Ashford and St. Peter's Hospitals
NHS Foundation Trust

Paper 6.3

COUNCIL OF GOVERNORS
6th September 2017

TITLE	**Mortality Report**
EXECUTIVE SUMMARY	This paper provides a comparison between ASPH and national mortality rates.
The Council is asked to:	Note the summary
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Date:	September 2017
Decision:	For Noting

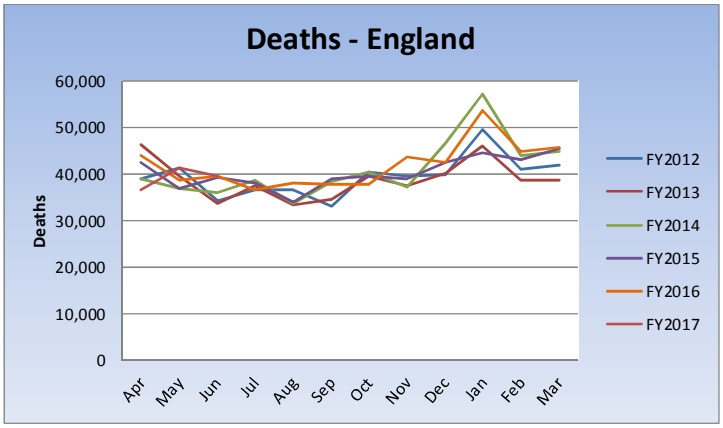
Paper 6.3

Mortality Rate - ASPH vs National Comparison

It is not unusual to see a rise in crude mortality rates during the winter season, although in 2015/16 the increase was attenuated. Nationally ONS publish the weekly deaths across the country. Looking at this data there is generally an increase in deaths through December and February of between 10 - 20% (average weekly rate 10000 deaths increased to 11000 to 12000) over the last 5 years. The increase this year has seen a further 10% with an average rate of 13000 (30% increase from baseline). Our increase has been higher at 50%.

England	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017
Apr	38,928	46,352	38,729	42,286	43,828	36,390
May	41,087	39,475	36,880	36,713	38,695	41,357
Jun	34,303	33,503	36,058	39,289	39,361	39,442
Jul	36,657	37,260	38,512	37,916	36,453	
Aug	36,435	33,322	33,640	33,823	37,989	
Sep	32,934	34,350	38,339	38,876	37,720	
Oct	40,394	39,585	40,201	39,458	37,828	
Nov	39,330	37,322	36,967	38,883	43,509	
Dec	39,669	39,974	46,481	42,495	42,434	
Jan	49,492	45,929	57,034	44,356	53,640	
Feb	41,002	38,566	43,727	42,995	44,767	
Mar	41,915	38,573	44,809	45,286	45,544	

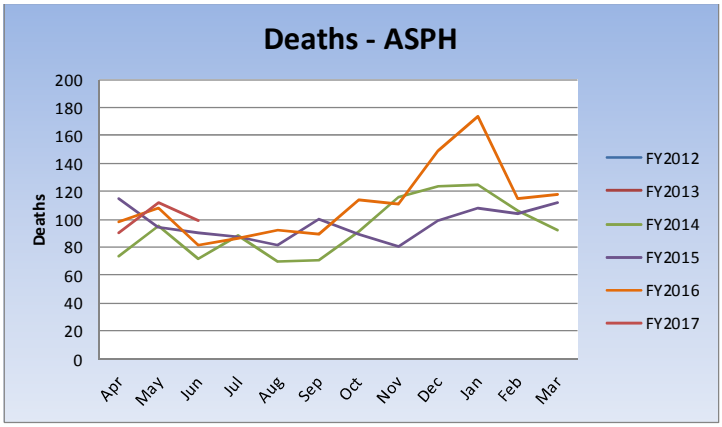
July vs Jan %	47%
Dec vs Jan %	26%
FY16 vs FY15 %	4%
FY15 vs FY14 %	-2%



Due to ASPH having low numbers of deaths (compared to national data), significant swings are more pronounced although not a cause for alarm, as ASPH will be more sensitive to confounding issues.

