

Indicator	Target/Tolerance*	FEB-2026	13 Month Trend (FEB-2025 to FEB-2026)	Comparator^	
Standard 1: Clinical Governance	1). ISR 1&2*	8	5		
	2). Number of confirmed SAPSEs*	4	4		
	3). % of open disclosures for ISR 1 & 2 events *	100%	100%		
	4). # Complaints opened more than 30 days *	0	4		
	5). % of staff with completed mandatory emergency training in last 12 months *	85%	89%		
	6). # of breaches of privacy (clinical trials)	0	0		
	7). # of breaches of code of conduct (clinical trials)	0	0		
	8). All staff injury frequency rate (AIFR)	33.9	41.2		

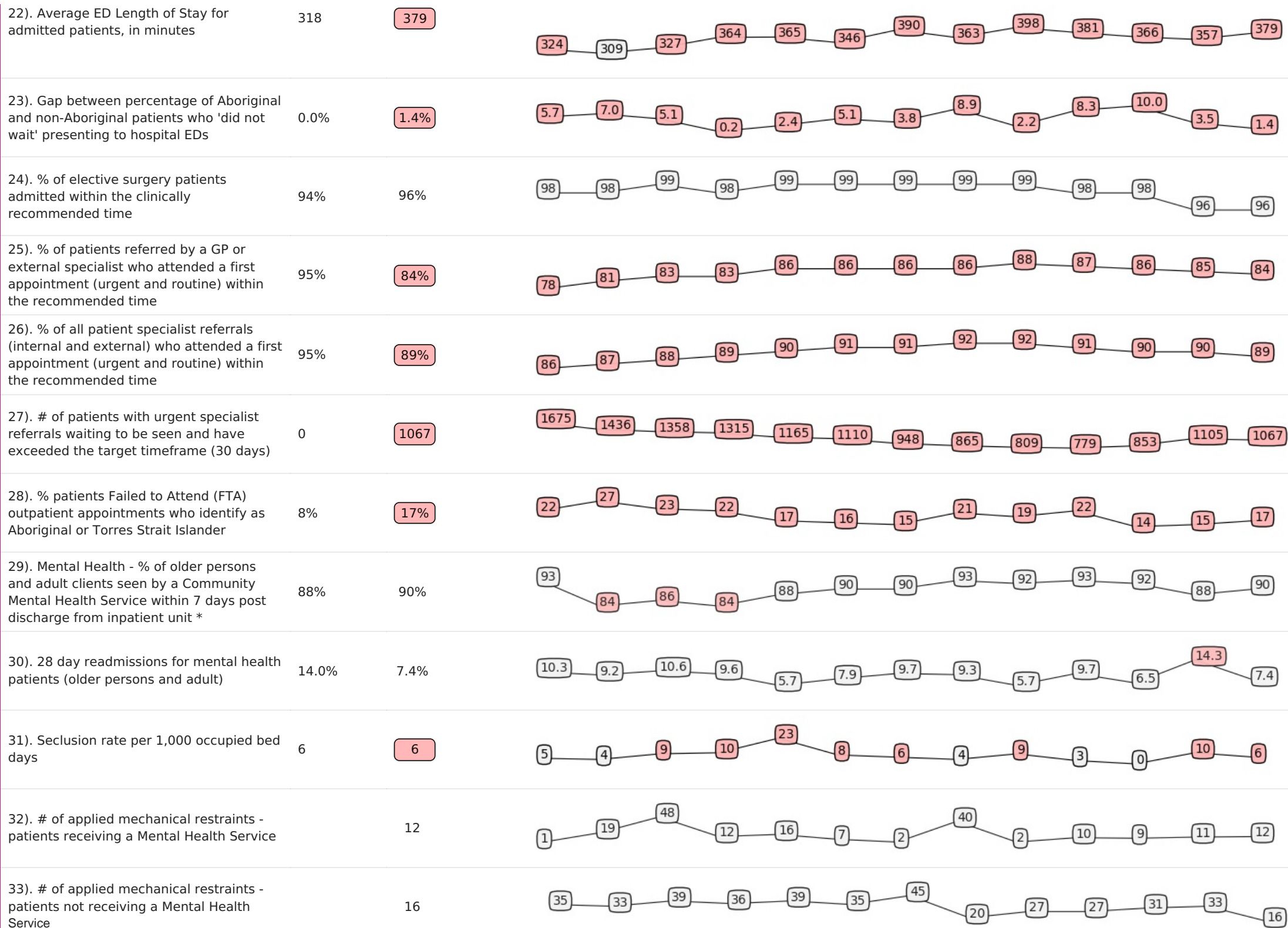
Standard 2: Partnering with Consumers	9). Measurement of pt experience (admitted overnight pts)	95%	95%		
	10). % of patients who reported they were involved in making decisions about their care	75%	85%		

