0	1	0	1	1	2	3	0	2	0	1	0	3	0	1	20
Hull CMHT - Management, Non Clinical and Psychology	4	0	0	0	1	1	2	0	0	1	0	0	0	0	0	3	1	0	0	0	0	3	0	2	18
Mental Health Crisis Intervention	2	1	0	0	1	0	1	1	1	1	0	2	1	0	0	1	1	0	1	0	0	0	1	1	16
King Street Medical Centre	0	1	0	0	0	0	0	0	0	0	0	0	2	0	3	0	2	0	1	0	3	0	0	0	12
Hull CMHT - Clinical	2	0	0	0	0	0	0	0	1	0	1	0	0	1	2	3	0	0	0	0	0	1	0	0	11
Westlands Unit Nursing	0	0	1	0	0	0	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	1	1	0	6
Beverley and Haltemprice OP CMHT	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	1	0	2	5
Community Core Team - Rivendell	0	0	0	1	0	0	0	1	0	1	0	0	0	1	1	0	0	0	0	0	0	0	0	0	5
Scarborough Core	0	0	0	1	0	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	5
Hull and East Riding CAMHS	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	4
Neuro Front Door	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	0	1	0	0	4
Specialist Psychotherapy Service	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	4
Whitby Core	0	1	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	4
CAMHS Crisis	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	3
Hull Community Learning Disability	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	3
Humber - Recovery Support Team - EIP	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	3
Avondale - Wards	0	0	0	0	0	0	2	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	0	0	1	0	0	0	1	0	0	0	0	0	0	2
CYP Autism and ADHD Service	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
ER Talking Therapies	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2
Facilities Management	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	2
Haltemprice Mental Health	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2
Hull and ER - Triage and Assessment	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	2
Mill View Court Adult	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	2
Miranda House - PICU	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	2
Newbridges Residential Unit	0	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Pocklington Core	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0	0	2
Total	14	6	5	5	9	2	13	9	5	14	9	6	7	7	14	13	10	8	7	4	7	13	4	10	201

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

	Jan-23	Feb-23	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	Rolling Total
Humber Primary Care Practice	14	8	8	9	1	7	5	15	9	11	7	7	8	4	6	5	4	7	4	7	3	8	2	7	166
Hull CMHT - Management, Non Clinical and Psychology	0	2	2	2	3	4	3	1	4	3	3	4	0	4	2	4	7	2	2	3	4	4	7	3	73
King Street Medical Centre	1	2	1	1	1	3	0	1	1	4	3	2	1	9	6	4	4	3	3	1	3	0	2	3	59
Market Weighton Practice	3	1	4	3	1	4	1	1	4	2	2	1	3	1	4	3	3	2	4	1	3	5	0	1	57
Mental Health Crisis Intervention	2	0	1	3	0	7	4	3	0	2	2	2	1	0	6	2	3	0	0	0	2	4	4	0	48
Hull CMHT - Clinical	0	0	0	1	2	3	1	0	1	1	0	0	2	1	3	3	5	2	3	0	1	1	1	1	32
CYP Autism and ADHD Service	0	2	4	1	4	3	1	0	0	0	0	1	1	1	1	0	1	0	0	0	1	0	0	0	21
Community Core Team - Rivendell	1	2	0	0	0	0	2	1	1	1	0	0	1	1	0	1	1	0	0	0	0	0	0	1	13
ER Talking Therapies	0	0	0	0	0	0	1	0	1	1	0	1	0	3	3	0	2	0	0	0	0	0	0	0	12
Neuro Front Door	0	0	1	0	1	1	0	0	0	1	2	0	0	1	0	1	1	0	0	0	0	1	0	0	10
Hull and East Riding CAMHS	1	1	1	0	0	0	0	1	0	1	0	0	0	0	0	1	1	1	0	0	0	0	1	0	9
Scarborough Core	0	0	1	0	1	1	0	0	1	0	0	0	0	2	0	1	0	0	0	0	1	0	1	0	9
Avondale - Wards	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	1	0	2	8
Hull and ER - Triage and Assessment	0	0	0	0	1	0	0	0	0	1	1	0	0	0	0	0	1	0	1	0	0	1	1	1	8
Facilities Management	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	1	0	1	0	0	0	1	1	0	7
Haltemprice Mental Health	0	0	0	0	0	1	0	0	0	1	0	1	1	0	0	0	0	0	1	0	0	0	1	1	7
Mill View Court Adult	0	1	2	0	0	0	0	2	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	7
Goole Mental Health	1	0	0	1	0	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	6
Childrens S< Hull & East Riding Service	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	5
Humber Centre - Swale	0	1	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5
Pine View	1	1	0	0	0	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	0	5
Specialist Psychotherapy Service	1	0	0	0	0	0	0	0	0	0	0	2	0	0	0	1	0	0	0	0	0	0	1	0	5
Westlands Unit Nursing	0	0	0	1	0	0	1	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5
Beverley Mental Health	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	4
Bridlington & Driffield Mental Health	0	0	0	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	4
Holderness Mental Health	0	1	0	0	0	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	0	4
0-19 Health Visitors & School Nurses - East Riding North	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	3
East Riding Community Learning Disability	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	3
East Riding Core CAMHS	0	0	0	0	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Hull Integrated Care Team for Older People	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	0	3
Humber - Recovery Support Team - EIP	0	1	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	3
Lot 2 ER Specialist Clinical	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	3
Mental Health Liaison Service	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	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

	Jan-23	Feb-23	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	Rolling Total
Newbridges Residential Unit	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	0	3
PCN CMHT East Riding	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	3
CAMHS Contact Point	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2
Complex Emotional Needs Service	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Crisis and Intervention for Older People	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	2
Early Intervention Contact Point	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2
Forensic Management	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2
Hull Community Learning Disability	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2
Hull Older Peoples MH Memory Services	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	2
Humber Centre - Derwent	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2
Humber Centre - Ouse	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2
Humber Centre - Ullswater	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2
Inspire Multi-Disciplinary	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Maister Lodge Nursing	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2
Malton Ward	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	2
Recovery College	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2
STaRS Ward	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
Whitby UTC	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Whitby Ward	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2
Total	28	24	31	27	20	40	21	30	27	33	22	26	22	29	37	30	41	22	23	14	21	32	27	23	650

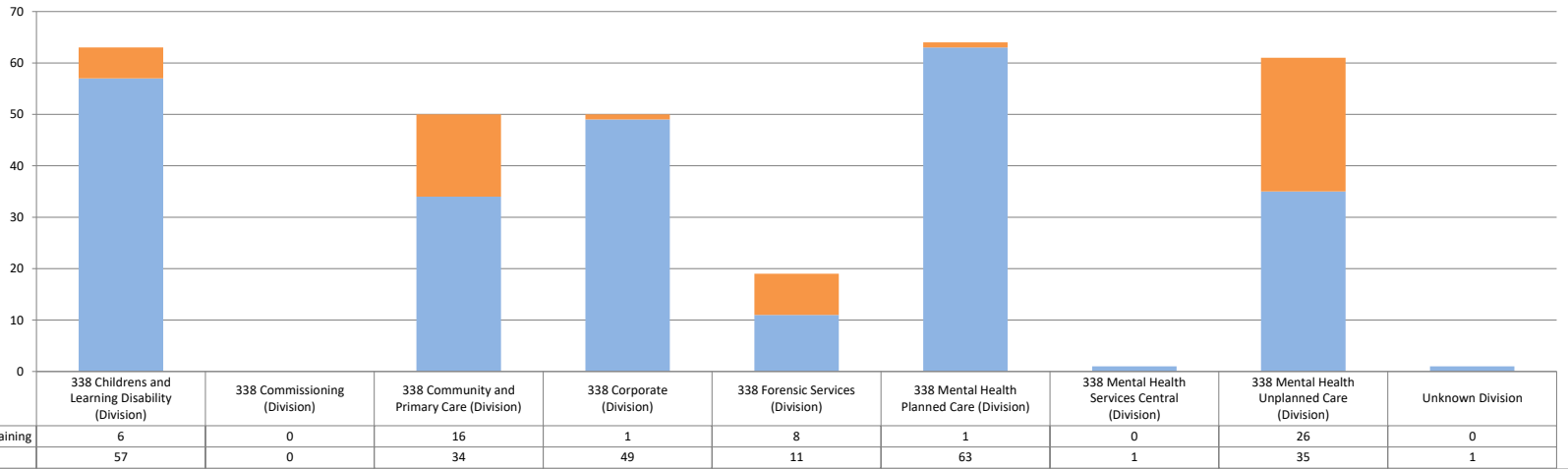
Quality Dashboard

Domain

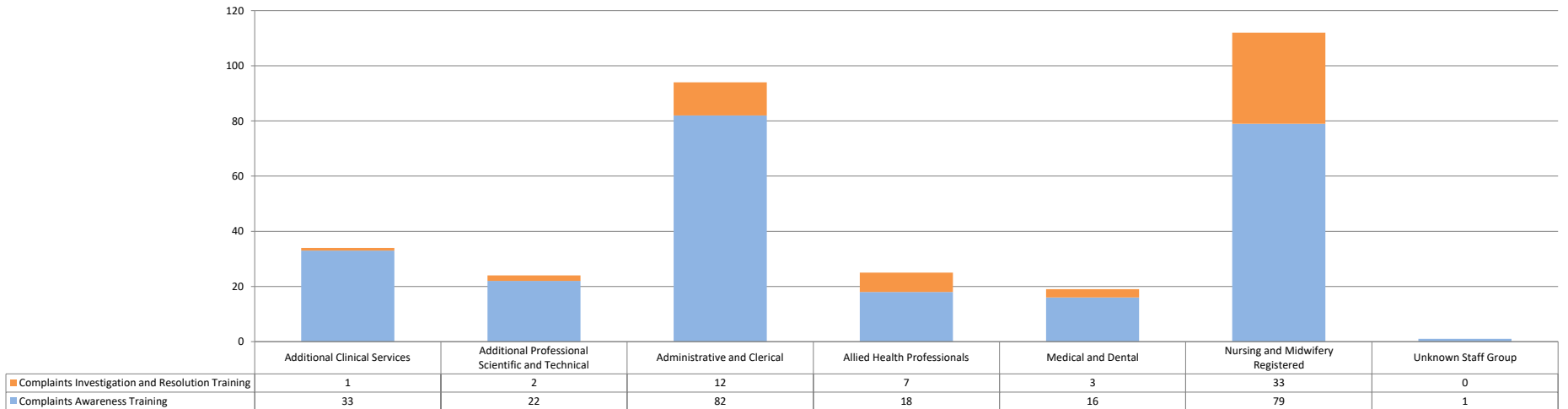
Section 1.3.5 Complaints Training

12 months rolling data

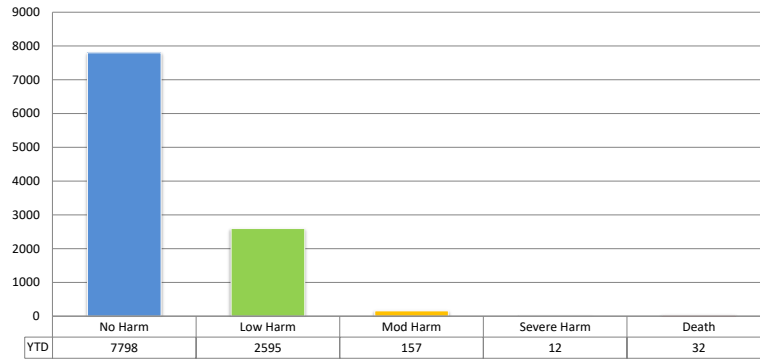
Complaints Training Completed by Course Type and Division