ASPH	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017
Apr			74	115	98	90
May			95	94	108	112
Jun			72	90	82	99
Jul			88	87	86	
Aug			70	82	92	
Sep			71	100	89	
Oct			91	89	114	
Nov			116	81	111	
Dec			124	99	149	
Jan			125	108	174	
Feb			106	104	115	
Mar			92	112	118	

July vs Jan %	102%
Dec vs Jan %	17%
FY16 vs FY15 %	15%
FY15 vs FY14 %	3%



As can be seen from the graph above, ASPH July to Jan increase at 102% was much higher than the national, regional or local levels seen 47-63%. However, ASPH Dec to Jan increase at 17% is much lower than national, regional or local levels seen 26-30%.

Overall, ASPH have recorded a FY16 vs FY15 increase of 15% compared to national, regional or local levels being recorded at 4-6%. Interestingly, ASPH also recorded a 3% FY15 vs FY14 increase compared to national, regional & local levels who reported a decline of -2%.

However, reviewing crude mortality rates in isolation of confounding issues & patient co-morbidities only provides a basic understanding; therefore national statistics are reviewed using the Summary Hospital-level Mortality Indicator (SHMI) and Risk Adjusted Mortality Index (RAMI).

Paper 6.3

Summary Hospital-level Mortality Indicator

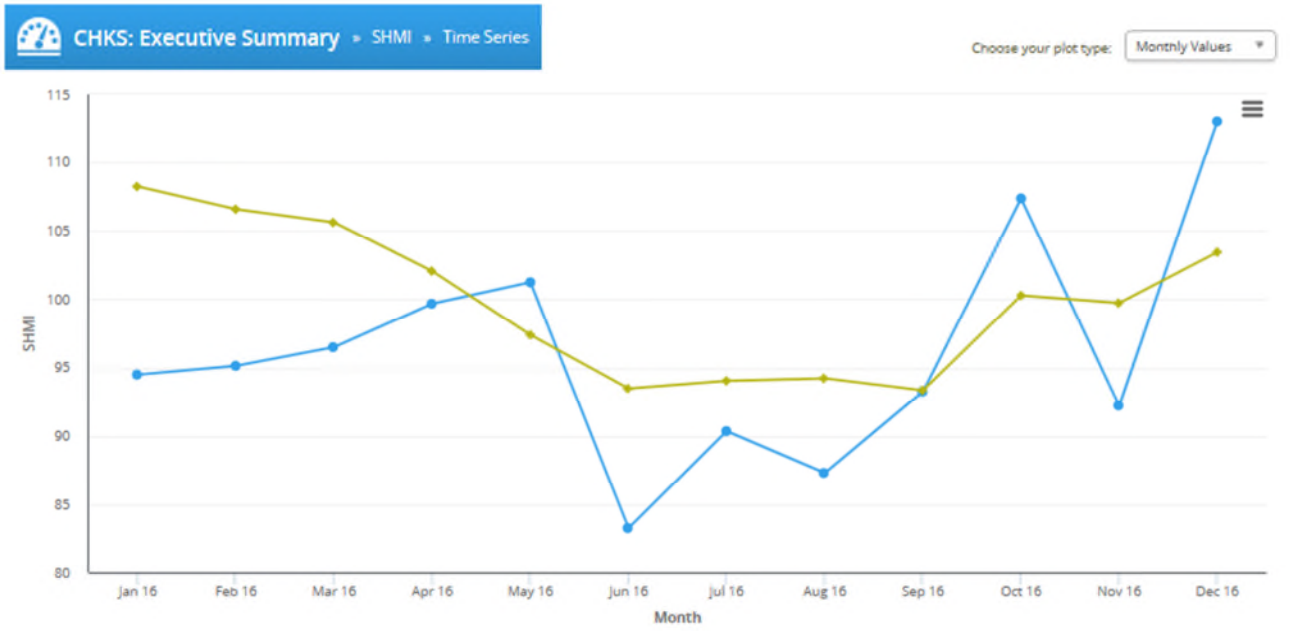
The Summary Hospital-level Mortality Indicator (SHMI) reports on mortality at trust level across the NHS in England using a standard and transparent methodology.

