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

Commissioner name NHS Hartlepool & Stockton CCG

Commissioner organisation code 00K

YTD 2015/16

Ref	Schedule 4A Operational Standards	Standard	RE9 South Tyneside	RLN Sunderland	RR7 Gateshead	RTD Newcastle	RTF Northumbria	RTR South Tees	RVW North Tees	RX3 TEWV	RX4 NTW	RX6 NEAS	RXP County Durham & D'ton	Total, £	Actual or intended use of funding withheld
RTT waiting times for non-urgent consultant-led treatment															
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	£ -	£ 6,982	£ -	£ 770	£ -	£ 7,295	£ -	£ -	£ -	£ -	**£ 596**	**£15,644**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ 63	£ -	£ -	£ -	£ 1,430	£ -	£ -	£ -	£ -	**£ 1,078**	**£2,571**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ 228	£ -	£ 84	£ -	£ 7,743	£ 1,560	£ -	£ -	£ -	**£ 291**	**£9,907**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ 106	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ 44**	**£150**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ 88**	**£88**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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%	£ -	£ 115	£ -	£ -	£ -	£ 2,967	£ -	£ -	£ -	£ -	**£ 132**	**£3,214**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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	£ -	£ 12	£ -	£ -	£ -	£ 228	£ -	£ -	£ -	£ -	**£ -**	**£240**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ 33,425	**£ -**	**£33,425**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ 32,916	**£ -**	**£32,916**	re-invested to fund additional activity or improve the performance and quality of services
E.B.16	Percentage of Category A calls resulting in an ambulance arriving at the scene within 19 minutes	Operating standard of 95%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ 32,916	**£ -**	**£32,916**	re-invested to fund additional activity or improve the performance and quality of services
Mixed sex accommodation breaches															
E.B.S.1	Sleeping Accommodation Breach	Zero breaches	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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	£ -	£ -	£ -	£ -	£ -	£ 1,429	£ -	£ -	£ -	£ -	**£ -**	**£1,429**	re-invested to fund additional activity or improve the performance and quality of services
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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
National Quality Requirements															
E.A.S.4	Zero tolerance MRSA	Zero breaches	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ 44**	**£44**	re-invested to fund additional activity or improve the performance and quality of services
E.A.S.5	Minimise rates of Clostridium difficile	Zero breaches	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	

E.B.S.4	Zero tolerance RTT waits over 52 weeks for incomplete pathways	Zero breaches	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
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	£ -	£ 227	£ -	£ 18	£ -	£ 3,971	£ 1,000	£ -	£ -	£ -	**£ 644**	**£5,860**	re-invested to fund additional activity or improve the performance and quality of services
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	£ -	£ 231	£ -	£ -	£ -	£ 3,475	£ -	£ -	£ -	£ -	**£ 836**	**£4,542**	re-invested to fund additional activity or improve the performance and quality of services
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	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ 2,968	**£ -**	**£2,968**	re-invested to fund additional activity or improve the performance and quality of services
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	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ 696	**£ -**	**£696**	re-invested to fund additional activity or improve the performance and quality of services
E.B.S.5	Trolley waits in A&E not longer than 12 hours	Zero breaches	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
E.B.S.6	No urgent operation should be cancelled for a second time	Zero breaches	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
	VTE risk assessment: all inpatient Service Users undergoing risk assessment for VTE, as defined in Contract Technical Guidance	Operating standard of 95%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
	Publication of Formulary	Continuing failure to publish	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
	Duty of candour	Each failure to notify the Relevant Person of a suspected or actual Reportable Patient Safety Incident in accordance with SC35	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
	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%	£ -	£ -	£ -	£ 83	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£83**	re-invested to fund additional activity or improve the performance and quality of services
	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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
	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%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	
	Completion of IAPT Minimum Data Set outcome data for all appropriate Service Users, as defined in Contract Technical Guidance	Operating standard of 90%	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	£ -	**£ -**	**£0**	