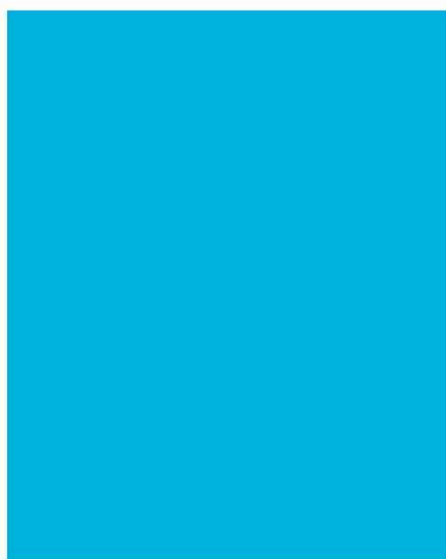


# NHS Standard Contract 2013/14

## Particulars



# NHS Standard Contract 2013/14

## *Particulars*

First published: 4 February 2013

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**Prepared by the NHS Standard Contracts Team  
on behalf of the NHS Commissioning Board**

NHS COMMISSIONING BOARD  
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Contract Reference	
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<b>PARTICULARS</b>
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<b>DATE OF CONTRACT</b>	
<b>SERVICE COMMENCEMENT DATE</b>	
<b>CONTRACT TERM</b>	[12] Months
<b>COMMISSIONERS</b>	[            ] CCG (ODS [    ]) [            ] CCG (ODS [    ]) [            ] CCG (ODS [    ])  [NHS Commissioning Board]  [Local Authority]
<b>CO-ORDINATING COMMISSIONER</b>	[            ]
<b>PROVIDER</b>	[            ] (ODS [    ]) Principal and/or registered office address: [            ] [Company number: [        ]]

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**CONTRACT**

This Contract records the agreement between the Commissioners and the Provider and comprises

1. the **Particulars**;
2. the **Service Conditions**;
3. the **General Conditions**,

as completed and agreed by the Parties and as varied from time to time in accordance with General Condition 13.

**IN WITNESS OF WHICH the Parties have signed this Contract on the date(s) shown below**

**SIGNED by** .....

Signature

**[INSERT AUTHORISED SIGNATORY'S NAME] for and on behalf of [INSERT COMMISSIONER NAME]** .....

Title

.....  
Date

**[INSERT AS ABOVE FOR EACH COMMISSIONER]**

**SIGNED by** .....

Signature

**[INSERT AUTHORISED SIGNATORY'S NAME] for and on behalf of [INSERT PROVIDER NAME]** .....

Title

.....  
Date



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<b>CONTRACT TERM</b>	
Effective Date	
Expiry Date(s)	
<b>SERVICE COMMENCEMENT</b>	
Expected Service Commencement Date	
Conditions Precedent	<b>Set out in Schedule 1 Part A or None</b>
Longstop Date	
Commissioner Documents	<b>Set out in Schedule 1 Part B or None</b>

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<b>SERVICES</b>	
<b>Service Categories</b>	<b>Tick all that apply</b>
<b>Accident and Emergency</b>	
<b>Acute</b>	
<b>Ambulance</b>	
<b>Cancer Services</b>	
<b>Care Home</b>	
<b>Community Services</b>	
<b>Mental Health and Learning Disability Services</b>	
<b>Mental Health Secure Services</b>	
<b>Patient Transport</b>	
<b>Primary Care Services not commissioned under primary care contracts</b>	
<b>Radiotherapy</b>	
<b>Substance Misuse</b>	
<b>Surgical</b>	
<b>Termination of Pregnancy</b>	
<b>Service Requirements</b>	
<b>Service Specifications</b>	<b>Set out in Schedule 2 Part A</b>
<b>Indicative Activity Plan</b>	<b>Set out in Schedule 2 Part B or Not applicable</b>
<b>Activity Planning Assumptions</b>	<b>Set out in Schedule 2 Part C or Not applicable</b>
<b>Commissioner Requested Services</b>	<b>Set out in Schedule 2 Part D or Not applicable</b>
<b>Essential Services</b>	<b>Set out in Schedule 2 Part D or Not applicable</b>
<b>Services to which 18 Weeks applies</b>	<b>YES/NO</b>

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<b>PAYMENT</b>	
<b>Tariff Services</b>	<b>[List Services, by Specification No.]</b> or <b>Not applicable</b>
<b>Permitted Variations to Tariff (in accordance with PbR rules)</b>	<b>Set out in Schedule 3 Part A or Not applicable</b>
<b>Non-Tariff Services</b>	<b>[List Services, by Specification No.]</b> or <b>Not applicable</b>
<b>Small Provider</b>	<b>YES/NO</b>
<b>Expected Annual Contract Value Agreed</b>	<b>YES/NO</b>
<b>Any Services not included in Expected Annual Contract Value</b>	<b>YES/NO</b>
<b>Other Clinical Arrangements</b>	<b>YES/NO</b>
<b>First/Last Contract Year less than 12 months</b>	<b>YES/NO</b>
<b>Notice given to aggregate payments</b>	<b>YES/NO</b>
<b>Notice given to disaggregate payments</b>	<b>YES/NO</b>
<b>Risk Share Agreement</b>	<b>Set out in Schedule 3 Part C or Not applicable</b>

