Intelligent Monitoring Report

Report on

Warrington and Halton Hospitals NHS Foundation Trust

21 October 2013 (Revised)
CQC has developed a new model for monitoring a range of key indicators about NHS acute and specialist hospitals. These indicators relate to the five key questions we will ask of all services – are they safe, effective, caring, responsive and well-led? The indicators will be used to raise questions about the quality of care. They will not be used on their own to make judgements. Our judgements will always be based on the result of an inspection, which will take into account our Intelligent Monitoring analysis alongside local information from the public, the trust and other organisations.

What does this report contain?

This report presents CQC’s analysis of the key indicators (which we call ‘tier one indicators’) for Warrington and Halton Hospitals NHS Foundation Trust. We have analysed each indicator to identify two possible levels of risk.

We have used a number of statistical tests to determine where the thresholds of "risk" and "elevated risk" sit for each indicator, based on our judgement of which statistical tests are most appropriate. These tests include CUSUM and z scoring techniques. For some data sources we have applied a set of rules to the data as the basis for these thresholds - for example concerns raised by staff to CQC (and validated by CQC) are always flagged in the model.

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

What guidance is available?

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

Trust Summary

Count of 'Risks' and 'Elevated risks'

<table>
<thead>
<tr>
<th>Count of 'Risks'</th>
<th>'Elevated risks'</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

| Band             | 4               |
| Number of 'Risks'| 2               |
| Number of 'Elevated risks' | 2               |
| Overall Risk Score | 6               |
| Number of Applicable Indicators | 83              |
| Proportional Score | 3.61%           |
| Maximum Possible Risk Score | 166             |

