

Health and Wellbeing Strategy Reporting Framework

Priority 1 - Smoking														
High level aspiration - Rotherham: a smoke free town														
Goal 1 - Preventing initiation of tobacco use amongst children and young people														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Key Measure	Percentage smoking at delivery 20.1% (12/13 Qtr 2) to below the national average by 2015	20.8%	19.2%	19.1%	A	19.9%	17.9%	R	Q1 14/15	18.6%	17.6%	R	16.7%	Alison Iliff
	Percentage of young people (Year 7 & 10) smoking (CYPS lifestyle survey) (regular smokers)	2%/14%	2%/14%	No target		1%/9%	1.9%/13.5%	G	2013	1%/9%	See notes		1.8%/13%	Alison Iliff
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Quarterly Proxy Measure	Participation in Responsible Retailer Scheme in CAP areas		New Measure for 2013-14			50%	50%	G	01-04-14 to 18-11-14	60%	60%	G	75%	Alan Pogorzelec
	Number of enforcement interventions taken in relation to the sale of tobacco to children		New Measure for 2013-14			5	5	G	01-04-14 to 18-11-14	3	3	G	5	Alan Pogorzelec
	Schools with anti-tobacco policies approved by Head		New Measure for 2013-14			55%	50%	G	Q4 13/14	55%	50%	G	100%	Alison Iliff
Goal 2 - Reducing Harm to Adults from tobacco consumption														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Key Measure	Percentage of adults 18 and over smoking (integrated household survey)	23.3%	22.7%	N/A	N/A	18.9%	22%	G	2013	18.9%	22%	G	22%	Alison Iliff
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Quarterly Proxy Measure	Percentage of key public sector staff undertaking Making Every Contact Counts					75%							100%	
	Participation in Responsible Retailer Scheme in CAP areas		New Measure for 2013-14			50%	50%	G	01-04-14 to 18-11-14	60%	60%	G	75%	Alan Pogorzelec
	Number of enforcement interventions taken in relation to illicit and / or counterfeit tobacco		New Measure for 2013-14			8	5	G	01-04-14 to 18-11-14	6	4	G	5	Alan Pogorzelec

Priority 1 - Smoking

General A new tobacco control programme has been commissioned to begin in April 2014 comprising a new Doncaster and Rotherham Smokefree Service, smoking in pregnancy support further embedded within midwifery, enhanced enforcement of illicit tobacco and age of sale legislation, youth prevention activity and social marketing for tobacco control across Rotherham, Doncaster and Sheffield. Performance of the new services will be monitored against service specifications and nationally collected data.

Goal 1 KM 1 (smoking at delivery)

Baseline data may be affected by high percentage where mother's smoking status not known (quarters Q1 and Q2 2011/12)

Targets adjusted to match national ambition decrease of 21.7% between 2009/10 and 2014/15 (to be achieved between Q3 2010/11 and 2014/15) (31/05/13)(AI)

Quarterly position shows high variation, so suggest notice is predominantly taken of outturn figure.

Smoking at delivery rates have risen slightly during 2013/14, when we would have anticipated a continued fall. There are number of factors which could have influenced this including: transition of service from the stop smoking service to midwifery, specialist midwife sickness during Q4 affecting capacity, inaccurate recording of smoking at delivery status and uncertainty of midwifery staff about how to record smoking status of women who switch to electronic cigarettes during pregnancy.

New systems have been put in place since the team has moved to midwifery, including electronic booking of stop smoking appointments by community midwives, clinic lists and text appointment reminders. An audit of smoking at booking and smoking at delivery recording is planned as this is has been shown to be inaccurate in other areas in Yorkshire and Humber, with appropriate follow-up dependent upon results.

KM 2 (young people smoking)

Data shown as Y7/Y10. Baseline represents 2011 Survey data, 2012-13 represents 2012, and 2013-14 and Current Position represents 2013. Survey is conducted and reported annually.

When information issued about data collection mechanism for PHOF indicator "Smoking at age 15", this KM will be amended.

