Declaration of risks against healthcare targets and indicators for 201516 by Sherwood Forest Hospitals NHS Foundation Trust

Targets and indicators as set out in the Risk Assessment Framework (RAF) - definitions per RAF Appendix A NOTE: If a particular indicator does not apply to your FT then please enter "Not relevant" for those lines.

			Annual Plan		Quarter 1				
Key:	Threshold or target YTD	Scoring Per Risk Assessment Framework	Risk declared	Scoring Per Risk Assessment Framework	Performance	Declaration	Comments / explanations	Scoring Per Risk Assessment Framework	
must complete may need to complate	,								

				Framework		Framework			Framework
		must complete			,				
		may need to complate							
Target or Indicator (per Risk Assessment Framework)						THE ALERA SERVICE			
Referral to treatment time, 18 weeks in aggregate, admitted patients		i	90%	N/A	Yes		78.8%	Not met	I N/A I
Referral to treatment time, 18 weeks in aggregate, non-admitted patients		i	95%	N/A	Yes		89.9%	Not met	N/A
Referral to treatment time, 18 weeks in aggregate, incomplete pathways		i	92%	1.0	Yes	2	90.2%	Not met	1 1
A&E Clinical Quality - Total Time in A&E under 4 hours		i	95%	1.0	Yes	1	96.0%	Achieved	
Cancer 62 Day Waits for first treatment (from urgent GP referral) - post local breach re-allocation			85%	1.0	Yes		84.1%	Not met	- 0
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) - post local breach re-allocation		i	90%	1.0	No	1	100.0%	Achieved	
Cancer 62 Day Waits for first treatment (from urgent GP referral) - pre local breach re-allocation			3070	1.0	INU		0.0%	Achieved	1 1
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) - pre local breach re-allocation							0.0%		
Cancer 31 day wait for second or subsequent treatment - surgery			94%	1.0	No		100.0%	Achieved	
Cancer 31 day wait for second or subsequent treatment - drug treatments			98%	1.0	No				
Cancer 31 day wait for second or subsequent treatment - radiotherapy			94%	1.0	N/A	0	100.0%	Achieved	
Cancer 31 day wait from diagnosis to first treatment			96%	1.0	No No	0	0.0%	Not relevant	0
Cancer 2 week (all cancers)			93%	1.0		0	98.7%	Achieved	0
Cancer 2 week (breast symptoms)			93%	1.0	No	0	93.2%	Achieved	
Care Programme Approach (CPA) follow up within 7 days of discharge			95%		No	0	93.1%	Achieved	0
Care Programme Approach (CPA) formal review within 12 months				1.0	N/A		0.0%	Not relevant	
			95%	1.0	N/A	0	0.0%	Not relevant	0
Admissions had access to crisis resolution / home treatment teams			95%	1.0	N/A	0	0.0%	Not relevant	0
Meeting commitment to serve new psychosis cases by early intervention teams OLD measure - use until Q1 2016/17			95%	1.0	N/A	0	0.0%	Not relevant	0
Ambulance Category A 8 Minute Response Time - Red 1 Calls			75%	1.0	N/A	0	0.0%	Not relevant	0
Ambulance Category A 8 Minute Response Time - Red 2 Calls			75%	1.0	N/A	0	0.0%	Not relevant	0
Ambulance Category A 19 Minute Transportation Time			95%	1.0	N/A	0	0.0%	Not relevant	0
C.Diff due to lapses in care (YTD)		<u> </u>	12	1.0	Yes	1	8	Achieved	0
Total C.Diff YTD (including: cases deemed not to be due to lapse in care and cases under review)							16		
C.Diff cases under review		i					0		
Minimising MH delayed transfers of care		i	<=7.5%	1.0	N/A	0	0.0%	Not relevant	0
Meeting commitment to serve new psychosis cases by early intervention teams NEW measure (from Q3 2015/16)		i	50%				0.0%	Not relevant	
Improving Access to Psychological Therapies - Patients referred within 6 weeks NEW measure (from Q4 2015/16)		i	75%				0.0%	Not relevant	
Improving Access to Psychological Therapies - Patients referred within 18 weeks NEW measure (from Q4 2015/16)		i	95%				0.0%	Not relevant	
Data completeness, MH: identifiers		i	97%	1.0	N/A	0	0.0%	Not relevant	0
Data completeness, MH: outcomes		i	50%	1.0	N/A	0	0.0%	Not relevant	0
Compliance with requirements regarding access to healthcare for people with a learning disability		i	N/A	1.0	No	0	N/A	Achieved	0
Community care - referral to treatment information completeness		i	50%	1.0	No		97.0%	Achieved	
Community care - referral information completeness		i	50%	1.0	No		53.9%	Achieved	
Community care - activity information completeness		i	50%	1.0	No	0	54.9%	Achieved	0
							- 7.0.7.0		· ·
Risk of, or actual, failure to deliver Commissioner Requested Services			N/A		No			No	
Date of last CQC inspection			N/A	1 1	N/A			16/06/2015	
CQC compliance action outstanding (as at time of submission)			N/A	1	Yes			Yes	
CQC enforcement action within last 12 months (as at time of submission)			N/A	1 1	No			No	
CQC enforcement action (including notices) currently in effect (as at time of submission)			N/A	1 1	No			Yes	
Moderate CQC concerns or impacts regarding the safety of healthcare provision (as at time of submission)		i	N/A	Report by Exception	Yes			Yes	
Major CQC concerns or impacts regarding the safety of healthcare provision (as at time of submission)			N/A	1 report by Exception	No			No No	
Overall rating from CQC inspection (as at time of submission)			N/A	- 1	N/A				
CQC recommendation to place trust into Special Measures (as at time of submission)			N/A	-	N/A			Requires improvement	
Trust unable to declare ongoing compliance with minimum standards of CQC registration			N/A	- 1	Yes			Yes	
Trust has not complied with the high secure services Directorate (High Secure MH trusts only)			N/A	- 1				Yes	
riust has not compliede with the high secure services birectorate (riigh secure win trusts only) Results left to complete:	#REF!		N/A		N/A			W755	
Checks Count:		:						#REF!	
Checks left to clear:	0	- 1							
Checks left to clear: Service Performance Score	U	1						#REF!	
Service retroffinance ocore						5			2
									W. To a second s