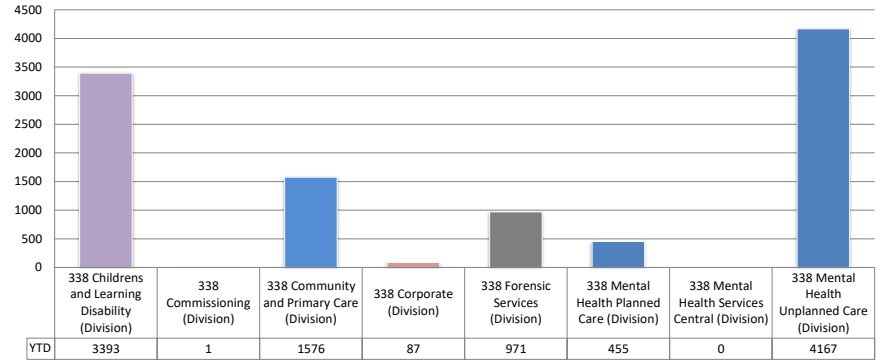
Complaints Training Completed by Course Type and Staff Group



Category of Harms Severity - Year to Date



Incidents by Division - Year to Date



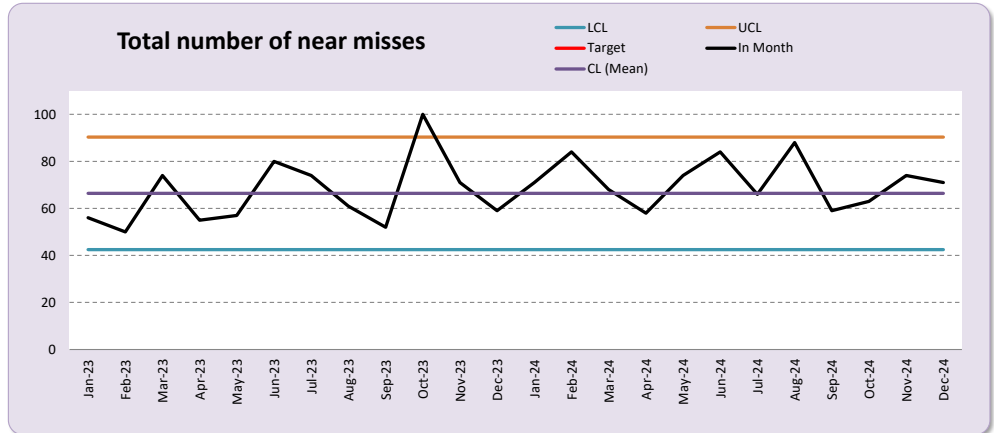
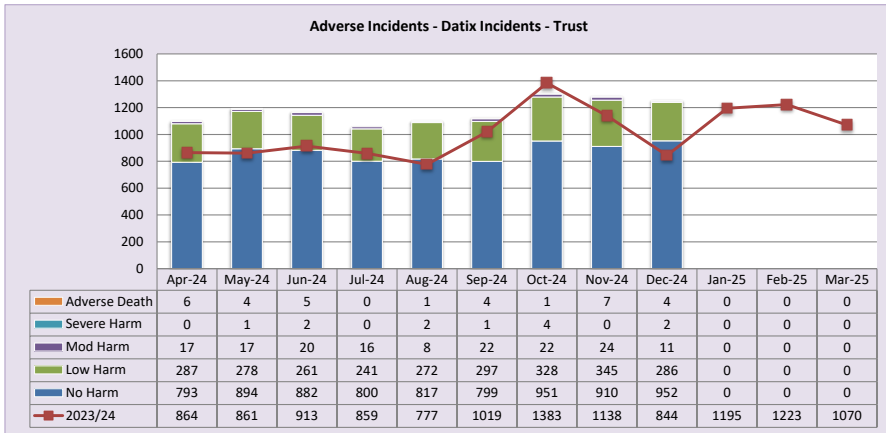
Quality Dashboard

Domain

Section 2.1

Clinical Risk

Overall Trust Position

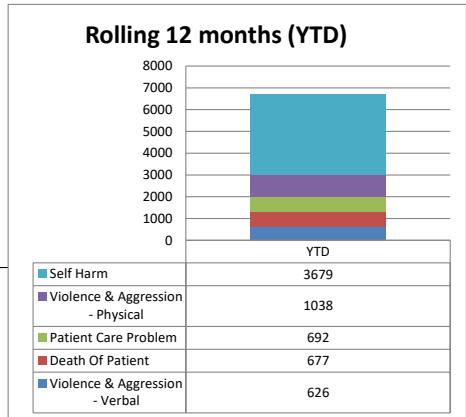
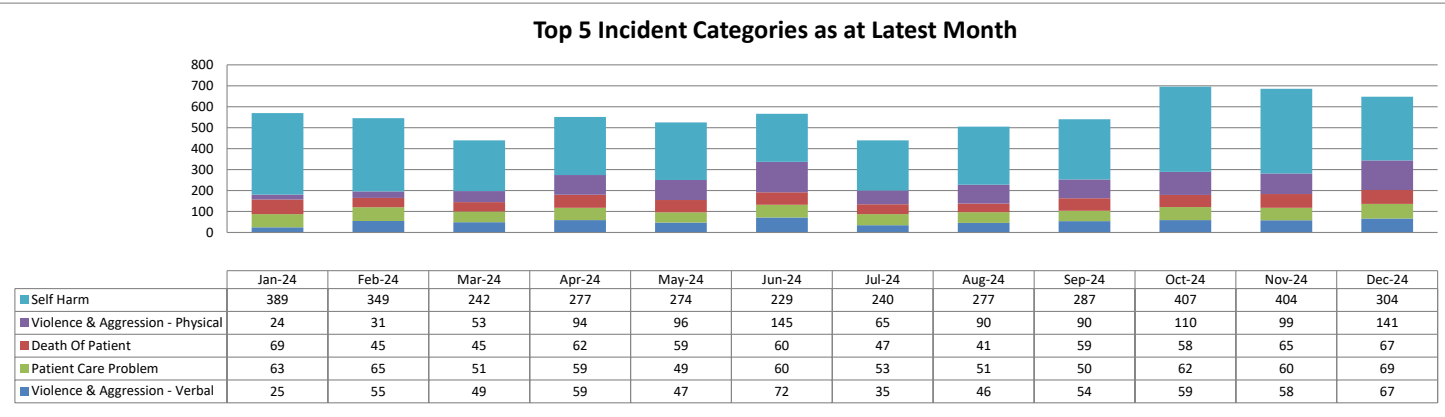


National Safety Alerts : Central Alert System (CAS)

	Nov-24	Dec-24
Number issued in month	0	1
Number applicable to HTFT	0	1
Number open pending action	0	0
Number closed in the month	0	1
Number of breaches	0	0

Incident Analysis

	Nov-24	Dec-24
Never Events	0	0
% of Harm Free Care	99.3%	99.4%
% of incidents that resulted in Severe Harm or Death	0.5%	0.5%



Quality Dashboard

Domain

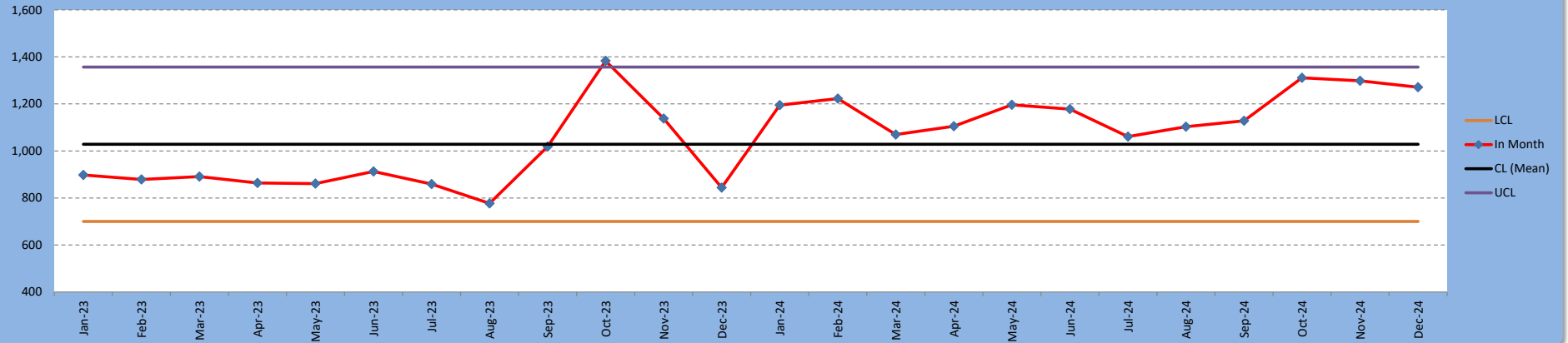
Section 2.1

Clinical Risk

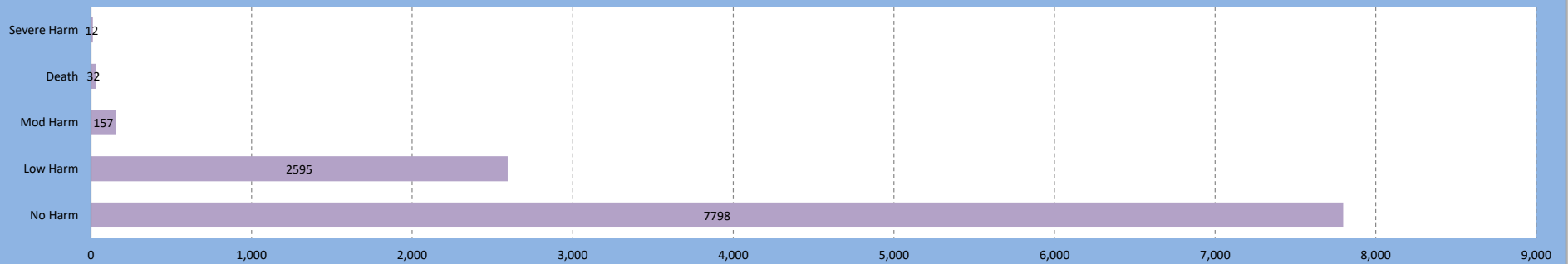
Overall Trust Position

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

Number of Total Incidents Reported



Severity of Harm (current financial year)



