

Organisation

Liverpool Heart and Chest NHS Foundation Trust

Financial Year

2019-20

Month

December

## Purpose of the dashboard

This suggested dashboard is a tool to aid the systematic recording of deaths and learning from the care provided by NHS Trusts. Trusts may use this to record relevant incidents of mortality, deaths reviewed and lessons learnt to encourage future learning and the improvement of care.

Guidance on what should be recorded in individual fields is provided below, alongside instructions for completing and updating the dashboard. This guidance on individual fields complements the wider guidance provided in the National Framework on Learning From Deaths and separate methodology guidance on the Structured Judgement Review (SJR) as developed by the Royal College of Physicians (RCP). The dashboard is not prescriptive and Trusts may set their own definitions according to local goals and data availability, although minimum requirements are set out in the framework.

To update this dashboard - enter your data on the "Data" worksheet. The dashboard sheet is automatically updated.

## Guidance on individual fields

Field No.	Field	Description of Field
<b>Recording data on structured judgement reviews:</b>		
1	<b>Total Number of Deaths in scope</b>	This must as a minimum include all adult inpatient deaths excluding maternity services. Where additional deaths are included (for example maternal deaths, deaths post-discharge or deaths of outpatients etc) the inclusion criteria should be made clear in this field, which can vary by trust. The total number of deaths in scope defined in this field must be used in all subsequent relevant fields in this work book. If a post-discharge period is being included in scope, (eg deaths within 30 days of discharge) then the death should be counted in the month where the death actually occurred rather than time of admittance or discharge.  Note that where it has been identified that a patient has a learning disability the death should be recorded separately (see Data item 6, below).
2	<b>Total Number of Deaths Reviewed under the SJR methodology</b>	This is the total number of deaths for which the care provided to the patient has been reviewed by your Trust. This may be a combination of deaths reviewed under national and local minimum requirements and random sampling of all other deaths in scope.
3	<b>Total number of deaths considered to have more than a 50% chance of having been avoidable</b>	The Structured Judgement Review methodology, for use in relation to adult acute inpatient deaths, allows for reviewers to score a death as having a more than 50% chance of having been avoidable when this judgement is made in relation to the care provided by the trust conducting the review. This is the equivalent of a score of 3 or less. If using the RCP SJR then the number of such deaths scored in this way is equivalent to this field  If not using RCP SJR, then the method used to judge whether a death was more likely than not to have been avoidable in relation to the care provided by the trust conducting the review (or another provider if appropriate) should be stated here including any definitions used. Note that if you are applying other methodologies to specific groups, such as learning disabilities patients, those methodologies may require a degree of judgement to determine whether the death was more likely than not to be avoidable. It may be appropriate to cross-reference those outputs with the processes for assessing structured judgement reviews, and if appropriate to include those outputs here.  If the RCP SJR methodology is being used for structured judgement reviews Trusts are able to include monthly totals of reviewed deaths that were in each category 1 to 6. If the Trust is not using this methodology these fields can be either left blank or edited as appropriate.
<b>Recording data on LeDeR reviews:</b>		
4	<b>Total Number of Deaths in scope</b>	This must include all adult inpatient deaths for patients with identified learning disabilities. The total number of deaths in scope defined in this field must be used in all subsequent relevant fields. If a post-discharge period is being included in scope, (eg deaths within 30 days of discharge) then the death should be counted in the month where the death actually occurred rather than time of admittance or discharge.
5	<b>Total Deaths Reviewed Through the LeDeR Methodology</b>	Formally, the LeDeR review methodology should be applied to all of the deaths shown as 'in scope'. You should record the total number of deaths reviewed here.
6	<b>Total Number of deaths considered to have been potentially avoidable</b>	Record the total number of deaths for which review evidence leads to a conclusion that it is more likely than not that the death was potentially avoidable. This will require that a degree of judgement is applied to the outputs of the LeDeR review, and it may be appropriate to cross-reference these outputs with the processes for assessing structured judgement reviews

## How to update the dashboard

To update this dashboard - enter your data on the "Data" worksheet. The dashboard sheet is automatically updated.