	11). % of patients reporting they felt safe using the service *	90%	95%	
	12). % of patients reporting they were given sufficient information about planning hospital discharge	75%	85%	

Standard 3: Preventing and Controlling Healthcare Associated Infections	13). # of Central Line Associated Bacteraemia incidents per 1,000 line days (ICU)	0.00	0	
	14). # of cases of healthcare associated S.aureus bacteraemia/10,000 occupied bed days	0.70	0.56	
	15). # Deep SSI - CABGs	0	0	
	16). # Deep Orthopaedic Wound Infection or Partial Knee Arthroplasties	0	0	
	17). # Deep Orthopaedic Wound Infection Hip arthroplasty	0	0	
	18). % Hand hygiene compliance (Alfred Health)	85%	85%	

Standard 4: Medication Safety	19). # of Medication Incidents (ISR 1 or 2)	1	0	
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Standard 5: Comprehensive Care	20). # of ED patients with Length of Stay in ED > 24 hours	0	0	
	21). % of patients transferred from an ambulance to ED within 40 minutes	81%	83%	



	34). % of departures from emergency departments to a mental health bed within 8 hours	80%	36%	77, 40, 43, 41, 63, 66, 43, 56, 42, 57, 64, 73, 36
	35). # of Individual Stage 3/4/SDTI/Unstageable Pressure Injuries - Acquired/worsened while in care	7	6	4, 6, 7, 7, 15, 10, 9, 9, 10, 11, 7, 15, 6
	36). # of Falls with Serious Injury ISR 1 or ISR 2	2	3	6, 6, 5, 10, 10, 3, 8, 8, 11, 6, 6, 2, 3
	37). # of Falls with Serious Injury ISR 1 or ISR 2 where all care strategies were not in place	1	0	1, 1, 2, 2, 1, 0, 0, 1, 0, 1, 0, 1, 0
	38). # of patients with malnutrition acquired or worsened in care *	8	34	32, 28, 26, 33, 51, 52, 34, 46, 49, 37, 49, 38, 34

Standard 6: Communicating for Safety	39). # of Wrong Blood in Tube Incidents	1	1	1, 0, 1, 0, 0, 1, 1, 0, 2, 2, 1, 0, 1
	40). % of patients discharged home with discharge summaries completed within 2 working days *	85%	74%	79, 79, 75, 76, 76, 77, 80, 81, 80, 77, 80, 77, 74

Standard 7: Blood Management	41). % of red blood cell wastage	2.0%	0.6%	0.0, 1.1, 2.1, 0.0, 0.6, 1.1, 2.0, 1.3, 2.2, 0.6, 1.4, 1.3, 0.6
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Standard 8: Recognising and Responding to Acute Deterioration	42). # of True Code Blue Calls (Inpatient)	8	9	12, 7, 9, 6, 4, 3, 7, 8, 6, 8, 6, 5, 9
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\* The target is informed by Alfred Health Risk tolerance consistent with the Risk Management Framework and calculated as an average of performance from June 2022 to June 2023  
^ Comparator derived from 2022-23 annual MONITOR report.