Quality Dashboard

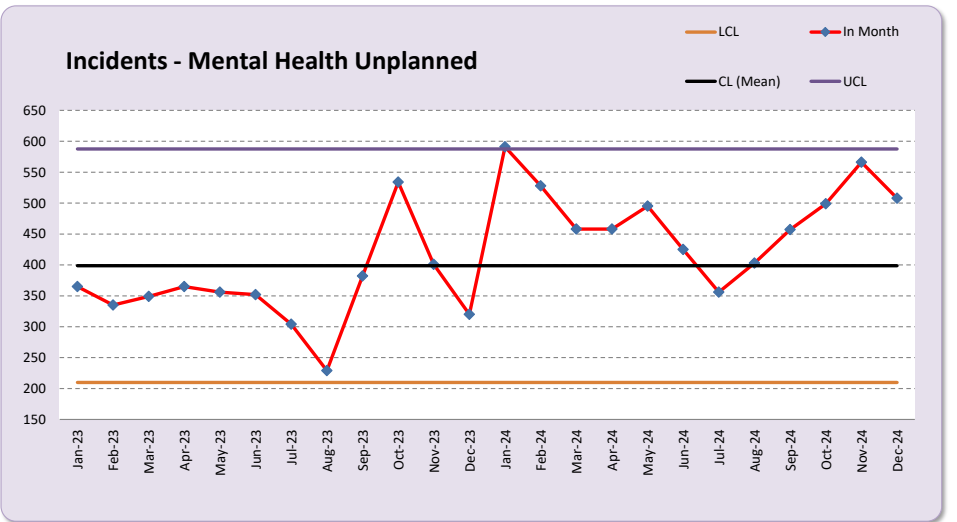
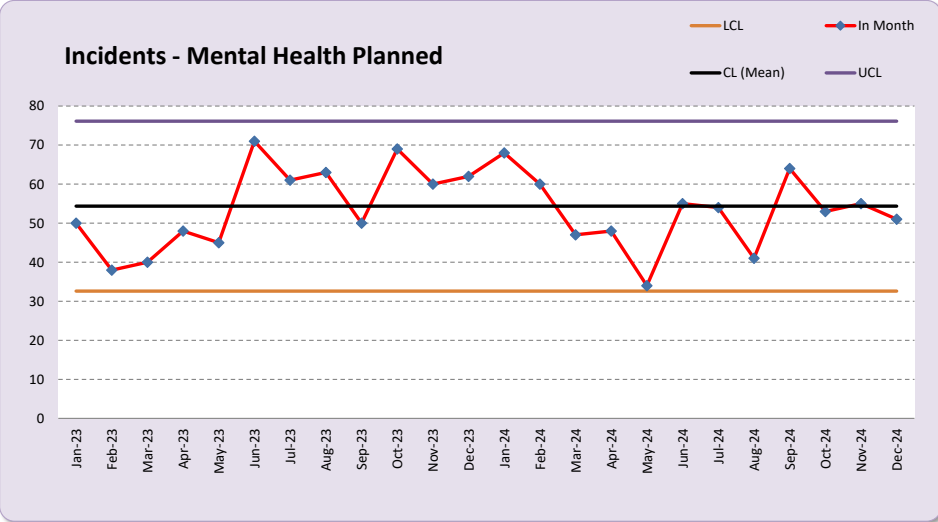
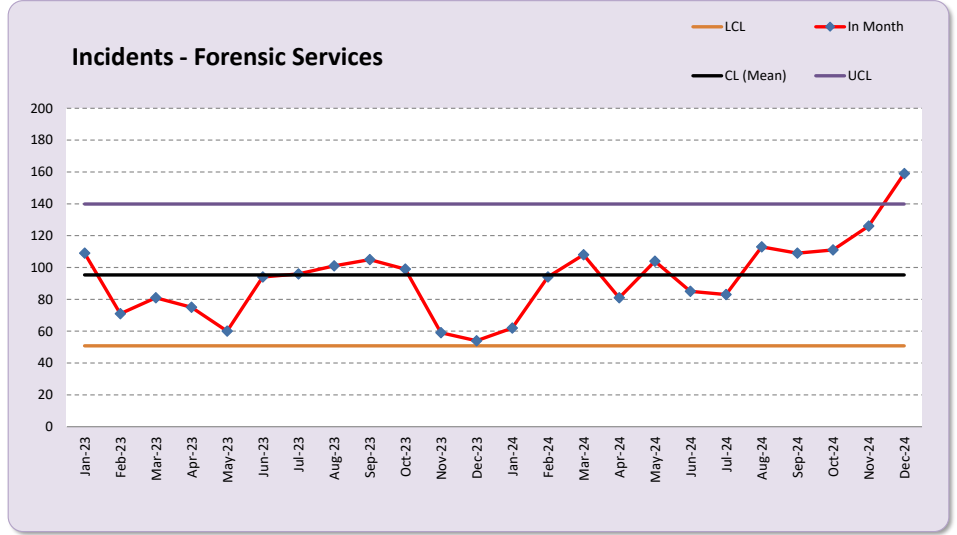
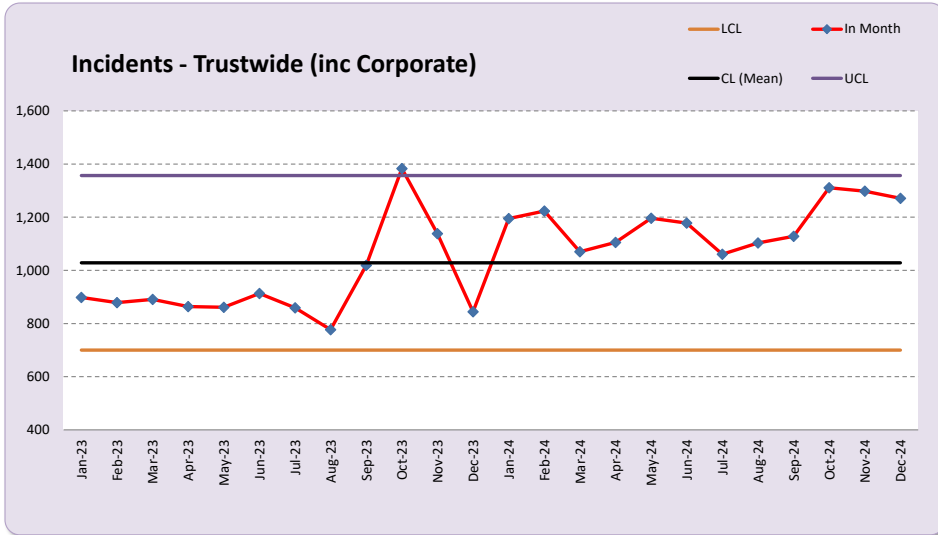
Domain

Section 2.3

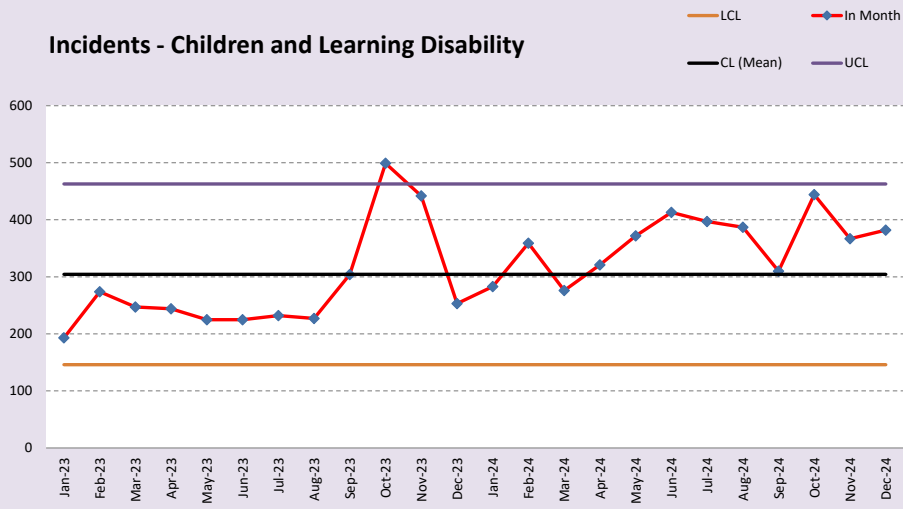
Clinical Risk

Incidents Registered by Division (Statistical Process Charts)