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<b>QUALITY</b>	
<b>Local Incentive Scheme</b>	<b>YES/NO</b>
<b>CQUIN Payments on Account Made</b>	<b>Monthly/Other (Specify)</b>
<b>NHS Foundation Trust/NHS Trust</b>	<b>YES/NO</b>
<b>Non-NHS Provider</b>	<b>YES/NO</b>
<b>Clostridium Difficile Baseline Threshold</b>	<b>[ ] or Nil or Not applicable</b>

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<b>GOVERNANCE</b>	
<b>Commissioner authorised signatories</b>	<p>[CCG]: [Insert name of authorised signatory]  [CCG]: [Insert name of authorised signatory]  [CCG]: [Insert name of authorised signatory]</p> <p>[NHS Commissioning Board]: [Insert name of authorised signatory]</p> <p>[Local Authority]: [Insert name of authorised signatory]</p>
<b>Provider authorised signatory</b>	[Insert name of authorised signatory]
<b>Documents Relied On</b>	Set out in Schedule 5 Part A or Not applicable
<b>Mandatory Material Sub-contractors</b>	Set out in Schedule 5 Part B1 or Not applicable
<b>Permitted Material Sub-Contractors</b>	Set out in Schedule 5 Part B2 or Not applicable
<b>IPR</b>	Set out in Schedule 5 Part C or Not applicable
<b>Commissioner Roles and Responsibilities</b>	Set out in Schedule 5 Part D
<b>Nominated Mediation Body</b>	[                    ]
<b>Caldicott Guardian</b>	[                    ] Email: [                    ] Tel: [                    ]
<b>Senior Information Risk Owner</b>	[                    ] Email: [                    ] Tel: [                    ]
<b>Accountable Emergency Officers</b>	[CCG]: [                    ] Email: [                    ] Tel: [                    ] [Insert for each Commissioner] [Provider]: [                    ] Email: [                    ] Tel: [                    ]
<b>Prevent Lead</b>	[                    ] Email: [                    ] Tel: [                    ]

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<b>REGULATORY</b>	
<b>CQC Registration</b>	<b>Required/Not required</b>
<b>Monitor's Licence</b>	<b>YES/Not applicable</b>

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<b>CONTRACT MANAGEMENT</b>	
<b>Addresses for service of Notices</b>	<b>Co-ordinating Commissioner:</b> [            ] <b>Address:</b> [                            ] <b>Email:</b> [                            ]  <b>Commissioner:</b> [            ] <b>Address:</b> [                            ] <b>Email:</b> [                            ]  <b>Provider:</b> [            ] <b>Address:</b> [                            ] <b>Email:</b> [                            ]
<b>Frequency of Review Meetings</b>	<b>Ad hoc/Monthly/Quarterly/Six Monthly</b>
<b>Commissioner Representative(s)</b>	[            ] <b>Address:</b> [                            ] <b>Email:</b> [                            ] <b>Tel:</b> [                            ]
<b>Provider Representative</b>	[            ] <b>Address:</b> [                            ] <b>Email:</b> [                            ] <b>Tel:</b> [                            ]
<b>Data Quality Improvement Plan</b>	<b>Set out in Schedule 6 Part D or Not applicable</b>
<b>Service Development and Improvement Plan</b>	<b>Set out in Schedule 6 Part F or Not applicable</b>

## SCHEDULE 1 – SERVICE COMMENCEMENT

### A. Conditions Precedent

The Provider must provide the Co-ordinating Commissioner with the following documents:

**Insert text or state Not Applicable**

The Provider must complete the following actions:

1. Put in place appropriate Counter Fraud and Security Management Arrangements
2. [Agree plan with Co-ordinating Commissioner to achieve level 2 compliance against all requirements in the relevant NHS information governance toolkit.]
3. **[Insert text locally as required]**



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**B. Commissioner Documents**

Date	Document	Description
Insert text locally or state Not Applicable		

## SCHEDULE 2 – THE SERVICES

### A. Service Specifications

Mandatory headings 1 – 4. Mandatory but detail for local determination and agreement  
Optional headings 5-7. Optional to use, detail for local determination and agreement.

