Financial Year
2025-26

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:
May-25

Chief Executive: Michele Moran

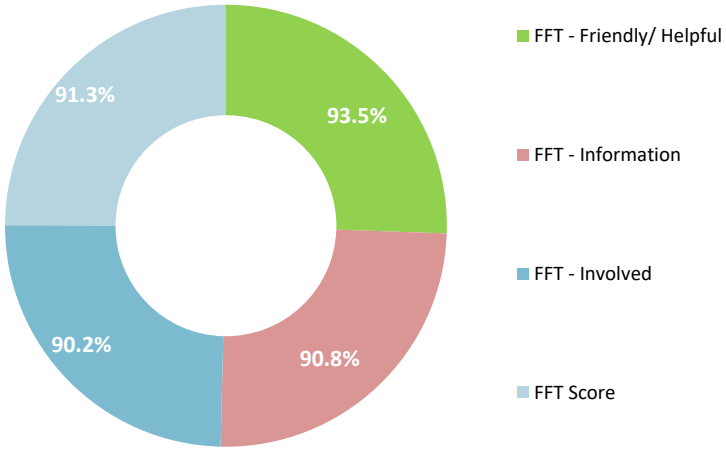
Prepared by: Business Intelligence Team

Domain

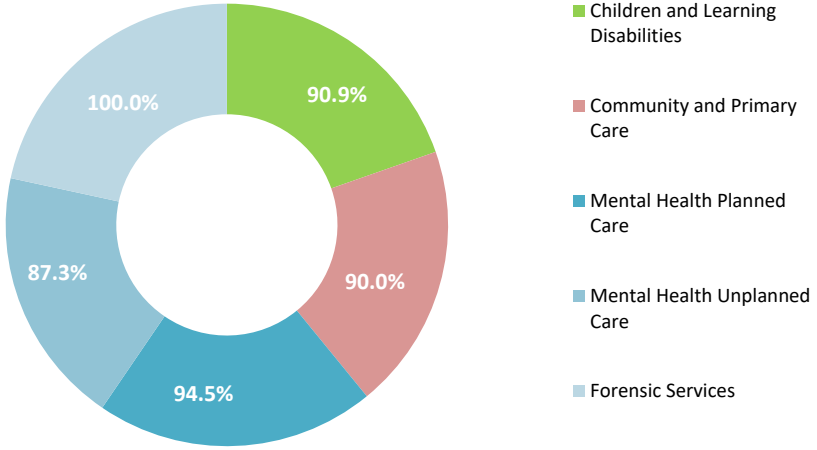
Patient / Carer Experience

Quality Report

Friends and Family Year to Date Satisfaction Results



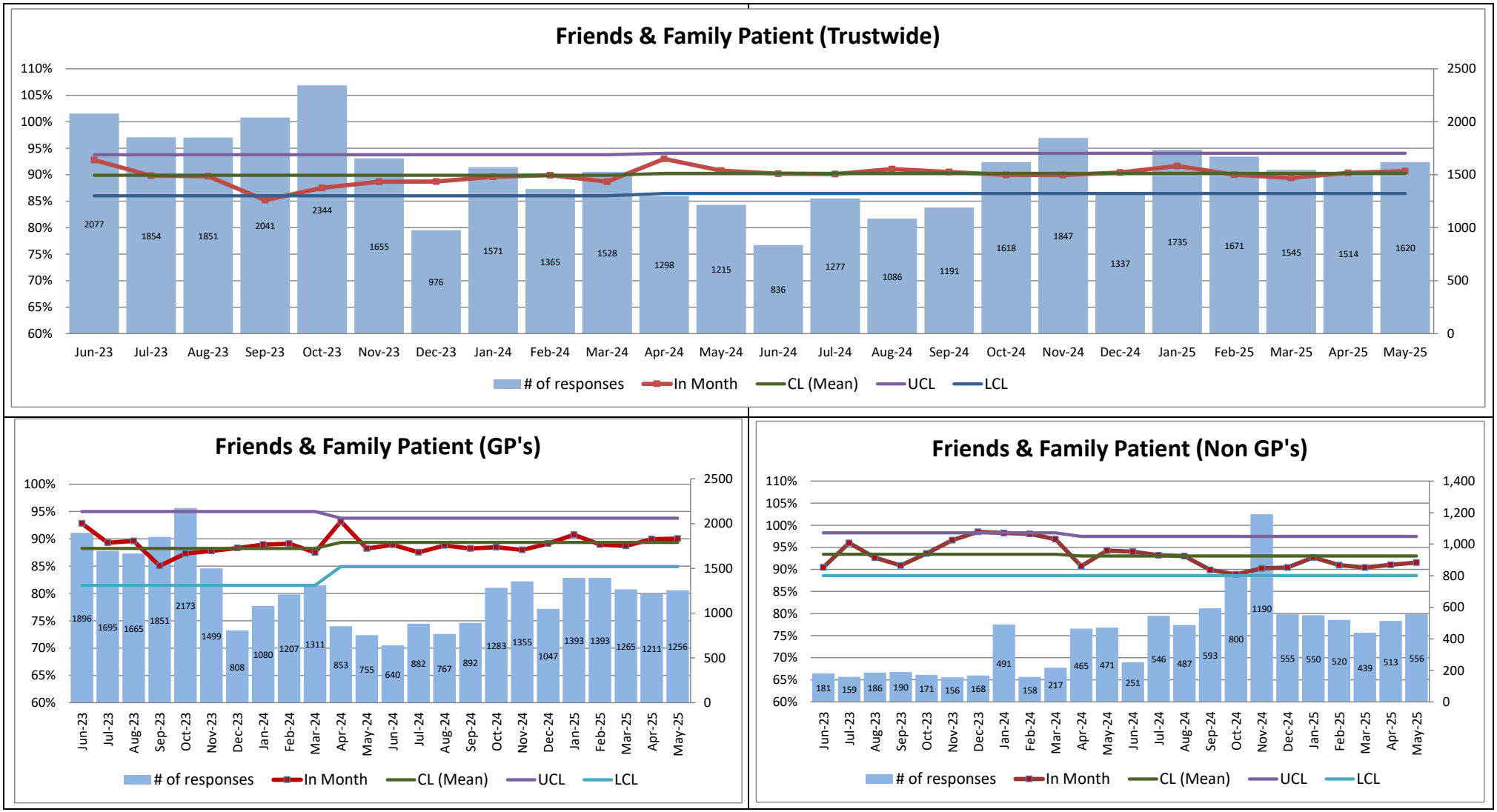
Friends and Family Satisfaction by Division Current Month



Overall Experience Score for CMHT (Community Mental Health Team) Patient Survey - 2024	National Benchmark (Upper Quartile)
	66.6%
	Trust Result
	67.3%

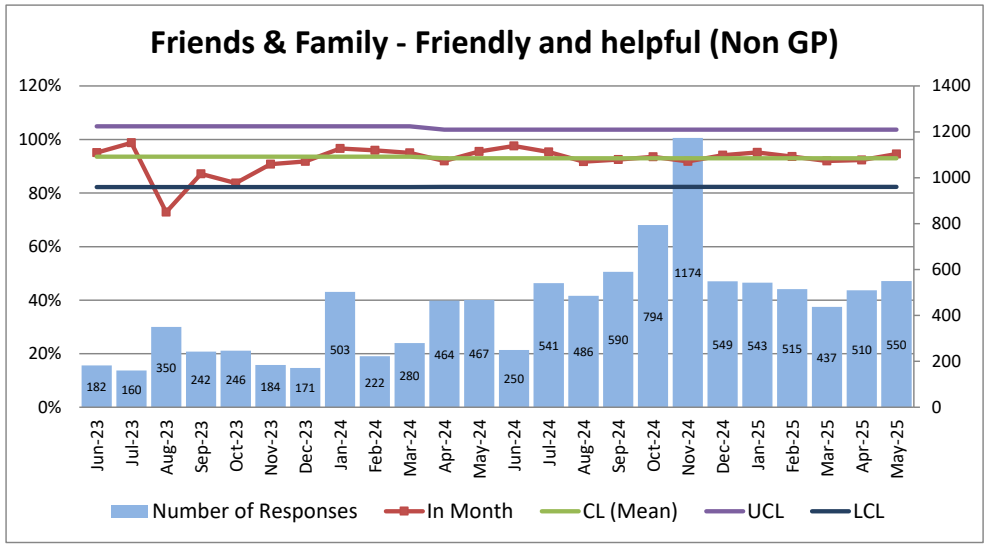
Quality Dashboard

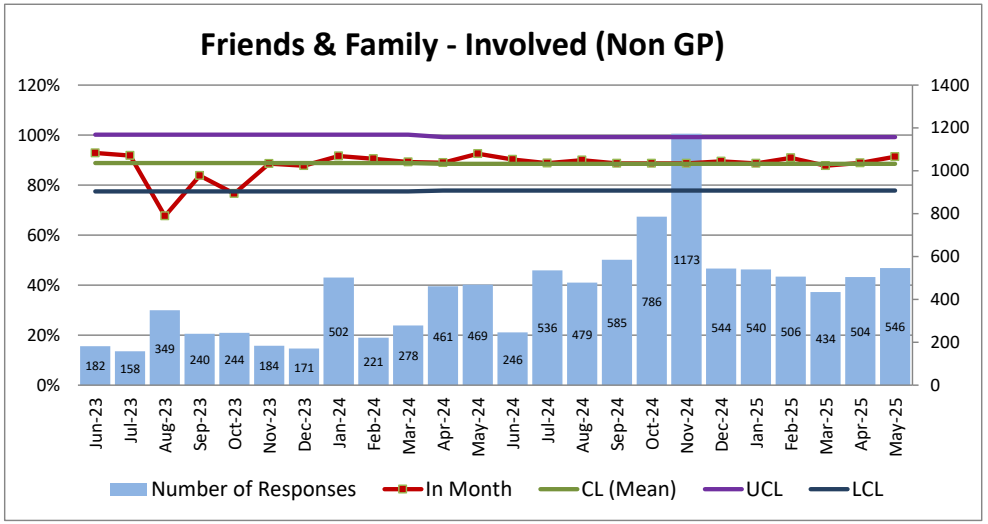
Section 1.1.1 Patient / Carer Experience - Trustwide / GP / Non GP Services — Friends and Family

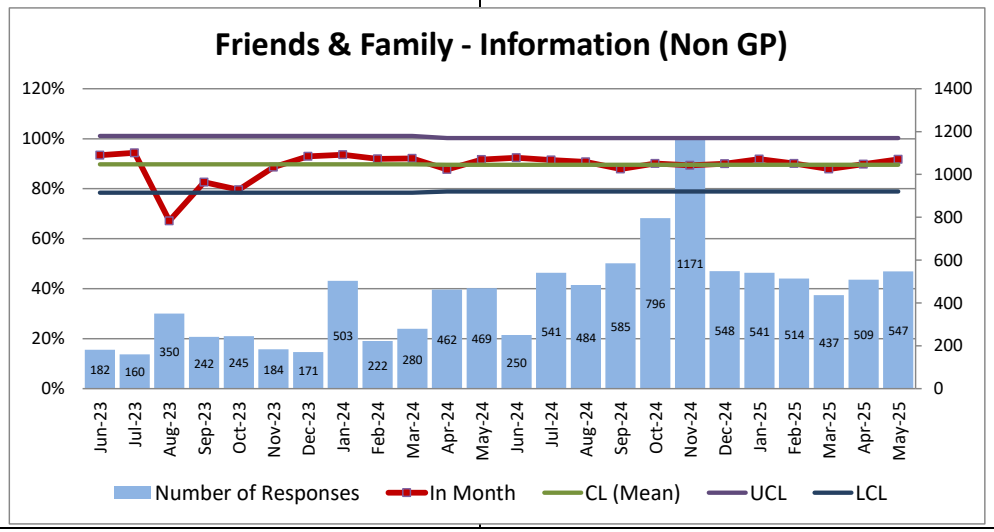


Quality Dashboard

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

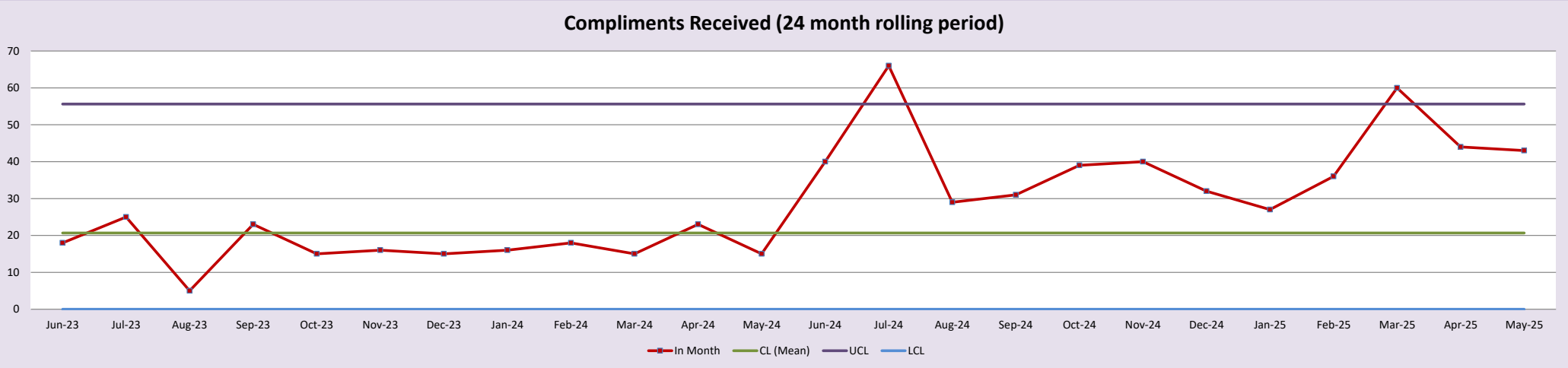




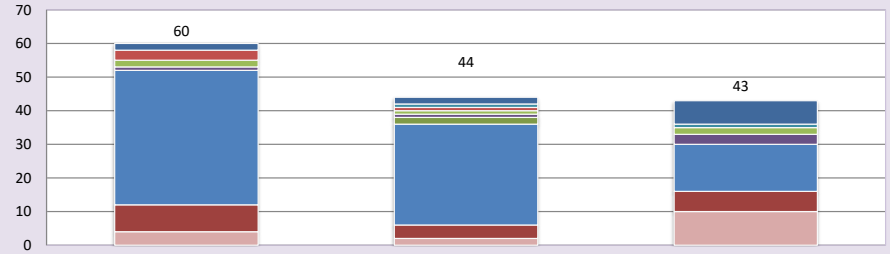


Quality Dashboard

Section 1.2 Patient / Carer Experience — Overall Trust Position



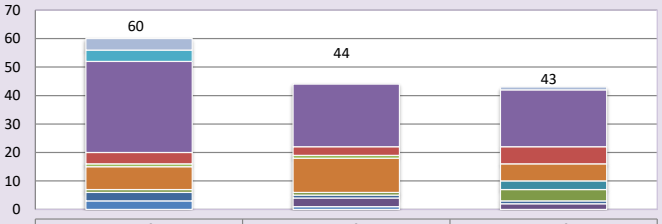
Compliments by Theme



	Mar-25	Apr-25	May-25
Access to care	2	2	7
Admission and Discharge	0	1	1
Appointments	3	1	0
Carer involvement	2	1	2
Communications	1	1	3
End of Life Care	0	2	0
Facilities	0	0	0
Patient Care/Treatment	40	30	14
Prescribing	0	0	0
Privacy, dignity and wellbeing	0	0	0
Trust admin policies/procedures	0	0	0
Values and Behaviours of staff	8	4	6
Waiting times	0	0	0
Other	4	2	10

Patient Experience Indicators	Mar-25	Apr-25	May-25
Eliminating Mixed Sex Accommodation	0	0	0
Duty of Candour Compliance	100%	100%	100%