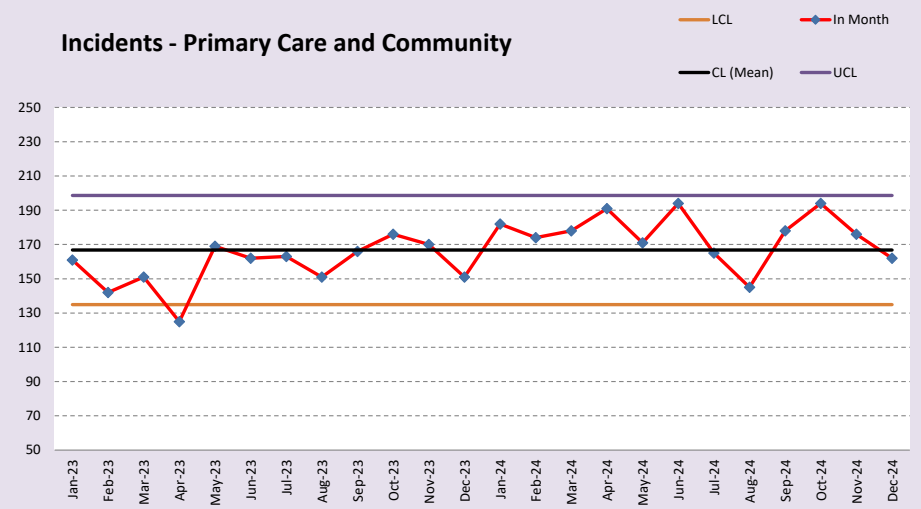
Incidents - Division SPCs



Incidents - Children and Learning Disability



Incidents - Primary Care and Community



Quality Dashboard

Domain

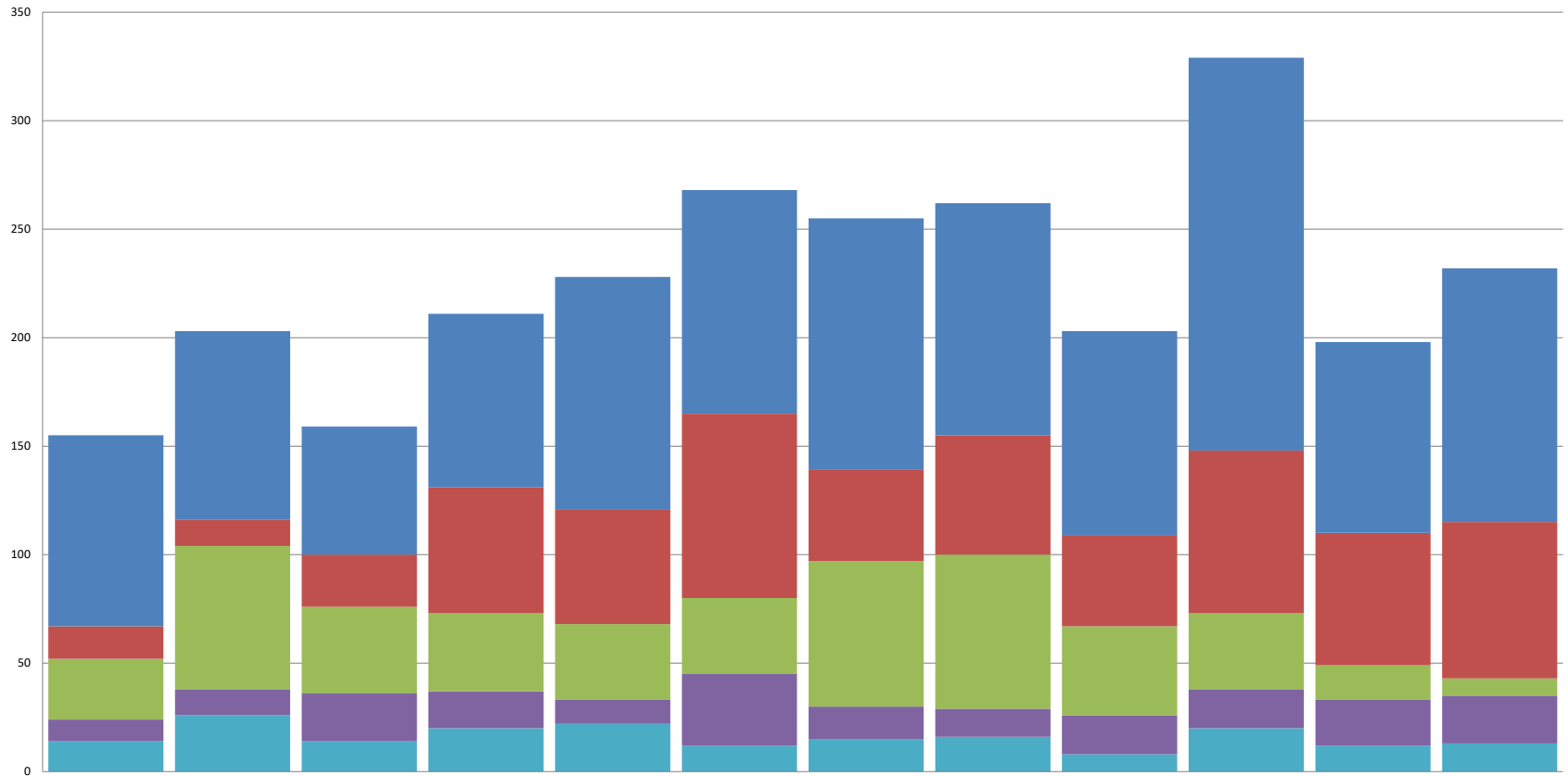
Section 2.3

Clinical Risk

Incidents by Care Group (Division) - Top 5 Categories

Incidents - Division

Childrens and Learning Disability (Division)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Self Harm	88	87	59	80	107	103	116	107	94	181	88	117
Violence & Aggression - Physical	15	12	24	58	53	85	42	55	42	75	61	72
Miscellaneous. Physical or MH Problems	28	66	40	36	35	35	67	71	41	35	16	8
Violence & Aggression - Verbal	10	12	22	17	11	33	15	13	18	18	21	22
Patient Information	14	26	14	20	22	12	15	16	8	20	12	13

Quality Dashboard

Domain

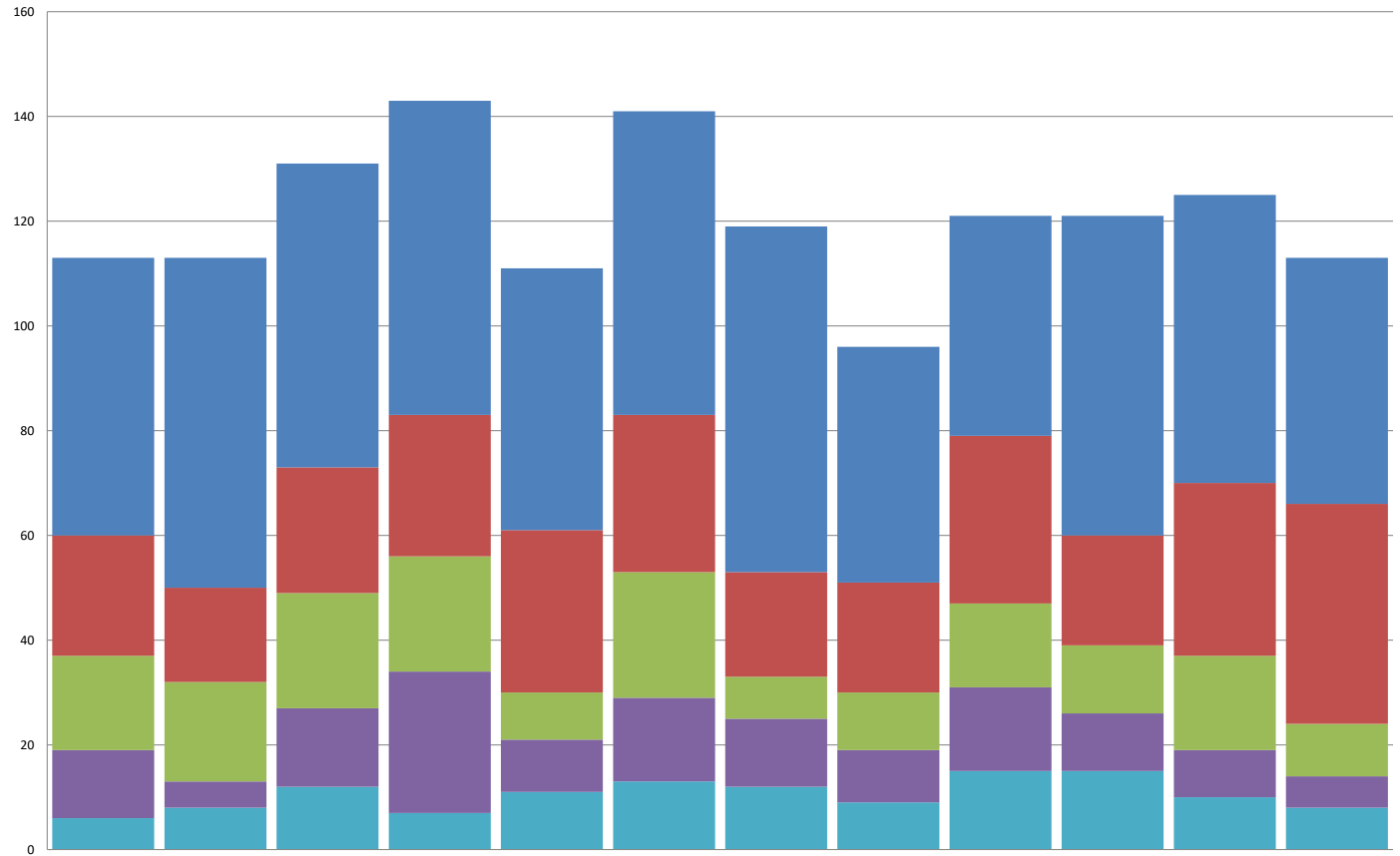
Section 2.3

Clinical Risk

Incidents by Care Group (Division) - Top 5 Categories

Incidents - Division

Community & Primary Care (Division)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
■ Pressure Ulcer	53	63	58	60	50	58	66	45	42	61	55	47
■ Death Of Patient	23	18	24	27	31	30	20	21	32	21	33	42
■ Problems with Admission / Discharge / Transfer	18	19	22	22	9	24	8	11	16	13	18	10
■ Patient Care Problem	13	5	15	27	10	16	13	10	16	11	9	6
■ Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	6	8	12	7	11	13	12	9	15	15	10	8

Quality Dashboard

Domain

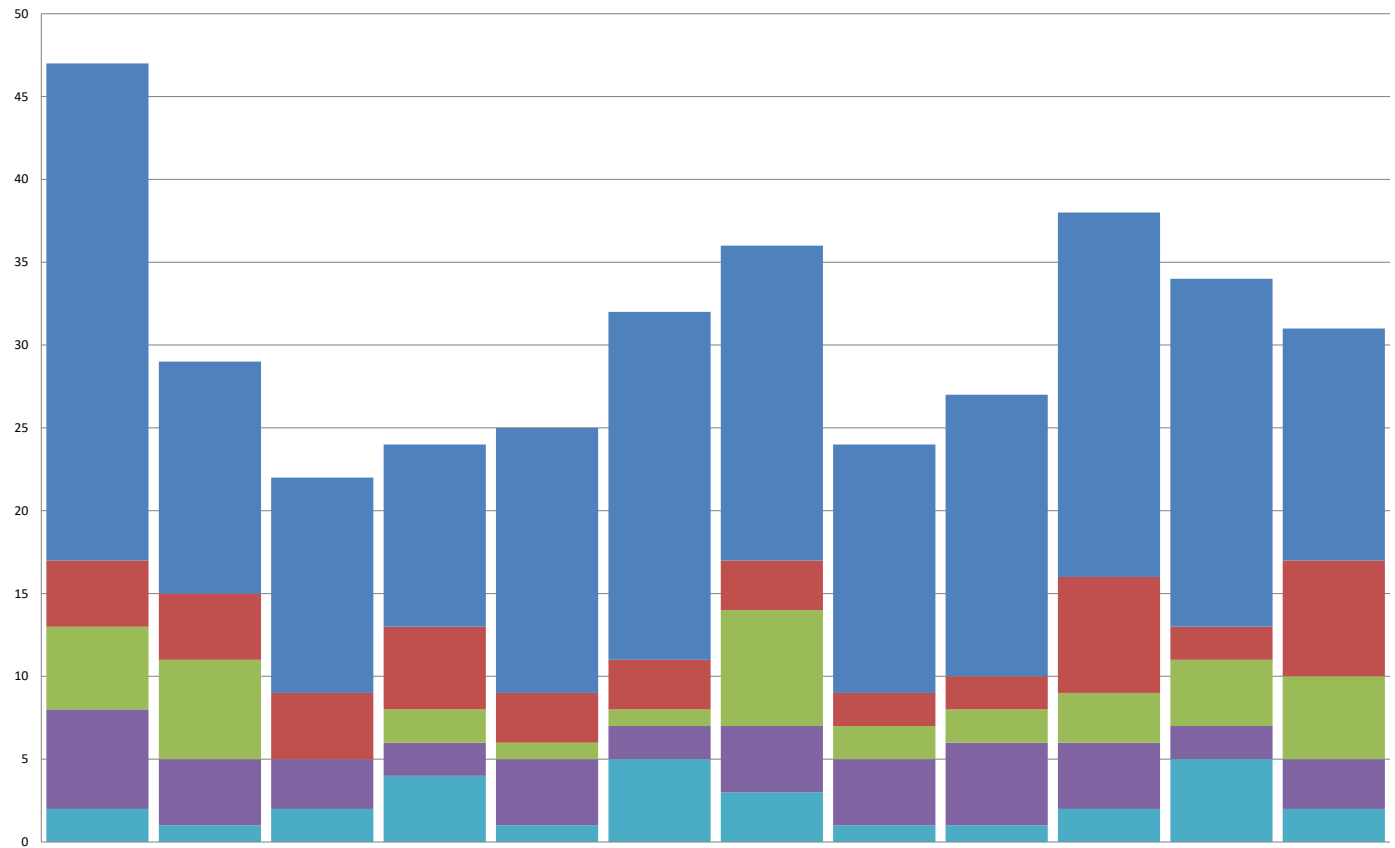
Section 2.3

Clinical Risk

Incidents by Care Group (Division) - Top 5 Categories

Incidents - Division

Mental Health Planned (Division)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Death Of Patient	30	14	13	11	16	21	19	15	17	22	21	14
Concern for Person(s) (inc. Neglect / Emotional Harm)	4	4	4	5	3	3	3	2	2	7	2	7
Patient Care Problem	5	6	0	2	1	1	7	2	2	3	4	5
Patient Information	6	4	3	2	4	2	4	4	5	4	2	3
Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	2	1	2	4	1	5	3	1	1	2	5	2

