

Trust Board Report

Meeting Date:	14 th February 2011
Title:	Compliance Framework 2011/12
Executive Summary:	This report provides the Board with the Governance Indicators for 2011/12
Action Requested:	To be noted
Report of:	Chief Operating Officer
Author: Contact Details:	Performance Manager Tel 01902 694470 Email: Lesley.taff@nhs.net
Resource Implications:	
Public or Private: (with reasons if private)	Public Session
References: (eg from/to other committees)	
Appendices/ References/ Background Reading	Appendix 1 – Governance Indicators
NHS Constitution: (How it impacts on any decision-making)	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> ✚ Equality of treatment and access to services ✚ High standards of excellence and professionalism ✚ Service user preferences ✚ Cross community working ✚ Best Value ✚ Accountability through local influence and scrutiny

Compliance Framework Governance Indicators

Governance Indicators

Monitor uses performance against a number of national measures, as well as compliance with the Care Quality Commission's registration requirements, as indicators of governance at NHS foundation trusts. Monitor's governance risk rating is designed to assess the risk of an actual or potential significant breach of the authorisation by a foundation trust. The proposed targets and indicators for inclusion in the governance risk rating are set out in Appendix 1.

National Measures

The Operating Framework 2011/12 sets out national headline and supporting measures in areas of safety, patient experience, quality and effectiveness. As in previous years, Monitor is proposing to incorporate a number of these in our regulatory regime where we believe they offer an appropriate and robust indicator of trust governance.

While most of our governance indicators remain unchanged in the Operating Framework, the Operating Framework revises the measures concerning referral to treatment times; and A&E quality indicators. As the number of indicators for 2011/12 is accordingly comparable with those for 2010/11, it is also proposed that the threshold for a red rating of governance risk will revert to a score of 4.0 or higher.

Patient experience: Referral to treatment waiting times

Proposed approach

Monitor proposes introducing into the Compliance Framework the national referral to treatment waiting time measure from the *Operating Framework*. Under this indicator, governance risk will be assessed by ensuring the 95th percentile of elective patients wait no longer than the times below for admitted and non-admitted procedures:

	95th Percentile waiting time	Score	Monitoring frequency
Admitted patients	23 weeks	1.0	Quarterly (see below)
Non-admitted	18.3 weeks	1.0	Quarterly (see below)

As historically with the 18-weeks waiting time target, NHS foundation trusts are required to meet this measure on a monthly basis: trusts will self-certify to Monitor each quarter that the target will be met in each month of the

subsequent quarter – failure in any subsequent month should thus be reported by exception to Monitor.

Note: in line with previous practice on monitoring performance against the 18-weeks referral to treatment waiting time target, Monitor will not include thresholds for incomplete pathways in the Compliance Framework in 2011/12: it is for foundation trust boards to assess the risk to breaching each of the referral time measures.

Clinical quality: A&E quality indicators

Proposed approach

The Operating Framework had classified A&E quality as a headline measure for National Oversight. The existing 95% waiting time target now forms part of a suite of five A&E quality indicators. As it is national policy to treat these indicators as an aggregate assessment of A&E quality, it is Monitor’s view that to select indicator(s) at the expense of the others. Consequently, Monitor proposes to incorporate the following five A&E quality indicators in the Compliance Framework in 2011/12, with the associated thresholds and scoring:

Measure	Threshold	Score	Monitoring frequency
95 th percentile overall time in A&E department	<= 4 hours	0.5	Quarterly
Unplanned reattendance at A&E within 7 days of original attendance	> 5%	0.5	Quarterly
95 th percentile time to initial assessment for patients arriving by ambulance	> 15 minutes	0.5	Quarterly
Time from arrival to treatment – median waiting time	> 60 minutes	0.5	Quarterly
Left without being seen	> 5%	0.5	Quarterly

If a trust fails **2 or more** of these measures, then the **total score is capped at 1.0**

Escalation

If, having failed two or more A&E quality indicators in any two quarters in a twelve month period, an NHS foundation trust then again fails two or more indicators in any quarter in the nine months subsequent to the second quarter’s failure, Monitor will consider whether to formally escalate the trust in order to consider whether it is in significant breach of its authorisation.

For the purposes of applying our escalation procedure from April 2011, Monitor will apply the targets in force in each quarter, i.e.:

- failure to achieve 98% in 4 hours in Q1 2010-11;
- failure to achieve 95% in 4 hours for Q2, Q3 and Q4 2010-11; and/ or
- failure of 2 or more of the above A&E quality indicators from April

Work is currently in place to scope compliance against all new measures with the governance indicators of the compliance framework.

Appendix 1

Governance Indicators

Area	Proposed measures, thresholds, weightings and monitoring periods for 2011/12	Threshold (1)	Weighting	Monitoring Period
Safety	Clostridium difficile – meeting the Clostridium Difficile objective	0	1.0	Quarterly
Safety	MRSA – meeting the MRSA objective (2)	0	1.0	Quarterly
Quality	All cancers: 31-day wait for second or subsequent treatment (3), comprising either : Surgery Anti cancer drug treatments Radiotherapy	94% 98% 94%	1.0	Quarterly
Quality	All cancers: 62-day wait for first treatment (4) comprising either : from urgent GP referral to treatment from consultant screening service referral from fast track consultant upgrade	85% 90% 85%	1.0	Quarterly
Patient Experience	Referral to treatment waiting times – admitted (95 th percentile) (5)	23 weeks	1.0	Quarterly
Patient Experience	Referral to treatment waiting times – non-admitted (95 th percentile) (5)	18.3 weeks	1.0	Quarterly
Quality	All cancers: 31-day wait from diagnosis to first treatment (6)	96%	0.5	Quarterly
Quality	Cancer: two week wait from referral to date first seen (7), comprising either : all cancers for symptomatic breast patients (cancer not initially suspected)	93% 93%	0.5	Quarterly
Quality	A&E (8): Total time in A&E (95 th percentile) Time to initial assessment (95 th percentile) Time to treatment decision (median) Unplanned reattendance rate Left without being seen	4 hours 15 minutes 60 minutes 5% 5%	0.5 0.5 0.5 0.5 0.5	Quarterly
Quality	Stroke indicator (9)	TBC	0.5	Quarterly
Quality	100% enhanced Care Programme Approach (CPA) patients (10), comprising either : Receiving follow-up contact within seven days of discharge Having formal review within 12 months	95% 95%	1.0	Quarterly
Quality	Minimising delayed transfers of care (11)	<= 7.5%	1.0	Quarterly
Quality	Admissions to inpatients services had access to crisis resolution home treatment teams (12)	90%	1.0	Quarterly
Quality	Meeting commitment to serve new psychosis cases by early intervention teams (13)	93%	0.5	Quarterly
Effectiveness	Data completeness: identifiers (14)	99%	0.5	Quarterly
Effectiveness	Data completeness: outcomes (15)	50%	0.5	Quarterly
Quality	Category A call – emergency response within 8 minutes (16)	75%	1.0	Quarterly
Quality	Category A call – ambulance vehicle arrives within 19 minutes (16)	75%	1.0	Quarterly
Patient Experience	Self-certification against compliance with requirements regarding access to healthcare for learning disability (17)	N/A	0.5	Quarterly