Compliments by Sub Sub Type

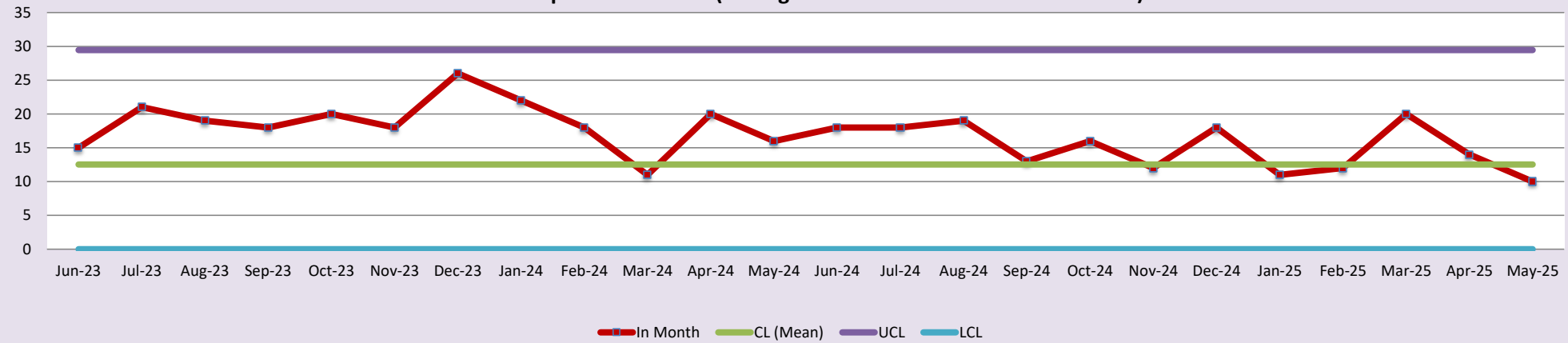


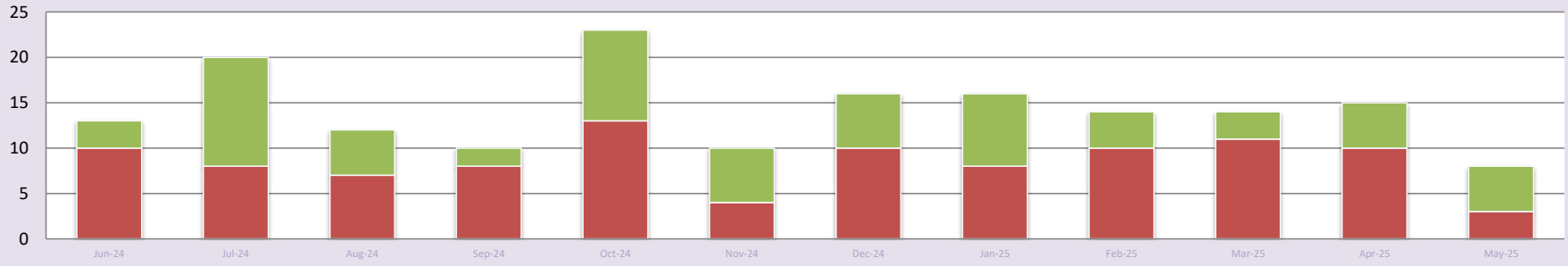
	Mar-25	Apr-25	May-25
Caring	4	0	1
Friendly	4	0	0
General thank you	32	22	20
Going the extra mile	4	3	6
Inclusive	1	1	0
Kindness, Compassion and Empathy	8	12	6
Knowledgeable	0	0	3
Listening and understanding	1	1	4
Professional	3	1	1
Respectful	0	0	0
Responsive	0	3	2
Welcoming	3	1	0

Quality Dashboard

Domain

Section 1.3.1 Patient / Carer Experience — Overall Trust Position



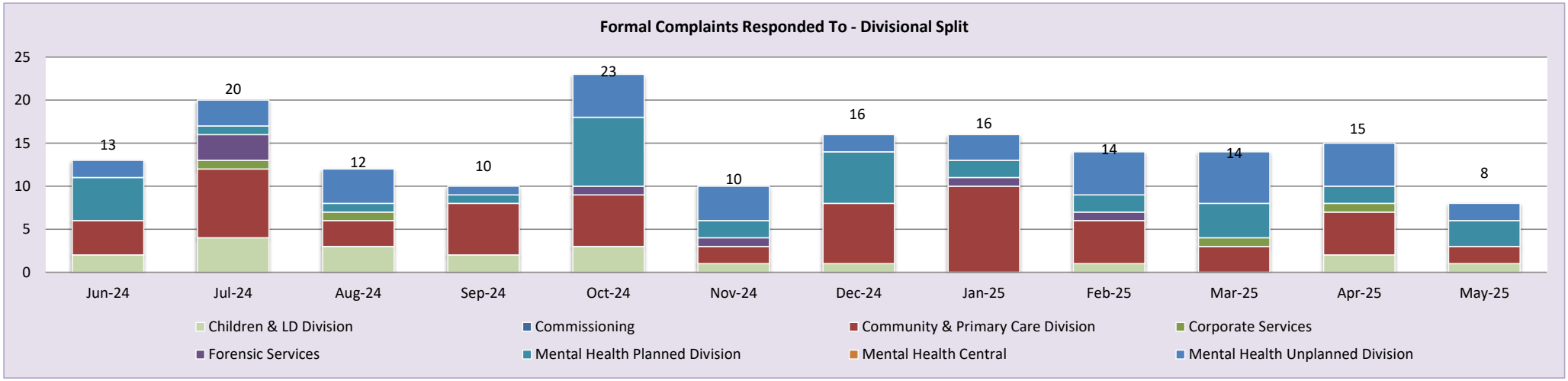


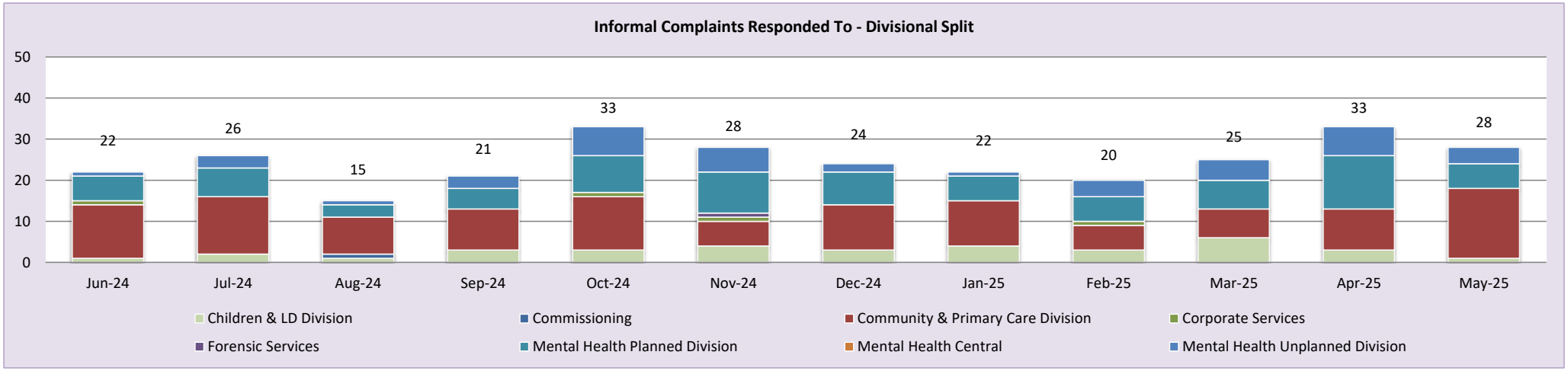
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Complaints Not Upheld	3	12	5	2	10	6	6	8	4	3	5	5
Complaints Upheld Fully/Partly	10	8	7	8	13	4	10	8	10	11	10	3

Quality Dashboard

Domain

Section 1.3.1 Patient / Carer Experience — Overall Trust Position





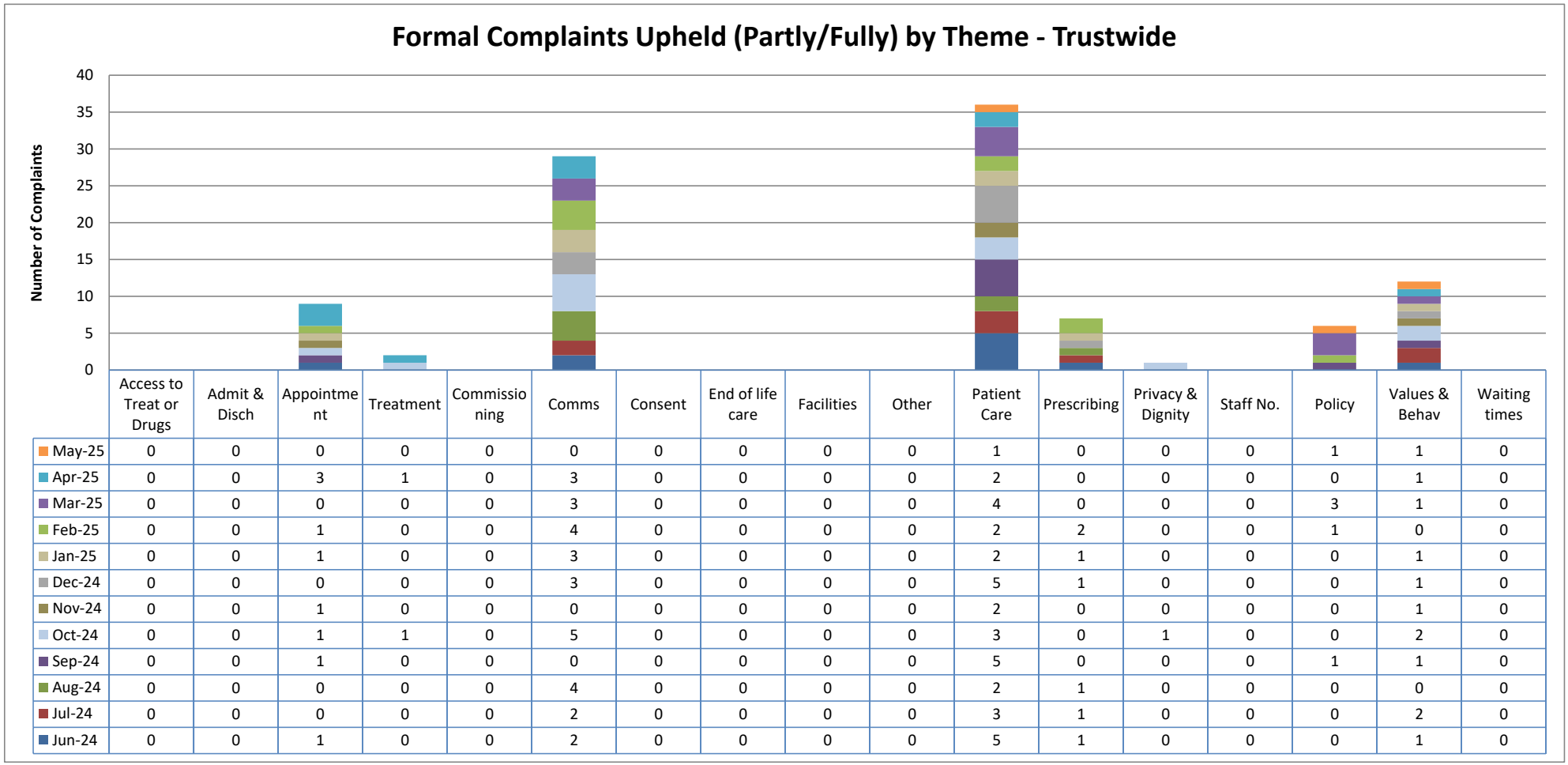
Withdrawn Complaints

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

Quality Dashboard

Domain

Section 1.3.2 Complaints Themes — Overall Trust Position



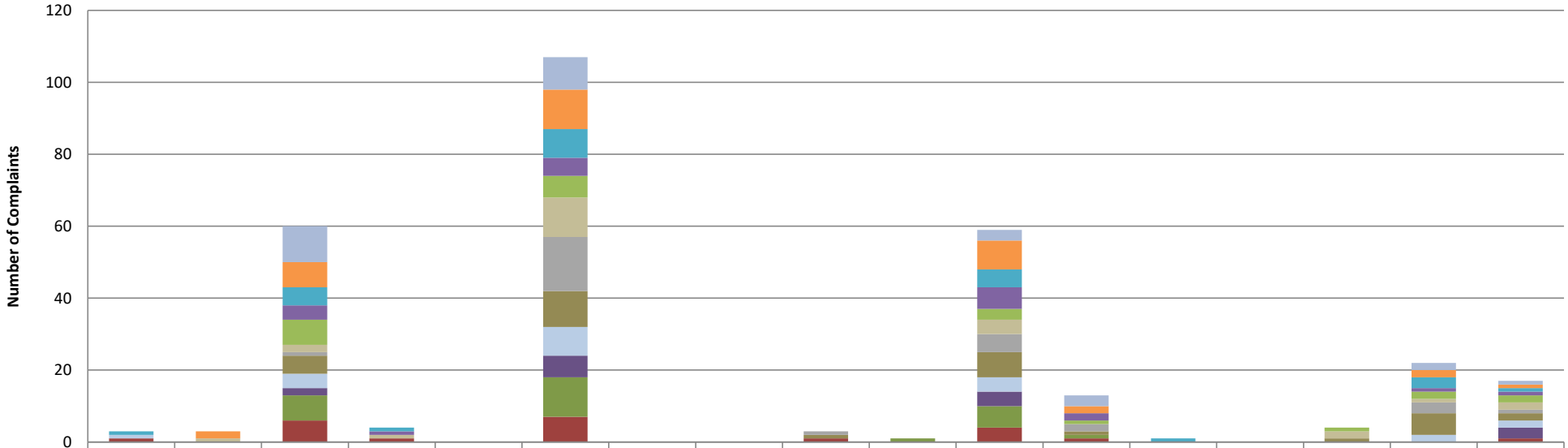
	Access to Treat or Drugs	Admit & Disch	Appointment	Treatment	Commissioning	Comms	Consent	End of life care	Facilities	Other	Patient Care	Prescribing	Privacy & Dignity	Staff No.	Policy	Values & Behav	Waiting times
May-25	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	1	0
Apr-25	0	0	3	1	0	3	0	0	0	0	2	0	0	0	0	1	0
Mar-25	0	0	0	0	0	3	0	0	0	0	4	0	0	0	3	1	0
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

Quality Dashboard

Domain

Section 1.3.2 Complaints Themes — **Overall Trust Position**

Informal Complaints by Theme - Trustwide



	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
May-25	0	0	10	0	0	9	0	0	0	0	3	3	0	0	0	2	1
Apr-25	0	2	7	0	0	11	0	0	0	0	8	2	0	0	0	2	1
Mar-25	1	0	5	1	0	8	0	0	0	0	5	0	1	0	0	3	1
Feb-25	0	0	4	1	0	5	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

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

	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	Mar-25	Apr-25	May-25	Rolling Total
Humber Primary Care Practice	0	4	3	2	8	6	2	2	0	3	1	4	0	2	1	1	1	1	3	1	2	1	0	0	**48**
Market Weighton Practice	0	1	1	0	0	1	0	1	1	2	3	0	2	0	1	0	3	0	1	3	0	0	1	0	**21**
King Street Medical Centre	0	0	0	0	0	0	0	2	0	3	0	2	0	1	0	3	0	0	0	1	2	1	1	0	**16**
Hull CMHT - Management, Non Clinical and Psychology	1	2	0	0	1	0	0	0	0	0	3	1	0	0	0	0	3	0	2	0	1	1	0	0	**15**
Mental Health Crisis Intervention	0	0	1	1	1	0	2	1	0	0	1	1	0	1	0	0	0	1	1	1	0	1	1	1	**15**
Hull CMHT - Clinical	0	0	0	1	0	1	0	0	1	2	3	0	0	0	0	0	1	0	0	0	0	1	1	0	**11**
Beverley and Haltemprice OP CMHT	0	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	1	0	2	0	0	0	0	0	**6**
Westlands Unit Nursing	0	0	0	0	1	0	0	1	0	1	0	0	0	0	0	0	1	1	0	0	0	0	1	0	**6**
Specialist Psychotherapy Service	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	1	0	**5**
Townend Court	0	0	0	0	0	0	0	1	1	1	0	0	1	0	0	0	0	0	0	0	0	0	0	1	**5**
Community Core Team - Rivendell	0	0	1	0	1	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**4**
Neuro Front Door	0	0	0	0	1	0	0	0	0	0	1	0	0	1	0	0	1	0	0	0	0	0	0	0	**4**
Newbridges Residential Unit	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0	**4**
Scarborough Core	0	0	1	1	0	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	**4**
Whitby Core	0	1	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	**4**
Hull and East Riding CAMHS	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	**3**
Hull and ER - Triage and Assessment	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	1	0	0	**3**
Hull Community Learning Disability	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	0	0	0	0	**3**
Lot 2 ER Specialist Clinical	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	**3**
Mill View Court Adult	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	1	0	**3**
Avondale - Wards	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**
Beverley Mental Health	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	**2**
CAMHS Crisis	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	**2**
ER Talking Therapies	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	**2**
Facilities Management	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**
Haltemprice Mental Health	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	**2**
Humber Centre - Swale	0	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Miranda House - PICU	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**
Total	**2**	**12**	**9**	**5**	**14**	**9**	**6**	**8**	**8**	**15**	**13**	**10**	**8**	**7**	**4**	**7**	**13**	**4**	**10**	**7**	**9**	**8**	**8**	**3**	**199**

