Introduction

Vision Statement:

People of all ages in Rotherham feel more connected to others and loneliness is reduced.

Introduction

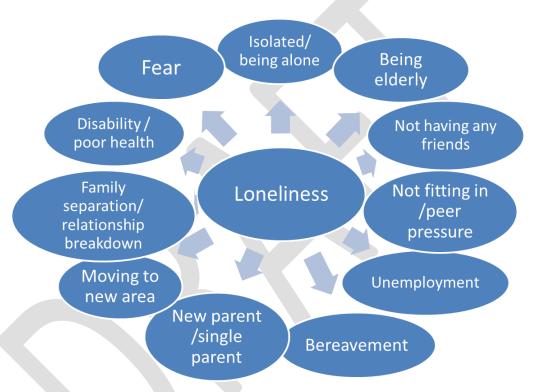
Loneliness is a very personal issue and people will describe it very differently. For the purposes of this action plan the following definition will be used for loneliness:

"Loneliness can be defined as a subjective, unwelcome feeling of lack or loss of companionship. It happens when we have a mismatch between the quantity and quality of social relationships that we have, and those that we want." Perlman, D. and Peplau, 1981, cited in HM (2018), 'A connected society: a strategy for tackling loneliness'.

The way people lead their lives in society is changing, for example the nature of jobs has changed with developments in technology which means more solitary working. Many of the public services are moving towards a digital offer which means less human interaction. Whilst this can bring many positives it has led to changes in the way we now live, work and interact with each other. Loneliness is not a new issue, but it is being recognised as a major public health issue. Research has shown that loneliness is as harmful to our health as smoking 15 cigarettes a day. Loneliness has been linked to numerous health issues like coronary heart disease, stroke, depression, cognitive decline and an increased risk of Alzheimer's. If people feel connected to others it can reduce the risk of mortality or developing certain diseases. There is some evidence to suggest that people who are lonely are more likely to place a higher demand on public services, for example visiting their GP and A&E more often. Anecdotal evidence from frontline staff suggests that some demands placed on public services in Rotherham may be due in part to individuals feeling lonely.

"Young or old, loneliness doesn't discriminate." Jo Cox

Loneliness can fluctuate over the life course and most people at some point in their life will experience loneliness. It is difficult to say what exactly causes loneliness but there are some known trigger factors which can be seen at an individual, community and societal level. Some of the factors are illustrated in the picture below:



Other factors which operate at community and societal levels include, transport, neighbourhood safety, access to services, financial hardship, insular communities, stigma and discrimination, digital technology and work life balance.

Loneliness affects all ages within society and national and local data reflects this. National estimates are that between 55 and 18% of the adults in the UK feel lonely often or always. Despite this there is a great deal of stigma attached to loneliness with a third of the adult population stating that they would be too embarrassed to say that they were lonely, making it more difficult for people to ask for help. (Mental Health Foundation (2010) The lonely society; https://www.mentalhealth.org.uk/sites/default/files/the_lonely_society_report.pdf)

It is because loneliness presents as a public health issue that a whole system response is required in Rotherham. In Rotherham actions to address loneliness are referenced in the Health and Wellbeing Board Strategy (Aim 4) and the refreshed Place Plan. This important public health issue has been championed by the Chair of the Health and Wellbeing Board (H&WbB).

Rotherham Loneliness event, 24th September 2019- Working Together to Tackle Loneliness

On the 24th September 2019 partners of the H&WbB were invited by Councillor Roche to a workshop to share their experiences of loneliness, showcase some of the many examples of good practice and to start to contribute to Rotherham's action plan to address this public health issue.