- **Elevated risk** Composite indicator: In-hospital mortality - Vascular conditions and procedures
- **Elevated risk** Whistleblowing alerts
- **Risk** Key Indicator 1: Number of patients scanned within 1 hour of arrival at hospital
- **Risk** NHS Staff Survey - KF10. % staff receiving health and safety training in last 12 months
<table>
<thead>
<tr>
<th>Section</th>
<th>ID</th>
<th>Indicators</th>
<th>Observed</th>
<th>Expected</th>
<th>Risk?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never Events</td>
<td>STEISNE</td>
<td>Never Event incidence</td>
<td>-</td>
<td>-</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td>Avoidable infections</td>
<td>CDIFF</td>
<td>Incidence of Clostridium difficile (C. difficile)</td>
<td>-</td>
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<tr>
<td></td>
<td>MRSA</td>
<td>Incidence of Meticillin-resistant Staphylococcus aureus (MRSA)</td>
<td>3</td>
<td>2.34</td>
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<tr>
<td>Deaths in low risk diagnosis groups</td>
<td>MORTLOWR</td>
<td>Dr. Foster: Deaths in low risk diagnosis groups</td>
<td>-</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td>Patient safety incidents</td>
<td>NRRL03</td>
<td>Proportion of reported patient safety incidents that are harmful</td>
<td>0.38</td>
<td>0.28</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>NRRL04</td>
<td>Potential under-reporting of patient safety incidents resulting in death or severe harm</td>
<td>0.99</td>
<td>1.49</td>
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<tr>
<td></td>
<td>NRRL05</td>
<td>Potential under-reporting of patient safety incidents</td>
<td>327.08</td>
<td>235.27</td>
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<td>Venous Thromboembolism</td>
<td>VTERA03</td>
<td>Proportion of patients risk assessed for Venous Thromboembolism (VTE)</td>
<td>0.95</td>
<td>0.95</td>
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<tr>
<td>Mortality: Trust Level</td>
<td>SHMI01</td>
<td>Summary Hospital-level Mortality Indicator</td>
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<tr>
<td></td>
<td>COM_HSMR</td>
<td>Dr. Foster: Composite of Hospital Standardised Mortality Ratio indicators</td>
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<tr>
<td>Mortality</td>
<td>COM_CARDI</td>
<td>Composite indicator: In-hospital mortality - Cardiological conditions and procedures</td>
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<td>COM_CEREB</td>
<td>Composite indicator: In-hospital mortality - Cerebrovascular conditions</td>
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<td>COM_DERMA</td>
<td>Composite indicator: In-hospital mortality - Dermatological conditions</td>
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<td>No evidence of risk</td>
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<td>COM_ENDOC</td>
<td>Composite indicator: In-hospital mortality - Endocrinological conditions</td>
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<td>No evidence of risk</td>
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<td>COM_GASTR</td>
<td>Composite indicator: In-hospital mortality - Gastroenterological and hepato pathological conditions and procedures</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td>COM_GENIT</td>
<td>Composite indicator: In-hospital mortality - Genito-urinary conditions</td>
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<td>No evidence of risk</td>
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<td>COM_HAEMA</td>
<td>Composite indicator: In-hospital mortality - Haematological conditions</td>
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<td>COM_INFEC</td>
<td>Composite indicator: In-hospital mortality - Infectious diseases</td>
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<td></td>
<td>COM_MENTA</td>
<td>Composite indicator: In-hospital mortality - Conditions associated with Mental health</td>
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<tr>
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<td>COM_MUSCU</td>
<td>Composite indicator: In-hospital mortality - Musculoskeletal conditions</td>
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<td>COM_NEPHR</td>
<td>Composite indicator: In-hospital mortality - Nephrological conditions</td>
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<tr>
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<td>COM_NEURO</td>
<td>Composite indicator: In-hospital mortality - Neurological conditions</td>
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<td>No evidence of risk</td>
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<tr>
<td></td>
<td>COM_PAEIDI</td>
<td>Composite indicator: In-hospital mortality - Paediatric and congenital disorders and perinatal mortality</td>
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<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>COM_RESPI</td>
<td>Composite indicator: In-hospital mortality - Respiratory conditions and procedures</td>
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<td>No evidence of risk</td>
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<td>COM_TRAUM</td>
<td>Composite indicator: In-hospital mortality - Trauma and orthopaedic conditions and procedures</td>
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<td>No evidence of risk</td>
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<tr>
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<td>COM_VASCU</td>
<td>Composite indicator: In-hospital mortality - Vascular conditions and procedures</td>
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<td>-</td>
<td>Elevated risk</td>
</tr>
<tr>
<td>Section</td>
<td>ID</td>
<td>Indicators</td>
<td>Observed</td>
<td>Expected</td>
<td>Risk?</td>
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<tr>
<td>Maternity and women's health</td>
<td>MATELECCS</td>
<td>Maternity outlier alert: Elective Caesarean section</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td></td>