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

	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	Mar-25	Apr-25	May-25	Rolling Total
Humber Primary Care Practice	7	5	15	9	11	7	7	8	4	6	5	4	7	4	7	3	8	2	6	7	1	0	4	5	**142**
Hull CMHT - Management, Non Clinical and Psychology	4	3	1	4	3	3	4	0	4	2	4	7	2	2	3	4	4	7	3	2	5	2	4	1	**78**
King Street Medical Centre	3	0	1	1	4	3	2	1	9	6	4	4	3	3	1	3	0	2	3	2	1	0	1	6	**63**
Market Weighton Practice	4	1	1	4	2	2	1	3	1	4	3	3	2	4	1	3	5	0	1	2	2	6	3	5	**63**
Mental Health Crisis Intervention	7	4	3	0	2	2	2	1	0	6	2	3	0	0	0	2	4	4	0	0	1	2	4	4	**53**
Hull CMHT - Clinical	3	1	0	1	1	0	0	2	1	3	3	5	2	3	0	1	1	1	1	2	0	1	1	1	**34**
ER Talking Therapies	0	1	0	1	1	0	1	0	3	3	0	2	0	0	0	0	0	0	0	0	0	1	3	1	**17**
Hull and ER - Triage and Assessment	0	0	0	0	1	1	0	0	0	0	0	1	0	1	0	0	1	1	1	2	1	1	1	0	**12**
Neuro Diagnostic	3	1	0	0	0	0	1	1	1	1	0	1	0	0	0	1	0	0	0	1	0	0	1	0	**12**
Community Core Team - Rivendell	0	2	1	1	1	0	0	1	1	0	1	1	0	0	0	0	0	0	1	0	0	1	0	0	**11**
Neuro Front Door	1	0	0	0	1	2	0	0	1	0	1	1	0	0	0	0	1	0	0	1	0	2	0	0	**11**
Scarborough Core	1	0	0	1	0	0	0	0	2	0	1	0	0	0	0	1	0	1	0	0	2	0	0	1	**10**
Avondale - Wards	0	0	0	0	0	0	0	0	0	0	0	1	0	2	0	0	1	0	2	0	1	1	0	0	**8**
Facilities Management	0	0	1	1	0	0	1	0	0	0	1	0	1	0	0	0	1	1	0	0	1	0	0	0	**8**
Haltemprice Mental Health	1	0	0	0	1	0	1	1	0	0	0	0	0	1	0	0	0	1	1	0	0	1	0	0	**8**
Hull and East Riding CAMHS	0	0	1	0	1	0	0	0	0	0	1	1	1	0	0	0	0	1	0	0	0	1	1	0	**8**
Specialist Psychotherapy Service	0	0	0	0	0	0	2	0	0	0	1	0	0	0	0	0	0	1	0	1	1	1	0	0	**7**
Beverley Mental Health	0	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	1	1	**5**
Community Core Team - Rivendell	0	0	1	0	0	1	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	**5**
Goole Mental Health	1	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	**5**
Childrens S&LT Hull & East Riding Service	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	1	0	0	0	0	1	0	**4**
Holderness Mental Health	0	0	0	0	0	1	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	**4**
Hull Community Learning Disability	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	2	0	0	**4**
Hull Integrated Care Team for Older People	0	0	0	0	0	0	2	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	**4**
Mill View Court Adult	0	0	2	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	**4**
Westlands Unit Nursing	0	1	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**4**
East Riding Community Learning Disability	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	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	1	0	0	1	1	0	0	0	**3**
Lot 2 ER Specialist Clinical	0	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	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

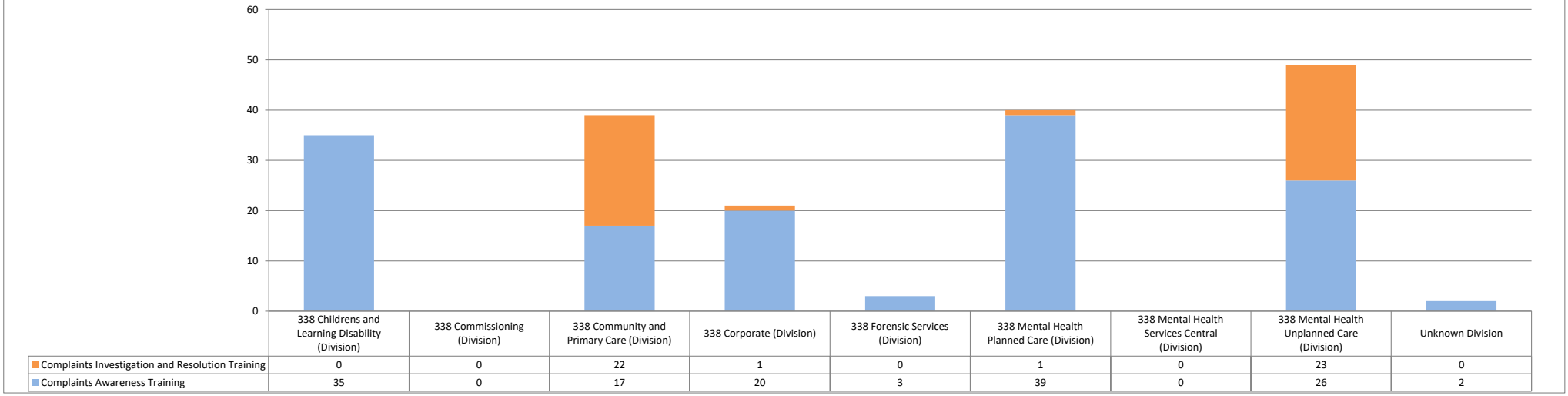
	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Rolling Total
Maister Lodge Nursing	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	**3**
Malton Ward	0	0	1	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	**3**
Mental Health Liaison Service	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	1	0	0	0	0	0	0	0	**3**
Newbridges Residential Unit	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0	**3**
PCN CMHT East Riding	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	1	0	0	0	0	0	**3**
Pine View	0	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**3**
0-19 Health Visitors & School Nurses - East Riding North	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	**2**
Bridlington & Driffield Mental Health	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	**2**
CAMHS Contact Point	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	**2**
Crisis and Intervention for Older People	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	**2**
ER Contact Point & PMHW	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	**2**
ER Memory Services	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**
Forensic Management	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	**2**
Hull Older Peoples MH Memory Services	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	**2**
Humber - Recovery Support Team - EIP	0	0	0	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Humber Centre - Ouse	0	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Humber Centre - Ullswater	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	**2**
Mill View Lodge Nursing	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	0	**2**
Miranda House - PICU	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**
North Yorkshire Therapy	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	**2**
Whitby UTC	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	**2**
Whitby Ward	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	**2**
Total	**39**	**20**	**30**	**29**	**33**	**22**	**26**	**23**	**29**	**36**	**30**	**42**	**22**	**22**	**14**	**21**	**33**	**27**	**21**	**22**	**19**	**25**	**32**	**26**	**643**

Quality Dashboard

Domain

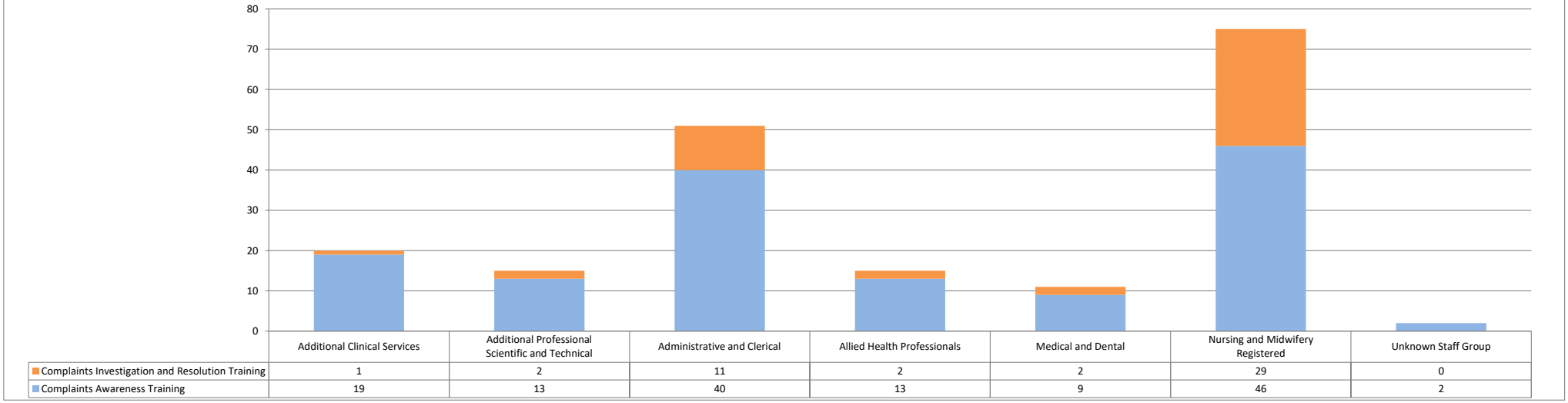
Section 1.3.5 Complaints Training — 12 months rolling data

Complaints Training Completed by Course Type and Division



	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	22	1	0	1	0	23	0
Complaints Awareness Training	35	0	17	20	3	39	0	26	2

Complaints Training Completed by Course Type and Staff Group

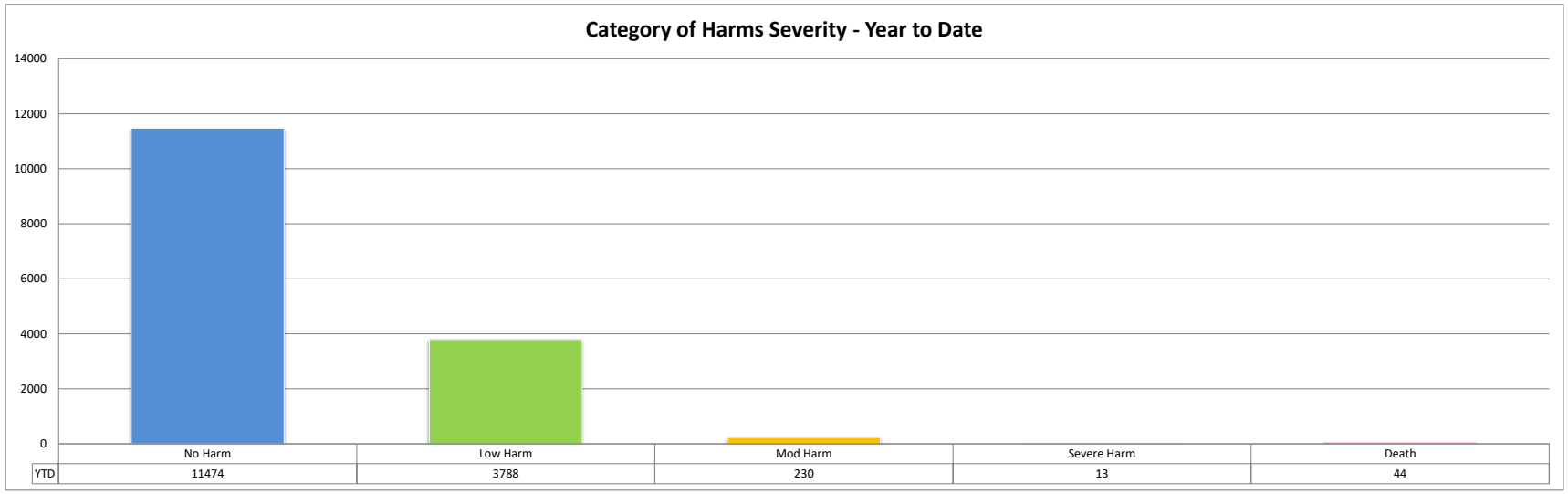


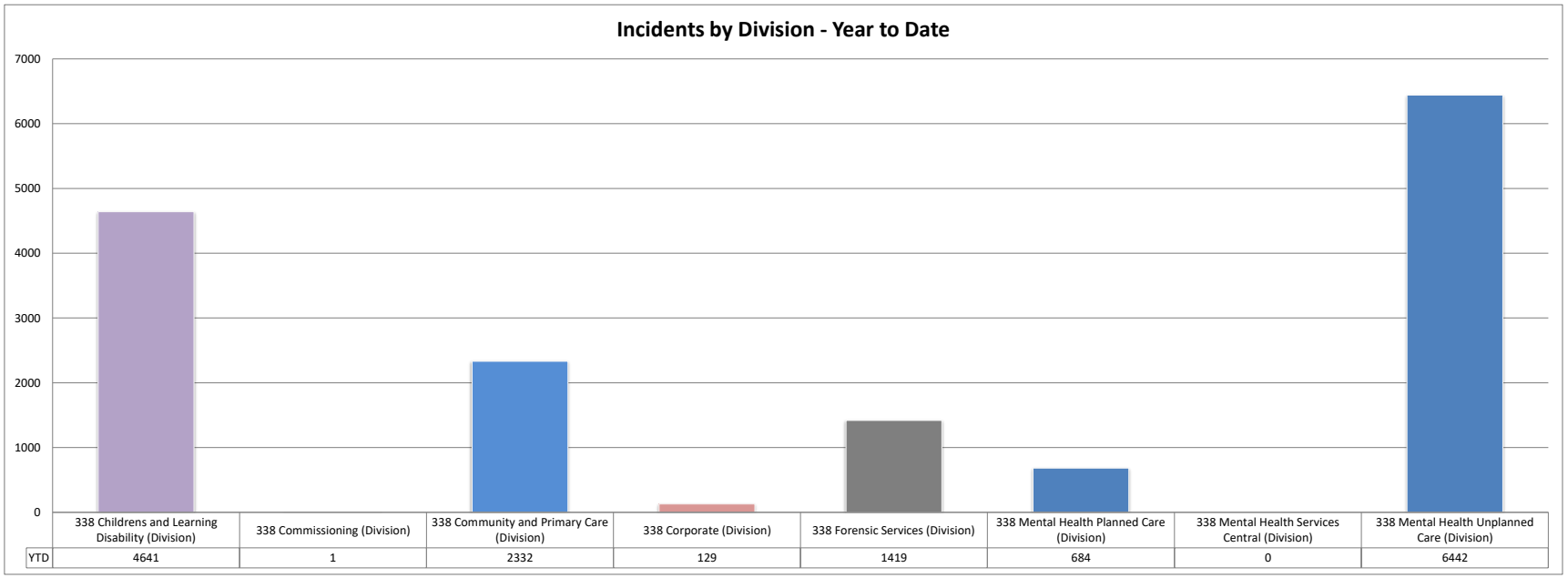
	Additional Clinical Services	Additional Professional Scientific and Technical	Administrative and Clerical	Allied Health Professionals	Medical and Dental	Nursing and Midwifery Registered	Unknown Staff Group
Complaints Investigation and Resolution Training	1	2	11	2	2	29	0
Complaints Awareness Training	19	13	40	13	9	46	2

Domain

Clinical Risk

Quality Report

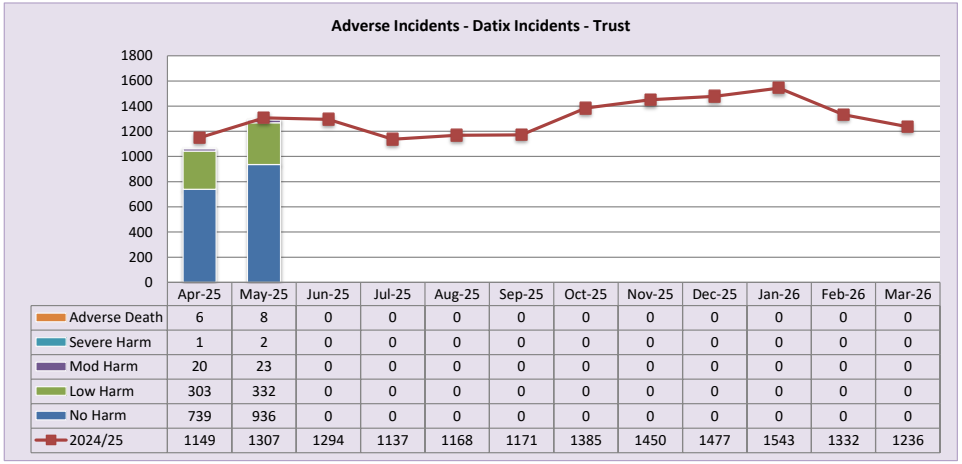




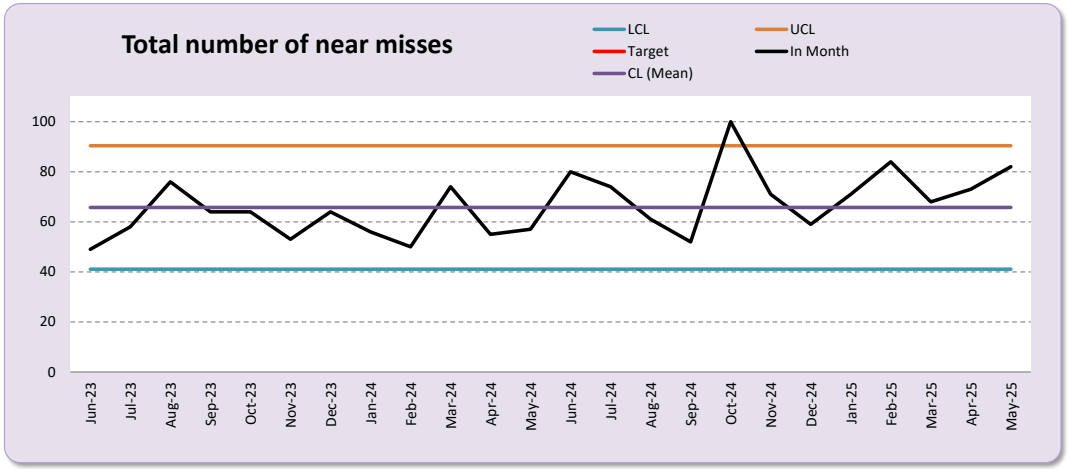
Quality Dashboard

Domain

Section 2.1 Clinical Risk — Overall Trust Position

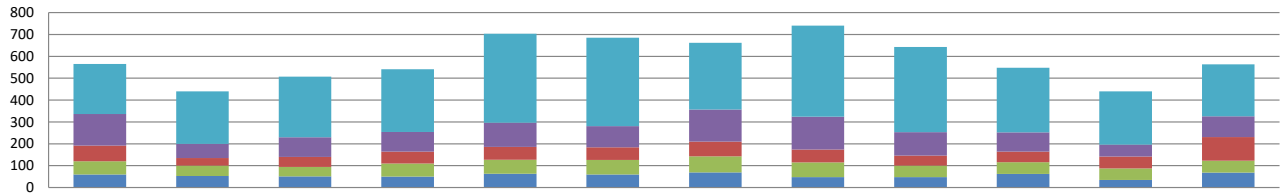


	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26
Adverse Death	6	8	0	0	0	0	0	0	0	0	0	0
Severe Harm	1	2	0	0	0	0	0	0	0	0	0	0
Mod Harm	20	23	0	0	0	0	0	0	0	0	0	0
Low Harm	303	332	0	0	0	0	0	0	0	0	0	0
No Harm	739	936	0	0	0	0	0	0	0	0	0	0
2024/25	1149	1307	1294	1137	1168	1171	1385	1450	1477	1543	1332	1236

