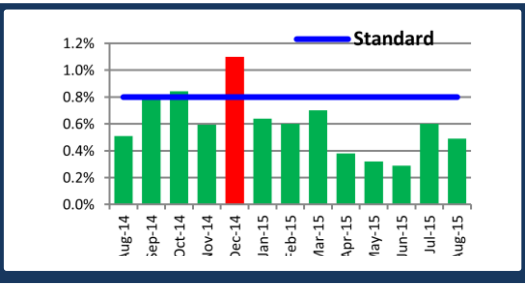
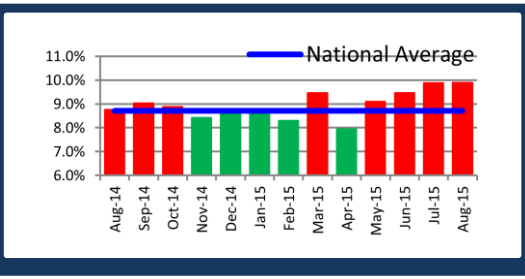
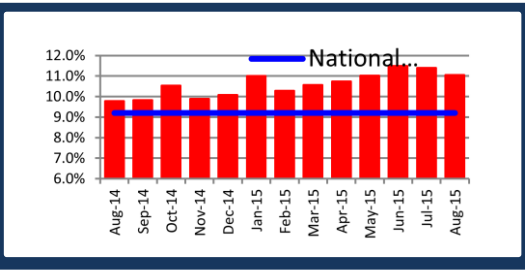
Sherwood Forest Hospitals NHS
NHS Foundation Trust

Board of Directors Scorecard September 2015)

Performance – Mandatory Access Standards (Executive Lead – Sue Barnett, COO)

	Description	Aggregate Position	Historical	Variation
Readmissions (GMs)	The construction of the readmissions metric is under development in line with the SLA work stream e.g. re-admissions data has been provided to the CCG, as per SLA requirements).			
Cancelled Elective Operations (D. Travis)	The percentage of all patients with operations cancelled for non-clinical reasons (on the day of admission or after) re-admitted within 28 days	August performance is 0.49%.		Performance continues to be successfully delivered within the maximum threshold for this metric (0.8%). However, there has been a deterioration in performance between July and August.
Outpatient DNA Rate (New) (S. Evans)	The percentage of new patients that failed to turn up for their outpatient appointment (includes all referral types)	August performance is 9.89%.		The DNA for new appointments is above the national average of 8.71%. Outpatient Improvement projects have started and rates are expected to fall below national level.
Outpatient DNA Rate (Follow UP) (S. Evans)	The percentage of follow up patients that failed to turn up for their outpatient appointment (includes all referral types)	August performance is 11.05%		The DNA for Follow up appointments is above the national average of 9.21%. Improved call centre systems and processes will lead to reductions in future months.