

Worksheet "Targets and Indicators"

Declaration of risks against healthcare targets and indicators for 2014-15 by Sherwood Forest Hospitals

These targets and indicators are set out in the Risk Assessment Framework
 Definitions can be found in Appendix A of the Risk Assessment Framework
 NOTE: If a particular indicator does not apply to your FT then please enter "Not relevant" for those lines.

Key: must complete
may need to complete

Target or Indicator (per Risk Assessment Framework)	Scoring under Risk Assessment Framework		Risk declared at Annual Plan	Scoring under Risk Assessment Framework	Quarter 1 Actual		Scoring under Risk Assessment Framework	Quarter 2 Actual		Scoring under Risk Assessment Framework	Quarter 3 Actual	
	Threshold or target YTD	Risk Assessment Framework			Performance	Achieved/Not Met		Performance	Achieved/Not Met		Performance	Achieved/Not Met
Referral to treatment time, 18 weeks in aggregate, admitted patients	90%	1.0	No		91.1%	Achieved		89.4%	Not met		90.6%	
Referral to treatment time, 18 weeks in aggregate, non-admitted patients	95%	1.0	No		94.1%	Not met		91.8%	Not met		94.3%	
Referral to treatment time, 18 weeks in aggregate, incomplete pathways	92%	1.0	No	0	92.0%	Achieved	1	94.2%	Achieved	2	92.6%	
A&E Clinical Quality- Total Time in A&E under 4 hours	95%	1.0	No	0	94.3%	Not met	1	94.0%	Not met	1	88.5%	
Cancer 62 Day Waits for first treatment (from urgent GP referral) - post local breach re-allocation	85%	1.0	No		86.8%	Achieved		87.5%	Achieved		85.9%	
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) - post local breach re-allocation	90%	1.0	No	0	100.0%	Achieved	0	94.7%	Achieved	0	93.5%	
Cancer 62 Day Waits for first treatment (from urgent GP referral) - pre local breach re-allocation					86.8%			87.5%			0.0%	
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) - pre local breach re-allocation					100.0%			94.7%			0.0%	
Cancer 31 day wait for second or subsequent treatment - surgery	94%	1.0	No		100.0%	Achieved		95.0%	Achieved		95.8%	
Cancer 31 day wait for second or subsequent treatment - drug treatments	98%	1.0	No		98.8%	Achieved		100.0%	Achieved		100.0%	
Cancer 31 day wait for second or subsequent treatment - radiotherapy	94%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Cancer 31 day wait from diagnosis to first treatment	96%	1.0	No	0	98.4%	Achieved	0	98.7%	Achieved	0	99.7%	
Cancer 2 week (all cancers)	93%	1.0	No		92.3%	Not met		93.0%	Achieved		93.5%	
Cancer 2 week (breast symptoms)	93%	1.0	No	0	93.6%	Achieved	1	94.5%	Achieved	0	96.5%	
Care Programme Approach (CPA) follow up within 7 days of discharge	95%	1.0	No		0.0%	Not relevant		0.0%	Not relevant		0.0%	
Care Programme Approach (CPA) formal review within 12 months	95%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Admissions had access to crisis resolution / home treatment teams	95%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Meeting commitment to serve new psychosis cases by early intervention teams	95%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Ambulance Category A 8 Minute Response Time - Red 1 Calls	75%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Ambulance Category A 8 Minute Response Time - Red 2 Calls	75%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Ambulance Category A 19 Minute Transportation Time	95%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
C.Diff due to lapses in care	37	1.0	Yes	1	1	Achieved	0	2	Achieved	0	9	
Total C.Diff YTD (including: cases deemed not to be due to lapse in care and cases under review)					16			35			54	
C.Diff cases under review					0			0			0	
Minimising MH delayed transfers of care	<=7.5%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Data completeness, MH- identifiers	97%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Data completeness, MH- outcomes	50%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Compliance with requirements regarding access to healthcare for people with a learning disability	N/A	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	
Community care - referral to treatment information completeness	50%	1.0	No	0	85.2%	Achieved	0	90.2%	Achieved	0	92.8%	
Community care - referral information completeness	50%	1.0	No	0	55.9%	Achieved		54.4%	Achieved		55.3%	
Community care - activity information completeness	50%	1.0	No	0	76.9%	Achieved	0	76.6%	Achieved	0	76.9%	
Risk of, or actual, failure to deliver Commissioner Requested Services	N/A		No			No			No			
CQC compliance action outstanding (as at time of submission)	N/A		Yes			Yes			No			
CQC enforcement action within last 12 months (as at time of submission)	N/A		Yes			Yes			No			
CQC enforcement action (including notices) currently in effect (as at time of submission)	N/A		No			No			No			
Moderate CQC concerns or impacts regarding the safety of healthcare provision (as at time of submission)	N/A		Yes			Yes			Yes			
Major CQC concerns or impacts regarding the safety of healthcare provision (as at time of submission)	N/A		No			No			Yes			
Trust unable to declare ongoing compliance with minimum standards of CQC registration	N/A		No			No			Yes			
Results left to complete				0			0		0		0	
Total Score				1			3		3			
Risk Assessment Framework Indicative Governance Rating						Red			Red			
Category												
Explanation						Enter details underlying a narrative rating here			Enter details underlying a narrative rating here			