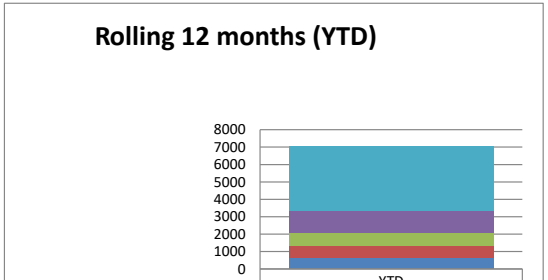


National Safety Alerts : Central Alert System (CAS)	Apr-25	May-25
Number issued in month	0	0
Number applicable to HTFT	0	0
Number open pending action	0	0
Number closed in the month	0	0
Number of breaches	0	0

Incident Analysis	Apr-25	May-25
Never Events	0	0
% of Harm Free Care	99.5%	99.7%
% of incidents that resulted in Severe Harm or Death	0.7%	0.8%



	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Self Harm	229	240	277	287	407	404	305	416	390	296	244	237
Violence & Aggression - Physical	144	65	90	90	110	97	147	150	107	88	54	95
Violence & Aggression - Verbal	72	35	46	54	59	58	67	59	46	48	55	108
Death Of Patient	60	47	43	60	64	66	74	67	52	54	52	55
Patient Care Problem	60	53	51	50	63	60	69	48	48	62	35	68



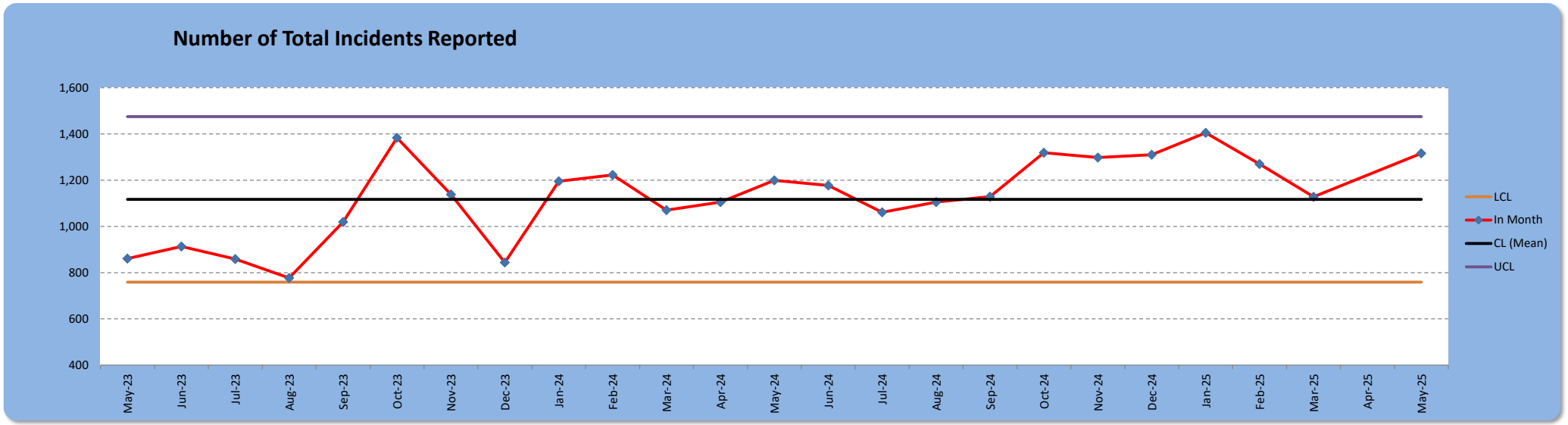
	YTD
Self Harm	3732
Violence & Aggression - Physical	1237
Death Of Patient	694
Violence & Aggression - Verbal	707
Patient Care Problem	667

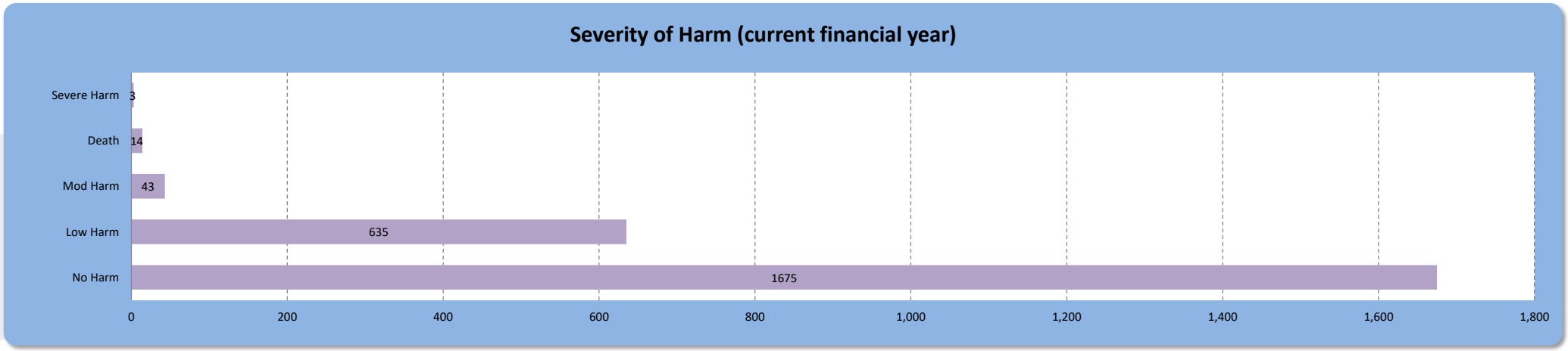
Quality Dashboard

Domain

Section 2.1	Clinical Risk	Overall Trust Position

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

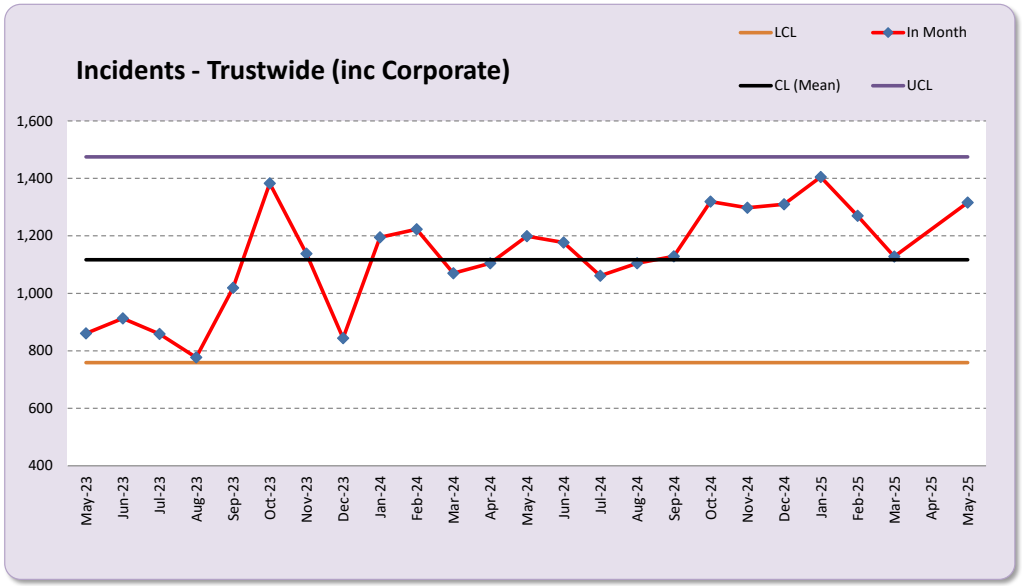


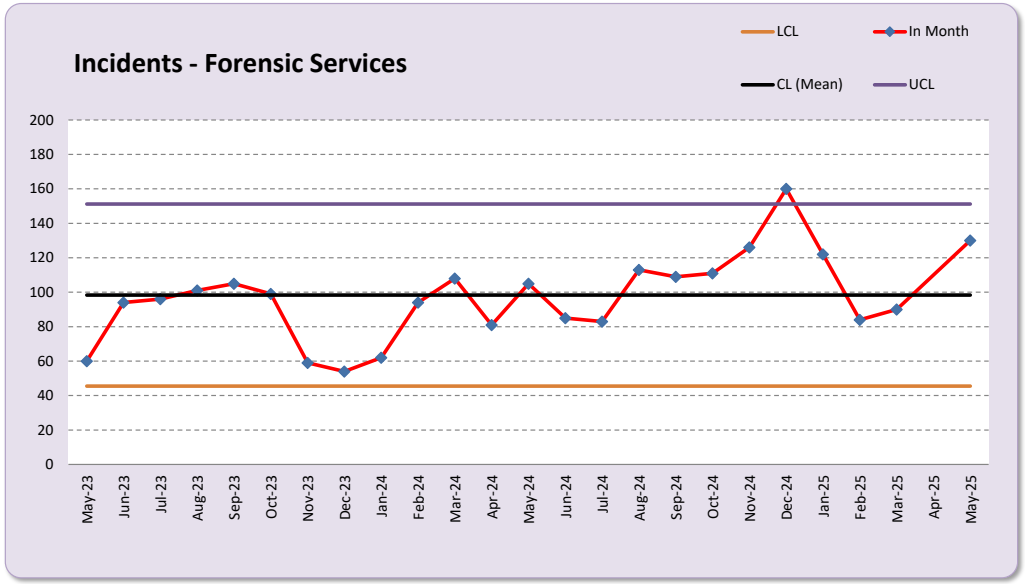


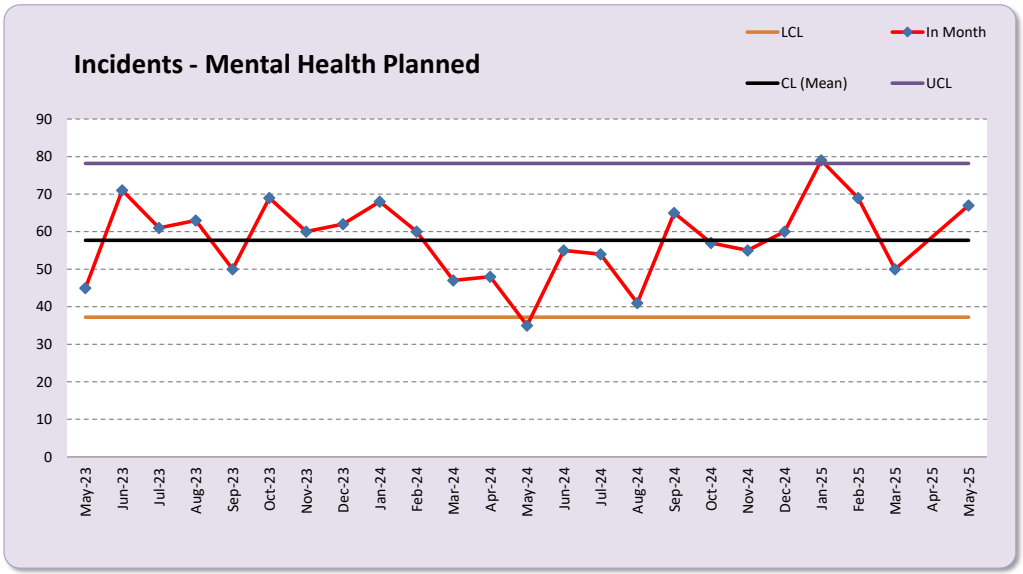
Quality Dashboard

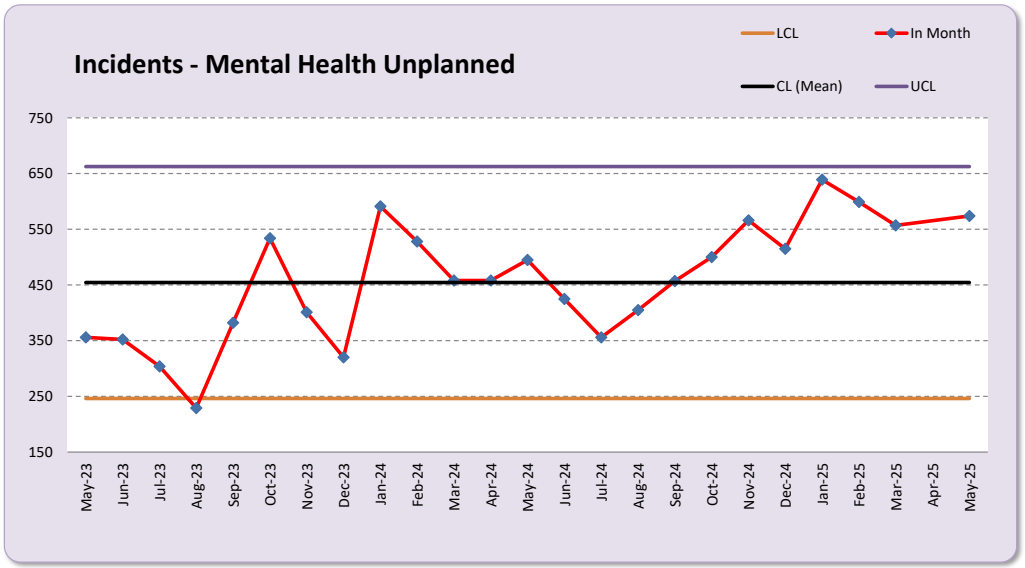
Domain

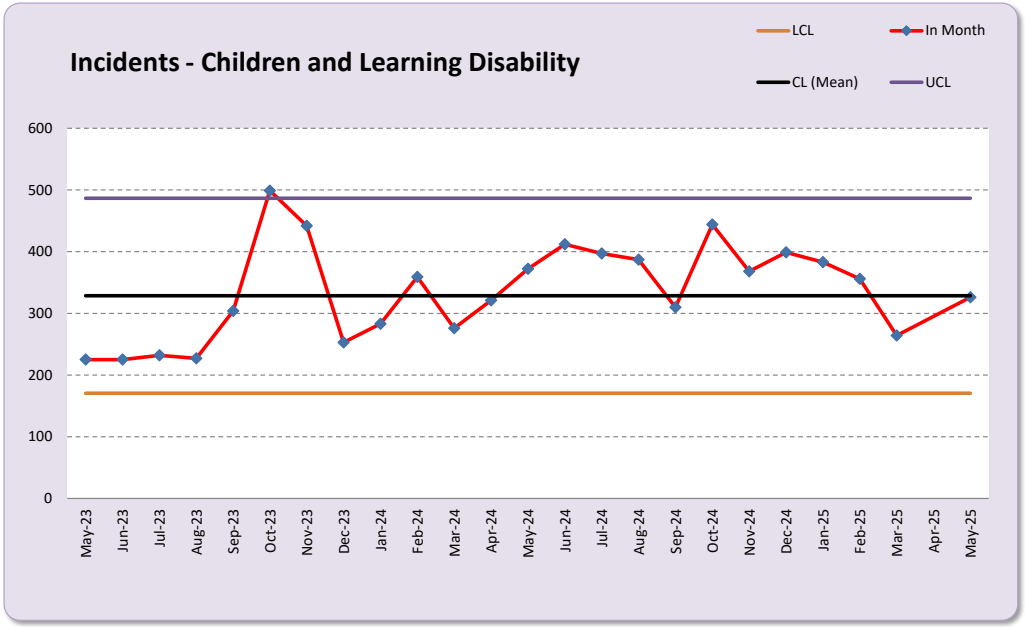
Section 2.3	Clinical Risk	Incidents Registered by Division (Statistical Process Charts)	Incidents - Division SPCs