All subheadings for local determination and agreement

<b>Service Specification No.</b>	
<b>Service</b>	
<b>Commissioner Lead</b>	
<b>Provider Lead</b>	
<b>Period</b>	
<b>Date of Review</b>	

<b>1. Population Needs</b>		
1.1	National/local context and evidence base	
<b>2. Outcomes</b>		
2.1	<u>NHS Outcomes Framework Domains &amp; Indicators</u>	
	Domain 1	Preventing people from dying prematurely
	Domain 2	Enhancing quality of life for people with long-term conditions
	Domain 3	Helping people to recover from episodes of ill-health or following injury
	Domain 4	Ensuring people have a positive experience of care
	Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm
2.2	Local defined outcomes	
<b>3. Scope</b>		
3.1	Aims and objectives of service	
3.2	Service description/care pathway	

**3.3 Population covered**

**3.4 Any acceptance and exclusion criteria and thresholds**

**3.5 Interdependence with other services/providers**

#### **4. Applicable Service Standards**

**4.1 Applicable national standards (eg NICE)**

**4.2 Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)**

**4.3 Applicable local standards**

#### **5. Applicable quality requirements and CQUIN goals**

**5.1 Applicable quality requirements (See Schedule 4 Parts A-D)**

**5.2 Applicable CQUIN goals (See Schedule 4 Part E)**

#### **6. Location of Provider Premises**

**The Provider's Premises are located at:**

#### **7. Individual Service User Placement**

**B. Indicative Activity Plan**

**Insert text locally or state Not Applicable**

**C. Activity Planning Assumptions**

**Insert text locally or state Not Applicable**

**D. Commissioner Requested Services and Essential Services**

<b>Commissioner Requested Services</b>
Insert text locally or state Not Applicable
<b>Essential Services</b>
Insert text locally or state Not Applicable

**E. CRS Continuity Plan/Essential Services Continuity Plan**

<b>Insert text locally or state Not Applicable</b>
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**F. Clinical Networks, Screening Programmes and National Clinical  
Audit and Patient Outcomes Programme**

Insert text locally or state Not Applicable



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**G. Other Locally Agreed Policies and Procedures**

Policy	Date	Weblink
Insert text locally or state Not Applicable		

## **H. Transition Arrangements**

**Insert text locally or state Not Applicable**

**I. Exit Arrangements**

**Insert text locally or state Not Applicable**

**J. Social Care Provisions**

**Insert text locally or state Not Applicable**

**K. Transfer of and Discharge from Care Protocols**

**Insert text locally**

**L. Safeguarding Policies**

Insert text locally

### SCHEDULE 3 - PAYMENT

#### A. Permitted Variations to Tariff, Non-Tariff Prices and Other Payment Arrangements

Table 1: Non-Tariff Prices

Service Description	Currency	Price
Insert text locally or state Not Applicable		

Table 2: Permitted Variations to Tariff

Service Description	Currency	Price
Insert text locally or state Not Applicable		

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**Table 3: Other Payment Arrangements**

<b>Insert text locally or state Not Applicable</b>
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**Table 4: Timing and amounts of payments in first and/or final Contract Year**

<b>Insert text locally or state Not Applicable</b>
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**B. Expected Annual Contract Values**

Commissioner	Expected Annual Contract Value
Insert text locally or state Not Applicable	
<b>Total</b>	

**C. Risk Share Agreement**

**Insert text locally or state Not Applicable**

**D. Notices to Aggregate/Disaggregate Payments**

**Insert text locally as and when required or state Not Applicable**

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## SCHEDULE 4 – QUALITY REQUIREMENTS

### A. Operational Standards

Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	<b>RTT waiting times for non-urgent consultant-led treatment</b>					
CB_B1	Percentage of admitted patients starting treatment within a maximum of 18 weeks from referral	Operating standard of 90%	Review of monthly Service Quality Performance Report	As set out in Service Condition 21 and Schedule 4 Part G	Monthly	A.,  C, MH where 18 Weeks applies
CB_B2	Percentage of non-admitted patients starting treatment within a maximum of 18 weeks from referral	Operating standard of 95%	Review of monthly Service Quality Performance Report	As set out in Service Condition 21 and Schedule 4 Part G	Monthly	A.,  C, MH where 18 Weeks applies
CB_B3	Percentage of patients on incomplete non-emergency pathways (yet to start treatment) waiting no more than 18 weeks from referral	Operating standard of 92%	Review of monthly Service Quality Performance Report	As set out in Service Condition 21 and Schedule 4 Part G	Monthly	A.,  C, MH where 18 Weeks applies

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Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	<b>Diagnostic test waiting times</b>					
CB_B4	Percentage of patients waiting less than 6 weeks from referral for a diagnostic test	Operating standard of >99%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the month of the under-achievement	Monthly	A, C
	<b>A&amp;E waits</b>					
CB_B5	Percentage of A & E attendances where the patient was admitted, transferred or discharged within 4 hours of their arrival at an A&E department	Operating standard of 95%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A+E
	<b>Cancer waits - 2 week wait</b>					
CB_B6	Percentage of patients referred urgently with suspected cancer by a GP waiting no more than two weeks for first outpatient appointment	Operating standard of 93%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR
CB_B7	Percentage of patients	Operating	Review of monthly Service	2% of revenue derived	Quarterly	A, CR

