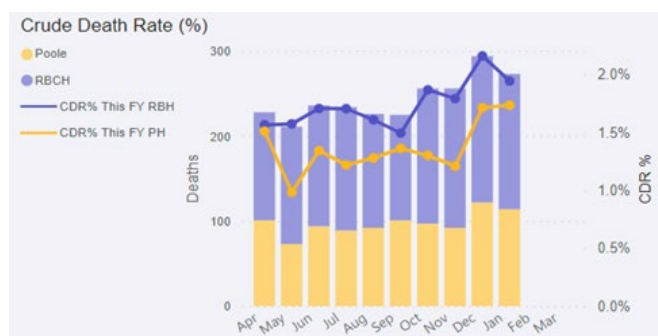


Chief Medical Officer's Report to the Board Mortality Update

Crude mortality rate financial year 22/23 (In house)



HSMR October 21 to September 22 (UHD) SHMI August 21 to July 22 (Telstra health)

Indicator	Site	Value	Range
HSMR	RBH	96.2	Better than expected
	Poole	100.7	As expected
	UHD	103.2	As expected
SMR	RBH	94.6	Better than expected
	Poole	96.0	As expected
	UHD	100.4	As expected
SMHI	RBH	80.99	As expected
	Poole	84.61	As expected
	UHD	89.6	As expected

Mortality Ratios

Mortality ratios have risen over last 5 months where 12-month data includes months following e-camis IT system merger (June 2022 onwards). This led to a high number of 'un-coded' episode submission to the national system. Partially coded episodes did include mortality impacting mortality ratios. This has been resolved from November 2022 onwards. MSG accepted that 18 'partially coded' mortality episodes remaining in the system is acceptable risk from this IT merger where retrospective coding is not possible. MSG is reassured that coding department is now achieving coding completion rates comparable to national standards of submission.

The crude mortality ratios show fluctuating trends with variation on two sites however no significant 'winter' spike is noted this financial year.

New Diagnostic and Procedural Alerts (Telstra Health)

Dr Foster's Senior Analyst presented an intelligence report and alerts in the January MSG. New alerts were discussed and action plan was agreed.

Telstra health Alerts	Type of Alert	Site	Action Plan and completion date
peripheral arterial diseases and thrombosis	Diagnostic alert (Relative risk)	RBH	Mr Godfrey conducting in depth case notes review. MSG to review learning and action plan March 23.
UHD weekend mortality ratios	Above expected range Red outlier (relative risk)	Cross site	Further analysis showed alerts in the following categories <ul style="list-style-type: none">• Pneumonia OPS, Poole• GI haemorrhage OPS , Poole• Primary cancer of bronchus, Thoracic department, RBH In depth case notes review is planned for all three categories, MSG will report its findings when this review is complete.
Cancer of liver intrahepatic bile duct	Diagnostic(Relative risk)	Cross site	Case notes review by Gastroenterology department. Patient level data awaited.
#NOF	Procedural alert(within expected for 12 month, very high for November and expected to climb)	Poole	Review complete, MSG to re-audit using same tools in 6 months

Mortality Review related QI projects

IV fluid management and prescription:

This trust wide QI group is in its last development phase. Electronic fluid balance chart IT development is nearly complete. MSG led this QI group is concerned delays in its implementation/ trust wide roll out. ENA merger has been pushed many times impacting on progress of this project. QI group needs support from the board to see this project as IT priority. QI team cannot have endless time commitment to this project.

Learning from Death Review QI project

This QI group is tasked to transition paper-based processes to electronic platform (e-fication) starting from death verification, mortuary transfer, Medical Examiner review and e-Mortality review across the UHD. QI group led by Dan Richter/ Jon Lust/ Jonathan Goss/ Andy Slade completed the Trust wide roll out on 5th December 2022 (huge thank you). MSG aims to provide 'mortality review' data at UHD level to the board from the next financial year (23/24).