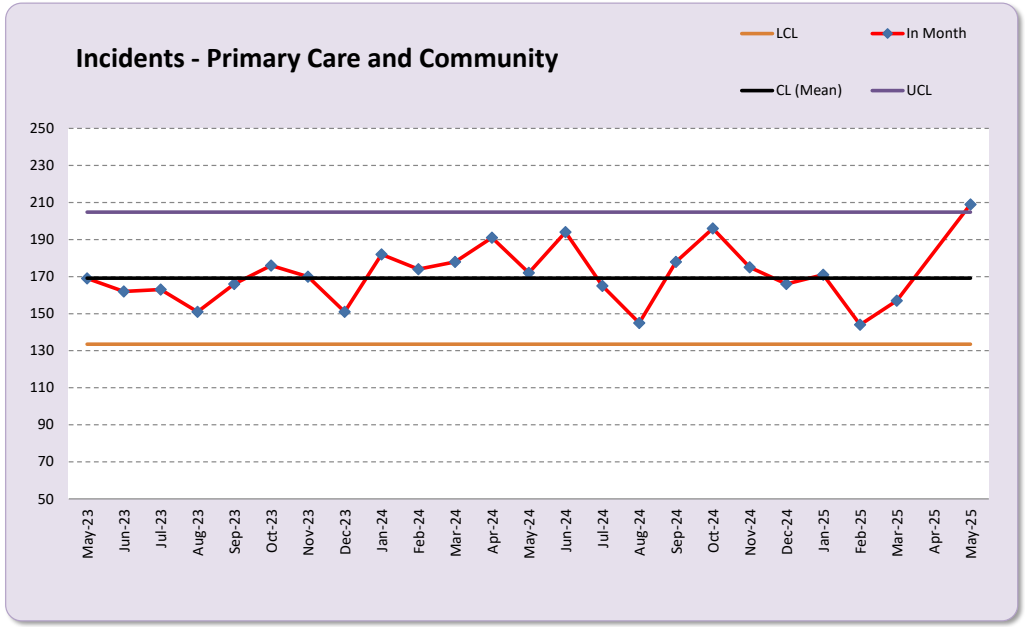









Incidents - Children and Learning Disability
LCL
In Month
CL (Mean)
UCL
600
500
400
300
200
100
0
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
May-24
Jun-24
Jul-24
Aug-24
Sep-24
Oct-24
Nov-24
Dec-24
Jan-25
Feb-25
Mar-25
Apr-25
May-25

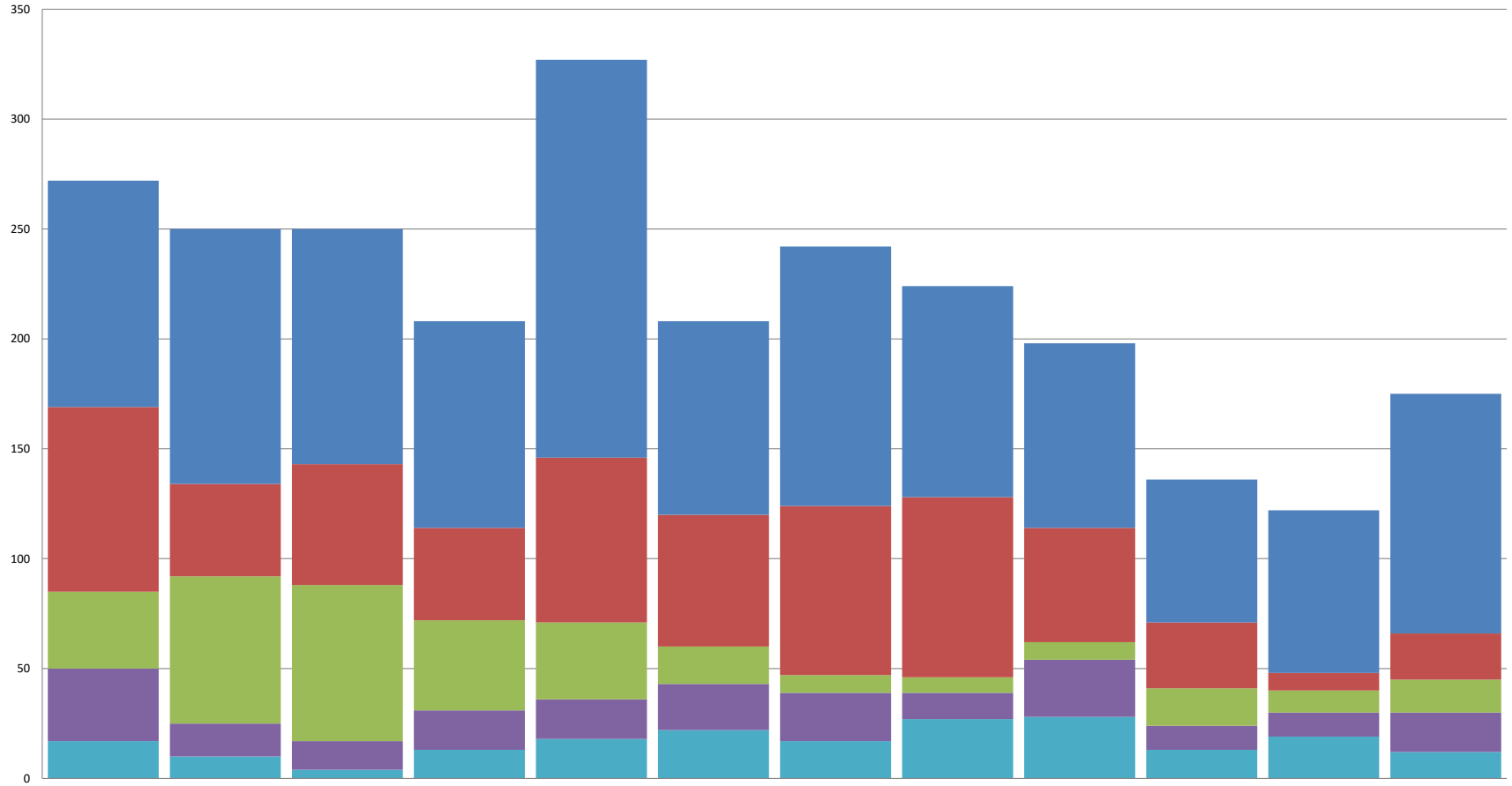

Incidents - Primary Care and Community
LCL
In Month
CL (Mean)
UCL
250
230
210
190
170
150
130
110
90
70
50
May-23
Jun-23
Jul-23
Aug-23
Sep-23
Oct-23
Nov-23
Dec-23
Jan-24
Feb-24
Mar-24
Apr-24
May-24
Jun-24
Jul-24
Aug-24
Sep-24
Oct-24
Nov-24
Dec-24
Jan-25
Feb-25
Mar-25
Apr-25
May-25

Quality Dashboard

Domain

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

Childrens and Learning Disability (Division)



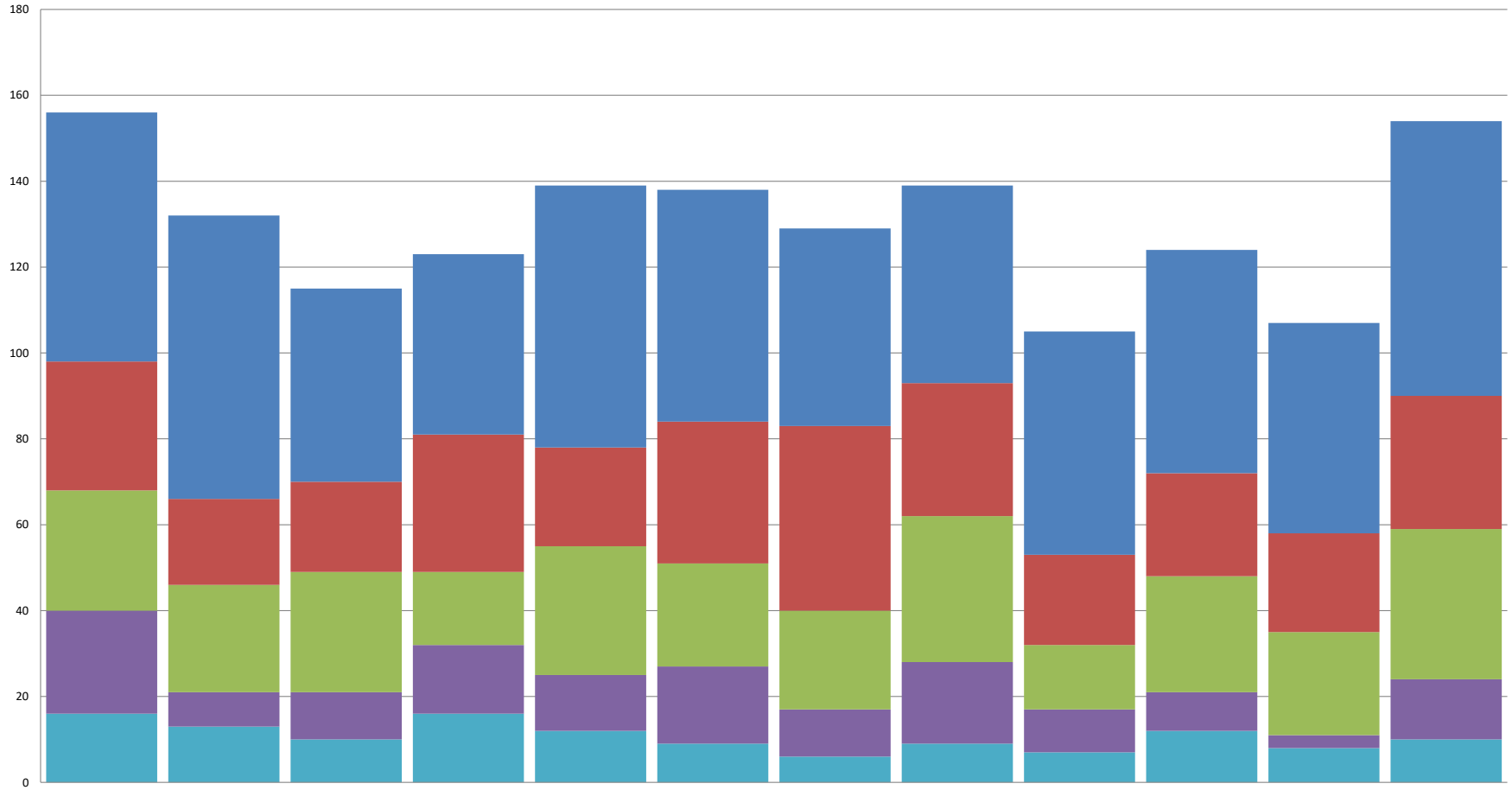
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Self Harm	103	116	107	94	181	88	118	96	84	65	74	109
Violence & Aggression - Physical	84	42	55	42	75	60	77	82	52	30	8	21
Miscellaneous. Physical or MH Problems	35	67	71	41	35	17	8	7	8	17	10	15
Violence & Aggression - Verbal	33	15	13	18	18	21	22	12	26	11	11	18
Concern for Person(s) (inc. Neglect / Emotional Harm)	17	10	4	13	18	22	17	27	28	13	19	12

Quality Dashboard

Domain

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

Community & Primary Care (Division)



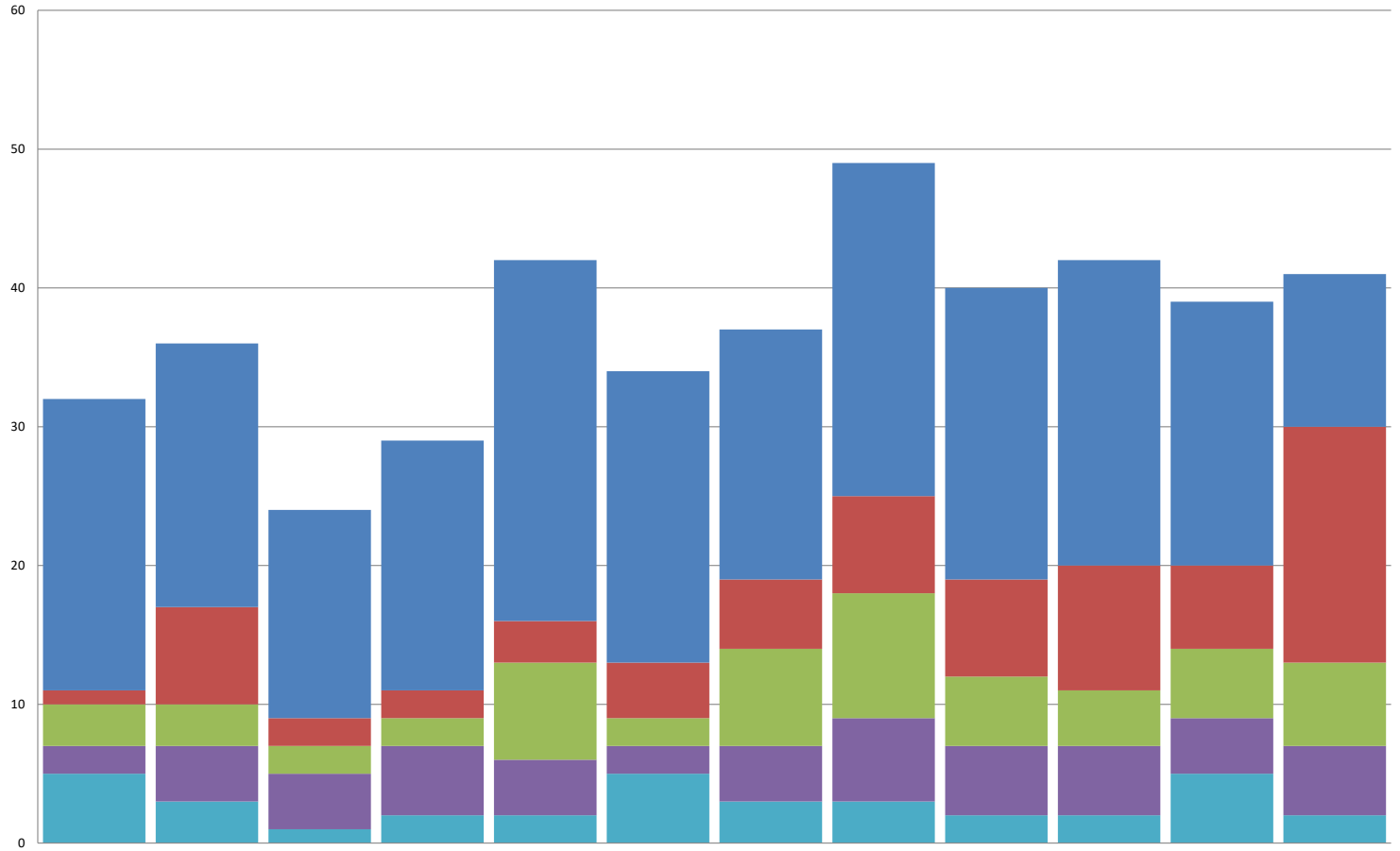
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Pressure Ulcer	58	66	45	42	61	54	46	46	52	52	49	64
Death Of Patient	30	20	21	32	23	33	43	31	21	24	23	31
Tissue Breakdown (Not Pressure Ulcer)	28	25	28	17	30	24	23	34	15	27	24	35
Problems with Admission / Discharge / Transfer	24	8	11	16	13	18	11	19	10	9	3	14
Patient Care Problem	16	13	10	16	12	9	6	9	7	12	8	10

Quality Dashboard

Domain

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

Mental Health Planned (Division)



