

## UH Bristol CQUINS 2013/14

CQUIN	Indicator	Description	Contract Type
1	1	Friends and Family Test: Phased expansion	Non Specialised./ Specialised
1	2	Friends and Family Test: Increased response rate	Non Specialised./ Specialised
1	3	Friends and Family Test: Improved performance on staff test	Non Specialised./ Specialised
2	1	NHS Safety Thermometer: Improvement Goal – Reduce incidence of hospital acquired pressure ulcers	Non Specialised./ Specialised
3	1.1	Percentage of patients >75 admitted as an emergency who are reported as having: known diagnosis of dementia or clinical diagnosis of delirium, or who have been asked the dementia case finding question	Non Specialised./ Specialised
3	1.2	Percentage of above patients reported as having had a diagnostic assessment including investigations	Non Specialised./ Specialised
3	1.3	Percentage of above patients referred for further diagnostic advice in line with local pathways agreed with commissioners	Non Specialised./ Specialised
3	2	Dementia: Clinical leadership - Named lead clinician for dementia and appropriate training for staff	Non Specialised./ Specialised
3	3	Dementia: Supporting Carers of people with dementia	Non Specialised./ Specialised
4	1	VTE Risk Assessment - Percentage of all adult inpatients who have had a VTE risk assessment on admission to hospital using the clinical criteria of the national tool	Non Specialised./ Specialised
4	1	VTE Root Cause Analyses - The number of root cause analyses carried out on cases of hospital associated thrombosis	Non Specialised./ Specialised
5	1	HII: Intra Operative Fluid Management	Non Specialised./ Specialised
6	1.1	Appointments reminder system: Purchase a system and increase reminders to 30% of patient appointments.	Non Specialised./ Specialised
6	1.2	Telephone pre-operative assessments: increase to another 2 specialties in 2013/14 for clinically suitable patients.	Non Specialised./ Specialised
6	1.3	Remote post-surgical follow-ups: Agree and test for one	Non Specialised./

		cohort of clinically suitable post-op patients.	Specialised
6	1.4	Remote follow-ups: Aim for 2013/14 is for all existing well established services to be on a system where activity can be recorded.	Non Specialised./ Specialised
6	1.5	Remote test results: Aim in 2013/14 for sexual health clinic to deliver negative test results by SMS where appropriate.	Non Specialised./ Specialised
7	1	Patient Flow (adults) - reduction in occupied bed days for >14 day spells	Non Specialised./ Specialised
8	1	End of Life Care - To increase our effectiveness in helping people to achieve their preferred place of death.	Non Specialised./ Specialised
9	1	System flow measures – increase percent of discharges before midday	Non Specialised
10	1	Nutrition & Dietetics: 3 day food chart review for all patients with a MUST score of 2	Non Specialised
10	2	Nutrition & Dietetics: Nutritional Assessments/Dietetic review - All adult inpatients with a MUST score of 2 to have a dietetic review	Non Specialised
11	1.1	Percentage of patients with medication reconciliation performed within 1 working day of admission. - Wards: 17, 2, CCU, 51, 52, 53	Non Specialised
11	1.2	Percentage of Patients with medication reconciliation performed within 1 working day of admission. - Wards: 61, 62, 78	Non Specialised
11	2	Reduction in Medication errors to improve patient safety: Percentage of non-purposeful missed/omitted doses of the listed critical medication	Non Specialised
12	1	Cancer Treatment Summaries - To produce Cancer Treatment Summaries following completion of active chemotherapy treatment	Non Specialised
13	1	Enhanced Recovery Programme: Discharge - Percentage of surgical patients discharged from ITU to an appropriate ward bed within 4 hours of being recorded as fit for discharge	Non Specialised
13	2.1	Enhanced Recovery Programme: Theatres - Percentage elective patients reviewed in a dedicated Pre-Operative Assessment Clinic (POAC).	Non Specialised
13	2.2	Enhanced Recovery Programme: Theatres - Percentage elective patients to attend dedicated Surgical Admissions Suite (SAS) on day of surgery.	Non Specialised
13	2.3	Enhanced Recovery Programme: Theatres - Percentage of theatre lists with more than 3 patients on the list and the last patient does not attend SAS before 11:00am	Non Specialised
13	3.1	Enhanced Recovery Programme: Pathway Rollout – Vascular Surgery	Non Specialised
13	3.2	Enhanced Recovery Programme: Pathway Rollout - Maxillary Facial Surgery (major cases).	Non Specialised

13	3.3	Enhanced Recovery Programme: Pathway Rollout - General Gynaecology.	Non Specialised
13	4	Enhanced Recovery Programme: Pathway rollout – Thoracic Surgery	Non Specialised
13	5	Enhanced Recovery Programme: Pathway rollout – Lower GI Cancer	Non Specialised
14	1	Deteriorating patient: Early Warning System - Deteriorating patient: Observations completed and EWS calculated correctly	Non Specialised
14	2	Deteriorating patient: SBAR (Situation, Background, Assessment, Recommendation) - Escalation of deteriorating patient using a structured tool.	Non Specialised
15	1	Adult Learning Disabilities - Identify and make reasonable adjustments	Non Specialised
16	1	Children's Learning Disabilities – Nursing assessment form completed within 48 hours of admission	Non Specialised
17	1.1	Inpatient Diabetes specialist nurse (SHN) – Percentage of patients receiving specialist diabetic nurse input while an inpatient	Non Specialised
17	1.2	Inpatient Diabetes specialist nurse (Medicine / SS) – Percentage of patients receiving specialist diabetic nurse input while an inpatient	Non Specialised
18	1	Quality Dashboards	Specialised
19	1	Neonatal – Breastfeeding – Increase in percentage of preterm babies fed exclusively on mother's breast milk on final discharge home.	Specialised
20	1	PICU - Minimise the number of patients accidentally extubated	Specialised
21	1	PICU - Prevention of unplanned readmissions to PICU within 48 hours	Specialised
22	1	Transition - Development and implementation of Trust wide approach to support paediatric to adult transition	Specialised
23	1.1	Bone Marrow Transplant : Donor Acquisition Measures - Percentage use of UK donors rather than European or US	Specialised
23	1.2	Bone Marrow Transplant : Donor Acquisition Measures - Median number of Confirmatory Typing (CT)/ Extended Typing (ET) tests per patient	Specialised
23	1.3	Bone Marrow Transplant : Donor Acquisition Measures - Median number of searches undertaken per transplant	Specialised
23	1.4	Bone Marrow Transplant : Donor Acquisition Measures - Average Turnaround Times (TAT) from the date of the search request to the delivery of the donor report	Specialised
24	1	Cardiac – Reduction in inpatients waiting more than 7 days for a procedure	Specialised
25	1	Cardiology - Access to cath lab within 24 hours	Specialised
26	1	Radiotherapy – increased access to IGRT	Specialised

27	1	Haemophilia – proportion of appropriate patients having a joint score completed in the past 12 months	Specialised
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