Worksheet "Targets and Indicators"

Declaration of risks against healthcare targets and indicators for 2013-14 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)	Threshold or target YTD	Scoring under Compliance Framework	Scoring under Risk Assessment Framework	Risk declared at Annual Plan	Scoring under Compliance Framework	Quarter 1 Actual Performance	Achieved/Not Met	Any comments or explanations	Scoring under Compliance Framework	Quarter 2 Actual Performance	Achieved/Not Met	Any comments or explanations	Scoring under Compliance Framework	Quarter 3 Actual Performance	Achieved/Not Met	Any comments or explanations	Scoring under Risk Assessment Framework	Quarter 4 Actual Performance	Achieved/Not Met	Any comments or explanations	Scoring under Risk Assessment Framework
Referral to treatment time, 18 weeks in aggregate, admitted patients	90%	1.0	1.0	No		94.50%	Achieved			94.36%	Achieved			92.00%	Achieved			86.1%	Not met		
Referral to treatment time, 18 weeks in aggregate, non-admitted patients	95%	1.0	1.0	No		95.70%	Achieved			95.59%	Achieved			94.40%	Not met			94.1%	Not met		
Referral to treatment time, 18 weeks in aggregate, incomplete pathways	92%	1.0	1.0	No	0	95.10%	Achieved		0	93.83%	Achieved		0	91.30%	Not met		2	92.4%	Achieved		2
A&E Clinical Quality- Total Time in A&E under 4 hours	95%	1.0	1.0	No	0	96.70%	Achieved		0	96.66%	Achieved		0	95.70%	Achieved		0	93.5%	Not met		1
Cancer 62 Day Waits for first treatment (from urgent GP referral)	85%	1.0	1.0	No		91.60%	Achieved			88.83%	Achieved			89.70%	Achieved			86.4%	Achieved		
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral)	90%	1.0	1.0	No	0	100.00%	Achieved		0	100.00%	Achieved		0	100.00%	Achieved		0	94.1%	Achieved		0
Cancer 31 day wait for second or subsequent treatment - surgery	94%	1.0	1.0	No		96.20%	Achieved			100.00%	Achieved			100.00%	Achieved			100.0%	Achieved		
Cancer 31 day wait for second or subsequent treatment - drug treatments	98%	1.0	1.0	No		100.00%	Achieved			100.00%	Achieved			100.00%	Achieved			98.0%	Achieved		
Cancer 31 day wait for second or subsequent treatment - radiotherapy	94%	1.0	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Cancer 31 day wait from diagnosis to first treatment	96%	0.5	1.0	No	0	99.70%	Achieved		0	99.37%	Achieved		0	100.00%	Achieved		0	99.3%	Achieved		0
Cancer 2 week (all cancers)	93%	0.5	1.0	No		94.10%	Achieved			93.86%	Achieved			95.50%	Achieved			96.2%	Achieved		
Cancer 2 week (breast symptoms)	93%	0.5	1.0	No	0	97.60%	Achieved		0	95.05%	Achieved		0	93.00%	Achieved		0	94.0%	Achieved		0
Care Programme Approach (CPA) follow up within 7 days of discharge	95%	1.0	1.0	No		0.00%	Not relevant			0.00%	Not relevant			0.00%	Not relevant			0.0%	Not relevant		
Care Programme Approach (CPA) formal review within 12 months	95%	1.0	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Admissions had access to crisis resolution / home treatment teams	95%	1.0	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Meeting commitment to serve new psychosis cases by early intervention teams	95%	0.5	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Ambulance Category A 8 Minute Response Time - Red 1 Calls	75%	0.5	1.0	No		0.00%	Not relevant			0.00%	Not relevant			0.00%	Not relevant		0	0.0%	Not relevant		0
Ambulance Category A 8 Minute Response Time - Red 2 Calls	75%	0.5	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Ambulance Category A 19 Minute Transportation Time	95%	1.0	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Clostridium Difficile -meeting the C.Diff objective	0	1.0	1.0	Yes	1	8	Achieved		0	17	Not met		1	28	Not met		1	36	Not met		1
MRSA - meeting the MRSA objective	0	1.0	N/A	No	0	1	Achieved		0	3	Achieved		0	N/A		No longer applicable under RAF		N/A		No longer applicable under RAF	
Minimising MH delayed transfers of care	<=7.5%	1.0	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Data completeness, MH identifiers	97%	0.5	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Data completeness, MH outcomes	50%	0.5	1.0	No	0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.00%	Not relevant		0	0.0%	Not relevant		0
Compliance with requirements regarding access to healthcare for people with a learning disability	N/A	0.5	1.0	No	0	0.00%	Achieved		0	0.00%	Achieved		0	0.00%	Achieved		0	N/A	Achieved		0
Community care - referral to treatment information completeness	50%	1.0	1.0	No		81.80%	Achieved			85.92%	Achieved			86.20%	Achieved			89.2%	Achieved		0
Community care - referral information completeness	50%	1.0	1.0	No		57.40%	Achieved			54.26%	Achieved			54.00%	Achieved			55.4%	Achieved		0
Community care - activity information completeness	50%	1.0	1.0	No	0	76.70%	Achieved		0	77.11%	Achieved		0	75.50%	Achieved		0	76.1%	Achieved		0
Risk of, or actual, failure to deliver Commissioner Requested Services	N/A	4.0	Report by Exception	No	0		No		0		No		0		No				No		
CQC compliance action outstanding (as at 31 Mar 2014)	N/A	special	Report by Exception	Yes			Yes				Yes				Yes				Yes		
CQC enforcement action within last 12 months (as at 31 Mar 2014)	N/A	special	Report by Exception	No			No				No				Yes				Yes		
CQC enforcement action (including notices) currently in effect (as at 31 Mar 2014)	N/A	4.0	Report by Exception	No			No				Yes				No				No		
Moderate CQC concerns or impacts regarding the safety of healthcare provision (as at 31 Mar 2014)	N/A	special	Report by Exception	Yes			Yes				Yes				No				No		
Major CQC concerns or impacts regarding the safety of healthcare provision (as at 31 Mar 2014)	N/A	2.0	Report by Exception	No	0		No		0		Yes		4		No				No		
Trust unable to declare ongoing compliance with minimum standards of CQC registration	N/A	special	Report by Exception	No			Yes				Yes				Yes				Yes		
Results left to complete				0			0				0				0				0		
Total Score				1			0				5				3				4		
Override Rating (if any)							RED	Enter the reason for any non-scoring related rating override here													
Compliance Framework Indicative Governance Risk Rating				AMBER-GREEN			RED														