Report on financial sanctions imposed by commissioners on providers under the NHS Standard Contract for failure to achieve national standards

Commissioner name NHS Windsor Ascot Maidenhead CCG

Commissioner organisation code 11C

Notes

This report should be published quarterly by each commissioner on its website.
Only include those providers where sanctions of over £1,000 are triggered and applied for a particular standard in the period.
Enter values in £.
For further detail, see Appendix 6 of the Contract Technical Guidance, available at http://www.england.nhs.uk/nhs-standard-contract/

Quarter 3 2015/16

Ref	Schedule 4A Operational Standards	Standard	HEATHERWOOD AND WEXHAM PARK HOSPITALS NHS TRUST [RD700]	SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST [RYE00]	FRIMLEY PARK HOSPITAL NHS FOUNDATIO N TRUST [RDU00]	ROYAL BERKSHIRE HOSPITAL FOUNDATION TRUST[RWH00]	Provider 5, £	Provider 6, £	Provider 7, £	Total, £	Actual or intended use of funding withheld
			Include full provider name and ODS code								
	RTT waiting times for non-urgent consultant-led treatment										
E.B.1	Percentage of admitted Service Users starting treatment within a maximum of 18 weeks from Referral	Operating standard of 90% at specialty level	£ -			£ 1,693					
E.B.2	Percentage of non-admitted Service Users starting treatment within a maximum of 18 weeks from Referral	Operating standard of 95% at specialty level	£ -								
E.B.3	Percentage of Service Users on incomplete RTT pathways (yet to start treatment) waiting no more than 18 weeks from Referral	Operating standard of 92% at specialty level									
	Diagnostic test waiting times										
E.B.4	Percentage of Service Users waiting less than 6 weeks from Referral for a diagnostic test	Operating standard of 99%	£ -								
	A&E waits										
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	Operating standard of 95%	£ -								
	Cancer waits - 2 week wait										
E.B.6	Percentage of Service Users referred urgently with suspected cancer by a GP waiting no more than two weeks for first outpatient appointment	Operating standard of 93%	£ -								
E.B.7	Percentage of Service Users referred urgently with breast symptoms (where cancer was not initially suspected) waiting no more than two weeks for first outpatient appointment	Operating standard of 93%	£ -								
	Cancer waits – 31 days										
E.B.8	Percentage of Service Users waiting no more than one month (31 days) from diagnosis to first definitive treatment for all cancers	Operating standard of 96%	£ -								
E.B.9	Percentage of Service Users waiting no more than 31 days for subsequent treatment where that treatment is surgery	Operating standard of 94%	£ -								
E.B.10	Percentage of Service Users waiting no more than 31 days for subsequent treatment where that treatment is an anti-cancer drug regimen	Operating standard of 98%	£ -								
E.B.11	Percentage of Service Users waiting no more than 31 days for subsequent treatment where the treatment is a course of radiotherapy	Operating standard of 94%	£ -								
	Cancer waits – 62 days										
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	Operating standard of 85%	£ -								
E.B.13	Percentage of Service Users waiting no more than 62 days from referral from an NHS screening service to first definitive treatment for all cancers	Operating standard of 90%	£ -								
E.B.14	Percentage of Service Users waiting no more than 62 days for first definitive treatment following a consultant's decision to upgrade the priority of the Service User (all cancers)	For local determination	£ -								
	Category A ambulance calls										
E.B.15.i	Percentage of Category A Red 1 ambulance calls resulting in an emergency response arriving within 8 minutes	Operating standard of 75%	£ -								
E.B.15.ii	Percentage of Category A Red 2 ambulance calls resulting in an emergency response arriving within 8 minutes	Operating standard of 75%	£ -								
E.B.16	Percentage of Category A calls resulting in an ambulance arriving at the scene within 19 minutes	Operating standard of 95%	£ -								
	Mixed sex accommodation breaches										
E.B.S.1	Sleeping Accommodation Breach	Zero breaches									
	Cancelled operations										
E.B.S.2	All Service Users who have operations cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days, or the Service User's treatment to be funded at the time and hospital of the Service User's choice	All Service Users to be offered another binding date within 28 days >0	£ 978								
	Mental health										
E.B.S.3	Care Programme Approach (CPA): The percentage of Service Users 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%									