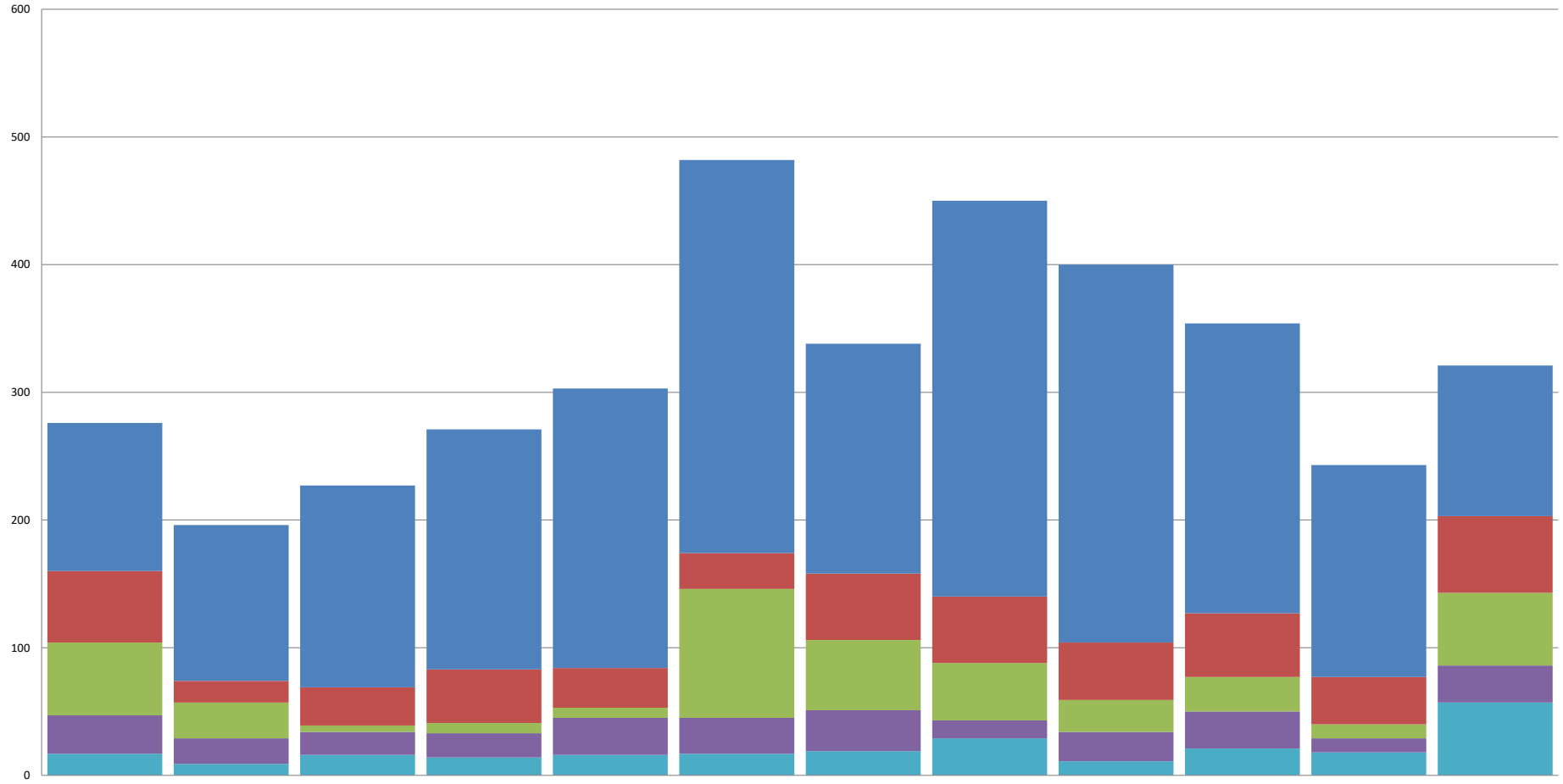
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Death Of Patient	21	19	15	18	26	21	18	24	21	22	19	11
Patient Care Problem	1	7	2	2	3	4	5	7	7	9	6	17
Concern for Person(s) (inc. Neglect / Emotional Harm)	3	3	2	2	7	2	7	9	5	4	5	6
Patient Information	2	4	4	5	4	2	4	6	5	5	4	5
Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	5	3	1	2	2	5	3	3	2	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)



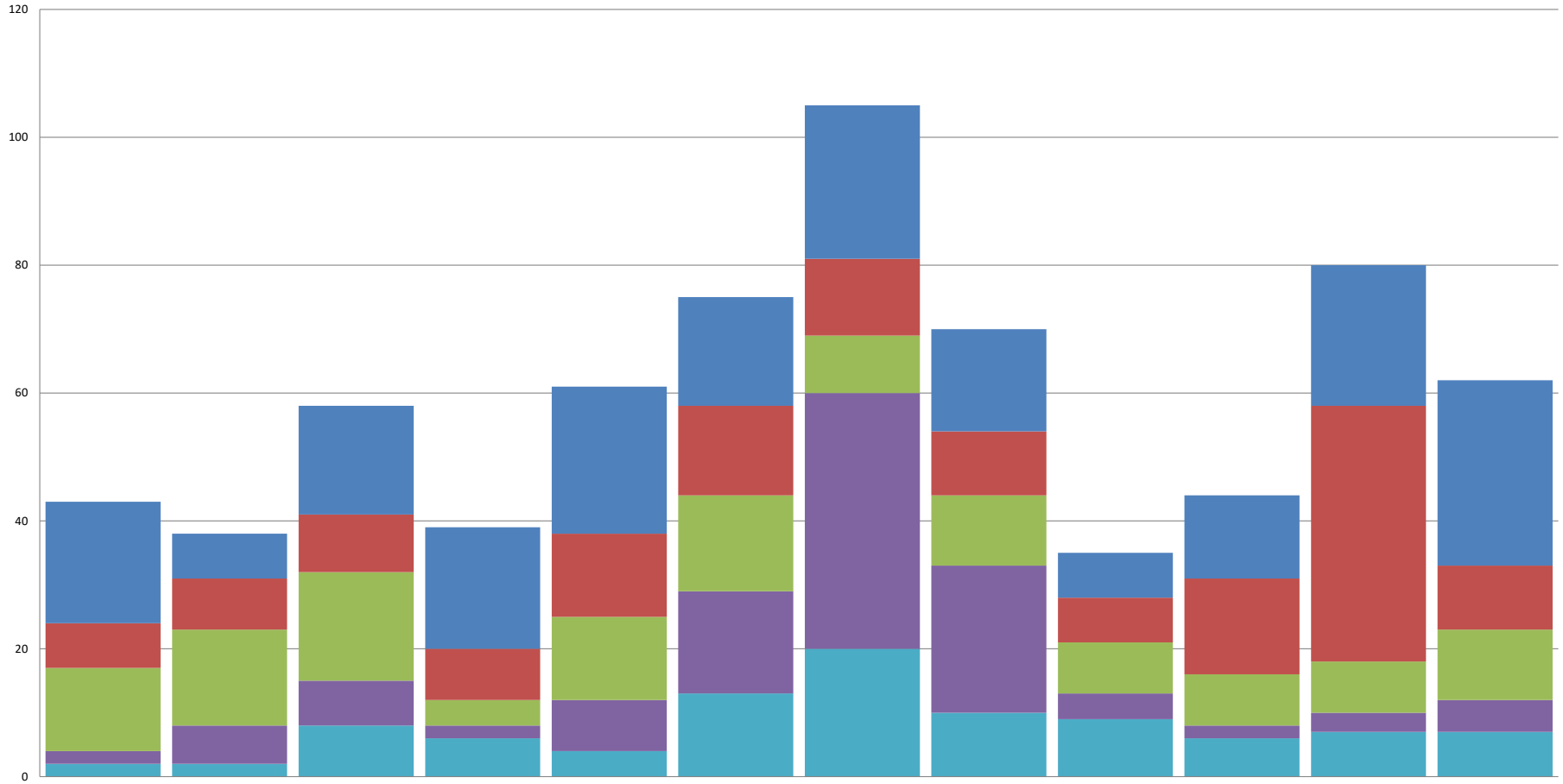
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Self Harm	116	122	158	188	219	308	180	310	296	227	166	118
Violence & Aggression - Physical	56	17	30	42	31	28	52	52	45	50	37	60
Seclusion Issue	57	28	5	8	8	101	55	45	25	27	11	57
Patient Care Problem	30	20	18	19	29	28	32	14	23	29	11	29
Violence & Aggression - Verbal	17	9	16	14	16	17	19	29	11	21	18	57

Quality Dashboard

Domain

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

Secure Services (Division)



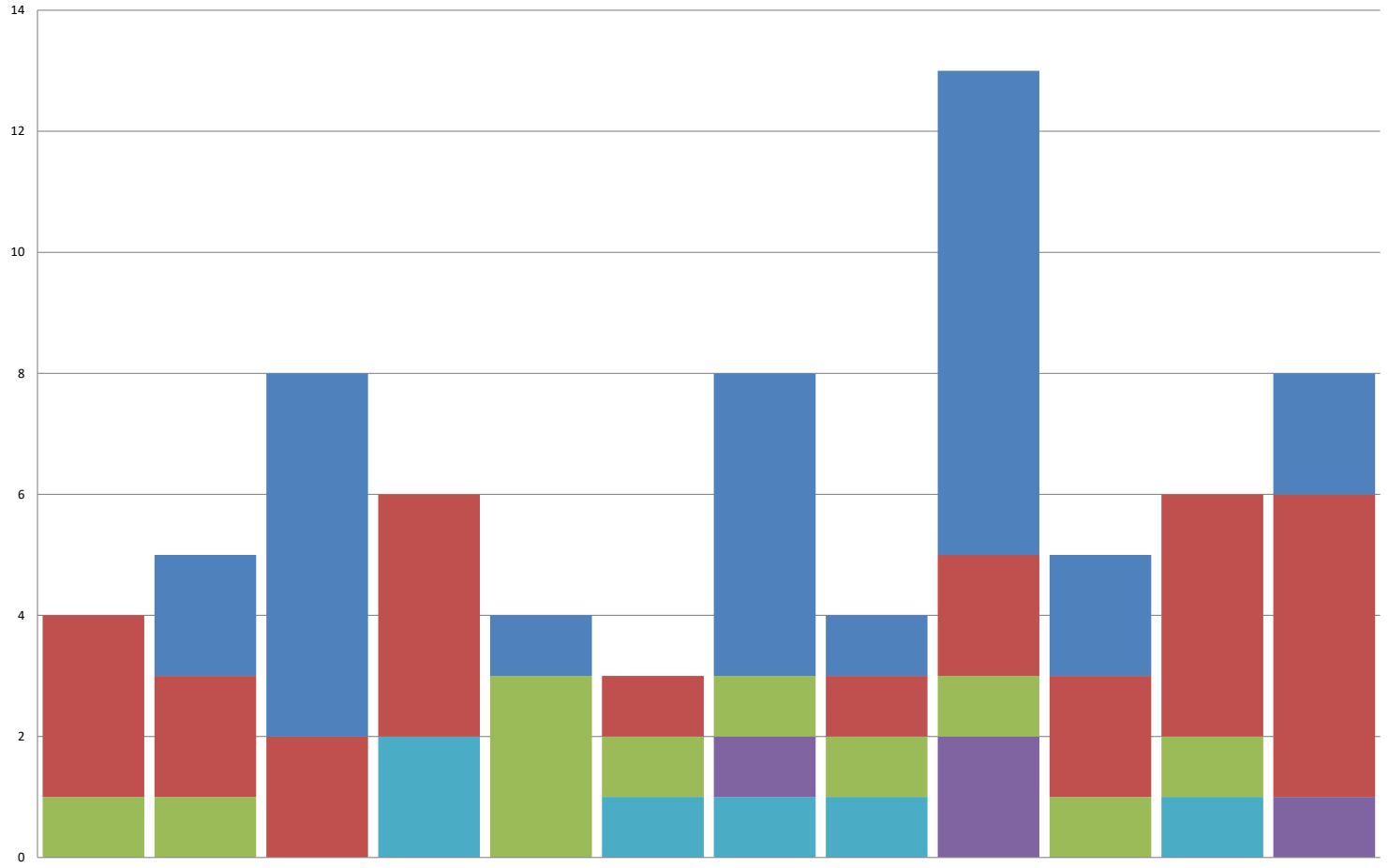
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Violence & Aggression - Verbal	19	7	17	19	23	17	24	16	7	13	22	29
Security Incident	7	8	9	8	13	14	12	10	7	15	40	10
Inappropriate behaviour (not violent)	13	15	17	4	13	15	9	11	8	8	8	11
Seclusion Issue	2	6	7	2	8	16	40	23	4	2	3	5
Violence & Aggression - Non-Physical	2	2	8	6	4	13	20	10	9	6	7	7

Quality Dashboard

Domain

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

Corporate (Division)



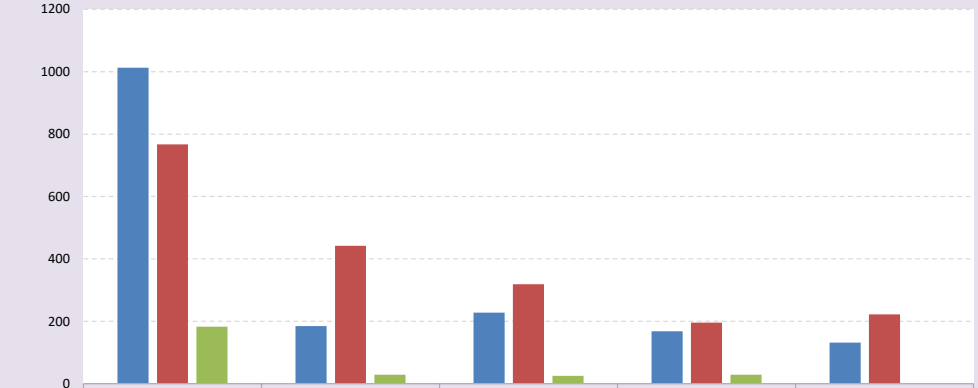
	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25
Patient Information	0	2	6	0	1	0	5	1	8	2	0	2
Information Incident	3	2	2	4	0	1	0	1	2	2	4	5
Security Incident	1	1	0	0	3	1	1	1	1	1	1	0
Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	0	0	0	0	0	0	1	0	2	0	0	1
Network / System security	0	0	0	2	0	1	1	1	0	0	1	0

Quality Dashboard

Domain

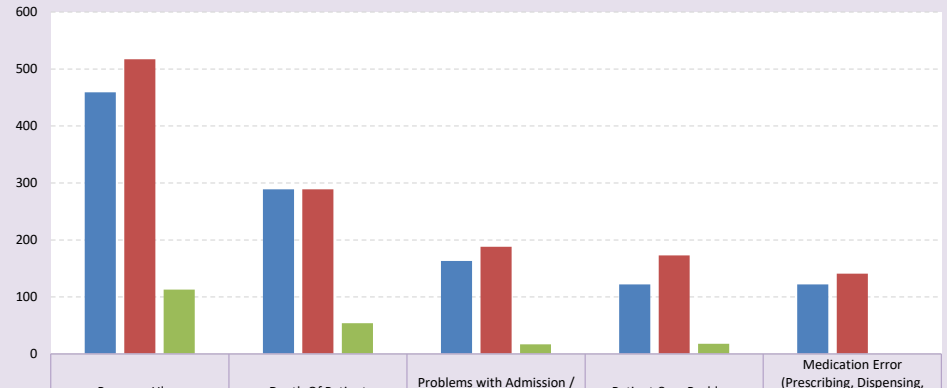
Section 2.3	Clinical Risk	Incidents Registered by Division (by financial year)	Incidents - Division (by year)

Childrens and Learning Disability (Division)



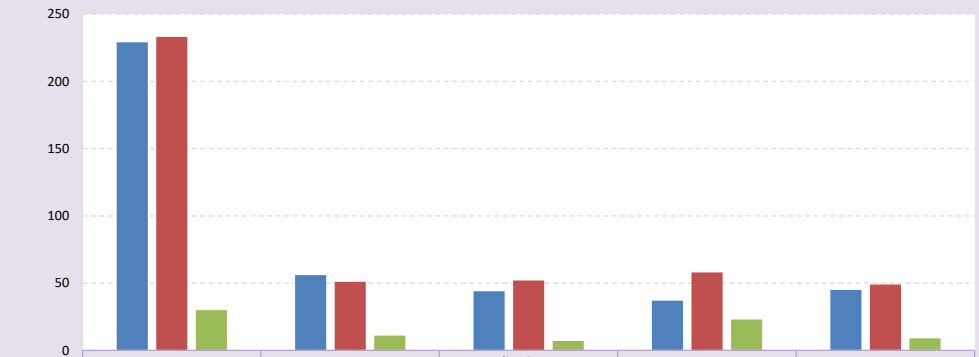
	Self Harm	Violence & Aggression - Physical	Miscellaneous. Physical or MH Problems	Violence & Aggression - Verbal	Patient Information
2022-2023	1013	185	228	168	132
2023-2024	767	442	319	196	222
2024-2025	183	29	25	29	0

Community and Primary Care (Division)



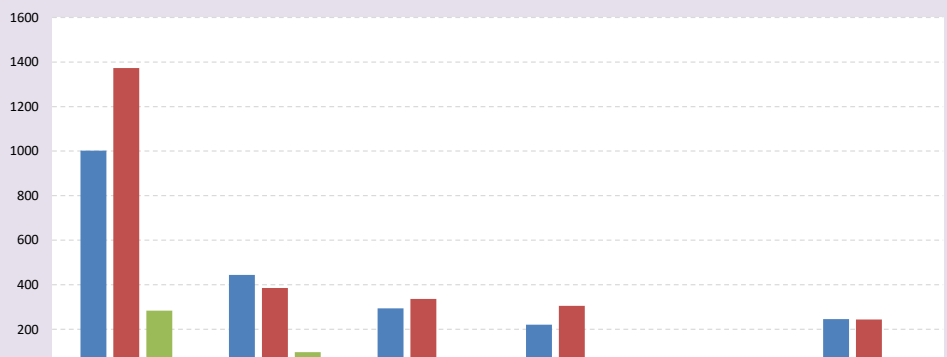
	Pressure Ulcer	Death Of Patient	Problems with Admission / Discharge / Transfer	Patient Care Problem	Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)
2022-2023	459	289	163	122	122
2023-2024	517	289	188	173	141
2024-2025	113	54	17	18	0

Mental Health Planned Care (Division)