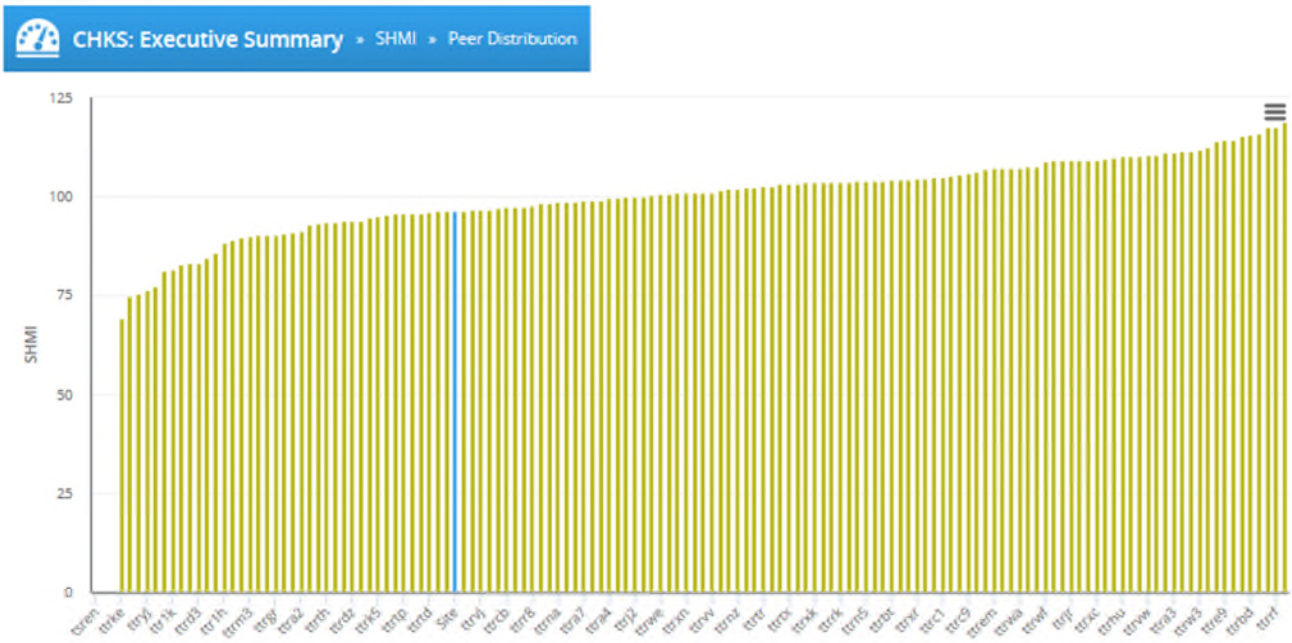
The SHMI is the ratio between the actual number of patients who die following hospitalisation at the trust and the number that would be expected to die on the basis of average England figures, given the characteristics of the patients treated there. This indicator includes deaths 30 days post discharge which adds an average of just over 35 per cent more deaths into the calculation and no exclusion for palliative care.
Being over 100 is not a problem in itself (by definition 50 per cent of trusts will be over 100).

Summary Hospital-level Mortality Indicator (data available to Dec 16)