Ref	Schedule 4B National Quality Requirements	Standard	HEATHERWOOD AND WEXHAM PARK HOSPITALS NHS TRUST [RD700]	SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST [RYE00]	FRIMLEY PARK HOSPITAL NHS FOUNDATIO N TRUST [RDU00]	ROYAL BERKSHIRE HOSPITAL FOUNDATION TRUST[RWH00]	Provider 5, £	Provider 6, £	Provider 7, £	Total, £	Actual or intended use of funding withheld
			Include full provider name and ODS code								
E.A.S.4	Zero tolerance MRSA	Zero breaches	£ -								
E.A.S.5	Minimise rates of Clostridium difficile	Zero breaches	£ -								
E.B.S.4	Zero tolerance RTT waits over 52 weeks for incomplete pathways	Zero breaches	£ 5,000								
E.B.S.7a	All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 30 minutes	Zero breaches									
E.B.S.7b	All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 60 minutes	Zero breaches									
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	Zero breaches	£ 5,357								
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	Zero breaches	£ 5,054								
E.B.S.5	Trolley waits in A&E not longer than 12 hours	Zero breaches	£ -								
E.B.S.6	No urgent operation should be cancelled for a second time	Zero breaches	£ -								
	VTE risk assessment: all inpatient Service Users undergoing risk assessment for VTE, as defined in Contract Technical Guidance	Operating standard of 95%	£ -								
	Publication of Formulary	Continuing failure to publish	£ -								
	Duty of candour	Each failure to notify the Relevant Person of a suspected or actual Reportable Patient Safety Incident in accordance with SC35	£ -								
	Completion of a valid NHS Number field in mental health and acute commissioning data sets submitted via SUS, as defined in Contract Technical Guidance	Operating standard of 99%	£ -								
	Completion of a valid NHS Number field in A&E commissioning data sets submitted via SUS, as defined in Contract Technical Guidance	Operating standard of 95%									

	Completion of Mental Health Minimum Data Set ethnicity coding for all detained and informal Service Users, as defined in Contract Technical Guidance	Operating standard of 90%	£ -								
	Completion of IAPT Minimum Data Set outcome data for all appropriate Service Users, as defined in Contract Technical Guidance	Operating standard of 90%	£ -								

Quarter 2 2015/16

Ref	Schedule 4A Operational Standards	Standard	HEATHERWOOD AND WEXHAM PARK HOSPITALS NHS TRUST [RD700]	SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST [RYE00]	FRIMLEY PARK HOSPITAL NHS FOUNDATION TRUST [RDU00]	ROYAL BERKSHIRE HOSPITAL FOUNDATION TRUST[RWH00]	Provider 5, £	Provider 6, £	Provider 7, £	Total, £	Actual or intended use of funding withheld
			Include full provider name and ODS code								
	RTT waiting times for non-urgent consultant-led treatment										
E.B.1	Percentage of admitted Service Users starting treatment within a maximum of 18 weeks from Referral	Operating standard of 90% at specialty level	£ -								
E.B.2	Percentage of non-admitted Service Users starting treatment within a maximum of 18 weeks from Referral	Operating standard of 95% at specialty level	£ -								
E.B.3	Percentage of Service Users on incomplete RTT pathways (yet to start treatment) waiting no more than 18 weeks from Referral	Operating standard of 92% at specialty level				£ 1,803					
	Diagnostic test waiting times										
E.B.4	Percentage of Service Users waiting less than 6 weeks from Referral for a diagnostic test	Operating standard of 99%	£ -								
	A&E waits										
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	Operating standard of 95%	£ -								
	Cancer waits - 2 week wait										
E.B.6	Percentage of Service Users referred urgently with suspected cancer by a GP waiting no more than two weeks for first outpatient appointment	Operating standard of 93%	£ -								
E.B.7	Percentage of Service Users referred urgently with breast symptoms (where cancer was not initially suspected) waiting no more than two weeks for first outpatient appointment	Operating standard of 93%	£ -								
	Cancer waits – 31 days										
E.B.8	Percentage of Service Users waiting no more than one month (31 days) from diagnosis to first definitive treatment for all cancers	Operating standard of 96%	£ -								
E.B.9	Percentage of Service Users waiting no more than 31 days for subsequent treatment where that treatment is surgery	Operating standard of 94%	£ -								
E.B.10	Percentage of Service Users waiting no more than 31 days for subsequent treatment where that treatment is an anti-cancer drug regimen	Operating standard of 98%	£ -								
E.B.11	Percentage of Service Users waiting no more than 31 days for subsequent treatment where the treatment is a course of radiotherapy	Operating standard of 94%	£ -								
	Cancer waits – 62 days										
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	Operating standard of 85%	£ -								
E.B.13	Percentage of Service Users waiting no more than 62 days from referral from an NHS screening service to first definitive treatment for all cancers	Operating standard of 90%	£ -								
E.B.14	Percentage of Service Users waiting no more than 62 days for first definitive treatment following a consultant's decision to upgrade the priority of the Service User (all cancers)	For local determination	£ -								
	Category A ambulance calls										
E.B.15.i	Percentage of Category A Red 1 ambulance calls resulting in an emergency response arriving within 8 minutes	Operating standard of 75%	£ -								
E.B.15.ii	Percentage of Category A Red 2 ambulance calls resulting in an emergency response arriving within 8 minutes	Operating standard of 75%	£ -								
E.B.16	Percentage of Category A calls resulting in an ambulance arriving at the scene within 19 minutes	Operating standard of 95%	£ -								
	Mixed sex accommodation breaches										
E.B.S.1	Sleeping Accommodation Breach	Zero breaches	£ -			£ 697					
	Cancelled operations										
E.B.S.2	All Service Users who have operations cancelled, on or after the day of admission (including the day of surgery), for non-clinical reasons to be offered another binding date within 28 days, or the Service User's treatment to be funded at the time and hospital of the Service User's choice	All Service Users to be offered another binding date within 28 days >0	£ 8,896								
	Mental health										
E.B.S.3	Care Programme Approach (CPA): The percentage of Service Users 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%	£ -								