QPM 3 (anti-tobacco policies)

New measure for 2013-14. Whole school review audit used to establish baseline of schools with policies. As at quarter 4 2013-14 this was 55%.

Denominator = 120 schools (24/06/13). Denominator figure = 120 schools (Primary – 95 LA and 3 Academies, Special 6 LA, Secondary 11 LA and 5 Academies). (AI)

Work is continuing to contact schools without up to date whole school reviews, to ask if they have a smoke free policy. If the answer is no,

we are sending the Rotherham Healthy Schools model smoke free policy for their information and asking if they would adapt it for their own use.

Healthy Schools absence of admin support means up to date position not available. Am working with healthy schools coordinator to find a solution (Oct 2014)

Goal 2 KM 1 (adults smoking)

2011-12 represents 12 months April 11-Mar 12. 2012-13 and Current Position represent Jan-Dec 2012.

QPM 1 (making every contact count)

Under development.

Goal 1 - QPM 3	13/14			14/15						
Trajectory for schools with no-smoking policies:	Q2	Q3	Q4	Q1				Q2	Q3	Q4
	40%	45%	50%	65%				72%	90%	100%

Priority 2 - Alcohol															
High level aspiration - Rotherham: a place where people drink responsibly															
Goal 1 - Preventing harm to children and young people from alcohol consumption															
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead	
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG			
	Percentage of Year 10s reporting that they drink alcohol (CYPS Lifestyle Survey) (regular drinkers)	30%	12%				0%		2013	11%			0%	Kay Denton	
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead	
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG			
		Percentage of key public sector staff undertaking Making Every Contact Counts													
		Community Alcohol Partnerships across the Borough	New Measure for 2013-14					No target	Q3 13/14	2	No target	A	11	Mel Howard	
	Participation of retailers in Responsible Retailer scheme in CAP areas	New Measure for 2013-14			50%	50%	G	01-04-14 to 18-11-14	60%	60%	G	75%	Alan Pogorzelec		

Goal 2 - Reducing Harm to Adults from alcohol consumption															
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead	
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG			
	Reduce hospital admissions due to alcohol related illness		1,069	No target		1,162	1,069	R	Q1 14/15	345	214	R	20% less	Anne Charlesworth	
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead	
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG			
		Percentage of key public sector staff undertaking Making Every Contact Counts													
		Community Alcohol Partnerships across the Borough	New Measure for 2013-14					No target	Q3 13/14	2	No target	A	11	Mel Howard	
		Participation of retailers in Responsible Retailer scheme in CAP areas	New Measure for 2013-14			50%	50%	G	01-04-14 to 18-11-14	60%	60%	G	75%	Alan Pogorzelec	
		Number of FPN waivers which result in attendance at binge drinking course		86	No target		55			Q2 14/15	16	No target	A		
		Number of brief interventions in general practice		8,749	No target		29,424	12,000	G	Q2 14/15	9,246	4,000	G	16,000	Anne Charlesworth
		Number of brief interventions in community settings (Lifeline plus Health Trainer statistics)	2,673	3,192	No target		5,111	4,000	G	Q2 14/15	2,885	2,000	G	8,000	Anne Charlesworth
	Number of brief interventions in hospital settings													Anne Charlesworth	

Priority 2 - Alcohol

Goal 1 KM 1 (Year 10s reporting drinking)

Represents those reporting drinking regularly. Baseline represents 2011 Survey data and 2012-13 represents 2012 Survey data. Survey is conducted and reported annually. The 2011 baseline figure of 30% was set before the category of 'social/infrequent' was added to the question on frequency of drinking in 2012; 'regular' was classed as 'at least once per week' to be able to compare with national survey data (In 2012 Rotherham was 12% compared to 11% for England) In the 2014 Rotherham Lifestyle survey it has been suggested that the alcohol question mirrors the national categories to compare them more accurately. As it is **not** against the law to drink alcohol if you're age 5 or over, the target of 0% could be considered a little unrealistic/ambitious and one set to fail;

perhaps we should aim to try to reduce the % of young people drinking to be equal or lower than the national average, which may be still be challenging.

