**NHS Standard Contract 2016/17**

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Template SDIP for Sustainability and Transformation Fund performance

**Template Service Development and Improvement plan in relation to provider performance against Sustainability and Transformation Fund performance trajectories and assurance statements**

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*[This Service Development and Improvement Plan template should be completed to reflect the final Performance Improvement Trajectories and Assurance Statements relevant to the Provider, as signed off by NHS Improvement and NHS England. It should then be included at Schedule 6D in each NHS Standard Contract which the Provider signs with an NHS Commissioner or Commissioners for 2016/17. Note that both the Trajectories and the Assurance Statements relate to the Provider as a whole, covering its aggregate performance under all of its separate signed contracts and including any non-contract activity.]*

**Performance Improvement Trajectories**

The Provider undertakes to achieve specific levels of performance, on a month-by-month basis during 2016/17, against Operational Standards as set out in the tables below.

*[Delete where not applicable]*

*E.B.3* Percentage of Service Users on incomplete RTT pathways (yet to start treatment) waiting no more than 18 weeks from Referral

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

E.B.4 Percentage of Service Users waiting more than 6 weeks from Referral for a diagnostic test

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| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

E.B.5 Percentage of A & E attendances where the Service User was admitted, transferred or discharged within 4 hours of their arrival at an A&E department

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

E.B.12 Percentage of Service Users waiting no more than two months (62 days) from urgent GP referral to first definitive treatment for cancer

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| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

E.B.15.i Percentage of Category A Red 1 ambulance calls resulting in an emergency response arriving within 8 minutes

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

E.B.15.ii Percentage of Category A Red 2 ambulance calls resulting in an emergency response arriving within 8 minutes

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

E.B.16 Percentage of Category A calls resulting in an ambulance arriving at the scene within 19 minutes

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Standard | April | May | June | July | August | Sept | Oct | Nov | Dec | Jan | Feb | March |
| Numerator |  |  |  |  |  |  |  |  |  |  |  |  |
| Denominator |  |  |  |  |  |  |  |  |  |  |  |  |
| % performance |  |  |  |  |  |  |  |  |  |  |  |  |

**Assurance statements**

The Provider undertakes to comply with the assurance statements it has given to NHS Improvement and NHS England in relation to its performance during 2016/17 against National Quality Requirements, as set out in the table below.

*[Delete where not applicable]*

|  |  |
| --- | --- |
| **National Quality Requirement** | **Provider assurance statement** |
| Zero tolerance RTT waits over 52 weeks for incomplete pathways | 52 weeks is recognised as the national maximum waiting time standard and the Provider will ensure that no patient breaches this or that they flag any potential breaches to the commissioner so that alternative provision is identified before the breach date. |
| All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 30 minutes | Ambulance handover delays should also be minimised and the Provider is committed to ensuring that the number in 2016/2017 will be less than there were in 2015/2016 with plans for continued improvement. |
| All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 60 minutes | Ambulance handover delays should also be minimised and the Provider is committed to ensuring that the number in 2016/2017 will be less than there were in 2015/2016 with plans for continued improvement. |
| Following handover between ambulance and A & E, ambulance crew should be ready to accept new calls within 15 minutes and no longer than 30 minutes | Ambulance handover delays should also be minimised and the Provider is committed to ensuring that the number in 2016/2017 will be less than there were in 2015/2016 with plans for continued improvement. |
| Following handover between ambulance and A & E, ambulance crew should be ready to accept new calls within 15 minutes and no longer than 60 minutes | Ambulance handover delays should also be minimised and the Provider is committed to ensuring that the number in 2016/2017 will be less than there were in 2015/2016 with plans for continued improvement. |
| Trolley waits in A&E not longer than 12 hours | 12 hour trolley waits are recognised by the Provider as being unacceptable and will ensure that no patient breaches this standard. If in extreme circumstances that this does happen the Provider will report it as a SUI through the normal route. |

**Assumptions underpinning Performance Improvement Trajectories and Assurance Statements**

Include below any assumptions, jointly agreed between the Provider and its Commissioners, which underpin the Trajectories and Assurance Statements set out above.

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