Quality Dashboard

Domain

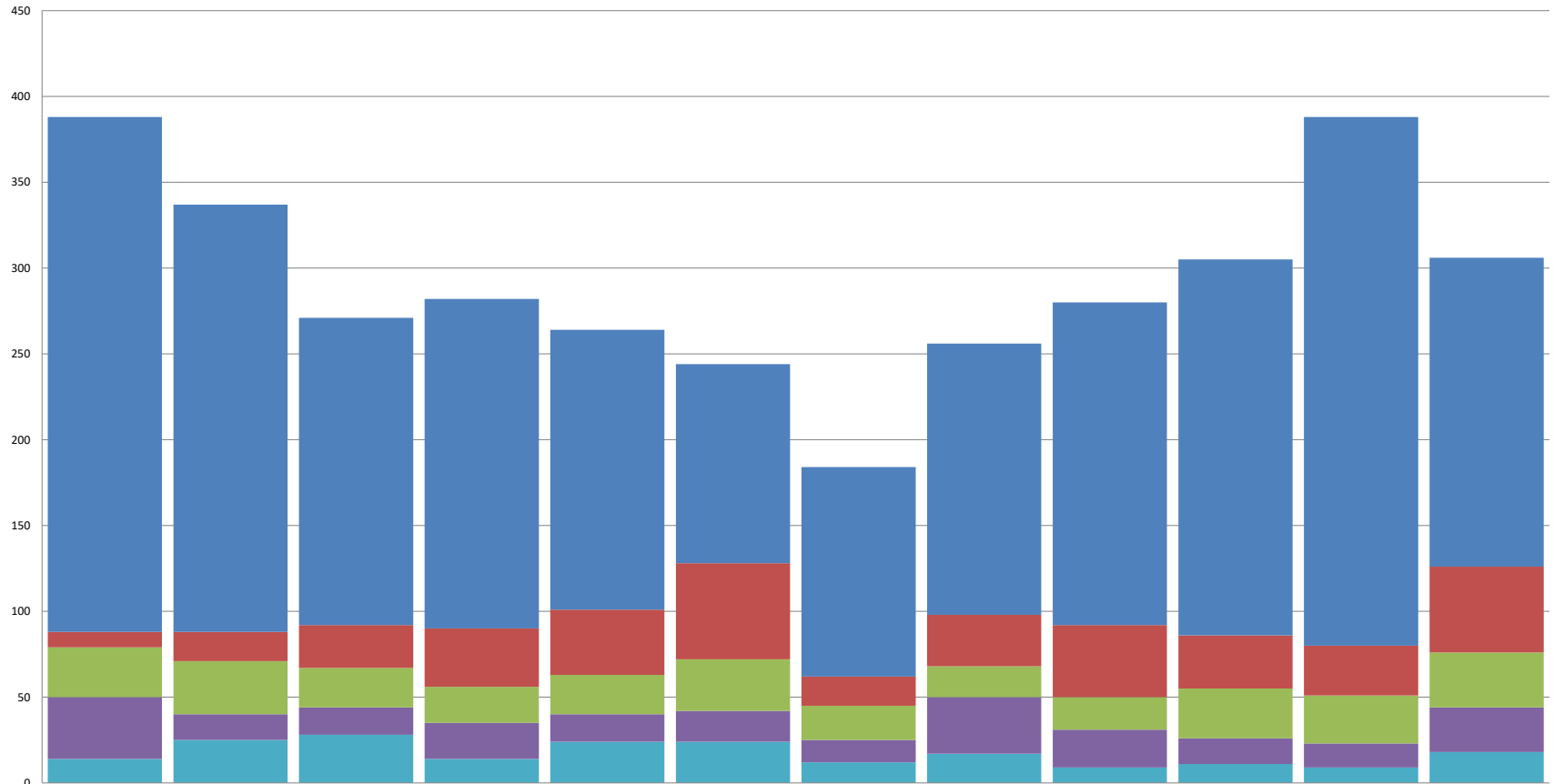
Section 2.3

Clinical Risk

Incidents by Care Group (Division) - Top 5 Categories

Incidents - Division

Mental Health Unplanned (Division)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Self Harm	300	249	179	192	163	116	122	158	188	219	308	180
Violence & Aggression - Physical	9	17	25	34	38	56	17	30	42	31	29	50
Patient Care Problem	29	31	23	21	23	30	20	18	19	29	28	32
Inappropriate behaviour (not violent)	36	15	16	21	16	18	13	33	22	15	14	26
Violence & Aggression - Non-Physical	14	25	28	14	24	24	12	17	9	11	9	18

Quality Dashboard

Domain

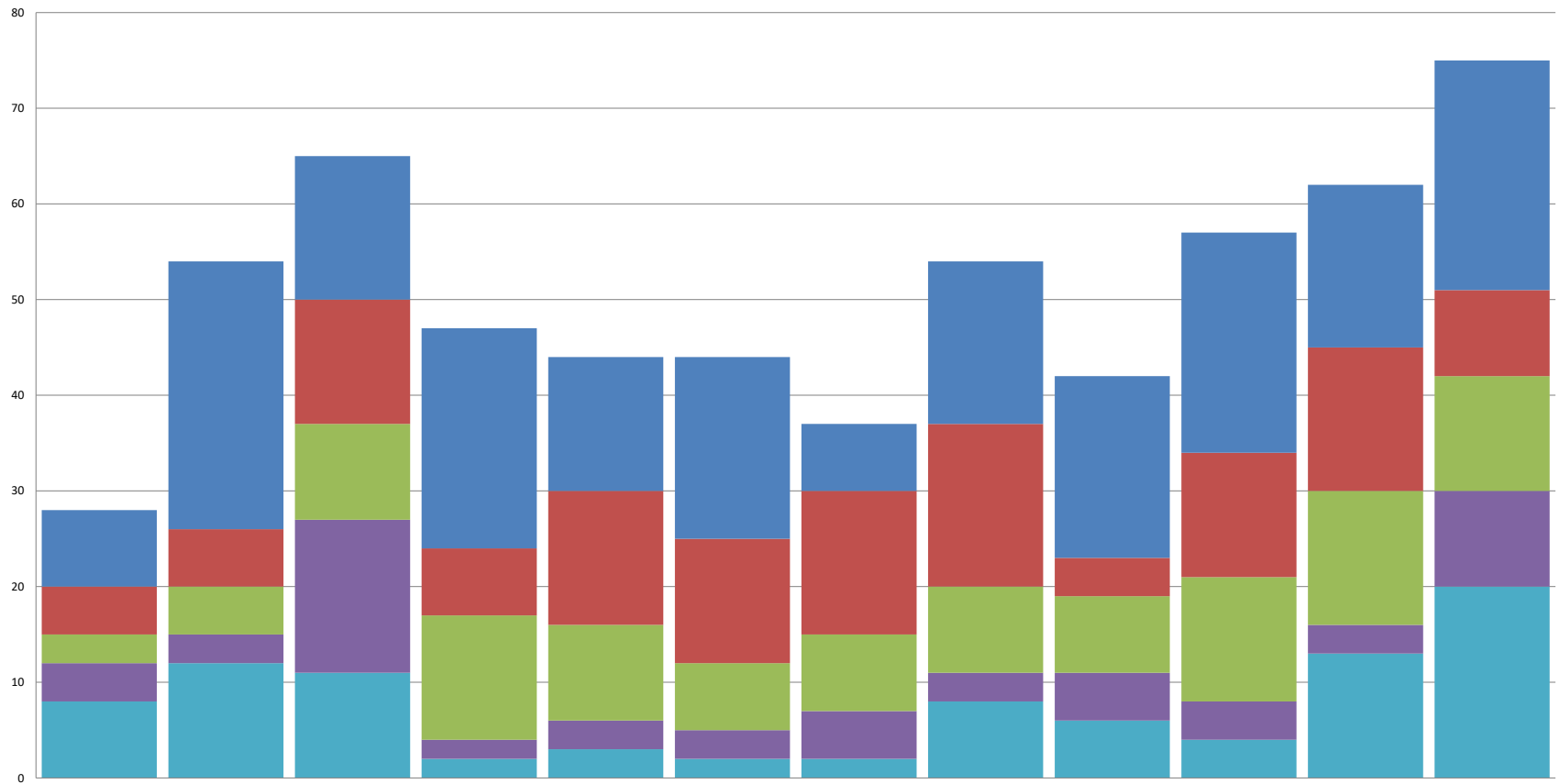
Section 2.3

Clinical Risk

Incidents by Care Group (Division) - Top 5 Categories

Incidents - Division

Secure Services (Division)



	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
Violence & Aggression - Verbal	8	28	15	23	14	19	7	17	19	23	17	24
Inappropriate behaviour (not violent)	5	6	13	7	14	13	15	17	4	13	15	9
Security Incident	3	5	10	13	10	7	8	9	8	13	14	12
Staffing Level Shortage	4	3	16	2	3	3	5	3	5	4	3	10
Violence & Aggression - Non-Physical	8	12	11	2	3	2	2	8	6	4	13	20

Quality Dashboard

Domain

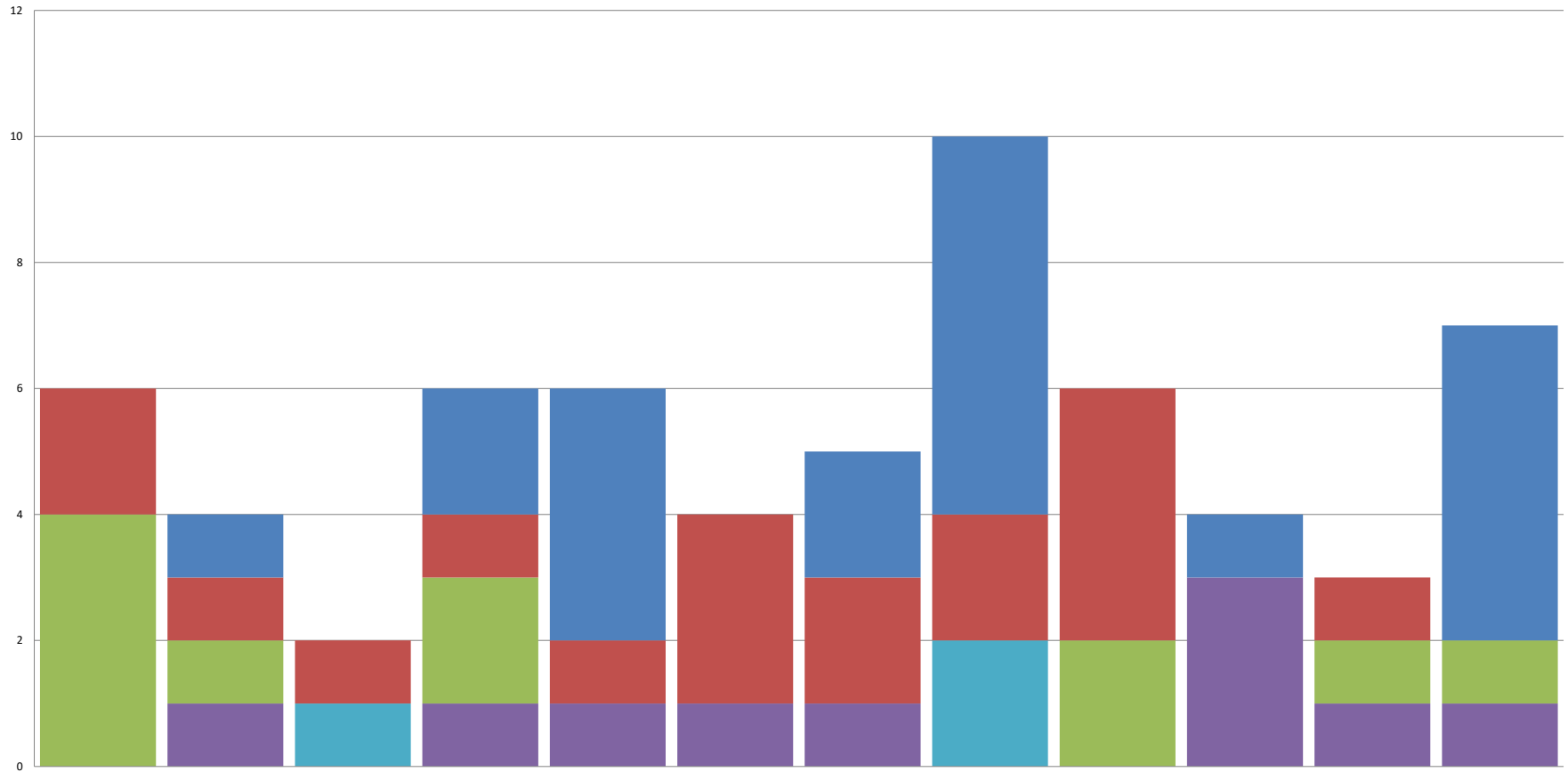
Section 2.3

Clinical Risk

Incidents by Care Group (Division) - Top 5 Categories

Incidents - Division

Corporate (Division)



