QUARTERLY LOCAL DELIVERY PLAN REPORT Quarter 3, October - December 2016

ASSURANCE OF GOVERNANCE OF 'RED' AND 'AMBER' STANDARDS

Standard	Date of data	Rating	Assurance of Governance	RAG Definition ¹
12 weeks outpatients	Dec 16	Red	This is included within a substantive Waiting Times Report submitted to and reviewed by the Corporate Management Team, the Acute Operating Management Committee, the Planning, Performance & Resources Committee, and the NHS Board.	Green – 95%> Amber – 87%-95% Red - <87%
18 weeks RTT Acute	Dec 16	Amber	This is included within a substantive Waiting Times Report submitted to and reviewed by the Corporate Management Team, the Acute Operating Management Committee, the Planning, Performance & Resources Committee, and the NHS Board.	Green – 90%> Amber – 85%-90% Red - <85%
18 weeks RTT CAMHS	Sept 16	Red	This is reported to the North H&SCP IJB.	Green – 85%> Amber – 80%-85% Red -<80%
Primary Care 48 hour access	Jun 16	Amber	This is reported to the South H&SCP IJB.	This is a biennial survey, next update due May 2018. Green – 90% > Amber – 80%-89% Red - <80%
Primary Care Advance Booking	Jun 16	Red	This is reported to the South H&SCP IJB.	This is a biennial survey, next update due May 2018. Green – 90% > Amber – 80%-89% Red - <80%
Detect Cancer Early	Dec 15 ²	Red	This is managed by the Cancer Management Team and the DCE Steering Group within Acute Division.	The end point trajectory for this target was December 2015. At that point, Lanarkshire achieved 25.7% against a target of 29%, thus failing. If a new trajectory is set in the future then RAG definitions will be developed.
TTG	Dec 16	Red	This is included within a substantive Waiting Times Report submitted to and reviewed by the Corporate Management Team, the Acute Operating Management Committee, the Planning, Performance & Resources Committee, and the NHS Board.	Green – 90%> Amber – 87%-90% Red -<87%

C diff	Sept 16	Amber	This is reported to the Lanarkshire Infection Control Committee and the Healthcare Quality Assurance and Improvement Committee. It is also part of a mandatory national Healthcare Associated Infection Reporting Template that is submitted to each NHS Board meeting.	Green - <0.32 Amber - 0.33 - 0.39 Red - 0.40>
SABs	Sept 16	Amber	This is reported to the Lanarkshire Infection Control Committee and the Healthcare Quality Assurance and Improvement Committee. It is also part of a mandatory national Healthcare Associated Infection Reporting Template that is submitted to each NHS Board meeting.	Green - <0.24 Amber - 0.25 - 0.35 Red - 0.36>
Unscheduled Care – 4hr compliance	Dec 16	Amber	This is included within a substantive Waiting Times Report submitted to and reviewed by the Corporate Management Team, the Acute Operating Management Committee, the Planning, Performance & Resources Committee, and the NHS Board.	Green – 93% > Amber – 90% - 93% Red - <90%
Financial Breakeven	Sept 16	Amber	This is reported to each PP&RC and Board meeting.	This is provided by the DoF office, based on formula in line with NHS accounting and financial reporting standards.
Sickness Absence	Jun 16	Amber	This is reported at corporate level to the Staff Governance Committee and at divisional level to Acute Operating Management Committee, North Integrated Joint Board and South Integrated Joint Board.	Green – <4% Amber – 4.1 – 6% Red -6%>

Note 1 - As agreed by PP&RC 28 September 2016

Note 2 - Data is annual, with a 7 month lag