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Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	referred urgently with breast symptoms (where cancer was not initially suspected) waiting no more than two weeks for first outpatient appointment	standard of 93%	Quality Performance Report	from the provision of the locally defined service line in the quarter of the under-achievement		
	<b>Cancer waits - 31 days</b>					
CB_B8	Percentage of patients waiting no more than one month (31 days) from diagnosis to first definitive treatment for all cancers	Operating standard of 96%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR
CB_B9	Percentage of patients waiting no more than 31 days for subsequent treatment where that treatment is surgery	Operating standard of 94%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR
CB_B10	Percentage of patients waiting no more than 31 days for subsequent treatment where that treatment is an anti-cancer drug regimen	Operating standard of 98%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR
CB_B11	Percentage of patients waiting no more than 31	Operating standard of	Review of monthly Service Quality Performance	2% of revenue derived from the provision of the	Quarterly	A, CR

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Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	days for subsequent treatment where the treatment is a course of radiotherapy	94%	Report	locally defined service line in the quarter of the under-achievement		
	<b>Cancer waits - 62 days</b>					
CB_B12	Percentage of patients waiting no more than two months (62 days) from urgent GP referral to first definitive treatment for cancer	Operating standard of 85%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR
CB_B13	Percentage of patients waiting no more than 62 days from referral from an NHS screening service to first definitive treatment for all cancers	Operating standard of 90%	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR
CB_B14	Percentage of patients waiting no more than 62 days for first definitive treatment following a consultant's decision to upgrade the priority of the patient (all cancers)	[Insert as per local determination]	Review of monthly Service Quality Performance Report	2% of revenue derived from the provision of the locally defined service line in the quarter of the under-achievement	Quarterly	A, CR



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Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	<b>Category A ambulance calls</b>					
CB_B15_01	Percentage of Category A Red 1 ambulance calls resulting in an emergency response arriving within 8 minutes	Operating standard of 75%	Performance measured monthly with annual reconciliation	Monthly withholding of 2% of actual monthly contract value with an end of year reconciliation with 2% of the Actual Outturn Value of the Agreement retained if annual performance is not met or the withheld sums returned (with no interest) if annual performance is met	Monthly withholding, annual reconciliation	AM
CB_B15_02	Percentage of Category A Red 2 ambulance calls resulting in an emergency response arriving within 8 minutes	Operating standard of 75%	Performance measured monthly with annual reconciliation	Monthly withholding of 2% of actual monthly contract value with an end of year reconciliation with 2% of the Actual Outturn Value of the Agreement retained if annual performance is not met or the withheld sums returned (with no interest) if annual performance is met	Monthly withholding, annual reconciliation	AM

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Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
CB_B16	Percentage of Category A calls resulting in an ambulance arriving at the scene within 19 minutes	Operating standard of 95%	Performance measured monthly with annual reconciliation	Monthly withholding of 2% of actual contract monthly value with an end of year reconciliation with 2% of the Actual Outturn Value of the Agreement retained if annual performance is not met or the withheld sums returned (with no interest) if annual performance is met	Monthly withholding, annual reconciliation	AM
	<b>Mixed sex accommodation breaches</b>					
CB_B17	Sleeping Accommodation Breach	>0	Verification of the monthly data provided pursuant to Schedule 6 Part C in accordance with the Professional Letter	£250 per day per patient affected	Monthly	A, CR, S, MH, C
	<b>Cancelled operations</b>					
CB_B18	All patients who have operations cancelled, on or after the day of admission (including the	Number of patients who are not offered another	Review of monthly Service Quality Performance Report	Non- payment of costs associated with cancellation and non-payment or	Monthly	A, CR, S, C, TP

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Ref	Operational Standards	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	day of surgery), for non-clinical reasons to be offered another binding date within 28 days, or the patient's treatment to be funded at the time and hospital of the patient's choice	binding date within 28 days >0		reimbursement (as applicable) of re-scheduled episode of care		
	<b>Mental health</b>					
CB_B19	Care Programme Approach (CPA): The percentage of people under adult mental illness specialties on CPA who were followed up within 7 days of discharge from psychiatric in-patient care	Operating standard of 95%	Review of monthly Service Quality Performance Report	[Insert as per local determination]	[Insert as per local determination]	MH, MHSS

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**B. National Quality Requirements**