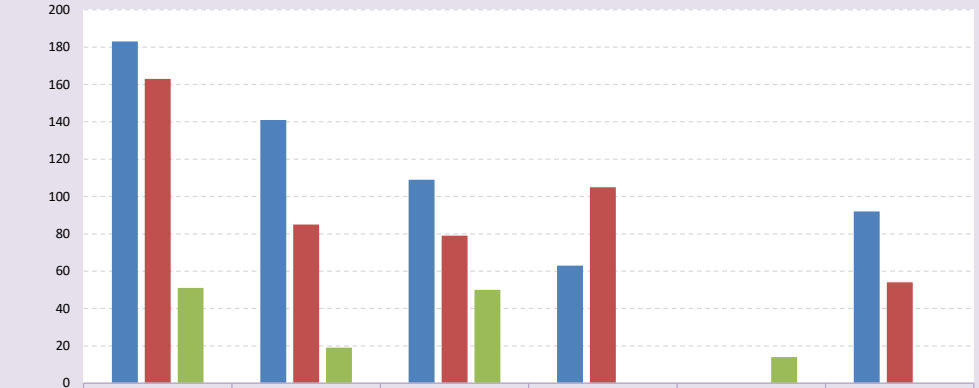
	Death Of Patient	Concern for Person(s) (inc. Neglect / Emotional Harm)	Medication Error (Prescribing, Dispensing, Administration and Adverse Drug Reactions Only)	Patient Care Problem	Patient Information
2022-2023	229	56	44	37	45
2023-2024	233	51	52	58	49
2024-2025	30	11	7	23	9

Mental Health Unplanned Care (Division)



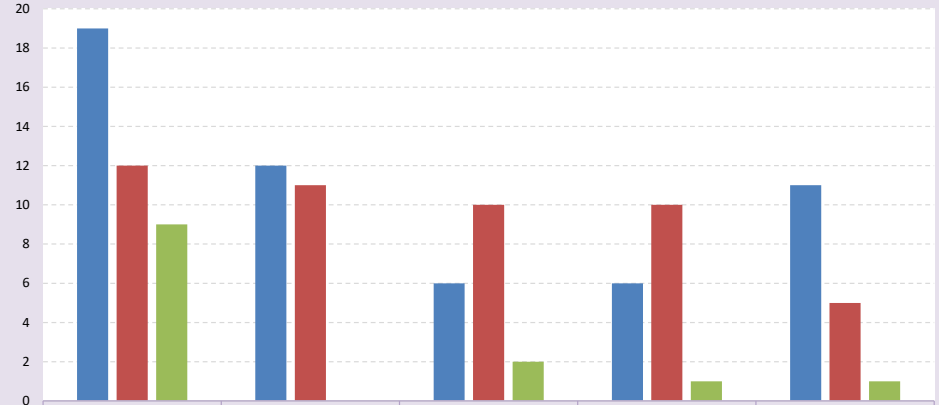
	Self Harm	Violence & Aggression - Physical	Patient Care Problem	Inappropriate behaviour (not violent)	Violence & Aggression - Non-Physical	Absconded (i.e. patient left ward / service without permission)
2022-2023	1002	444	294	221		246
2023-2024	1373	385	336	305		244
2024-2025	284	97	40	0	0	0

Forensic Services (Division)



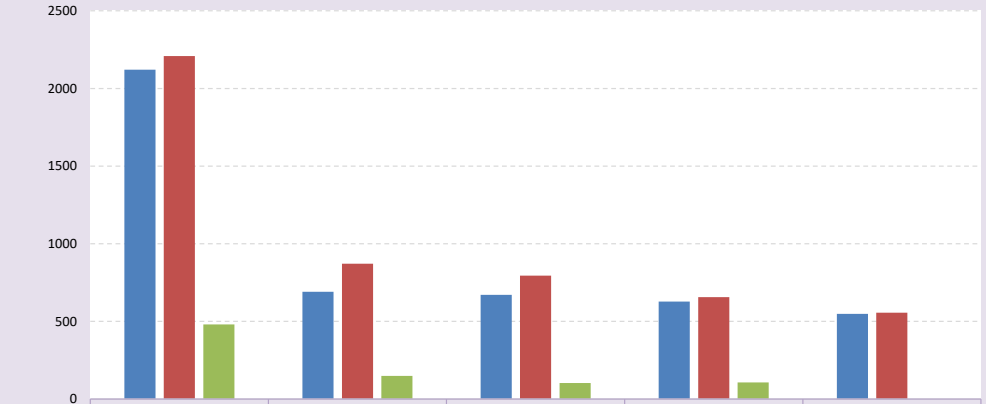
	Violence & Aggression - Verbal	Inappropriate behaviour (not violent)	Security Incident	Staffing Level Shortage	Violence & Aggression - Non-Physical	Self Harm
2022-2023	183	141	109	63		92
2023-2024	163	85	79	105		54
2024-2025	51	19	50	0	14	0

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	9	0	2	1	1

Trustwide

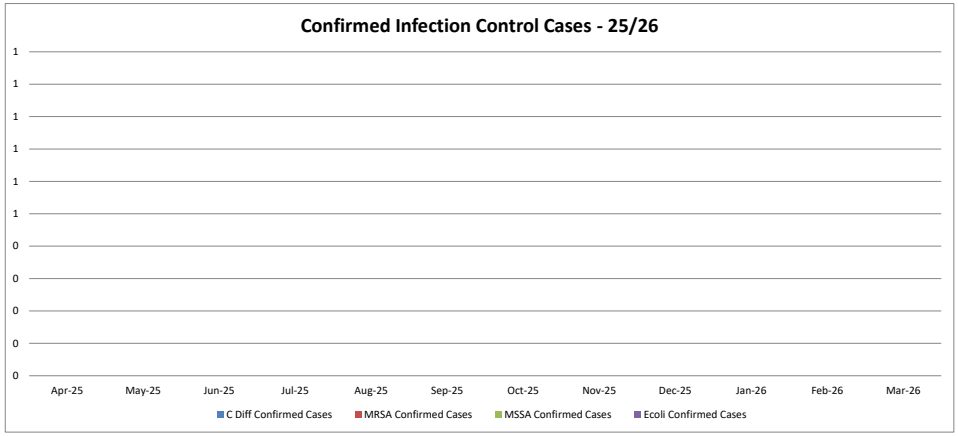


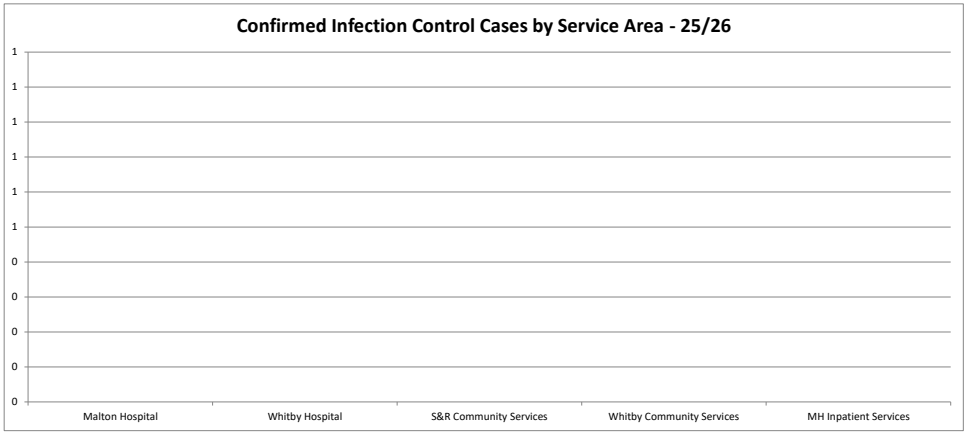
	Self Harm	Violence & Aggression - Physical	Patient Care Problem	Death Of Patient	Inappropriate behaviour (not violent)
2022-2023	2121	691	671	628	549
2023-2024	2208	872	795	656	556
2024-2025	481	149	103	107	0

Quality Dashboard

Domain

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



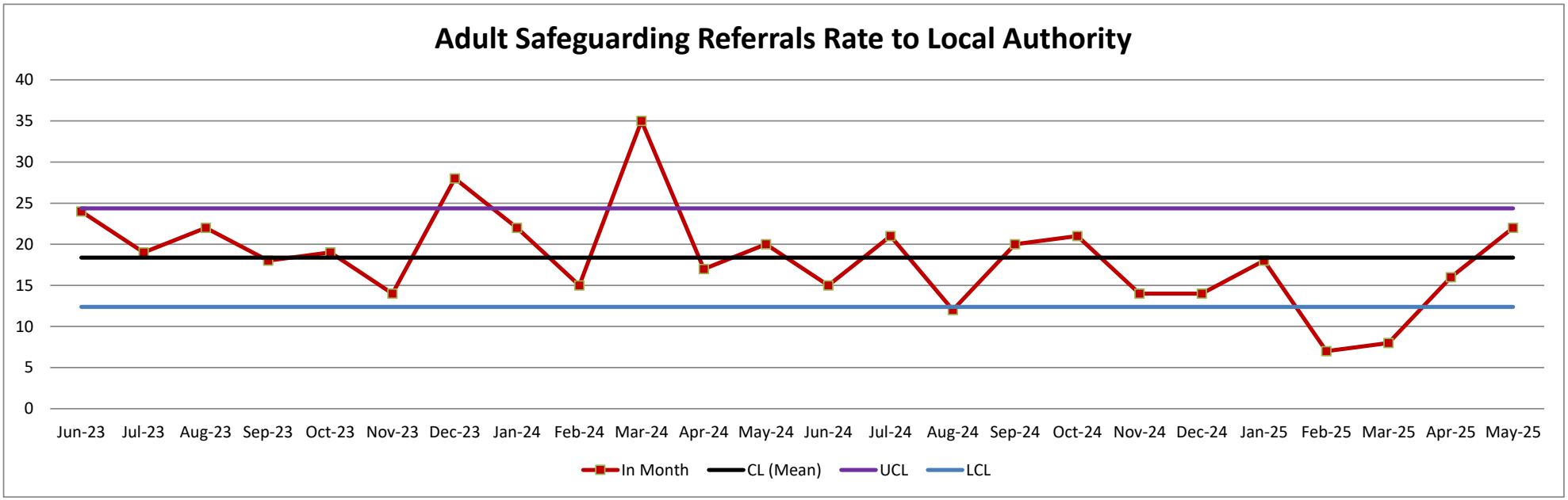


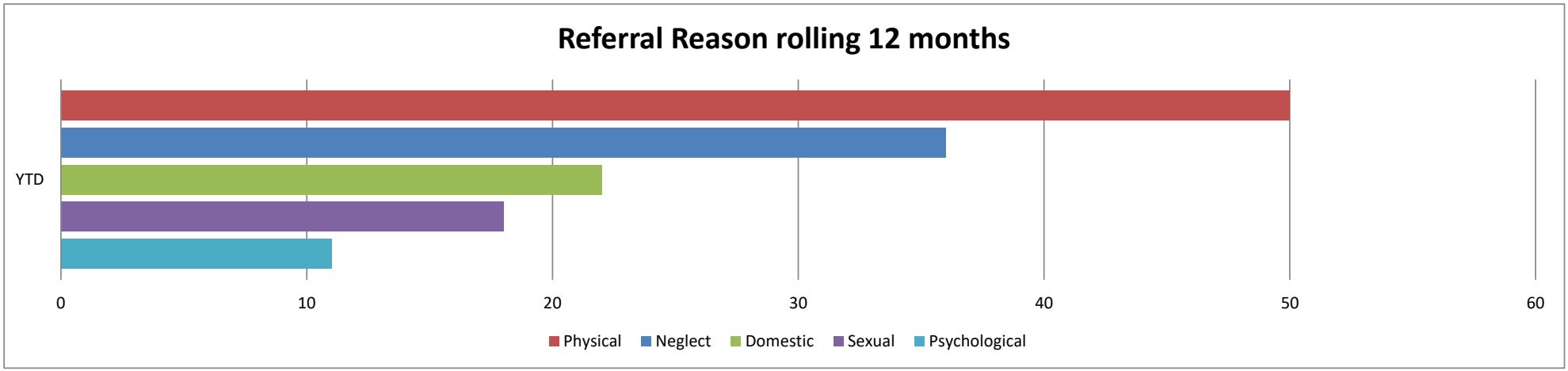
Narrative, Updates and Conclusions
Q1
Q2
Q3
Q4