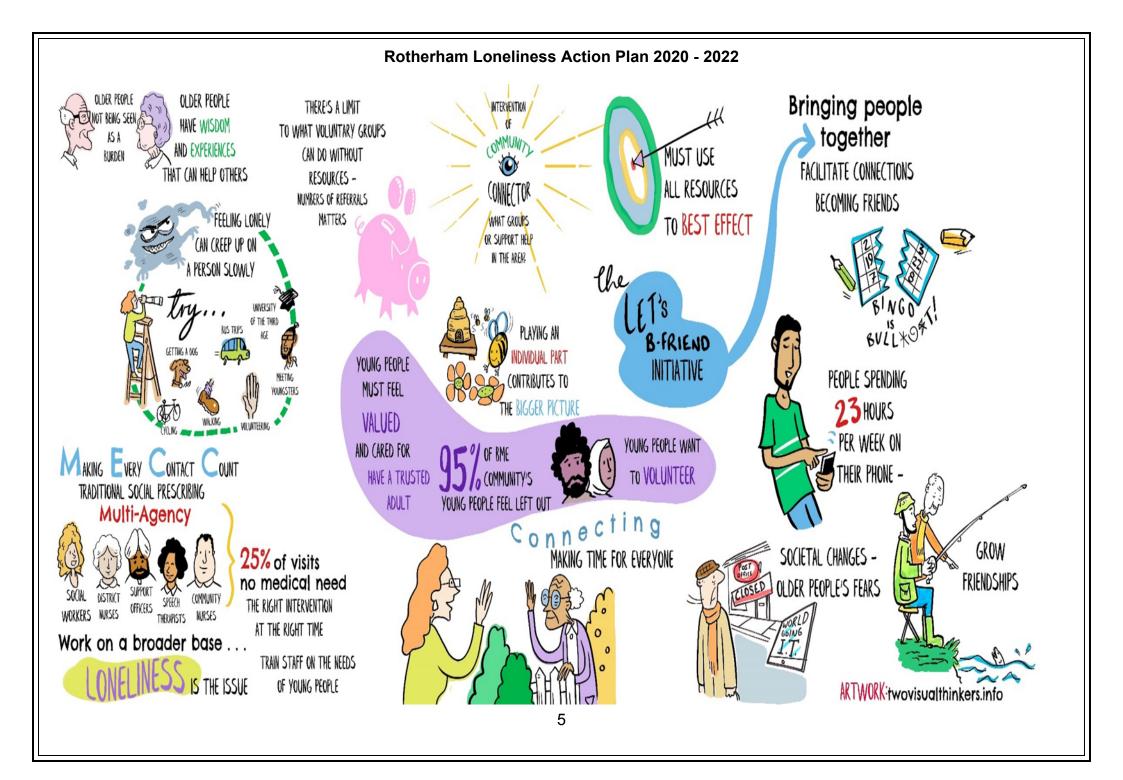
The day focused on:

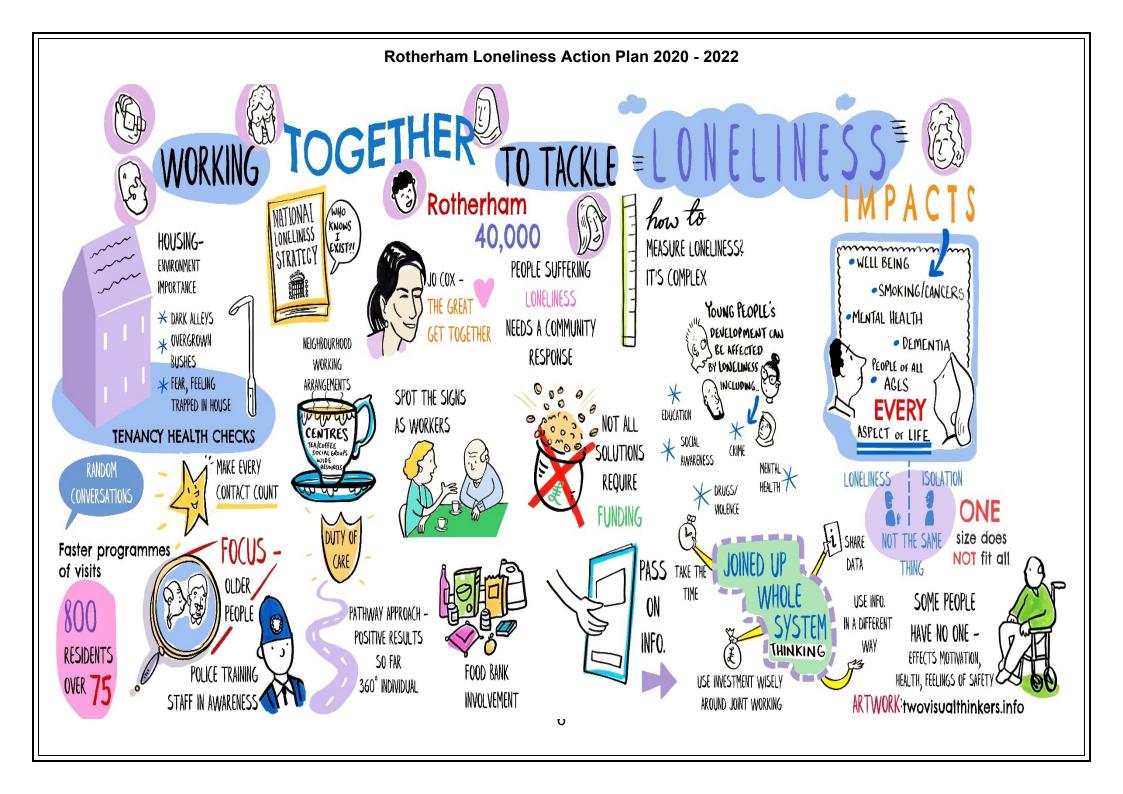
- o The vision for Rotherham and what good looks like.
- o What is working well?
- The gaps and opportunities.

