
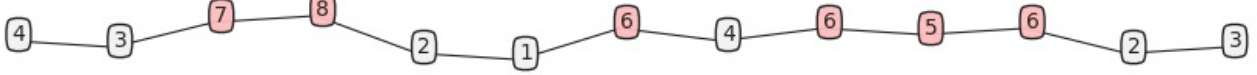
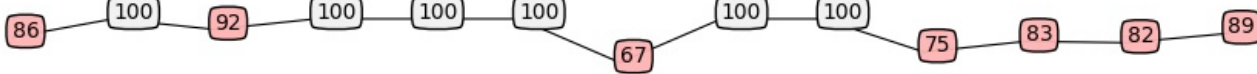
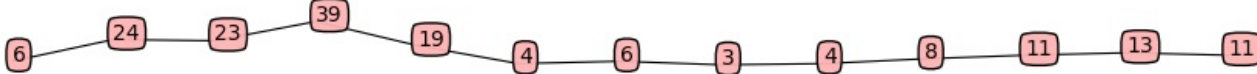
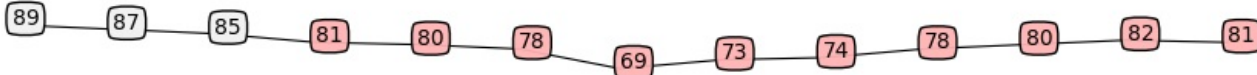
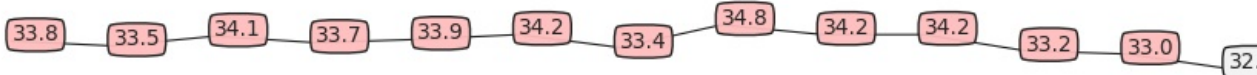
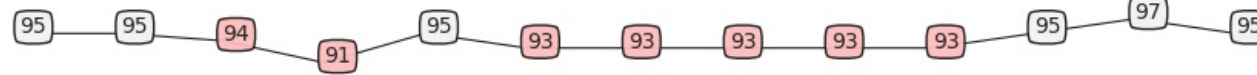
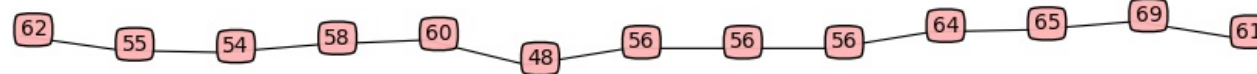
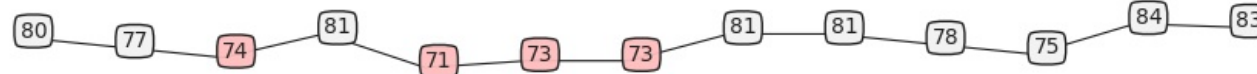


Board Quality and Safety

Indicator	Target/Tolerance*	OCT-2024	13 Month Trend (OCT-2023 to OCT-2024)	Comparator^	
Standard 1: Clinical Governance	ISR 1&2*	8	9		N/A
	Number of confirmed SAPSEs*	4	3		N/A
	Percentage of Open Disclosure for ISR 1 & 2 events *	100%	89%		N/A
	# Complaints opened more than 30 days *	0	11		N/A
	% of staff with completed mandatory emergency training in last 12 months *	85%	81%		N/A
	Placeholder Clinical Trials and Research indicator	Indicator to be developed.			
	All staff injury frequency rate (AIFR) *	32.6	32.1		N/A

Standard 2: Partnering with Consumers	Measurement of pt experience (admitted overnight pts)	95%	95%		90.8%
	% of positive responses on discharge planning	75%	61%		74%
	% of patients who reported they were involved in making decisions about their care	75%	83%		71%
	% of patients reporting they felt safe using the service *	90%	93%		85%

	Perception of Cleanliness *	70%	77%		N/A

Standard 3: Preventing and Controlling Healthcare Associated Infections	# of Central Line Associated Bacteraemia (ICU) per 1000 Line Days	0.00	0.00		0.6/1000 CLDs
	# of cases of Healthcare associated S. aureus bacteraemia/10,000 Occupied Beddays	0.70	1.16		0
	# Deep SSI - CABGs	0	0		N/A
	# Deep Orthopaedic Wound Infection Total or Partial Knee Arthroplasties	0	0		N/A
	# Deep Orthopaedic Wound Infection Hip arthroplasty	0	0		N/A
	% Hand Hygiene Compliance Alfred Health	85%	83%		85.7%

Standard 4: Medication Safety	# of Medication Incidents (ISR 1 or 2) *	1	3		N/A
	Placeholder Incidents relating to misuse of Schedule 8 medications	Indicator to be developed.			

Standard 5: Comprehensive Care	% of Triage Category 1 to 5 emergency patients seen within clinically recommended time	80%	63%		65%
	# of ED Patients with Length of Stay in ED > 24 hours	0	0		N/A

	# of Individual Stage 3/4/SDTI/Unstageable Pressure Injuries - Acquired/worsened while in care *	9	10		N/A
	# of Falls with Serious Injury ISR 1 or ISR 2 *	2	1		N/A
	# of Falls with Serious Injury ISR 1 or ISR 2 where all care strategies were not in place *	0	0		N/A
	# of patients with malnutrition acquired or worsened in care *	5	20		N/A
	Seclusion rate per 1000 occupied bed days	8	6		
	Placeholder Mental Health Restrictive Interventions	Indicator to be developed.			

Standard 6: Communicating for Safety	# of Wrong Blood in Tube Incidents	2	0		N/A
	% of patients discharged home with discharge summaries completed within 2 working days *	85%	81%		N/A

Standard 7: Blood Management	% of red blood cell wastage	2.0%	0		2%
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Standard 8: Recognising and Responding to Acute Deterioration	# of True Code Blue Calls (Inpatient) *	8	6		N/A
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* The target is informed by Alfred Health Risk tolerance consistent with the Risk Management Framework and calculated as an average of performance from June 2022 to June 2023
^ Comparator derived from 2022-23 annual MONITOR report.