Quality Dashboard

Domain

Section 2.5	Clinical Risk	Adult Safeguarding Referrals

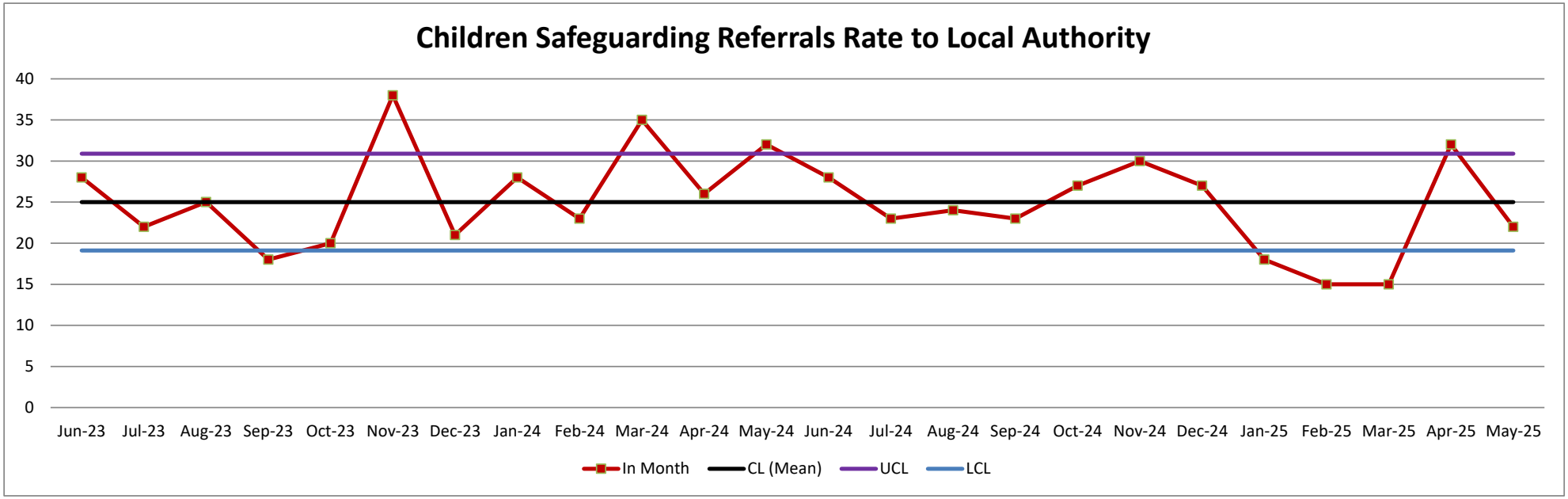


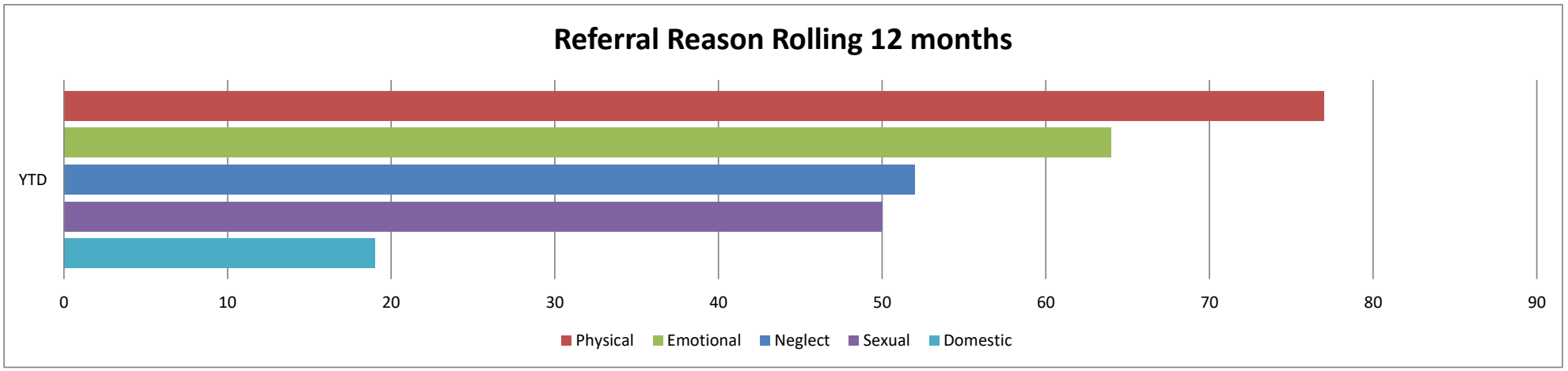


Quality Dashboard

Domain

Section 2.5	Clinical Risk	Children Safeguarding Referrals





HUMBER TEACHING NHS FOUNDATION TRUST
SAFER STAFFING INPATIENT DASHBOARD

Staffing and Quality Indicators
Contract Period: 2025-26
Reporting Month: Apr-25

NHS Humber Teaching NHS Foundation Trust

Shown one month in arrears

Units							Bank/Agency Hours				Average Safer Staffing Fill Rates				High Level Indicators																			Indicator Totals	
											Day		Night		QUALITY INDICATORS																				
															Month				YTD																
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	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)	Mar-25	Apr-25
Adult MH	Avondale	Adult MH Assessment	31.0	✓	67%	✓ 12.7	↑	14.3%	↑	1.6%	↑	✓ 106%	✓ 100%	✓ 98%	✓ 98%	0	2	0	0	0	2	0	0	✓ 100.0%	✓ 94.0%	✓ 92.3%	✓ 87.5%	✓ 3.4%	0.0	✓ 0	✓ 0
	New Bridges	Adult MH Treatment (M)	38.0	✗	96%	! 7.8	↓	11.9%	↑	0.0%	↑	✓ 99%	✓ 103%	✓ 100%	✓ 101%	0	3	0	0	0	3	0	0	✓ 100.0%	✓ 97.2%	✓ 93.3%	✓ 100.0%	✓ 3.7%	3.0	! 2	✓ 1
	Westlands	Adult MH Treatment (F)	22.7	!	90%	! 8.0	↑	32.5%	↑	1.2%	↓	! 88%	! 83%	✓ 100%	✓ 100%	0	4	2	0	0	4	2	0	✓ 96.4%	✓ 90.5%	✓ 82.4%	✓ 82.4%	✗ 12.4%	-0.4	! 2	✓ 1
	Mill View Court	Adult MH Treatment	33.1	✗	96%	! 7.5	↑	12.7%	↑	0.8%	↑	✓ 93%	✓ 98%	✓ 100%	✓ 98%	0	0	1	0	0	0	1	0	✓ 96.7%	✓ 93.2%	✓ 82.4%	✓ 100.0%	✓ 3.6%	0.6	✓ 1	✓ 1
	STARS	Adult MH Rehabilitation	13.8	✗	97%	✓ 17.4	↑	42.0%	↓	1.9%	↓	✓ 98%	✓ 92%	✓ 101%	✓ 100%	0	0	0	0	0	0	0	0	✓ 92.3%	✓ 90.3%	✓ 80.0%	✓ 77.8%	✗ 5.2%	2.0	! 2	! 2
	PICU	Adult MH Acute Intensive	32.3	✓	56%	✓ 40.3	↑	38.8%	↑	2.4%	↑	✓ 115%	✓ 102%	✓ 99%	✓ 130%	0	12	0	0	0	12	0	0	! 82.8%	✓ 94.2%	✓ 100.0%	✓ 100.0%	! 5.0%	2.6	✓ 1	✓ 0
OP MH	Maister Lodge	Older People Dementia Treatment	35.6	✓	67%	✓ 19.5	↑	28.4%	↑	0.9%	↑	✓ 111%	✓ 93%	✓ 100%	✓ 133%	0	7	0	0	0	7	0	0	✓ 95.0%	✓ 91.8%	✓ 83.3%	✓ 84.0%	✗ 9.9%	0.5	✓ 1	✓ 1
	Mill View Lodge	Older People Treatment	32.1	✓	85%	✓ 17.7	↑	16.4%	↑	0.5%	↑	✗ 72%	! 86%	✓ 100%	✓ 100%	0	1	0	0	0	1	0	0	! 75.9%	✓ 96.8%	✓ 84.6%	✓ 95.0%	✗ 11.9%	1.0	! 4	! 2
	Maister Court	Older People Treatment	19.4	✗	101%	✓ 25.9	↑	24.8%	↑	0.0%	→	✓ 112%	✗ 71%	✓ 130%	! 88%	0	7	0	0	0	7	0	0	✓ 87.0%	! 83.7%	✗ 37.5%	✓ 90.9%	✗ 9.5%	0.0	! 3	! 4
	Pine View	Forensic Low Secure	29.7	✓	69%	✓ 44.3	↑	23.9%	↑	0.0%	→	✓ 93%	✗ 72%	! 82%	✓ 105%	0	0	0	0	0	0	0	0	✓ 100.0%	✓ 94.7%	✓ 92.3%	✓ 90.0%	✗ 11.8%	1.1	! 2	! 2
	Derwent	Forensic Medium Secure	28.7	✓	71%	✓ 18.0	↑	27.1%	↑	0.0%	→	✓ 100%	! 76%	✓ 103%	✓ 127%	0	4	0	0	0	4	0	0	✓ 100.0%	✓ 95.2%	✓ 83.3%	✓ 81.3%	! 5.1%	-0.8	! 2	✓ 0
	Ouse	Forensic Medium Secure	26.6	✓	86%	✓ 9.2	↓	28.1%	↑	0.0%	→	! 88%	✓ 104%	✓ 117%	✓ 99%	0	0	0	0	0	0	0	0	✓ 100.0%	✓ 93.2%	✓ 90.0%	✓ 93.8%	✗ 16.7%	-0.8	✓ 1	✓ 1
	Swale	Personality Disorder Medium Secure	27.5	✗	93%	✓ 14.5	↑	24.5%	↑	0.0%	→	! 87%	✓ 98%	✓ 104%	✓ 99%	0	0	0	0	0	0	0	0	✓ 100.0%	✓ 99.7%	✓ 100.0%	✓ 100.0%	✓ 0.8%	3.0	✓ 1	✓ 1
	Ullswater (10 Beds)	Learning Disability Medium Secure	30.2	!	90%	✓ 15.8	↑	27.2%	↑	0.0%	→	! 88%	✓ 127%	✓ 103%	✓ 140%	0	1	0	0	0	1	0	0	✓ 90.0%	✓ 95.5%	✓ 90.9%	✓ 89.5%	✗ 14.3%	-0.7	✓ 1	✓ 1
Child & LD	Townend Court	Learning Disability	42.4	✓	36%	✓ 98.7	↑	14.5%	↑	2.5%	↑	✗ 62%	✓ 91%	✓ 96%	✓ 98%	0	5	0	0	0	5	0	0	! 82.1%	✓ 93.1%	! 66.7%	✓ 87.9%	! 4.6%	1.7	! 2	✓ 1
	Inspire	CAMHS	50.0	✓	86%	✓ 29.2	↓	10.3%	↑	0.0%	→	✓ 100%	✓ 115%	✓ 98%	✓ 123%	0	0	0	0	0	0	0	0	✗ N/R	✓ 93.0%	✓ 75.0%	✓ 100.0%	! 4.6%	-0.5	! 2	✓ 1
	Granville Court	Learning Disability Nursing Care	55.3	✓	67%	✓ 20.8	↑	21.0%	↑	0.0%	→	✓ 133%	✓ 93%	✓ 99%	✓ 107%	0	0	0	0	0	0	0	0	✓ 94.2%	✓ 97.4%	! 71.4%	✓ 94.9%	✗ 9.1%	-2.4	✓ 1	✓ 1
CH	Whitby Hospital	Physical Health Community Hospital	30.9	✓	85%	✓ 8.5	↑	6.2%	↑	0.0%	→	✓ 99%	✗ 66%	✓ 102%	✓ 98%	2	1	0	0	2	1	0	0	✓ 87.5%	✓ 92.1%	✓ 88.2%	✓ 77.8%	✓ 4.1%	0.5	! 2	✓ 1
	Malton Hospital	Physical Health Community Hospital	30.4	✓	80%	! 7.6	↑	14.6%	↑	0.0%	→	! 87%	! 82%	✓ 104%	✓ 91%	0	0	0	0	0	0	0	0	✓ 100.0%	✓ 89.3%	! 70.6%	✓ 81.3%	✗ 8.9%	0.9	! 3	✓ 1

Key

✓ Target met | ! Within 5% of target | ✗ Target not met

Exception Reporting and Operational Commentary

Safer Staffing Dashboard Narrative : Apr

There has been a significant reduction in the number of units flagging red for sickness, from 17 in January, 14 in February and March, down to 10 in April.

The number of units with sickness rates above 10% has decreased to 5 in March and has remained the same for April. There is 1 unit with a sickness rate above 15% (Ouse 16.7%). Ullswater has a slightly improved position, from 16% in March to 14.3% in April. STaRS sickness rates continues to improve down from 25% in February to 5.2% in April. Targeted support continues for areas with continued high sickness rates.

There are no units with 5 red flags. There has been a drop in the number of units with 3 or more red flags, from 4 in March to 1 in April (Maister Court x4).

There are no red flags for Care Hours Per Patient Day (CHPPD). Westlands, Mill View Court, Newbridges and Malton inpatient units are slightly below their target in April which is consistent with March's report. They all have a target CHPPD of 8.0 which was achieved over a 6 month average (Oct-March) with the exception of Malton. Bed occupancy continued to be high in April for Newbridges and Mill View Court. Malton, as noted in previous months, continues to flag slightly under target but benchmark positively against model health system peers. Day time fill rates for both registered and unregistered staff on days are below target with a rise in sickness absence noted in March (7.6%) and again in April (8.9%).

Registered Nurse fill rates are satisfactory with the exception of Townend Court and Mill View Lodge who are under the lower target threshold of 75% on days. This has been reviewed as part of the safer staffing reviews in May. For Mill View Lodge the demand template does not capture staff on long days but rather early and late shifts. Whilst staffing levels are being achieved there are discrepancies in the planned versus actual hours which requires further review and amending in order to capture fill rates more accurately. The E-roster team are working with the team to review and amend.

Townend Court report occasions when only 1 registered nurse on duty, however IST base themselves at Townend Court and provide support as required at weekends. During the week the band 7s and matron provide support if staffing numbers are reduced. Notably, Townend Court continue to have low bed occupancy (April 36%) and a strong CHPPD (April 40.4). Sickness continues to improve and is now 4.6%. A new ward manager and clinical lead are now in post.

Statutory/Mandatory training (all) has remained consistently above 85% for all units, however Maister Court remains slightly under target at 83.7% up from 82.7% in March.

Immediate Life Support and Basic Life Support compliance has improved at Malton and Whitby following targeted 2 day training in March. Areas of ongoing concern have been highlighted to the resuscitation officer.

There was 1 nil return for clinical supervision in April (Inspire) however their 6 month position is over 90% (Oct-Mar). Maister Lodge previously had 4 nil returns however supervision compliance is reported at 95% in April.

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)

May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25
9.59%	9.66%	10.20%	10.28%	8.92%	6.80%	6.30%	7.39%	7.77%	7.57%	7.15%	7.71%

Slips/Trips and Falls (Rolling 3 months)

	Feb-25	Mar-25	Apr-25
Maister Lodge	5	7	11
Millview Lodge	2	5	1
Malton IPU	2	4	2
Whitby IPU	5	0	2

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:	2025-26
Reporting Month:	Apr

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	Mar-25	Apr-25
Adult MH Services	Mental Health Response Service	Adult Crisis	65.9	6.1%	5.2%	£41,804	£1,742	90.1%	82.1%	16	75.0%	0	1	3	2
	Hull East Mental Health Team	Hull Adult MHT	29.7	24.3%	6.1%	£132	£0	88.8%	93.5%	0	NS	0	1	2	1
	Hull West Mental Health Team	Hull Adult MHT	11.7	14.7%	8.1%	£0	£0	95.7%	N/R	0	NS	0	0	1	1
	Beverley Mental Health Team	ER Adult MHT	6.6	10.6%	1.2%	£2,149	£0	95.4%	100.0%	7	100.0%	0	0	0	0
	Goole Mental Health Team	ER Adult MHT	9.4	6.2%	6.6%	£860	£0	91.9%	100.0%	8	87.5%	0	0	0	1
	Haltemprice Mental Health Team	ER Adult MHT	9.9	3.2%	1.7%	£1,308	£0	98.6%	75.0%	0	NS	0	0	0	1
	Holderness Mental Health Team	ER Adult MHT	11.7	0.3%	12.3%	£0	£0	90.6%	100.0%	1	100.0%	0	0	1	1
	Bridlington & Driffield MHT	ER Adult MHT	14.5	9.2%	10.8%	£132	£0	94.4%	100.0%	0	NS	0	0	1	1
Older People MH Services	Crisis Intervention Team for Older People (CITOP)	OP Crisis	20.1	34.4%	1.5%	£9,429	£0	97.5%	100.0%	2	100.0%	0	0	0	0
	Hull Intensive Care Team for Older People (HICTOP)	Hull OP CMHT	21.5	11.0%	4.7%	£818	£0	95.8%	100.0%	0	NS	0	0	0	0
	Beverley and Haltemprice OP CMHT	ER OP CMHT	7.4	14.2%	18.6%	£0	£0	98.9%	100.0%	7	100.0%	0	0	2	1
	Bridlington & Driffield OP CMHT	ER OP CMHT	7.3	0.0%	11.1%	£0	£0	89.8%	100.0%	5	80.0%	0	0	1	1
	Goole & Pocklington OP CMHT	ER OP CMHT	6.1	12.3%	2.4%	£115	£0	93.5%	100.0%	8	100.0%	0	0	0	0
	Holderness OP Community Team	ER OP CMHT	5.3	-0.1%	29.5%	£0	£0	94.3%	100.0%	7	100.0%	0	0	1	1
Universal	Early Intervention in Psychosis	14-65 MHT	25.1	11.7%	3.0%	£0	£0	90.3%	89.3%	0	NS	0	0	1	0
	Hospital Mental Health Team	Liaison Services	34.0	0.2%	8.6%	£4,482	£50,425	88.9%	82.9%	2	0.0%	0	0	0	2
Community Services	Ryedale Team	Comm Services	19.9	4.7%	3.0%	£287	£0	90.6%	76.9%	0	NS	0	0	1	1
	Scarborough Hub	Comm Services	63.6	9.1%	6.7%	£28,228	£3,411	91.1%	79.7%	1	100.0%	0	0	2	2
	Whitby Community Nurses	Comm Services	28.2	17.8%	10.7%	£5,263	£0	92.2%	100.0%	0	NS	0	1	0	1
	Pocklington Nurses	Comm Services	18.1	3.1%	1.3%	£1,492	£0	84.2%	100.0%	0	NS	0	0	0	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

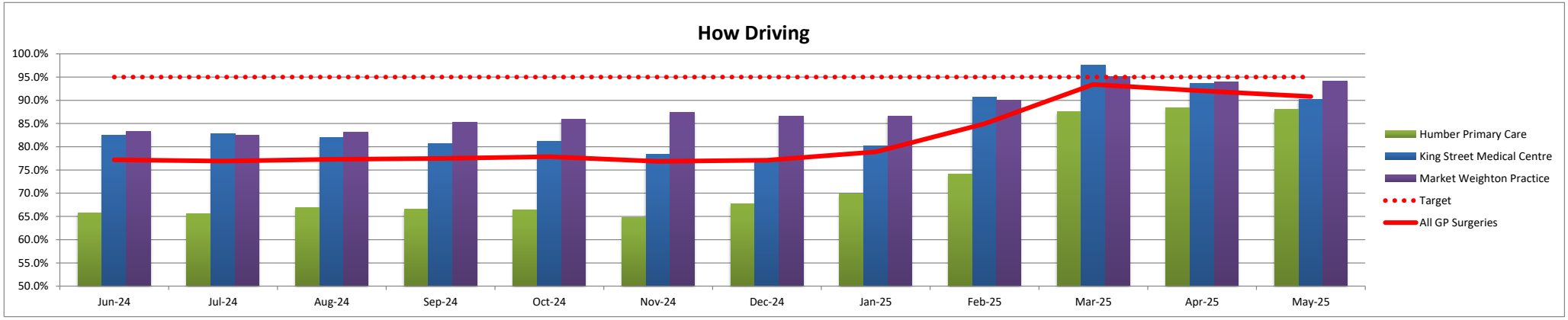
FFT % results based on the number of responses received with a satisfactory outcome

Waiting Assessment - Total number of patients not seen for assessment

Quality Dashboard

All GP Surgeries - Overall QOF Results

Reporting Month May 2025



	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Trend
Humber Primary Care	369.1 / 561	367.5 / 561	375 / 561	373.2 / 561	372.5 / 561	363.4 / 561	379.6 / 561	392.3 / 561	415.9 / 561	490.9 / 561	496.2 / 561	493.8 / 561	
QOF Predicted (How Driving)	✗ 65.8%	✗ 65.5%	✗ 66.8%	✗ 66.5%	✗ 66.4%	✗ 64.8%	✗ 67.7%	✗ 69.9%	✗ 74.1%	✗ 87.5%	✗ 88.4%	✗ 88.0%	
King Street Medical Centre	462.8 / 561	464.1 / 561	459.6 / 561	452.4 / 561	455.8 / 561	439.4 / 561	432.6 / 561	449.9 / 561	508.5 / 561	547.2 / 561	525.5 / 561	506.3 / 561	
QOF Predicted (How Driving)	✗ 82.5%	✗ 82.7%	✗ 81.9%	✗ 80.6%	✗ 81.2%	✗ 78.3%	✗ 77.1%	✗ 80.2%	! 90.6%	✓ 97.5%	! 93.7%	! 90.2%	
Market Weighton Practice	467.4 / 561	463.1 / 561	466.1 / 561	478.2 / 561	482.3 / 561	490.7 / 561	485.7 / 561	485.9 / 561	505.3 / 561	534 / 561	527.3 / 561	528.1 / 561	
QOF Predicted (How Driving)	✗ 83.3%	✗ 82.5%	✗ 83.1%	✗ 85.2%	✗ 86.0%	✗ 87.5%	✗ 86.6%	✗ 86.6%	! 90.1%	✓ 95.2%	! 94.0%	! 94.1%	
All GP Surgeries	✗ 77.2%	✗ 76.9%	✗ 77.3%	✗ 77.5%	✗ 77.9%	✗ 76.9%	✗ 77.1%	✗ 78.9%	✗ 84.9%	! 93.4%	! 92.0%	! 90.8%	
Number of GP Practices	3	3	3	3	3	3	3	3	3	3	3	3	

NHS
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