QPM 2 (community alcohol partnerships)

An analysis of the 2 pilot CAP areas has been undertaken and a report will be presented to the Safer Rotherham Partnership DAAT board 26/11/2014.

A toolkit that captures the lessons learnt from the CAP's has been shared with partners across the borough. There are no further plans for CAP's unless an area has a specific need arises in the future.

Goal 2 KM 1 (hospital admissions due to drinking)

Data represents number of admissions to Rotherham Foundation Trust by Rotherham CCG patients.

The team to deliver this piece of work has now been selected, work was scheduled to begin in October/November but this was delayed until quarter 4.

Due to the late start to the work the 2013-14 target was adjusted to maintain 2012-13 level with the 20% reduction set as the 2014-15 target.

Although the metrics for the project are not demonstrating reductions in admissions overall, reductions for the cohort of 3+ admitters are now in evidence, and length of stay is significantly reduced. The CCG will be reviewing this scheme in October.

The programme is making good progress to reduce length of stay, but as overall admissions have increased this figure increases also.

There is evidence that the programme is reducing admissions for the specified cohort.

QPM2 (community alcohol partnerships)

(see Goal 1 QPM2)

QPM 4 (Fixed Penalty Notice waivers)

(Q2 13/14) This figure has dropped significantly. SYP are aware and agreed to take steps to improve awareness across borough. From December SYP will also use conditions on cautions to ensure those with alcohol related offending engage in the education workshop.

(Q3 13/14) Although there is an increase on previous quarter SYP are continuing to promote this action within all settings.

(Q2 14/15) Lifeline provide a group to offer an education session to those individuals who have committed an alcohol related offence as an alternative to paying the £80 fine for a Fixed Penalty Notice (FPN), as a condition on a caution or voluntarily. SYP offer this as an option where they consider it appropriate. Figures have remained below the previous years.

It was anticipated that numbers would increase following the introduction of the Police power to add a condition (in this case to attend alcohol education) to a caution.

This has not been the case, all attendances have been as the result of a FPN. Due to the continued lower numbers Public Health have instructed Lifeline to run the group on a 4 weekly (rather than weekly) basis, this is to be reviewed Jan 2015 (a paper was taken to the to SRP 24/9 for agreement, the additional hours gained from not delivering weekly are to be utilised in the Eastwood Area).

Analysis of data provided by SYP from 12/10/2013 – 29/07/2014 showed that 68% of all FPN's issued for alcohol related behaviour attend the group.

Policing strategies for alcohol related crime and disorder are decided by SYP, they report that in addition to the FPN disposal they have also issued 184 dispersal orders (fig for past 12 months,

Priority 3 - Obesity														
High level aspiration - Rotherham: a place where being a healthy weight is the norm														
Goal 1 - Preventing obesity in children and young people														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Key Measure	Percentage of overweight and obese children in Reception	16.1%	22.2%			2013-14	23.1%		2014-15 due Dec 2015			R	12%	Joanna Saunders
	Percentage of overweight and obese children in Year 6	33.0%	35.2%			2013-14	36.0%		2014-15 due Dec 2015			R	25%	Joanna Saunders
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Quarterly Proxy Measure	Percentage of key public sector staff undertaking Making Every Contact Counts													
	Referrals of children to Healthy Weight Framework interventions	313	286	No target		364	No target		Q4 13/14	124	No target	G		Joanna Saunders
	Completed Healthy Weight Framework interventions by children	144	119	No target		171	No target		Q4 13/14*	58	No target	G		Joanna Saunders
	Percentage of applications for fast food outlets approved that are within close proximity to a school or in a deprived area (in accordance with policy)													Helen Sleigh