---- = Ashford & St Peters Hospitals NHS Foundation Trust

---- = National Comparison





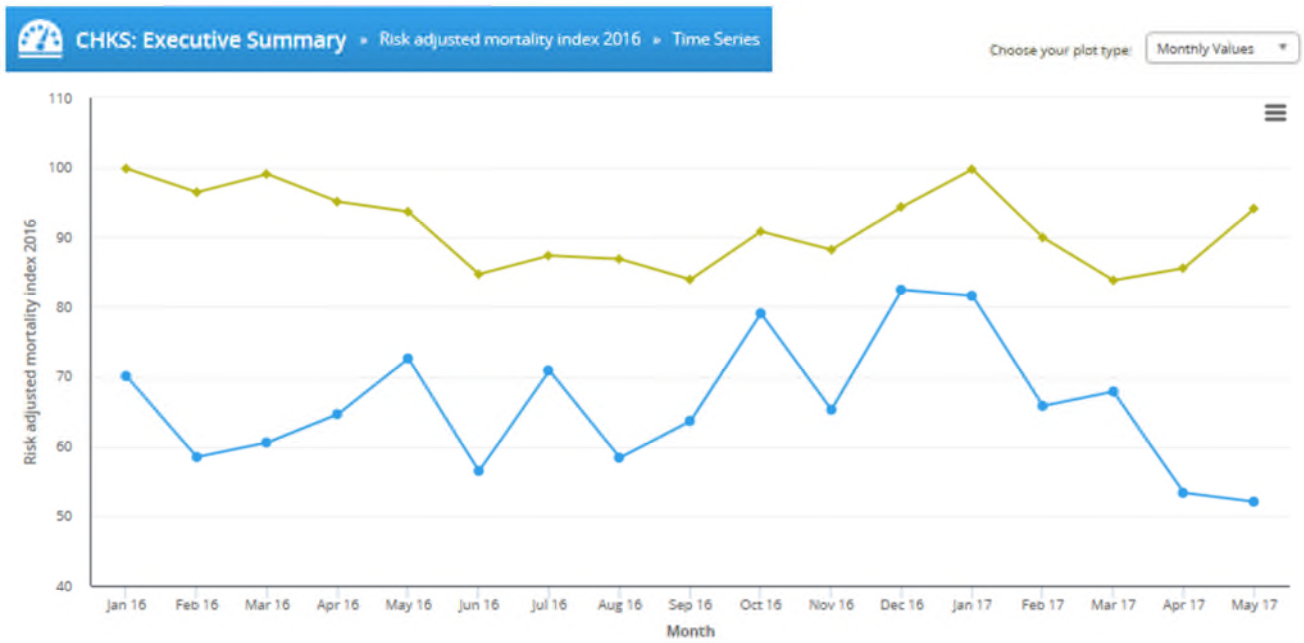
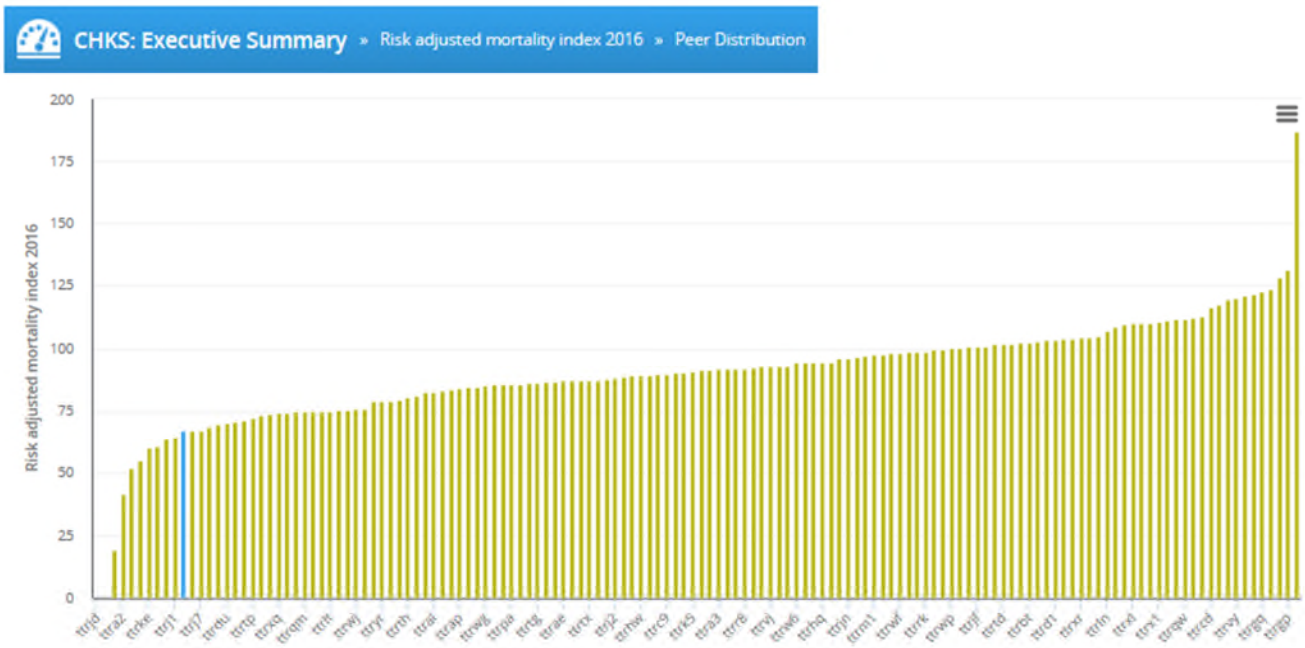
Paper 6.3

Risk Adjusted Mortality Index

The Risk Adjusted Mortality Index (RAMI) is a mortality rate that is adjusted for predicted risk of death.

Whereas SHMI includes deaths occurring in hospital and deaths occurring outside of hospital within 30 days of discharge, RAMI only includes deaths occurring in hospital. RAMI also excludes zero length of stay emergencies and spells containing the palliative care diagnosis code (Z51.5).

Risk Adjusted Mortality Index (data available to May 17)

---- = Ashford & St Peters Hospitals NHS Foundation Trust

---- = National Comparison