	National Quality Requirement	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
CB_A15	Zero tolerance MRSA	>0	Review of monthly Service Quality Performance Report	Non-payment of inpatient episode	Monthly	A
CB_A16	Rates of Clostridium difficile	[Insert Baseline Threshold identified for Provider]	Review of monthly Service Quality Performance Report	As set out in Schedule 4 Part H	Annual	A
CB_S6	Zero tolerance RTT waits over 52 weeks	>0	Review of monthly Service Quality Performance Report	£5,000 per patient waiting over 52 weeks	Monthly	A., C, MH where 18 Weeks applies
CB_S7a	All handovers between ambulance and A & E must take place within 15 minutes	Handover >15 minutes	Review of monthly Service Quality Performance Report	£200 per patient waiting over 30 minutes	Monthly	A+E
CB_S7b	All handovers between ambulance and A & E must take place within 15 minutes	Handover > 15 minutes	Review of monthly Service Quality Performance Report	£1,000 per patient waiting over 60 minutes (in total, not aggregated with CB_S7a consequence)	Monthly	A+E
CB_S8a	Following handover	Crew ready	Review of monthly	£20 per event where > 30	Monthly	AM

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	National Quality Requirement	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
	between ambulance and A & E, ambulance crew should be ready to accept new calls within 15 minutes	to accept new call >15 minutes	Service Quality Performance Report	minutes		
CB_S8b	Following handover between ambulance and A & E, ambulance crew should be ready to accept new calls within 15 minutes	Crew ready to accept new call > 15 minutes	Review of monthly Service Quality Performance Report	£100 per event where > 60 minutes (in total, not aggregated with CB_S8a consequence)	Monthly	AM
CB_S9	Trolley waits in A&E	Any trolley wait > 12 hours	Review of monthly Service Quality Performance Report	£1,000 per breach	Monthly	A+E
CB_S10	No urgent operation should be cancelled for a second time	Number of urgent operations cancelled for a second time	Review of monthly Service Quality Performance Report	Non-payment of costs associated with cancellation and non-payment/ reimbursement of costs (as applicable) of rescheduled episode of care.	Monthly	A, CR, C, S
	Failure to publish Formulary	Yes/No	Publication on Provider's website	Withholding of up to 1% of the monthly sums payable by the Commissioners under Service Condition 36 ( <i>Payment Terms</i> ) per month until publication	Monthly	All
	Duty of Candour	Each failure	[Insert as per local	Recovery of the cost of the	Monthly	All

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	National Quality Requirement	Threshold (2013/14)	Method of Measurement (2013/14)	Consequence of breach	Monthly or annual application of consequence	Applicable Service Category
		to notify the Relevant Person of a suspected or actual Reportable Patient Safety Incident (as per Guidance)	determination]	episode of care or £10,000 if the cost of the episode of care is unknown.		

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**C. Local Quality Requirements**

Quality Requirement	Threshold	Method of Measurement	Consequence of breach
<b>Domain 1: Preventing people dying prematurely</b>			
Insert text locally			
<b>Domain 2: Enhancing the quality of life of people with long-term conditions</b>			
Insert text locally			
<b>Domain 3: Helping people to recover from episodes of ill-health or following injury</b>			
Insert text locally			
<b>Domain 4: Ensuring that people have a positive experience of care</b>			
Insert text locally			
<b>Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm</b>			
Insert text locally			

**All sums calculated in accordance with this Schedule 4 Part C will be subject to an annual cap of 1.0% of Actual Annual Value**

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**D. Never Events**

Never Events	Threshold	Method of Measurement	Never Event Consequence (per occurrence)	DH Guidance Applicability	Applicable Service Category
<b>SURGICAL</b>					
Wrong site surgery	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A S
Wrong implant/prosthesis	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A S
Retained foreign object post-operation	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A S
<b>MEDICATION</b>					
Wrongly prepared high-risk injectable medication	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare settings	A MH MHSS AM C CH
Maladministration of potassium-containing solutions	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare settings	A MH MHSS AM C CH



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Wrong route administration of chemotherapy	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A C
Wrong route administration of oral/enteral treatment	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare settings	A MH MHSS AM C CH
Intravenous administration of epidural medication	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
Maladministration of Insulin	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare settings	A MH MHSS AM C CH
Overdose of midazolam during conscious sedation	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
Opioid overdose of an opioid-naïve Patient	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare settings	A MH MHSS AM C CH

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Inappropriate administration of daily oral methotrexate	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare settings	A MH MHSS C CH
<b>MENTAL HEALTH</b>					
Suicide using non-collapsible rails	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All mental health inpatient premises	MH MHSS
Escape of a transferred prisoner	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All medium and high secure mental health inpatient premises	MH MHSS
<b>GENERAL HEALTHCARE</b>					
Falls from unrestricted windows	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
Entrapment in bedrails	>0	Review of reports submitted to/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All adult inpatient premises	A MH MHSS AM C CH
Transfusion of ABO incompatible blood components	>0	Review of reports submitted to NRL /Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C

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					CH
Transplantation of ABO incompatible organs as a result of error	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A
Misplaced naso- or oro-gastric tubes	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
Wrong gas administered	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS C CH
Failure to monitor and respond to oxygen saturation	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
Air embolism	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
Misidentification of Patients	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH

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Severe scalding of Patients	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A MH MHSS AM C CH
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**MATERNITY**