Goal 2 - Reducing harm to adults from obesity														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Key Measure	Healthy eating prevalence (Integrated Household Survey/ Active People Survey)	21.3%	No further data. Indicator replaced by 'Excess weight in Adults' in Local Authority Health Profiles				2011-12	21.3%	28.7%			R		Joanna Saunders
	Increased prevalence of diagnosed diabetes	6.20%	6.35%			6.55%			2013-14	6.55%	No target	G		Dominic Blaydon
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
Quarterly Proxy Measure	Percentage of key public sector staff undertaking Making Every Contact Counts													
	Referrals of adults to Healthy Weight Framework interventions	2,884	2,253	No target		2,174			Q4 14/15	620	No target	A		Joanna Saunders
	Completed Healthy Weight Framework interventions by adults	1,414	1,067	No target		1,024			Q4 14/15	279	No target	A		Joanna Saunders
	Increased greenspace utilisation and access	13.7%	10.1%			19.2%	15%	G	2013-14	19.2%		G	16%	Chris Siddall

Priority 3 - Obesity

Goal 1 KM1 & 2 (overweight and obese children)

Data published annually in December.

QPM 2/QPM 3 (Healthy Weight Framework interventions)

Activity figures presented are enrolments and completions. The latter is a subset of the former and the duration of the treatment may go beyond the reporting cut-off.

*Quarter 4 2013/14 figures are incomplete for RIO Children's data. Data appears complete for More Life Club for 2013/14 Q4 and 2014/15 Q1.

QPM 4 (fast food outlets)

Planning policy relating to this is currently out for consultation.

Goal 2 KM 1 (healthy eating)

Baseline represents modelled data for 2006-2008 based on Health Survey for England data.

'Diet' indicators being developed nationally for Public Health Outcomes Framework on which target can be set.

One indicator planned to be similar to 'healthy eating prevalence'. Data to be collected via the Active People Survey from late 2014 and hoped to be published Feb or May 2015.

KM 2 (diagnosed diabetes)

Prevalence data published annually. This is ranked green from the view that practices are identifying people with diabetes.

QPM 2/QPM 3 (Healthy Weight Framework interventions)

Activity figures presented are enrolments and completions. The latter is a subset of the former and the duration of the treatment may go beyond the reporting cut-off.

Reshape data potentially complete up to 2014/15 Q2. However, around 10% of referrals for Q1 and Q2 have unknown end data data (5% at 2013/14 Q4)

QPM 4 (greenspace utilisation)

Baseline represents survey period March 2009 - February 2012. Indicator is based on annual survey data

2012-13 represents period March 2012 - February 2013. 2013-14 represents March 2013 - February 2014

Priority 4 - NEET														
High level aspirations outcome - Our commitment is that by 2016 all Rotherham's young people will participate in education or training up to the age of 18.														
Goal 1 - Reduce percentage of Academic Age 16 - 18 Young People who are Not in Employment, Education or Training (NEET)														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
	Percentage of Academic Age 16 - 18 Young People who are NEET	7.6%	7.4%	7.1%	A	6.4%	7.1%	G	Oct 2014	6.0%	6.2%	G	7.0%	Collette Bailey

Goal 2 – Reduce percentage of Academic Age 16 - 18 Young People whose current situation is Not Known														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
	Percentage of Academic Age 16 - 18 Young People whose current situation is Not Known	4.8%	3.9%	5.0%	G	5.6%	5.0%	A	Oct 2014	6.5%	6.5%	G	5.0%	Collette Bailey

Goal 3 – Increase percentage of Young People Participating (reporting to commence April 2013)														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
	Percentage of Academic Year 12 participating	89.0%	N/A	N/A	N/A	95.4%	92.0%	G	Oct 2014	95.6%	97.0%	G	95.0%	Collette Bailey
	Percentage of Academic Year 13 participating	80.0%	N/A	N/A	N/A	86.5%	82.0%	G	Oct 2014	84.6%	85.0%	G	85.0%	Collette Bailey

Goal 4 – Reduce percentage of RMBC Corporate Responsibility LAC/CL Young People (Academic Year 12 -14) who are Not in Employment, Education or Training (NEET)														
Key Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
	Percentage of RMBC Corporate Responsibility LAC/CL Young People (Academic Year 12 -14) who are NEET	28.0%	25.3%	N/A	N/A	26.9%	24.0%	A	Oct 2014	28.3%	24.0%	R	20.0%	Collette Bailey

Priority 4 - NEET

Goal 1/2 **KM1 (NEET/ Young people whose situation is not known)**

2011-12 Baseline is the 2011/12 reported data and Outturn 2012-13 is the 2012 reported data (Nov-Jan averages)(from DfE)

Goal 2 The tracking of young people is posing a problem nationally for all authorities as it is such a resource intensive exercise.

