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NHS Standard Contract 2017/18 and 2018/19

Template SDIP for Sustainability and Transformation Fund performance

**NHS Standard Contract 2017/18 and 2018/19**

**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 2017/18 and 2018/19. 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 2017/18, against the following Operational Standards, as set out in the tables below. From April 2018 onwards, the Provider undertakes to achieve these Operational Standards in full on an ongoing monthly basis.

*[Delete where not relevant to the Services provided by the Provider]*

*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.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

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 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

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

Where no trajectory is provided for any of the Operational Standards above, the Provider undertakes that it will use all reasonable endeavours to achieve that Operational Standard in full on an ongoing basis during 2017/18 and 2018/19.**Assurance Statements**

In line with the assurance statements it has given to NHS Improvement and NHS England, the Provider undertakes that it will use all reasonable endeavours to achieve in full the following Operational Standards and National Quality Requirements on an ongoing basis during 2017/18 and 2018/19.

*[Delete where not relevant to the Services provided by the Provider]*

Operational Standards

|  |  |
| --- | --- |
| E.B.4 | Percentage of Service Users waiting 6 weeks or more from Referral for a diagnostic test |
| E.B.15.i | Percentage of Category A Red 1 ambulance calls resulting in an emergency response arriving within 8 minutes |
| E.B.15.ii | Percentage of Category A Red 2 ambulance calls resulting in an emergency response arriving within 8 minutes |
| E.B.16 | Percentage of Category A calls resulting in an ambulance arriving at the scene within 19 minutes |

National Quality Requirements

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| --- | --- |
| E.B.S.4 | Zero tolerance RTT waits over 52 weeks for incomplete pathways |
| E.B.S.7a | All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 30 minutes |
| E.B.S.7b | All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 60 minutes |
| E.B.S.8a | 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 |
| E.B.S.8b | 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 |
| E.B.S.5 | Trolley waits in A&E not longer than 12 hours |

**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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