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of risks against healthcare targets and indicators for 2014-15 by S

indicators are set out in the Risk Assessment Framework
 e found in Appendix A of the Risk Assessment Framework
 ar indicator does not apply to your FT then please enter "Not relevant" for those lines.

Indicator (per Risk Assessment Framework)	Scoring under Risk Assessment Framework		Quarter 4 Actual		
	Achieved/Not Met	Framework	Performance	Achieved/Not Met	Any comments or explanations
atment time, 18 weeks in aggregate, admitted patients	Achieved		79.0%	Not met	
atment time, 18 weeks in aggregate, non-admitted patients	Not met		90.7%	Not met	
atment time, 18 weeks in aggregate, incomplete pathways	Achieved	1	89.4%	Not met	
Quality- Total Time in A&E under 4 hours	Not met	1	92.4%	Not met	
y Waits for first treatment (from urgent GP referral) - post local breach re-allocation	Achieved		83.2%	Not met	
y Waits for first treatment (from NHS Cancer Screening Service referral) - post local breach re-allocation	Achieved	0	92.7%	Achieved	
y Waits for first treatment (from urgent GP referral) - pre local breach re-allocation			0.0%		
y Waits for first treatment (from NHS Cancer Screening Service referral) - pre local breach re-allocation			100.0%	Achieved	
y wait for second or subsequent treatment - surgery	Achieved		100.0%	Achieved	
y wait for second or subsequent treatment - drug treatments	Not relevant	0	0.0%	Not relevant	0
y wait for second or subsequent treatment - radiotherapy	Achieved	0	98.3%	Achieved	0
y wait from diagnosis to first treatment	Achieved		94.8%	Achieved	
k (all cancers)	Achieved	0	97.1%	Achieved	0
k (breast symptoms)	Not relevant		0.0%	Not relevant	
me Approach (CPA) follow up within 7 days of discharge	Not relevant	0	0.0%	Not relevant	0
me Approach (CPA) formal review within 12 months	Not relevant	0	0.0%	Not relevant	0
ad access to crisis resolution / home treatment teams	Not relevant	0	0.0%	Not relevant	0
mitment to serve new psychosis cases by early intervention teams	Not relevant	0	0.0%	Not relevant	0
ategory A 8 Minute Response Time - Red 1 Calls	Not relevant	0	0.0%	Not relevant	0
ategory A 8 Minute Response Time - Red 2 Calls	Not relevant	0	0.0%	Not relevant	0
ategory A 19 Minute Transportation Time	Not relevant	0	0.0%	Not relevant	0
apses in care	Achieved	0	12	Not met	3 Q1, 4 Q2, 2 Q3, 0 Q4 following CCG and Trust agreement to definition
TD (including: cases deemed not to be due to lapse in care and cases under review)			67		
nder review			0		
H delayed transfers of care	Not relevant	0	0.0%	Not relevant	0
ness, MH: identifiers	Not relevant	0	0.0%	Not relevant	0
ness, MH: outcomes	Not relevant	0	0.0%	Not relevant	0
with requirements regarding access to healthcare for people with a learning disability	Achieved	0	NA	Achieved	0
are - referral to treatment information completeness	Achieved		94.4%	Achieved	0
are - referral information completeness	Achieved		83.7%	Achieved	0
are - activity information completeness	Achieved	0	77.8%	Achieved	0
ual, failure to deliver Commissioner Requested Services	no			no	
nce action outstanding (as at time of submission)	No			No	
ment action within last 12 months (as at time of submission)	No			No	
ment action (including notices) currently in effect (as at time of submission)	No			No	
C concerns or impacts regarding the safety of healthcare provision (as at time of submission)	Yes			Yes	
ncerns or impacts regarding the safety of healthcare provision (as at time of submission)	Yes			Yes	
to declare ongoing compliance with minimum standards of CQC registration	Yes			Yes	
Results	0	2		0	5
Risk Assessment Framework Indicative Go	Red				
	Enter details underlying a narrative rating here			Enter details underlying a narrative rating here	