Goal 3 KM 1&2 (academic year 12/13 participating)

Baseline taken from the Annual Activity Survey for 2012.

Targets are profiled on a monthly basis to take into consideration the seasonal trends associated with academic years etc.

The annual targets are taken as an average over November, December and January as per DoE expectations that this is when destination data nationally is at it's most robust.

Towards the end of academic years ((ie, June, July, August) participation reduces as 1 year courses come to an end in colleges etc and this has a knock on effect on NEET and

and Not Known as we work with young people to clarify their progression routes.

Goal 4 KM 1 (RMBC corporate responsibility NEET)

This cohort comprises 28 individual young people, of whom 14 (50%) are aged 18 and 19. This age group are able to claim benefit in their own right, and live independently, therefore are an extremely hard group to engage in any form of learning.

A further 9 (33%) are of Y13 academic year. Of those 9 young people, 6 are resident outside of Rotherham. The remaining 5 (17%) have all recently

left compulsory education and have a range of complex needs. Two young people in this group are resident outside the Rotherham area but are still being supported by the service,

one is in Temporary Accommodation at Rush House with intensive support from the service, one has health issues which prevent engagement in Learning at this time one has never engaged despite persistent attempts, whilst the r

moving towards a learning outcome.

IYSS is currently revisiting it's approach to working with the LAC/CL group, with a view to a more Locality based model and strengthened working relationship with the Care Leaver team.

(see also Goal 3 re Targets)

NB - DoE changed the count for NEET as at April 2013 - currency will no longer apply and therefore the adjustment set to NEET % has been amended.

This is projected to inflate the NEET % by approximately 1%.

Participation is defined as

- full-time education, such as school, college or home education
- an apprenticeship

Priority 5 - Fuel Poverty															
High level aspiration - Everyone in Rotherham can afford to keep warm and keep well															
Goal 1 - Reducing the effects of Fuel Poverty															
Key Measure	Indicator	2010 Baseline	2011			2012			Current Position				2014-15 Target	Accountable Lead	
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG			
	Percentage of the population needing to spend more than 10% of household income to achieve adequate levels of warmth in the home and meet their other energy needs.	18.2%	16.7%	17.2%	G	15.1%			2013 data Released in 2015					Catherine Homer	
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead	
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG			
		The number of properties receiving energy efficiency measures through Community Energy Saving Programme (CESP)		1,049	1,285	R	1,162	1,285	R	Superseded by GD/ECO (see QPM 4)					
		The number of properties receiving energy efficiency measures through Carbon Emissions Reduction Target (CERT)		1%	1%	G	CERT schemes have come to an end (31st March 2013) and have been superseded by Green Deal / ECO								
		The number of properties receiving energy efficiency measures through Dept of Energy & Climate Change (DECC)	To be delivered July 2013 onwards			68	65	G	01/04/2014-30/09/2014	27	57	A	252		
	The number of properties receiving energy efficiency measures through Green Deal / Energy Company Obligation (ECO)	1st year of collection anticipated in 4th quarter 2013-14			5,140		G	01/04/2014-30/06/2014	334						

Priority 5 - Fuel Poverty

Goal 1 KM 1 (spending more than 10% of household income to keep home warm)

Current Position represents 2011 calendar year. Baseline represents 2010 calendar year.

Data also measured for 2011 onwards using 'Low income, high costs' method. Rotherham: 2011 = 10.1%, 2012 = 9.8% (England 2012 = 10.4%)

QPM 1 (energy efficient measures through CESP)

Funding available to Utility Providers, ear-marked for 2012-13, was rolled over into 2013-14. The anticipated target of 1,285 will not be met as CESP has come to an end.

The reason for not meeting the target was because Utility Providers had made the required carbon savings on other earlier national schemes.

