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## Declaration of risks against healthcare targets and indicators for 2016/17 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.

**Key:**

must complete

may need to complete

**Target or Indicator (per Risk Assessment Framework)**

Threshold or target YTD	Scoring Per Risk Assessment Framework	Annual Plan		Quarter 1			
		Risk declared	Scoring Per Risk Assessment Framework	Performance	Declaration	Comments / explanations	Scoring Per Risk Assessment Framework

Referral to treatment time, 18 weeks in aggregate, incomplete pathways	i	92%	1.0	No	0	93.3%	Achieved		0
A&E Clinical Quality - Total Time in A&E under 4 hours	i	95%	1.0	Yes	1	93.7%	Not met		1
Cancer 62 Day Waits for first treatment (from urgent GP referral) - post local breach re-allocation	i	85%	1.0	No	0	85.3%	Achieved		0
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) - post local breach re-allocation	i	90%	1.0	No	0	96.0%	Achieved		0
Cancer 62 Day Waits for first treatment (from urgent GP referral) - pre local breach re-allocation	i					0.0%			
Cancer 62 Day Waits for first treatment (from NHS Cancer Screening Service referral) - pre local breach re-allocation	i					0.0%			
Cancer 31 day wait for second or subsequent treatment - surgery	i	94%	1.0	No	0	100.0%	Achieved		0
Cancer 31 day wait for second or subsequent treatment - drug treatments	i	98%	1.0	No	0	100.0%	Achieved		0
Cancer 31 day wait for second or subsequent treatment - radiotherapy	i	94%	1.0	No	0	0.0%	Not relevant		0
Cancer 31 day wait from diagnosis to first treatment	i	96%	1.0	No	0	98.8%	Achieved		0
Cancer 2 week (all cancers)	i	93%	1.0	No	0	95.9%	Achieved		0
Cancer 2 week (breast symptoms)	i	93%	1.0	No	0	99.3%	Achieved		0
Care Programme Approach (CPA) follow up within 7 days of discharge	i	95%	1.0	N/A	0	0.0%	Not relevant		0
Care Programme Approach (CPA) formal review within 12 months	i	95%	1.0	N/A	0	0.0%	Not relevant		0
Admissions had access to crisis resolution / home treatment teams	i	95%	1.0	N/A	0	0.0%	Not relevant		0
Ambulance Category A 8 Minute Response Time - Red 1 Calls	i	75%	1.0	N/A	0	0.0%	Not relevant		0
Ambulance Category A 8 Minute Response Time - Red 2 Calls	i	75%	1.0	N/A	0	0.0%	Not relevant		0
Ambulance Category A 19 Minute Transportation Time	i	95%	1.0	N/A	0	0.0%	Not relevant		0
C.Diff due to lapses in care (YTD)	i	12	1.0	No	0	5	Achieved		0
Total C.Diff YTD (including: cases deemed not to be due to lapse in care and cases under review)	i					10			
C.Diff cases under review	i					1			
Minimising MH delayed transfers of care	i	<=7.5%	1.0	N/A	0	0.0%	Not relevant		0
Early intervention in psychosis: first experience treated with a NICE-approved package within 2 weeks	i	50%	1.0	N/A	0	0.0%	Not relevant		0
Improving access to psychological therapies: % patients beginning treatment within 6 weeks of referral	i	75%	1.0	N/A	0	0.0%	Not relevant		0
Improving access to psychological therapies: % patients beginning treatment within 18 weeks of referral	i	95%	1.0	N/A	0	0.0%	Not relevant		0
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	N/A	0	94.8%	Achieved		0
Community care - referral information completeness	i	50%	1.0	N/A	0	57.9%	Achieved		0
Community care - activity information completeness	i	50%	1.0	N/A	0	77.0%	Achieved		0

Risk of, or actual, failure to deliver Commissioner Requested Services		N/A		No		No	
Date of last CQC inspection	i	N/A		N/A		16/06/2016	
CQC compliance action outstanding (as at time of submission)		N/A		Yes		Yes	
CQC enforcement action within last 12 months (as at time of submission)		N/A		Yes		Yes	
CQC enforcement action (including notices) currently in effect (as at time of submission)		N/A		Yes		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)	i	N/A		Yes		Yes	
Overall rating from CQC inspection (as at time of submission)	i	N/A		N/A		Inadequate	
CQC recommendation to place trust into Special Measures (as at time of submission)		N/A		N/A		Yes	
Trust unable to declare ongoing compliance with minimum standards of CQC registration		N/A		Yes		Yes	
Trust has not complied with the high secure services Directorate (High Secure MH trusts only)		N/A		N/A		N/A	

<b>Results left to complete:</b>	0						
<b>Checks Count:</b>	0						
<b>Checks left to clear:</b>	0					OK	
<b>Service Performance Score</b>				1			1