Maternal death due to post-partum haemorrhage after elective caesarean section	>0	Review of reports submitted to NRLS/Serious Incidents reports and monthly Service Quality Performance Report	In accordance with applicable Guidance, recovery of the cost of the procedure and no charge to Commissioner for any corrective procedure or care (not discretionary)	All healthcare premises	A
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**E. Commissioning for Quality and Innovation (CQUIN)**

**CQUIN Table 1: Summary of goals**

Goal Number	Goal Name	Description of Goal	Goal weighting (% of CQUIN scheme available)	Expected financial value of Goal (£)	Quality Domain (Safety, Effectiveness, Patient Experience or Innovation)
1	Friends and Family Test	To improve the experience of patients in line with Domain 4 of the NHS Outcomes Framework. The Friends and Family Test will provide timely, granular feedback from patients about their experience. The 2011/12 national inpatient survey showed that only 13 per cent of patients in acute hospital inpatient wards and A&E departments were asked for feedback			
2	NHS Safety Thermometer	To reduce harm. The power of the NHS Safety Thermometer lies in allowing frontline teams to measure how safe their services are and to deliver improvement locally			
3	Dementia	To incentivise the identification of patients with dementia and other causes of cognitive impairment alongside their other medical conditions, to prompt appropriate referral and follow up after they leave hospital and to ensure that hospitals deliver high quality care to			

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		people with dementia and support their carers.			
4	VTE	To reduce avoidable death, disability and chronic ill health from venous thromboembolism (VTE)			
5					
6					
etc					
<b>Totals:</b>			<b>100.00%</b>		

**CQUIN Table 2: Summary of indicators**

Goal Number	Indicator Number	Indicator Name	Indicator Weighting (% of CQUIN scheme available)	Expected financial value of Indicator (£)
1				
2				
3				
4				
5				
6				
etc				
<b>Totals:</b>			<b>100.00%</b>	

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**CQUIN Table 3: Detail of indicator** (to be completed for each indicator)

<b>Indicator number</b>	
<b>Indicator name</b>	
<b>Indicator weighting (% of CQUIN scheme available)</b>	
<b>Description of indicator</b>	
<b>Numerator</b>	
<b>Denominator</b>	
<b>Rationale for inclusion</b>	
<b>Data source</b>	
<b>Frequency of data collection</b>	
<b>Organisation responsible for data collection</b>	
<b>Frequency of reporting to Commissioner</b>	
<b>Baseline period/date</b>	
<b>Baseline value</b>	
<b>Final indicator period/date (on which payment is based)</b>	
<b>Final indicator value (payment threshold)</b>	
<b>Rules for calculation of payment due at final indicator period/date (including evidence to be supplied to Commissioner)</b>	
<b>Final indicator reporting date</b>	
<b>Are there rules for any agreed in-year milestones that result in payment</b>	
<b>Are there any rules for partial achievement of the indicator at the final indicator period/date?</b>	

**CQUIN Table 4: Milestones** (only to be completed for indicators that contain in-year milestones)

<b>Goal No.</b>	<b>Indicator No.</b>	<b>Date/period milestone relates to</b>	<b>Rules for achievement of milestones (including evidence to be supplied to Commissioner)</b>	<b>Date milestone to be reported</b>	<b>Milestone weighting (% of CQUIN scheme available)</b>
				<b>Total:</b>	

**CQUIN Table 5: Rules for partial achievement at final indicator period/date** (only complete if the indicator has rules for partial achievement at final indicator period/date)

<b>Goal No.</b>	<b>Indicator No.</b>	<b>Final indicator value for the part achievement threshold</b>	<b>% of CQUIN scheme available for meeting final indicator value</b>

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**CQUIN Table 6: Maximum aggregate CQUIN Payment**

Contract Year	Maximum aggregate CQUIN Payment
2013/14	2.5% of Actual Annual Value
Subsequent years	To be determined nationally and inserted locally

**CQUIN Table 7: CQUIN Payments on Account**

Commissioner	Payment	Frequency/Timing	Agreed provisions for adjustment of Payments on CQUIN Account based on performance



**F. Local Incentive Scheme**

**Insert text locally or state Not Applicable**

**G. 18 Weeks**

**18 Weeks Referral-to-Treatment Standard for Consultant-led Services Financial Adjustments Table**

<b>Percentage by which the Provider underachieves the 18 Weeks Referral-to-Treatment Standard threshold set out in Schedule 4 Part A (<i>Operational Standards</i>) for each specialty</b>	<b>Percentage of the revenue, derived from the provision of the (underachieved) specialty in the month of the underachievement, to be deducted under Service Condition 21.4</b>
Up to 1%	0.5%
>1% to 2%	1%
>2% to 3%	1.5%
>3% to 4%	2%
>4% to 5%	2.5%
>5% to 6%	3%
>6% to 7%	3.5%
>7% to 8%	4%
>8% to 9%	4.5%
>9% to 10%	5%
>10%	5%

1. All sums calculated in accordance with the table above will be weighted as follows:
  - 1.1 Adjustments relating to performance for admitted care will apply to 37.5% of Contract Month Elective Care 18 Weeks Revenue;
  - 1.2 Adjustments relating to performance for non-admitted care will apply to 12.5% of Contract Month Elective Care 18 Weeks Revenue; and
  - 1.3 Adjustments relating to performance for incomplete non-emergency pathways will apply to 50% of Contract Month Elective Care 18 Weeks Revenue.
  