To update the dashboard with new data:

1. Enter data for appropriate month(s) in the Data tab. Note that the RCP1 to RCP6 and Trust comparison fields are optional and the dashboard will still function correctly if these fields are left blank.

- In the first 3 columns enter the data for your structured judgement reviews (number of deaths in scope, numbers reviewed, and numbers deemed potentially avoidable )

- You have the option of recording how many of the SJR reviews placed cases in each of the RCP1 to RCP 6 categories.

- For learning disabilities patients, enter the number of deaths in scope, numbers reviewed under the LeDeR methodology, and numbers deemed potentially avoidable

2. Change the month and year on the Front Sheet tab to the most recent month of data.

3. Change the data range on the time series charts as required by using the interactive dropdowns on the Dashboard tab (eg cell V4). Note that the time series charts are not linked to the front sheet selection and are driven entirely by the dropdowns.





## Description:

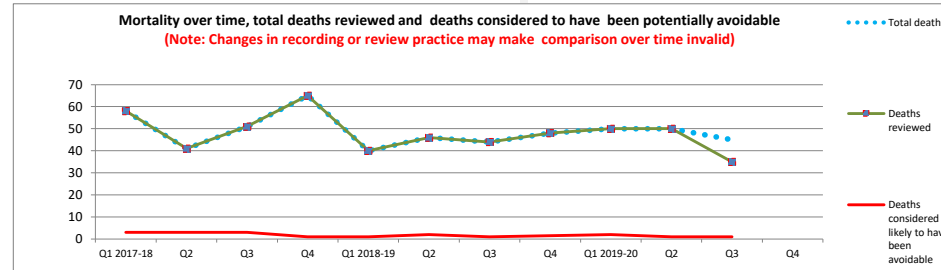
The suggested dashboard is a tool to aid the systematic recording of deaths and learning from care provided by NHS Trusts. Trusts are encouraged to use this to record relevant incidents of mortality, number of deaths reviewed and cases from which lessons can be learnt to improve care.

## Summary of total number of deaths and total number of cases reviewed under the Structured Judgement Review Methodology

### Total Number of Deaths, Deaths Reviewed and Deaths Deemed Avoidable (does not include patients with identified learning disabilities)

Total Number of Deaths in Scope		Total Deaths Reviewed		Total Number of deaths considered to have been potentially avoidable (RCP<=3)	
This Month	Last Month	This Month	Last Month	This Month	Last Month
18	10	10	9	0	0
This Quarter (QTD)	Last Quarter	This Quarter (QTD)	Last Quarter	This Quarter (QTD)	Last Quarter
45	50	35	50	1	1
This Year (YTD)	Last Year	This Year (YTD)	Last Year	This Year (YTD)	Last Year
145	178	135	178	4	4

Time Series: Start date 2017-18 Q1 End date 2019-20 Q4



### Total Deaths Reviewed by RCP Methodology Score

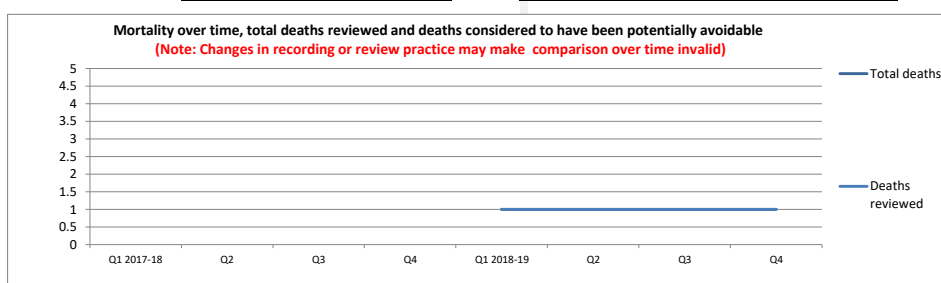
Score 1 Definitely avoidable	Score 2 Strong evidence of avoidability	Score 3 Probably avoidable (more than 50:50)	Score 4 Probably avoidable but not very likely	Score 5 Slight evidence of avoidability	Score 6 Definitely not avoidable
This Month	0	0	0	0	10
This Quarter (QTD)	0	0	1	3	31
This Year (YTD)	0	2	2	17	109
	0.0%	1.5%	3.7%	12.6%	80.7%