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

Quality Dashboard

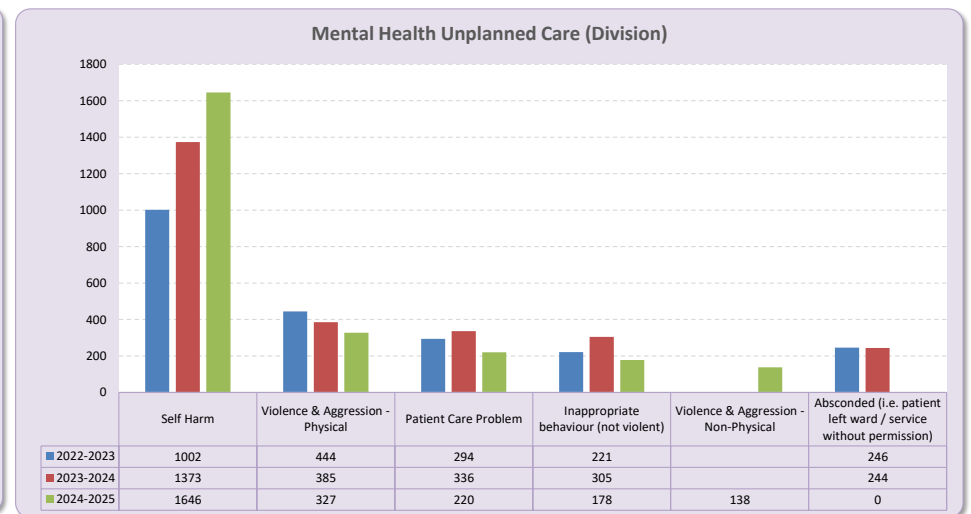
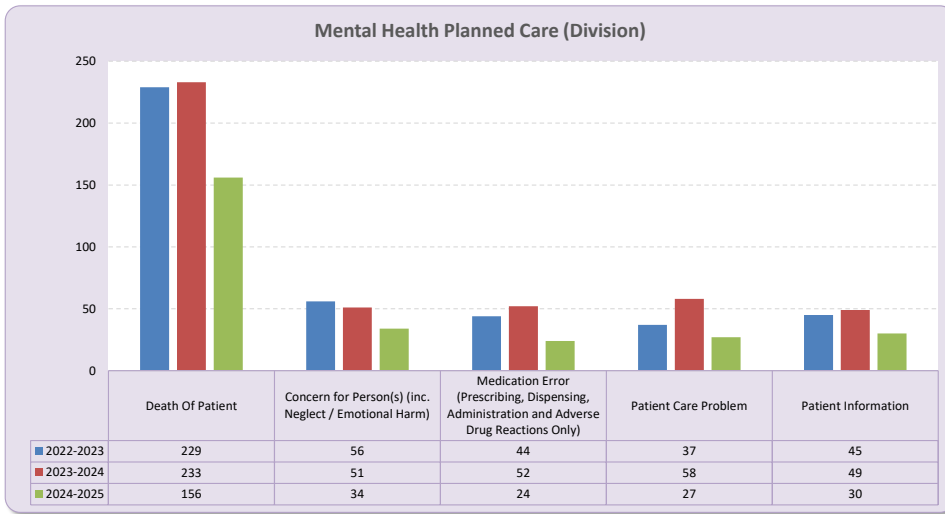
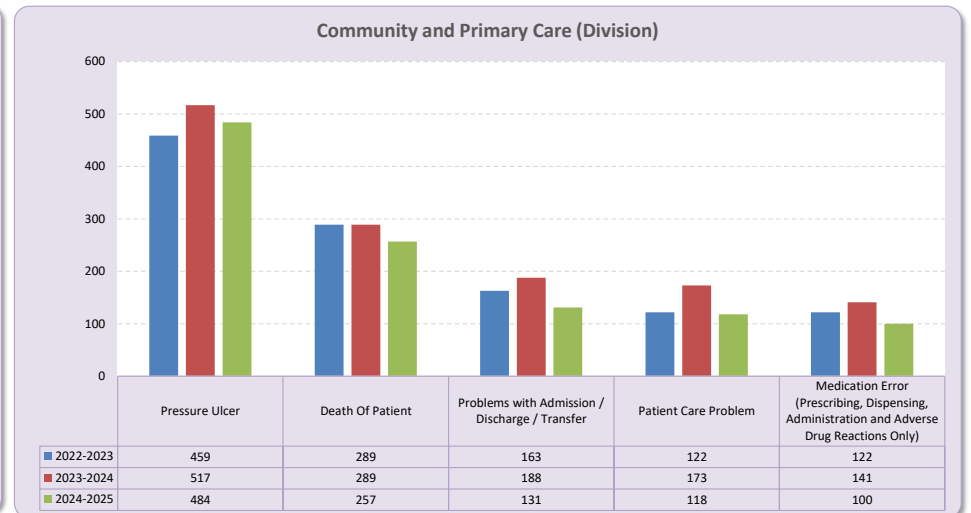
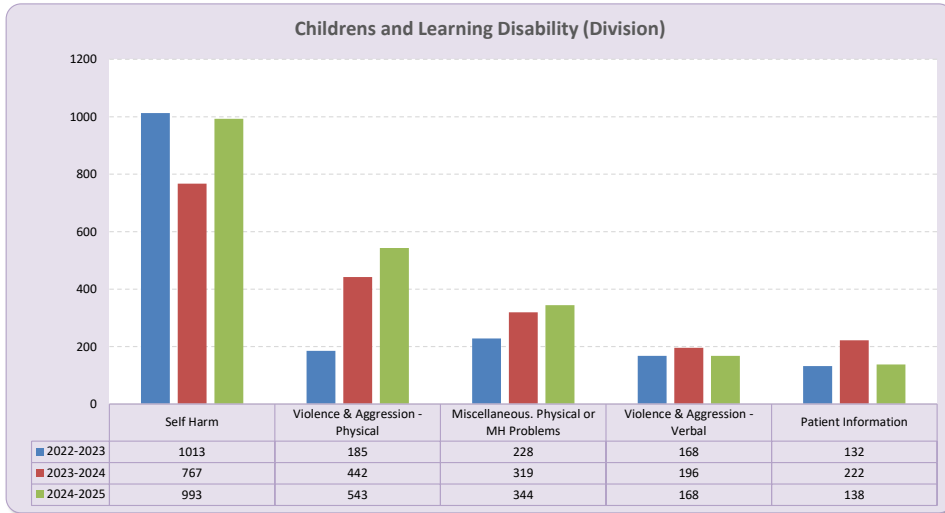
Domain

Section 2.3

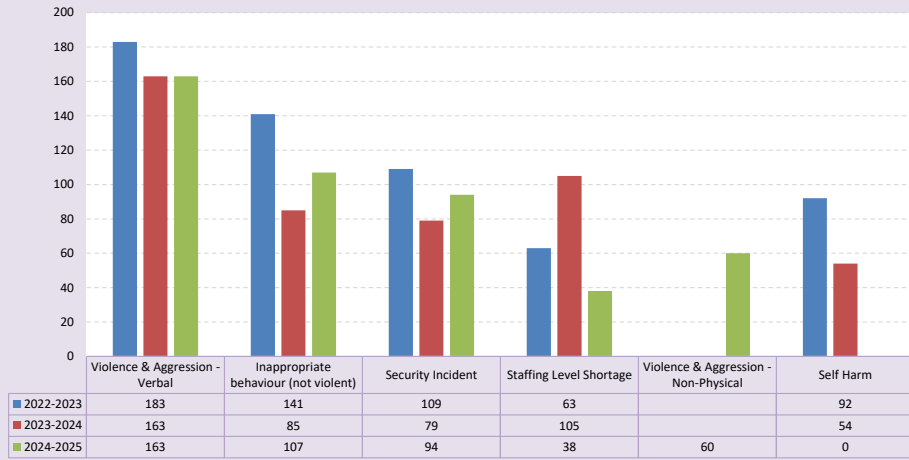
Clinical Risk

Incidents Registered by Division (by financial year)

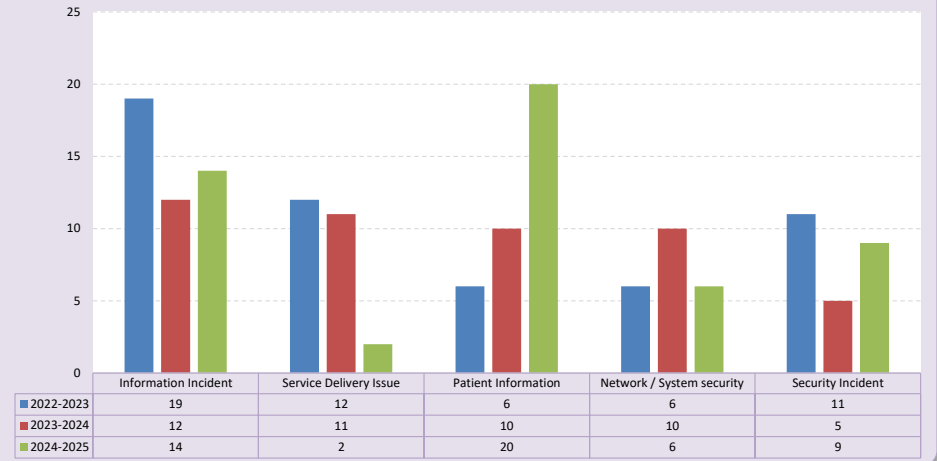
Incidents - Division (by year)



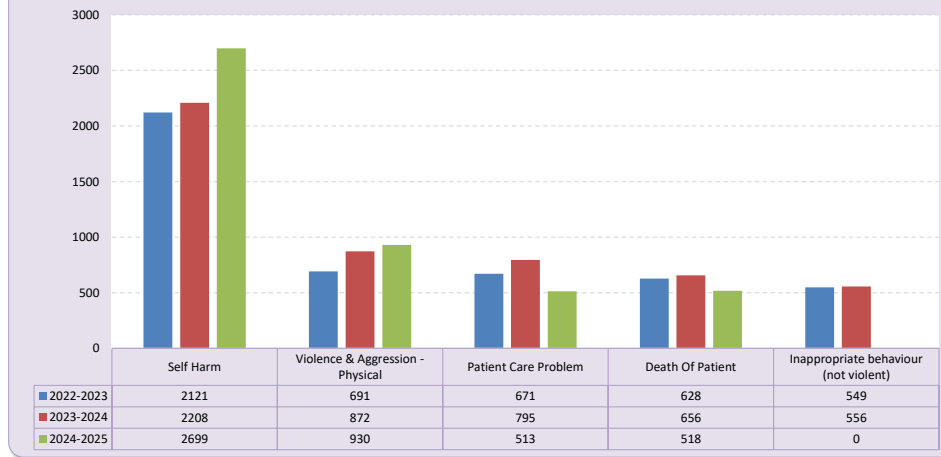
Forensic Services (Division)



Corporate (Division)