<td>MATEMERC5</td>
<td>Maternity outlier alert: Emergency Caesarean section</td>
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<td>No evidence of risk</td>
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<td>MATSEPSIS</td>
<td>Maternity outlier alert: Puerperal sepsis and other puerperal infections</td>
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<td>No evidence of risk</td>
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<td>Re-admissions</td>
<td>MATMATRE</td>
<td>Maternity outlier alert: Maternal readmissions</td>
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<td>No evidence of risk</td>
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<td>MATNEORE</td>
<td>Maternity outlier alert: Neonatal readmissions</td>
<td>-</td>
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<td>No evidence of risk</td>
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<td>HESELR</td>
<td>Emergency readmissions following an elective admission</td>
<td>745</td>
<td>616.16</td>
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<td>HESEMRE</td>
<td>Emergency readmissions following an emergency admission</td>
<td>3949</td>
<td>3613.9</td>
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<td>PROMs</td>
<td>PROMS19</td>
<td>PROMs EQ-5D score: Groin Hernia Surgery</td>
<td>Not included</td>
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<td>PROMS20</td>
<td>PROMs EQ-5D score: Hip Replacement</td>
<td>Not included</td>
<td>Not included</td>
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<td>PROMS22</td>
<td>PROMs EQ-5D score: Knee Replacement</td>
<td>Not included</td>
<td>Not included</td>
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<td>PROMS24</td>
<td>PROMs EQ-5D score: Varicose Vein Surgery</td>
<td>Not included</td>
<td>Not included</td>
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<td>Audit</td>
<td>NHFD01</td>
<td>The number of cases assessed as achieving compliance with all nine standards of care measured within the National Hip Fracture Database.</td>
<td>0.44</td>
<td>0.6</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>SINAP14</td>
<td>Key Indicator 1: Number of patients scanned within 1 hour of arrival at hospital</td>
<td>0.11</td>
<td>0.4</td>
<td>Risk</td>
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<td>SINAP15</td>
<td>Key Indicator 8: Number of potentially eligible patients thrombolysed</td>
<td>0.5</td>
<td>0.7</td>
<td>No evidence of risk</td>
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<tr>
<td>Surgical revisions outlier</td>
<td>SURGHIPREV</td>
<td>Surgical revisions outlier alert: Hip revisions</td>
<td>Not included</td>
<td>Not included</td>
<td>Not included</td>
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<tr>
<td></td>
<td>SURGKNEREV</td>
<td>Surgical revisions outlier alert: Knee revisions</td>
<td>Not included</td>
<td>Not included</td>
<td>Not included</td>
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<tr>
<td>Compassionate care</td>
<td>IPSurTalkWor</td>
<td>Inpatient Survey 2012 Q34 &quot;Did you find someone on the hospital staff to talk to about your worries and fears?&quot;</td>
<td>5.25</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>IPSurSupEmot</td>
<td>Inpatient Survey 2012 Q35 &quot;Do you feel you got enough emotional support from hospital staff during your stay?&quot;</td>
<td>7.08</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td>Meeting physical needs</td>
<td>IPSurHelpEat</td>
<td>Inpatient Survey 2012 Q23 &quot;Did you get enough help from staff to eat your meals?&quot;</td>
<td>7.65</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>IPSurInvDeci</td>
<td>Inpatient Survey 2012 Q32 &quot;Were you involved as much as you wanted to be in decisions about your care and treatment?&quot;</td>
<td>6.76</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>IPSurCntPain</td>
<td>Inpatient Survey 2012 Q39 &quot;Do you think the hospital staff did everything they could to help control your pain?&quot;</td>
<td>7.91</td>
<td>-</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td>Overall experience</td>
<td>IPSurOverall</td>
<td>Inpatient Survey 2012 Q68 &quot;Overall...&quot; (I had a very poor/good experience)</td>
<td>7.7</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>FTTNHSEscore</td>
<td>NHS England inpatients score from Friends and Family Test</td>
<td>77.69</td>
<td>-</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td>Treatment with dignity and respect</td>
<td>IPSurRspDign</td>
<td>Inpatient Survey 2012 Q67 &quot;Overall, did you feel you were treated with respect and dignity while you were in the hospital?&quot;</td>
<td>8.72</td>
<td>-</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td>Trusting relationships</td>
<td>IPSurConfDoc</td>
<td>Inpatient Survey 2012 Q25 &quot;Did you have confidence and trust in the doctors treating you?&quot;</td>
<td>8.53</td>
<td>-</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td></td>
<td>IPSurConfNur</td>
<td>Inpatient Survey 2012 Q28 &quot;Did you have confidence and trust in the nurses treating you?&quot;</td>
<td>8.66</td>
<td>-</td>
<td>No evidence of risk</td>
</tr>
<tr>
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<tr>
<td>Access measures</td>
<td>AD_A&amp;E12</td>
<td>A&amp;E waiting times more than 4 hours</td>
<td>0.05</td>
<td>0.05</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>RTT_01</td>
<td>Referral to treatment times under 18 weeks: admitted pathway</td>
<td>0.91</td>
<td>0.9</td>
<td>No evidence of risk</td>
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<tr>
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<td>RTT_02</td>
<td>Referral to treatment times under 18 weeks: non-admitted pathway</td>
<td>0.98</td>
<td>0.95</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>DIAG6WK01</td>
<td>Diagnostics waiting times: patients waiting over 6 weeks for a diagnostic test</td>