## Summary of total number of learning disability deaths and total number reviewed under the LeDeR methodology

### Total Number of Deaths, Deaths Reviewed and Deaths Deemed Avoidable for patients with identified learning disabilities

Total Number of Deaths in scope		Total Deaths Reviewed Through the LeDeR Methodology (or equivalent)		Total Number of deaths considered to have been potentially avoidable	
This Month	Last Month	This Month	Last Month	This Month	Last Month
0	0	0	0	0	0
This Quarter (QTD)	Last Quarter	This Quarter (QTD)	Last Quarter	This Quarter (QTD)	Last Quarter
0	0	0	0	0	0
This Year (YTD)	Last Year	This Year (YTD)	Last Year	This Year (YTD)	Last Year
0	3	0	3	0	1

Time Series: Start date 2017-18 Q1 End date 2018-19 Q4



Liverpool Heart and Chest NHS Foundation Trust

December  
2019-20

		Total Deaths (not LD)	Total Deaths Reviewed (not LD)	Deaths Avoidable > 50% (not LD)								LD Deaths Reviewed > 50%		
Financial Year	Month	(not LD)	(not LD)	(LD)	RCP1	RCP2	RCP3	RCP4	RCP5	RCP6	LD Deaths	Reviewed	Avoidable > 50%	
2017-18	April	20	20	0	0	0	0	2	2	16				
2017-18	May	21	21	1	0	0	1	1	1	18				
2017-18	June	17	17	2	1	0	1	0	1	14				
2017-18	July	11	11	0	0	0	0	0	1	10				
2017-18	August	15	15	0	0	0	0	1	0	14				
2017-18	September	15	15	0	0	0	0	4	1	10				
2017-18	October	14	14	1	0	1	0	2	0	11				
2017-18	November	21	21	1	0	1	0	1	5	14				
2017-18	December	16	16	1	0	0	1	1	3	11				
2017-18	January	23	23	0	0	0	0	1	2	20				
2017-18	February	21	21	0	0	0	0	0	4	17				
2017-18	March	21	21	1	0	0	1	1	4	15				
2018-19	April	13	13	0	0	0	0	0	1	12	1	1	0	
2018-19	May	16	16	1	0	0	1	1	1	13				
2018-19	June	11	11	0	0	0	0	1	0	10				
2018-19	July	19	19	2	1	0	1	2	1	14				
2018-19	August	12	12	0	0	0	0	0	1	11				
2018-19	September	15	15	0	0	0	0	2	2	11	1	1	1	
2018-19	October	15	15	1	0	0	1	0	0	14				
2018-19	November	13	13	0	0	0	0	0	5	8				
2018-19	December	16	16	0	0	0	0	0	5	11				
2018-19	January	15	15	0	0	0	0	1	3	11				
2018-19	February	14	14	0	0	0	0	1	2	11	1	1	0	
2018-19	March	19	19	0	0	0	0	0	1	18				
2019-20	April	17	17	0	0	0	0	1	2	14				
2019-20	May	18	18	0	0	0	0	1	5	12				
2019-20	June	15	15	2	0	2	0	1	0	12				
2019-20	July	16	16	0	0	0	0	1	1	14				
2019-20	August	16	16	0	0	0	0	0	2	14				
2019-20	September	18	18	1	0	0	1	1	4	12				
2019-20	October	17	16	1	0	0	1	0	2	13				
2019-20	November	10	9	0	0	0	0	0	1	8				
2019-20	December	18	10	0	0	0	0	0	0	10				
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