Trustwide



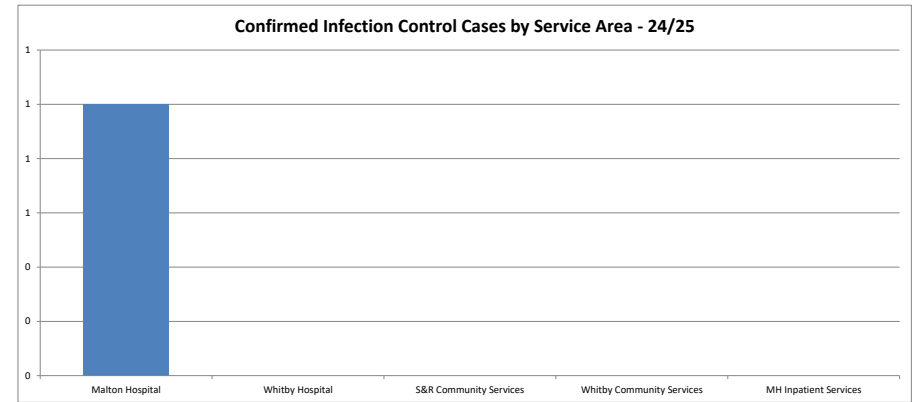
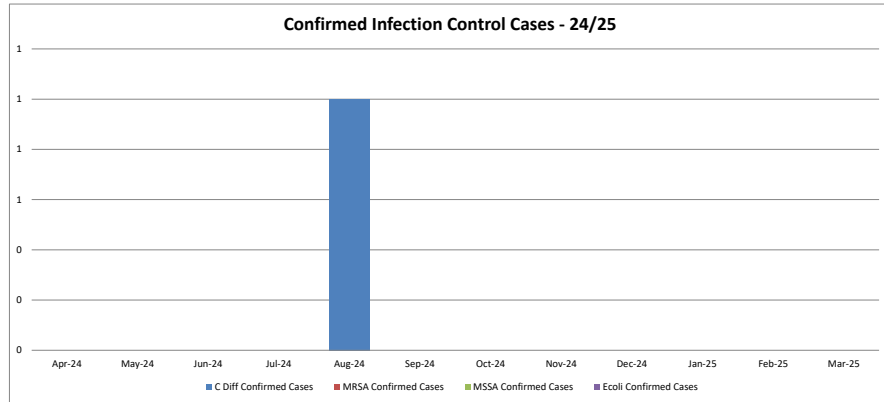
Quality Dashboard

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 Clostridioides 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.

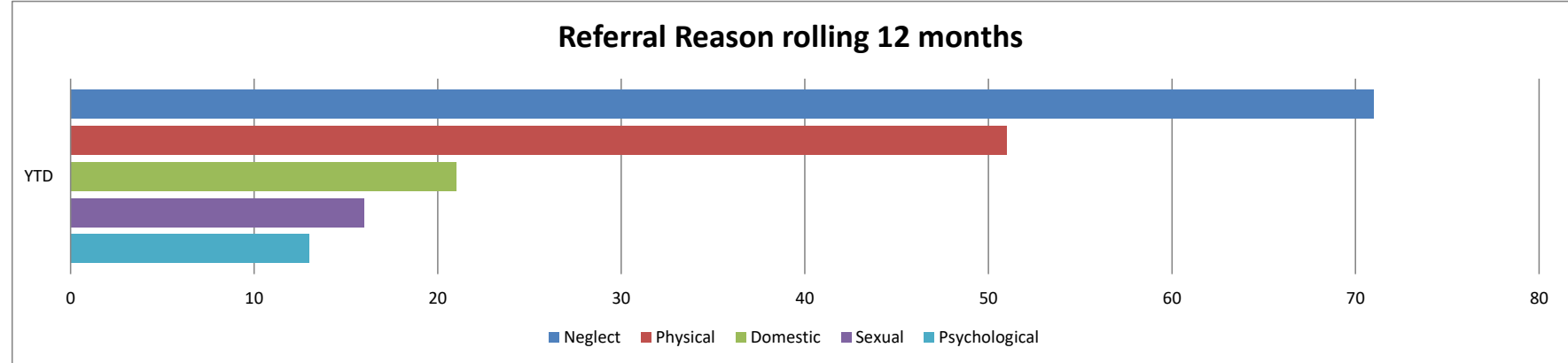
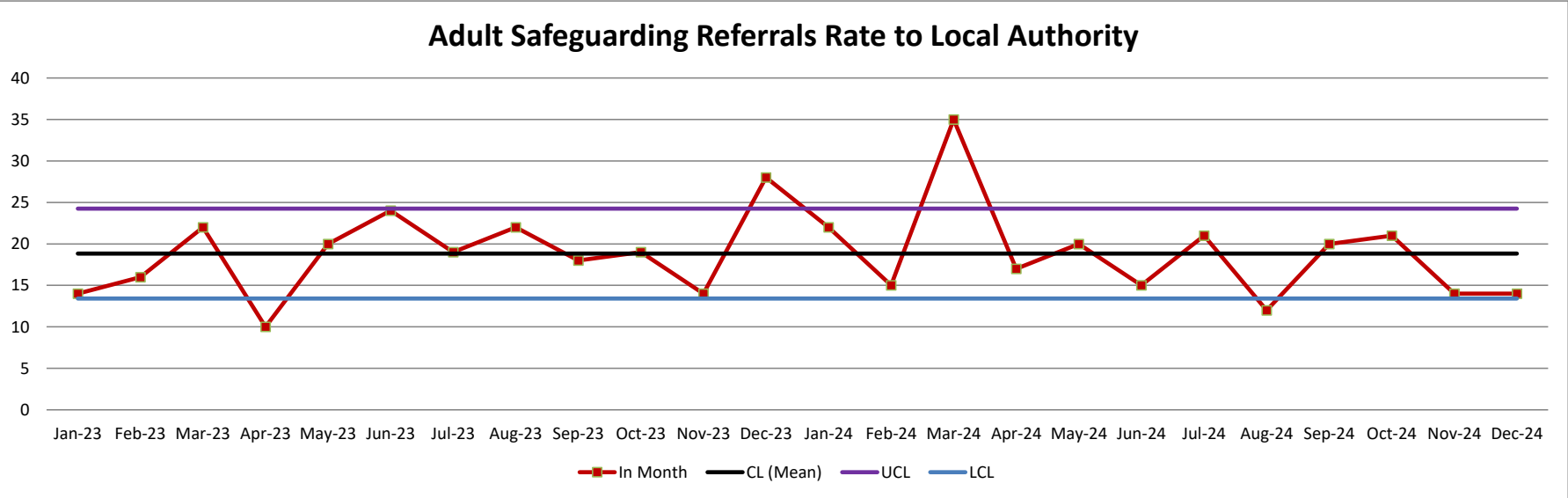
Q3

Q4

Quality Dashboard

Domain

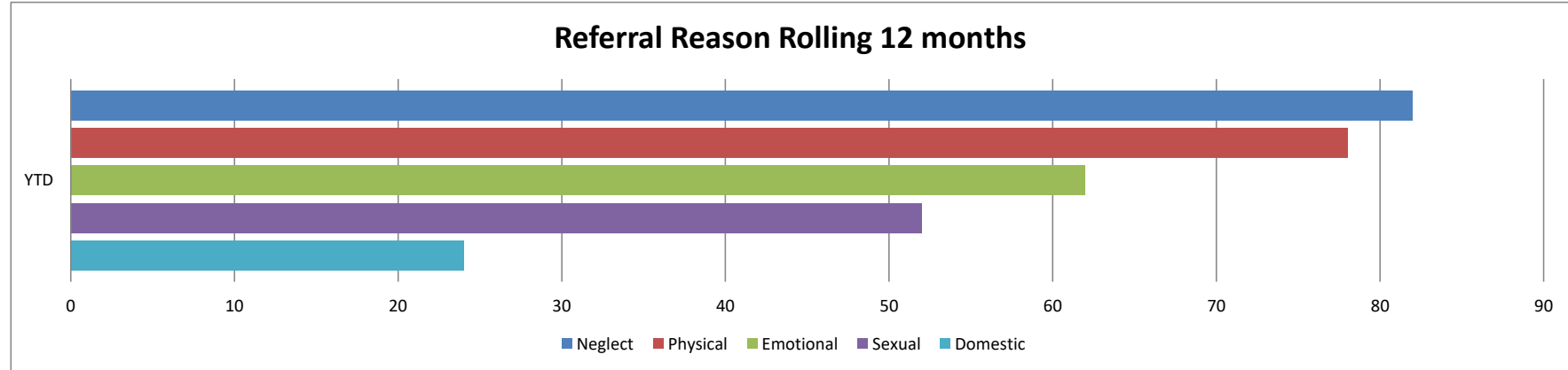
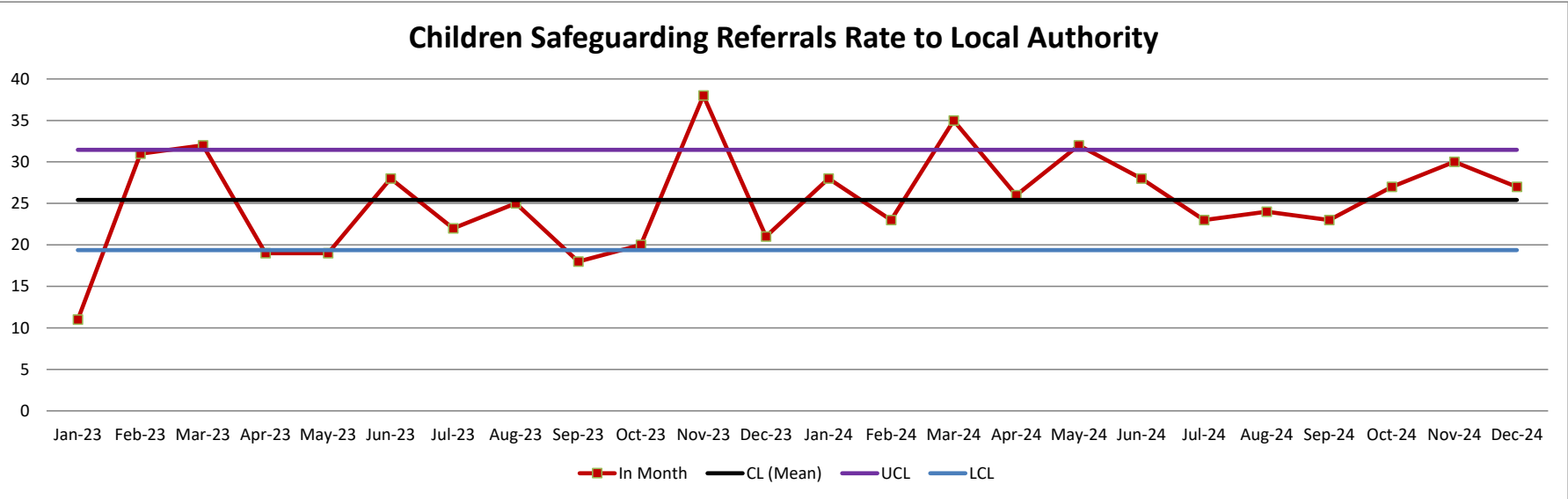
Section 2.5 Clinical Risk Adult Safeguarding Referrals