QPM 3 (Properties receiving DECC funded works)

It was anticipated that by the end of 2014/15 320 properties would benefit from works. The outturn for 2013/14 was 68 properties receiving measures, leaving a 2014/15 target of 252 properties with 27 delivered upto 31/07/2014. The remaining 225 properties are anticipated to be completed by 31st March 2015.

Currently there are 276 properties which have been identified as being suitable to receive measures and depending on take-up, an additional 556 (in two additional mail shots) will be targeted to meet any shortfall, budget depending.

It was anticipated that a further phase of work would be completed by the end of qtr 2; however, completion wasn't achieved and should be picked up in qtr 3.

Further mailshots and the publicising of the scheme across GP surgeries will be conducted during qtr 3 to try and identify the necessary households to meet the annual target.

QPM 4 (energy efficient measures through Green Deal/ECO)

Priority 6 - Dementia														
High level aspiration - Enabling people with dementia to live independantly for longer														
Goal 1 - Earlier detection of dementia in order to provide effective care														
Key Measure	Indicator	2011 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
	QOF identified prevalence as a % of calculated 'true prevalence'	59.5%	60.4%			66.0%	65.0%		Sep-14	69.7%			70.0%	Kate Tufnell
Quarterly Proxy Measure	Indicator	2011-12 Baseline	2012-13			2013-14			Current Position				2014-15 Target	Accountable Lead
			Outturn	Target	RAG	Outturn	Target	RAG	Period	Outturn	Target	RAG		
	Number of referrals to memory clinic			550		798			Apr-Nov14	612				Kate Tufnell
	Number of assessments undertaken in memory clinic			500		575			Apr-Sep14	262				Kate Tufnell
	Number of new plans of care in place for people with dementia	new - data not available												Kate Tufnell
	% of patients seen within 18 weeks (Referral to Treatment - Memory Clinic Pathway)			95%		92.7%	95%		Sep-14	94.3%		A	95%	Kate Tufnell
	Timeliness of social care assessment within 28 days (all adults)	83.2%	89.4%	89%	G	90.7%	90%	G	01-04-2014 to 17/11/2014	88.59	88.00	G	90%	Michaela Cox
	Care package assessments responded within 28 days for people with dementia								Area for National Development - New Returns Should make the required data available and recording of Dementia will start in 2015-16					
	Acceptable waiting times for care packages within 28 days	97.5%	97.5%	97.5%	G	98.6%	97.5%	G	01-04-2014 to 17/11/2014	95.3	95	G	97.5%	Michaela Cox
	Annual reviews of care package assessments for people with dementia								Area for National Development - New Returns Should make the required data available and recording of Dementia will start in 2015-16					
	Percentage of clients receiving a review	93.0%	93.1%	93%	G	93.2%	93%	G	New Indicator Developed see below			93%	Michaela Cox	
	Percentage of clients on service over 12month that received a review								01-04-2014 to 17/11/2014	42.40%	40.00%	G	99%	
A measure of the effectiveness of post-diagnosis care in sustaining independence and improving quality of life	Proposed indicator							Area for National Development - New Returns Should make the required data available and recording of Dementia will start in 2015-16				Kate Tufnell		

Priority 6 - Dementia

Goal 1 KM 1 (QOF identified prevalence as a % of calculated 'true prevalence')
2012/13 data is provisional (yet to be fully validated).

General guide to column headings:

2011-12 Baseline:- 2011-12 Outturn

2012-13: Outturn for full year 2012-13 or year end position as applicable.

Current position: Year To Date or latest figure as applicable.

2013-14 Target:- Will be the 2013-14 Target

2014-15 Target:- Will be the 2014-15 Target

For a number of indicators, no 2013-14 target has been set and targets have been proposed for 2013 onwards

For new indicators, we are seeking Board support and commitment to data collection

A number of local measures are also in the National Outcomes Frameworks - achievement of these will be key to getting the Health Premium Incentive and meeting NHS and DH targets

There are limitations on the availability of data for several indicators, including some key local measures that are also in the Public Health Outcomes Framework.