2. If the Provider misses the 18 Weeks Referral-to-Treatment Standard threshold by 10%, or more in any month, these deductions must not exceed 5% of the relevant Contract Elective Care Month 18 Weeks Revenue.

## H. Clostridium difficile

### Clostridium difficile adjustment: NHS Foundation Trust/NHS Trust

Financial adjustment (£) is the sum which is the lesser of Y and Z, where:

$$Y = (E \times 1.5 / 100)$$

$$Z = \left[ \frac{[(A - B) \times (100,000 \times A/C) \times 50,000]}{D} \right] \times F$$

A = the actual number of cases of Clostridium difficile in respect of all NHS patients treated by the Provider in the year 2013/14

B = the Baseline Threshold

C = the inpatient bed days in respect of all NHS patients for the Provider in the year 2013/14

D = the ambition rate per 100,000 inpatient bed days for acute trusts in England indicated in the CDI Table, being 13.00.

E = Actual Inpatient Revenue

F = the inpatient bed days in respect of Service Users in the year 2013/14  
the inpatient bed days in respect of all NHS patients treated by the Provider in the year 2013/14

(Note: The CDI Table is available at  
<http://www.commissioningboard.nhs.uk/files/2012/12/ccg-prov-c-diff-2013-14.xls>)

### Clostridium difficile adjustment: Non-NHS Providers

Financial adjustment (£) is the sum which is the lesser of Y and Z, where:

$$Y = (E \times 1.5 / 100)$$

$$Z = A \times 50,000$$

A = the actual number of cases of clostridium difficile in respect of Service Users in the relevant Contract Year

E = Actual Inpatient Revenue

(Note: The CDI table is available at  
<http://www.commissioningboard.nhs.uk/files/2012/12/ccg-prov-c-diff-2013-14.xls>)

## SCHEDULE 5 - GOVERNANCE

### A. Documents Relied On

#### Documents supplied by Provider

Date	Document
Insert text locally or state Not Applicable	

#### Documents supplied by Commissioners

Date	Document
Insert text locally or state Not Applicable	

**B1. Provider's Mandatory Material Sub-Contractors**

<b>Mandatory Material Sub-Contractor [Name] [Registered Office] [Company number]</b>	<b>Service Description</b>	<b>Terms of Mandatory Material Sub-Contract</b>
<b>Insert text locally or state Not Applicable</b>		

**B2. Provider's Permitted Material Sub-Contractors**

<b>Permitted Material Sub-Contractor [Name] [Registered Office] [Company number]</b>	<b>Service Description</b>	<b>Terms of Permitted Material Sub-Contract</b>
<b>Insert text locally or state Not Applicable</b>		

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**C. IPR**

**Commissioner IPR**

<b>Commissioner</b>	<b>Document/Data/Process</b>
<b>Insert text locally or state Not Applicable</b>	

**Provider IPR**

<b>Provider/Sub-Contractor</b>	<b>Document/Data/Process</b>
<b>Insert text locally or state Not Applicable</b>	

**D. Commissioner Roles and Responsibilities**

Co-ordinating Commissioner	Role/Responsibility
Insert text locally	



**E. Partnership Agreements**

To which the Provider is a party:

Date	Parties	Description
Insert text locally or state Not Applicable		

To which a Commissioner is a party:

Date	Parties	Description
Insert text locally or state Not Applicable		

## SCHEDULE 6 – CONTRACT MANAGEMENT, REPORTING AND INFORMATION REQUIREMENTS

### A. Recorded Variations

Variation Number	Description of Variation	Date of Variation Proposal	Party proposing the Variation	Date of Agreement for Variation

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**B. Recorded Dispute Resolutions**

Date of Recorded Dispute Resolution	Description of Dispute	Outcome of Dispute Resolution as agreed or determined	Relevant Documents	Is a Variation or other consequent action required?	Further details
				Yes/No	

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**C. Reporting Requirements**