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: Nov-24



Shown one month in arrears

Speciality		Units					Bank/Agency Hours				Average Safer Staffing Fill Rates				QUALITY INDICATORS (YTD)										High Level Indicators		Indicator Totals			
		Ward	Speciality	WTE	OBDS (including leave)	CHPPD Hours (Nurse)	Improvement	Bank % Filled	Improvement	Agency % Filled	Improvement	Day		Night		Staffing Incidents (Poor Staffing Levels)	Incidents of Physical Violence / Aggression	Complaints (Upheld/ partly upheld)	Failed S17 Leave	Clinical Supervision	Mandatory Training (ALL)	Mandatory Training (LS)	Mandatory Training (RLS)	Sickness Levels (clinical)	WTE Vacancies (RNs only)	Oct-24	Nov-24			
												Registered	Un Registered	Registered	Un Registered															
Adult MH	Avondale	Adult MH Assessment	31.4	72%	12.0	14.2%	2.9%	95%	108%	97%	107%	0	29	4	0	90.3%	90.4%	85.7%	93.8%	6.7%	2.0	2	1							
	New Bridges	Adult MH Treatment (M)	36.6	99%	7.5	17.6%	0.9%	93%	98%	75%	122%	1	32	1	0	100.0%	93.9%	94.4%	90.0%	7.0%	-1.0	2	2							
	Westlands	Adult MH Treatment (F)	37.0	95%	9.1	27.8%	4.7%	97%	88%	95%	131%	2	46	3	0	86.1%	88.8%	82.4%	68.4%	7.7%	-1.0	3	2							
	Mill View Court	Adult MH Treatment	32.0	103%	9.8	33.2%	8.4%	96%	135%	83%	166%	4	27	1	0	93.8%	90.0%	72.2%	71.4%	5.8%	0.8	3	2							
	STARS	Adult MH Rehabilitation	16.8	100%	15.9	26.4%	2.4%	114%	84%	98%	100%	1	5	0	0	77.8%	93.2%	66.7%	92.3%	12.1%	1.0	3	2							
	PICU	Adult MH Acute Intensive	33.3	53%	30.4	19.6%	4.4%	79%	94%	88%	98%	0	61	1	2	80.6%	91.5%	93.3%	95.0%	3.4%	1.6	1	0							
OP MH	Maister Lodge	Older People Dementia Treatment	33.6	56%	20.4	14.6%	0.0%	79%	101%	110%	107%	1	96	0	0	N/R	94.8%	100.0%	78.3%	8.0%	0.5	1	2							
	Mill View Lodge	Older People Treatment	31.8	95%	15.2	9.6%	5.0%	79%	77%	100%	100%	0	10	0	0	N/R	97.0%	84.6%	85.0%	7.0%	4.0	1	3							
Child & LD	Maister Court	Older People Treatment	15.4	103%	15.9	35.5%	1.6%	86%	85%	100%	99%	0	6	0	0	N/R	92.7%	80.0%	90.0%	7.8%	2.2	2	3							
	Pine View	Forensic Low Secure	27.8	77%	9.5	35.0%	0.0%	102%	73%	83%	102%	2	1	0	8	100.0%	91.1%	91.7%	75.0%	14.2%	0.9	1	2							
	Derwent	Forensic Medium Secure	28.9	87%	20.2	41.4%	0.0%	105%	99%	99%	165%	8	15	0	0	72.0%	94.4%	75.0%	83.3%	11.6%	-1.0	1	2							
	Ouse	Forensic Medium Secure	25.6	82%	8.1	17.4%	0.0%	86%	95%	104%	97%	2	3	2	0	95.5%	95.0%	90.9%	93.8%	9.0%	-0.8	2	1							
	Swale	Personality Disorder Medium Secure	28.5	87%	8.7	27.7%	0.0%	82%	98%	104%	93%	3	4	2	0	96.3%	97.9%	91.7%	100.0%	9.9%	-1.0	1	1							
	Ullswater (10 Beds)	Learning Disability Medium Secure	28.2	90%	14.5	36.4%	0.0%	94%	145%	104%	129%	3	25	1	2	93.1%	92.9%	100.0%	66.7%	14.2%	-1.1	3	1							
	Townend Court	Learning Disability	49.3	36%	47.5	17.5%	3.0%	63%	109%	88%	105%	7	475	0	0	95.1%	88.0%	69.2%	64.7%	14.1%	1.4	4	3							
CH	Inspire	CAMHS	50.0	58%	36.1	8.8%	6.5%	103%	99%	97%	112%	1	14	0	0	88.2%	92.9%	94.7%	82.1%	4.5%	-1.5	0	0							
	Granville Court	Learning Disability Nursing Care	52.1	73%	20.0	27.0%	0.0%	135%	100%	109%	115%	0	2	0	0	95.7%	96.4%	78.6%	95.0%	11.4%	-1.4	1	1							
	Whitby Hospital	Physical Health Community Hospital	31.9	83%	9.0	2.6%	0.0%	82%	86%	100%	100%	6	1	0	0	92.5%	92.1%	76.5%	66.7%	3.4%	1.3	1	0							
	Malton Hospital	Physical Health Community Hospital	32.8	86%	7.4	17.9%	0.0%	83%	94%	107%	93%	1	1	1	0	100.0%	89.0%	93.3%	82.4%	4.4%	-0.3	1	0							
Key	✔ Target met		! Within 5% of target		✘ Target not met																									

Exception Reporting and Operational Commentary

Safer Staffing Dashboard Narrative : Nov

15 units are flagging red for sickness in November, up from 14 in October which was the lowest since June. The number of units with sickness rates above 10% has reduced from 10 in October to 6 in November, with no units above 15% for the second month. A sickness intervention plan has been developed to address high sickness across the Humber Centre.

There are no units with 5 red flags.

2 units are slightly below the CHPPD but are within 5% of the target (Newbridge's, Malton) and Whitby has improved their position from October.

There were 6 units with RN day fill rates below 75% in October with a further 11 below the target threshold however this position has improved in November with 1 unit under 75% (TEC – with a low bed occupancy) and 8 other units slightly below the target.

Mandatory training (all) is above 85% for all units. TEC remain below the lower threshold for BLS, but STARS have improved to above 90%. Westlands, MVC and Swale are slightly under target in November.

Overall compliance with clinical supervision is strong. Derwent flagging under the lower threshold and 3 nil return (Maister Lodge, MVL and Maister Court). Whitby has recovered their position above 90%.

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)

Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24
11.04%	11.25%	11.00%	9.56%	9.10%	9.59%	9.66%	10.20%	10.28%	8.92%	6.80%	6.30%

Slips/Trips and Falls (Rolling 3 months)

	Sep-24	Oct-24	Nov-24
Maister Lodge	8	4	8
Millview Lodge	2	11	3
Malton IPU	0	2	4
Whitby IPU	1	8	3

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

HUMBER TEACHING NHS FOUNDATION TRUST SAFER STAFFING COMMUNITY DASHBOARD

Contract Period:
Reporting Month:

Staffing and Quality Indicators

2024-25

Nov



Humber Teaching
NHS Foundation Trust

Area	Team	Speciality	Workforce Indicators					Quality Indicators							Trend	
			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	Oct-24	Nov-24	
Adult MH Services	Mental Health Response Service	Adult Crisis	59.9	10.7%	⊗ 7.9%	£44,118	£4,575	✓ 92.1%	⚠ 80.0%	20	✓ 90.0%	0	1	⚠ 2	✓ 1	
	Hull East Mental Health Team	Hull Adult MHT	31.7	19.5%	⊗ 25.0%	£958	£0	✓ 90.3%	✓ 96.0%	2	✓ 100.0%	0	0	✓ 1	✓ 1	
	Hull West Mental Health Team	Hull Adult MHT	13.5	12.2%	⊗ 8.0%	£0	£0	✓ 93.6%	⚠ 83.3%	3	⊗ 66.7%	0	0	✓ 1	⚠ 2	
	Beverley Mental Health Team	ER Adult MHT	6.6	10.4%	✓ 1.9%	£525	£0	✓ 97.4%	✓ 100.0%	14	✓ 100.0%	0	0	✓ 1	✓ 0	
	Goole Mental Health Team	ER Adult MHT	8.4	12.5%	✓ 2.9%	£463	£0	✓ 96.3%	✓ 100.0%	7	⚠ 85.7%	0	0	✓ 0	✓ 0	
	Haltemprice Mental Health Team	ER Adult MHT	11.1	-6.3%	⊗ 11.0%	£1,781	£0	✓ 95.5%	✓ 100.0%	0	NS	1	0	⚠ 2	✓ 1	
	Holderness Mental Health Team	ER Adult MHT	11.6	10.7%	⊗ 13.0%	£899	£0	✓ 92.4%	✓ 100.0%	0	NS	0	0	✓ 1	✓ 1	
Bridlington & Driffield MHT	ER Adult MHT	15.5	3.1%	✓ 3.1%	£497	£0	✓ 94.4%	✓ 100.0%	7	✓ 100.0%	0	0	✓ 0	✓ 0		
Older People MH Services	Crisis Intervention Team for Older People (CITOP)	OP Crisis	20.1	22.4%	✓ 1.9%	£2,452	£0	✓ 97.3%	N/R	11	✓ 100.0%	0	0	✓ 0	✓ 0	
	Hull Intensive Care Team for Older People (HICTOP)	Hull OP CMHT	20.1	15.2%	✓ 1.5%	£0	£0	✓ 93.2%	✓ 100.0%	15	✓ 100.0%	0	0	✓ 0	✓ 0	
	Beverley and Haltemprice OP CMHT	ER OP CMHT	7.4	16.3%	⊗ 7.8%	£822	£0	✓ 98.9%	✓ 100.0%	8	✓ 100.0%	0	0	✓ 0	✓ 1	
	Bridlington & Driffield OP CMHT	ER OP CMHT	7.3	11.0%	✓ 3.1%	£0	£0	✓ 90.3%	✓ 100.0%	1	✓ 100.0%	0	0	✓ 1	✓ 0	
	Goole & Pocklington OP CMHT	ER OP CMHT	7.1	0.0%	✓ 2.5%	£1,124	£0	✓ 92.0%	✓ 100.0%	4	✓ 100.0%	0	0	✓ 1	✓ 0	
	Holderness OP Community Team	ER OP CMHT	4.4	11.5%	⚠ 4.9%	£0	£0	✓ 96.1%	✓ 100.0%	3	✓ 100.0%	0	0	✓ 1	✓ 0	
Universal	Early Intervention in Psychosis	14-65 MHT	28.9	6.9%	⊗ 12.0%	£0	£0	✓ 88.1%	✓ 100.0%	0	NS	0	0	✓ 1	✓ 1	
	Hospital Mental Health Team	Liaison Services	37.0	6.3%	✓ 3.9%	£0	£21,611	✓ 92.0%	✓ 89.5%	2	✓ 100.0%	0	0	✓ 0	✓ 0	
Community Services	Ryedale Team	Comm Services	22.0	-3.8%	✓ 1.5%	£0	£0	✓ 95.1%	✓ 100.0%	0	NS	0	0	✓ 0	✓ 0	
	Scarborough Hub	Comm Services	63.9	8.7%	⚠ 4.5%	£15,178	£4,050	✓ 85.8%	⚠ 81.5%	0	NS	0	0	✓ 1	✓ 0	
	Whitby Community Nurses	Comm Services	29.0	12.8%	✓ 4.4%	£896	£0	✓ 95.2%	✓ 100.0%	0	NS	0	0	✓ 1	✓ 0	
	Pocklington Nurses	Comm Services	17.9	7.3%	⊗ 6.3%	£1,223	£0	⚠ 84.9%	✓ 100.0%	0	NS	0	0	✓ 1	✓ 1	

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

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