Quarter 1 2015/16

Ref	Schedule 4B National Quality Requirements	Standard	HEATHERWOOD AND WEXHAM PARK HOSPITALS NHS TRUST [RD700]	SOUTH CENTRAL AMBULANCE SERVICE NHS FOUNDATION TRUST [RYE00]	FRIMLEY PARK HOSPITAL NHS FOUNDATION TRUST [RDU00]	ROYAL BERKSHIRE HOSPITAL FOUNDATION TRUST[RWH00]	Provider 5, £	Provider 6, £	Provider 7, £	Total, £	Actual or intended use of funding withheld
			Include full provider name and ODS code								
E.A.S.4	Zero tolerance MRSA	Zero breaches	£ -								
E.A.S.5	Minimise rates of Clostridium difficile	Zero breaches	£ -								
E.B.S.4	Zero tolerance RTT waits over 52 weeks for incomplete pathways	Zero breaches	£ 10,000			£ 5,000					
E.B.S.7a	All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 30 minutes	Zero breaches									
E.B.S.7b	All handovers between ambulance and A & E must take place within 15 minutes with none waiting more than 60 minutes	Zero breaches									
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	Zero breaches	£ -								
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	Zero breaches	£ -								
E.B.S.5	Trolley waits in A&E not longer than 12 hours	Zero breaches	£ -								
E.B.S.6	No urgent operation should be cancelled for a second time	Zero breaches	£ -								
	VTE risk assessment: all inpatient Service Users undergoing risk assessment for VTE, as defined in Contract Technical Guidance	Operating standard of 95%	£ -								
	Publication of Formulary	Continuing failure to publish	£ -								
	Duty of candour	Each failure to notify the Relevant Person of a suspected or actual Reportable Patient Safety Incident in accordance with SC35	£ -								
	Completion of a valid NHS Number field in mental health and acute commissioning data sets submitted via SUS, as defined in Contract Technical Guidance	Operating standard of 99%	£ -								
	Completion of a valid NHS Number field in A&E commissioning data sets submitted via SUS, as defined in Contract Technical Guidance	Operating standard of 95%	£ 847								
	Completion of Mental Health Minimum Data Set ethnicity coding for all detained and informal Service Users, as defined in Contract Technical Guidance	Operating standard of 90%	£ -								
	Completion of IAPT Minimum Data Set outcome data for all appropriate Service Users, as defined in Contract Technical Guidance	Operating standard of 90%	£ -								