	Reporting Period	Format of Report	Timing and Method for delivery of Report	Application	
<b>National Requirements Reported Centrally</b>					
1.	As specified in the list of assessed mandated collections published on the HSCIC website to be found at <a href="http://www.ic.nhs.uk/datacollections">http://www.ic.nhs.uk/datacollections</a> , as applicable to the Provider and Services.	As set out in relevant Guidance	As set out in relevant Guidance	As set out in relevant Guidance	<b>All</b>
2.	PROMS	As set out in relevant Guidance	As set out in relevant Guidance	As set out in relevant Guidance	<b>All</b>
3.	NDTMS	As set out in NTA Guidance	As set out in NTA Guidance	As set out in NTA Guidance	<b>SM</b>
<b>National Requirements Reported Locally</b>					
1.	Monthly Activity Report	Monthly		Via SUS where applicable	<b>All</b>
2.	Service Quality Performance Report, detailing performance against Operational Standards, National Quality Requirements, Local Quality Requirements, Never Events, Quality Incentive Scheme	Monthly		Submit to Co-ordinating Commissioner within 10 Operational Days of the end of the month to which it relates.	<b>All</b>

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<p>Indicators, including, without limitation:</p> <p>2.1 details of any thresholds that have been breached and any Never Events that have occurred;</p> <p>2.2 details of all requirements satisfied;</p> <p>2.3 details of, and reasons for, any failure to meet requirements and;</p> <p>2.4 details of progress towards satisfying any Quality Incentive Scheme Indicators, including details of all Quality Incentive Scheme Indicators satisfied or not satisfied; and</p> <p>2.5 the outcome of all root cause analyses and audits performed pursuant to Service Condition 20 (<i>Venous Thromboembolism</i>).</p>				
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3.	Monthly report on performance against the HCAI Reduction Plan	Monthly			<b>All</b>
4.	Equality monitoring report				<b>All</b>
5.	Complaints monitoring report				<b>All</b>
6.	Report against performance of the Service Development and Improvement Plan (SDIP)				<b>Only where SDIP in place</b>
7.	Report of local audits of the percentage of patients risk assessed for venous thromboembolism who receive the appropriate prophylaxis	Monthly	As set out in relevant Guidance		<b>A, MH, MHSS, C</b>
8.	Radiotherapy services: report and provide data in accordance with Guidance to support the Commissioners monitoring of the 31 day standard for radiotherapy (according to which Patients should not wait more than 31 days from Consultant referral to commencement of radiotherapy treatment)				<b>R</b>

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9.	Cancer Registration dataset reporting (ISN): report on staging data in accordance with Guidance		As set out in relevant Guidance		<b>CR</b>
10.	Abortion services: report and provide data to support the monitoring of delivery of contraception at abortion services				<b>TP</b>
11.	Monthly summary report of all incidents requiring reporting	Monthly			<b>All</b>
12.	Report performance against the 18 week Referral-to-Treatment Standard				A., C, MH where 18 Weeks applies
13.	Data Quality Improvement Plan: report of progress against milestones				<b>Only when/if DQIP put in place</b>
14.	In line with the NHS Carbon Reduction Strategy: "Saving Carbon, Improving Health", the Provider shall, as applicable, demonstrate its progress on climate change adaptation, mitigation and sustainable development, including performance against carbon reduction				<b>All</b>

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	management plans and provide a summary in its annual report				
15.	Information reasonably required by Commissioners to monitor equity of access to the Services and fulfil their obligations under the Law	As and when required by Commissioners			<b>All</b>
16.	Report and provide monthly data and detailed information relating to violence-related injury resulting in treatment being sought from Staff in A&E departments, Urgent Care and Walk in Centres, and from Ambulance Services Paramedics (where the casualties do not require A&E department, Urgent Care and Walk in Centre attendance), to the local Community Safety Partnership (CSP) in accordance with applicable Guidance (College of Emergency Medicine Clinical Guidance Information Sharing to Reduce Community Violence (July 2009). Format and method of		As set out in relevant Guidance	As set out in relevant Guidance	<b>A A+E AM C</b>



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delivery shall be in accordance with the applicable Guidance				
<b>Local Requirements Reported Locally</b>				
<b>[Insert as agreed locally]</b>				

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**D. Data Quality Improvement Plan**

<b>Data Quality Indicator</b>	<b>Data Quality Threshold</b>	<b>Method of Measurement</b>	<b>Milestone Date</b>	<b>Consequence</b>
<b>Insert text locally or state Not Applicable</b>				

**E. Incidents Requiring Reporting Procedure**

**Procedure(s) for reporting, investigating, and implementing and sharing lessons learned from: (1) Serious Incidents (2) Reportable Patient Safety Incidents (3) Other Patient Safety Incidents**

**Insert text locally**

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**F. Service Development and Improvement Plan**

	Milestones	Timescales	Expected Benefit	Consequence of Achievement/ Breach
<b>Insert text locally or state Not Applicable</b>				[Subject to General Condition 9 ( <i>Contract Management</i> )] or [locally agreed]

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**G. Surveys**

Type of Survey	Frequency	Method of Reporting	Method of Publication
Friends and Family Test (where required in accordance with FFT Guidance)			
Service User Survey [Insert further description locally]			
Staff Surveys [Insert further description locally]			
Carer Survey [Insert further description locally]			
[Other insert locally]			

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