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)	Threshold or target YTD	Scoring under Risk Assessment Framework	Risk declared at Annual Plan	Scoring under Risk Assessment Framework	Quarter 1 Actual Performance	Achieved/Not Met	Scoring under Risk Assessment Framework	Quarter 2 Actual Performance	Achieved/Not Met	Scoring under Risk Assessment Framework	Quarter 3 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	No		91.1%	Achieved		89.4%	Not met		90.6%	Achieved		
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%	Not met		
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%	Achieved		1
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%	Not met		1
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%	Achieved		
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%	Achieved		0
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%	Achieved		
Cancer 31 day wait for second or subsequent treatment - drug treatments	98%	1.0	No		98.8%	Achieved		100.0%	Achieved		100.0%	Achieved		
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%	Not relevant		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%	Achieved		0
Cancer 2 week (all cancers)	93%	1.0	No		92.3%	Not met		93.0%	Achieved		93.5%	Achieved		
Cancer 2 week (breast symptoms)	93%	1.0	No	0	93.6%	Achieved	1	94.5%	Achieved	0	96.5%	Achieved		0
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%	Not relevant		
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%	Not relevant		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%	Not relevant		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%	Not relevant		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%	Not relevant		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%	Not relevant		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%	Not relevant		0
C.Diff due to lapses in care	28	1.0	Yes	1	1	Achieved	0	2	Achieved	0	0	Not met		1
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%	Not relevant		0
Data completeness, MH: identifiers	97%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	Not relevant		0
Data completeness, MH: outcomes	50%	1.0	No	0	0.0%	Not relevant	0	0.0%	Not relevant	0	0.0%	Not relevant		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%	Achieved	0	N/A	Achieved		
Community care - referral to treatment information completeness	50%	1.0	No		89.5%	Achieved		90.2%	Achieved		92.8%	Achieved		
Community care - referral information completeness	50%	1.0	No		55.9%	Achieved		54.4%	Achieved		55.3%	Achieved		
Community care - activity information completeness	50%	1.0	No	0	75.9%	Achieved	0	76.6%	Achieved	0	76.9%	Achieved		0
Risk of, or actual, failure to deliver Commissioner Requested Services	N/A		No		No			No			no			
CQC compliance action outstanding (as at time of submission)	N/A		Yes		Yes			No			No			
CQC enforcement action within last 12 months (as at time of submission)	N/A		Yes		Yes			No			No			
CQC enforcement action (including notices) currently in effect (as at time of submission)	N/A	Report by Exception	No		No			No			No			
Moderate CQC concerns or impacts regarding the safety of healthcare provision (as at time of submission)	N/A		Yes		Yes			Yes			Yes			
Major CQC concerns or impacts regarding the safety of healthcare provision (as at time of submission)	N/A		No		No			Yes			Yes			
Trust unable to declare ongoing compliance with minimum standards of CQC registration	N/A		No		No			Yes			Yes			

| | | | | Results left to complete | 0 | | 0 | 0 | | | 0 | | | |
| | | | | Total Score | 1 | | | 3 | | | 3 | | | |

| Risk Assessment Framework Indicative Governance Rating Category | | | | | Red | | | Red | | | Red | | | |

Explanation

Enter details underlying a narrative rating here

Enter details underlying a narrative rating here

Enter details underlying a narrative rating here