<td>0</td>
<td>0.01</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td></td>
<td>WT_CAN26</td>
<td>All cancers: 62 day wait for first treatment from urgent GP referral</td>
<td>0.9</td>
<td>0.85</td>
<td>No evidence of risk</td>
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<td>WT_CAN27</td>
<td>All cancers: 62 day wait for first treatment from NHS cancer screening referral</td>
<td>1</td>
<td>0.9</td>
<td>No evidence of risk</td>
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<td></td>
<td>WT_CAN22</td>
<td>All cancers: 31 day wait from diagnosis</td>
<td>1</td>
<td>0.96</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>CND_OP502</td>
<td>The proportion of patients whose operation was cancelled</td>
<td>0.01</td>
<td>0.01</td>
<td>No evidence of risk</td>
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<td></td>
<td>DIAG6WK01</td>
<td>Diagnostics waiting times: patients waiting over 6 weeks for a diagnostic test</td>
<td>0.03</td>
<td>0.07</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>AMBTURN06</td>
<td>Proportion of ambulance journeys where the ambulance vehicle remained at hospital for more than 60 minutes</td>
<td>0.01</td>
<td>0.02</td>
<td>No evidence of risk</td>
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<tr>
<td>Discharge and Integration</td>
<td>DTC40</td>
<td>Ratio of the total number of days delay in transfer from hospital to the total number of occupied beds</td>
<td>0.01</td>
<td>0.02</td>
<td>No evidence of risk</td>
</tr>
<tr>
<td>Reporting culture</td>
<td>NRLS14</td>
<td>Consistency of reporting to the National Reporting and Learning System (NRLS)</td>
<td>6 months of reporting</td>
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<td>No evidence of risk</td>
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<tr>
<td></td>
<td>SUSDQ</td>
<td>Data quality of trust returns to the HSCIC</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td>FFTRESP02</td>
<td>Inpatients response rate from NHS England Friends and Family Test</td>
<td>0.2</td>
<td>0.26</td>
<td>No evidence of risk</td>
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<td>Partners</td>
<td>MONITOR01</td>
<td>Monitor - Governance risk rating</td>
<td>Green</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>TDA01</td>
<td>TDA - Escalation score</td>
<td>Not included</td>
<td>Not included</td>
<td>Not included</td>
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<td>NTS12</td>
<td>GMC National Training Survey – Trainee’s overall satisfaction</td>
<td>Within Q2/IQR</td>
<td>-</td>
<td>No evidence of risk</td>
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<tr>
<td>Staff survey</td>
<td>STASURBG01</td>
<td>NHS Staff Survey - Percentage of staff who would recommend the trust as a place to work or receive treatment</td>
<td>0.64</td>
<td>0.64</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>NHSSTAFF04</td>
<td>NHS Staff Survey - KF7. % staff appraised in last 12 months</td>
<td>0.85</td>
<td>0.82</td>
<td>No evidence of risk</td>
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<tr>
<td></td>
<td>NHSSTAFF06</td>
<td>NHS Staff Survey - KF9. Support from immediate managers</td>
<td>0.67</td>
<td>0.65</td>
<td>No evidence of risk</td>
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<td>NHSSTAFF07</td>
<td>NHS Staff Survey - KF10. % staff receiving health and safety training in last 12 months</td>
<td>0.53</td>
<td>0.74</td>
<td>Risk</td>
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<tr>
<td></td>
<td>NHSSTAFF11</td>
<td>NHS Staff Survey - KF15. Fairness and effectiveness of incident reporting procedures</td>
<td>0.66</td>
<td>0.63</td>
<td>No evidence of risk</td>
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<td>NHSSTAFF16</td>
<td>NHS Staff Survey - KF21. % reporting good communication between senior management and staff</td>
<td>0.28</td>
<td>0.27</td>
<td>No evidence of risk</td>
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<tr>
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<td><strong>Staffing</strong></td>
<td>ESRSIC</td>
<td>Composite risk rating of ESR items relating to staff sickness rates</td>
<td>-</td>
<td>-</td>
<td>No evidence of risk</td>
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<td>ESRReg</td>
<td>Composite risk rating of ESR items relating to staff registration</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td>ESRTO</td>
<td>Composite risk rating of ESR items relating to staff turnover</td>
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<td>ESRSTAB</td>
<td>Composite risk rating of ESR items relating to staff stability</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td>ESRSUP</td>
<td>Composite risk rating of ESR items relating to staff support/ supervision</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td></td>
<td>ESRSTAFF</td>
<td>Composite risk rating of ESR items relating to ratio: Staff vs bed occupancy</td>
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<td>-</td>
<td>No evidence of risk</td>
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<td>FLUVAC01</td>
<td>Healthcare Worker Flu vaccination uptake</td>
<td>0.7</td>
<td>0.48</td>
<td>No evidence of risk</td>
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<td><strong>Qualitative intelligence</strong></td>
<td>WHISTLEBLOW</td>
<td>Whistleblowing alerts</td>
<td>-</td>
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<td>Elevated risk</td>
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<td></td>
<td>GMCconcerns</td>
<td>GMC - Serious Education Concerns</td>
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<td>-</td>
<td>No evidence of risk</td>
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<tr>
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### Appendix of indicators used in the composite mortality indicators

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