

	Indicator	Target/Tolerance*	MAR-2026	13 Month Trend (MAR-2025 to MAR-2026)	Comparator^
Standard 1: Clinical Governance	1). ISR 1&2*	17	5		
	2). Number of confirmed SAPSEs*	4	0		
	3). % of open disclosures for ISR 1 & 2 events	100%	80%		
	4). # Complaints opened more than 30 days	0	4		
	5). % of staff with completed mandatory emergency training in last 12 months	85%	87%		
	6). # of breaches of privacy (clinical trials and research)	0	0		
	7). # of breaches of code of conduct (clinical trials and research)	0	0		
	8). All staff injury frequency rate (AIFR) *	33.2	37.5		

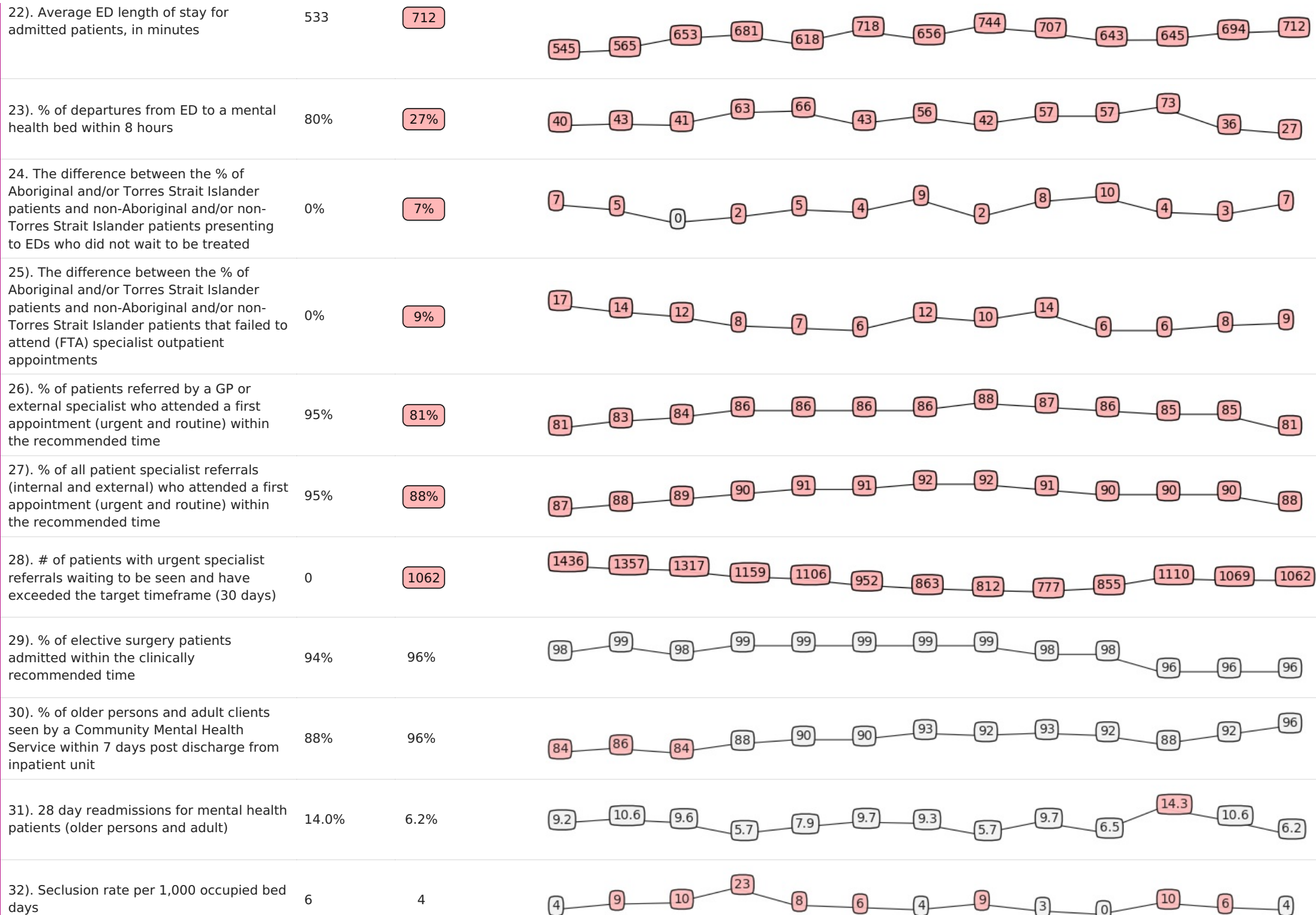
Standard 2: Partnering with Consumers	9). Measurement of pt experience (admitted overnight pts)	95%	96%		
	10). % of patients who reported they were involved in making decisions about their care	75%	79%		

	11). % of patients reporting they felt safe using the service	90%	93%	
	12). % of patients reporting they were given sufficient information about planning hospital discharge	75%	78%	

Standard 3: Preventing and Controlling Healthcare Associated Infections	13). # of Central Line Associated Bacteraemia incidents per 1,000 line days (ICU)	0.00	0.00	
	14). # of cases of healthcare associated S.aureus bacteraemia/10,000 occupied bed days	0.70	1.10	
	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	85%	84%	

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	80%	84%	



	33). # of applied mechanical restraints - patients receiving a Mental Health Service *	13	16	30 50 12 18 7 10 40 15 10 9 11 12 16
	34). # of applied mechanical restraints - patients not receiving a Mental Health Service *	43	20	40 49 36 39 35 45 20 27 27 32 33 16 20
	35). # of Individual Stage 3/4/SDTI/Unstageable Pressure Injuries - Acquired/worsened while in care *	8	10	6 7 7 15 10 9 9 10 11 7 15 7 10
	36). # of Falls with Serious Injury ISR 1 or ISR 2 *	7	2	6 5 10 10 3 8 8 11 7 6 2 3 2
	37). # of Falls with Serious Injury ISR 1 or ISR 2 where all care strategies were not in place *	1	0	1 2 2 1 0 0 1 0 1 0 1 0 0
	38). # of patients with malnutrition acquired or worsened in care *	15	37	28 26 33 51 52 34 46 49 37 49 38 35 37

Standard 6: Communicating for Safety	39). # of Wrong Blood in Tube Incidents *	1	1	0 1 0 0 1 1 0 2 2 1 0 1 1
	40). % of patients discharged home with discharge summaries completed within 2 working days	85%	72%	79 75 76 76 77 80 81 80 77 80 77 75 72

Standard 7: Blood Management	41). % of red blood cell wastage	2.0%	1.1%	1.1 2.1 0.0 0.6 1.1 2.0 1.3 2.2 0.6 1.4 2.6 0.6 1.1
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Standard 8: Recognising and Responding to Acute Deterioration	42). # of True Code Blue Calls (Inpatient) *	8	7	7 9 6 4 3 7 8 5 7 6 5 10 7
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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 July 2024 to June 2025.