The discussions from the event were captured visually and appear in this action plan. A full summary appears in Appendix 1. The presentations and discussions highlighted the abundance of initiatives across Rotherham which are helping address loneliness and build social connections, particularly in the voluntary and community sector. Delegates gave example of positive joint working between the different sectors and commented on the fact that loneliness is seen as a cross sector issue. There are many opportunities to take this work forwards including the need to work with people, empowering them to find solutions.

The other themes which were raised on the day by partners these were:

- · the value of partnership and neighbourhood working
- the great contribution the voluntary and community has and can make to this issue
- the need for intergenerational and inclusive working
- the need to identify and reach out to people
- the need for better communication, marketing and information technology.





Governance

The implementation of this loneliness action plan will be overseen by the Better Mental Health for All Group. These meetings are chaired by a Consultant in Public Health and have representation from H&WbB partners. The multi-agency group meets bimonthly and is tasked to implement this plan and the Better Mental Health for All Action Plan. The Partners represented on this group include:

- Crossroads, representing the Adult VCS
- Rotherham Clinical Commissioning Group (RCCG)
- RDaSH (mental health provider)
- Rotherham NHS Foundation Hospital Trust
- RMBC- Adult Care, Housing and Public Health (including Neighbourhoods)
- RMBC Children and Young People's Services
- RMBC Communications
- Rotherham United Community Sports Trust (RUCST)
- South Yorkshire Police

Progress against this action plan will be reported to the Mental Health (MH) and Learning Disability (LD) Transformation Group, a subgroup of the Rotherham Place Plan Board. Annual updates will be given to the Rotherham Health and Wellbeing Board.

National Picture

- Over 9 million adults are often or always lonely. (British Red Cross and Co-op)
- 43% of 17 25-year olds using Action for Children services experienced problems with loneliness. (Action for Children)
- Over half of parents (52%) have had a problem with loneliness with 21% feeling lonely in the last week. (Action for Children)
- 50% of disabled people will be lonely on any given day. (Sense)
- For 3.6 million people aged 65 television is the main form of company. (Age UK)
- 38% of people with dementia said that they had lost friends after their diagnosis. (Alzheimer's Society)
- 8 out of 10 carers have felt lonely or isolated as a result of looking after a loved one. (Carers UK)
- More than 1 in 10 men say they are lonely but would not admit it to anyone. (Royal Voluntary Service)

- 58% of migrants and refugees in London described loneliness and isolation as their biggest challenge. (The Forum)
- More than 1 in 3 people aged 75 and over say that feelings of loneliness are out of their control. (Independent Age)
- Loneliness costs UK employers £2.5 billion per year. (Co-op)
- Three out of four GPs say they see between 1 and 5 people a day who have come in mainly because they are lonely, and one in ten sees between six and ten such patients daily. (Campaign to End Loneliness)
- Disconnected communities could be costing the UK economy £32 billion every year. (Big Lunch)
- £1 invested in tackling loneliness saves society £1.26. (Public Health England)
- 81% of people agreed that there are lots of actions everyone can take in their daily lives to help those feeling lonely. (British Red Cross and Co-op)

The Jo Cox Commission on Loneliness was inspired by the MP's vision that by working together a real difference could be made to the lives of those affected by loneliness. Thirteen charities and businesses worked together to look at what could be done to tackle the issue and the resulting report sets out their findings: https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/active-communities/rb dec17 jocox commission finalreport.pdf.

The strong message from the report is that tackling loneliness will require a response from public sector staff, employers and businesses, communities and individuals.

In response to the work of the Jo Cox Commission on Loneliness, the Government committed to implementing many of the recommendations including the publication of a national strategy to tackle loneliness which was published in October 2018. The national strategy acknowledges the role that every part of society needs to take in order to tackle loneliness. Action needs to be taken by local authorities, public and health services, businesses, voluntary sector, communities, families and friends to support a more connected society.

The Strategy set out the challenge of how national Government, Local Authorities, businesses and society can work together to promote social connections. These three guiding principles, together with the feedback from the stakeholder event, will form the basis of this action plan:

- Improve how organisations and services connect people at risk of experiencing loneliness.
- Make it easier to access information about local community groups, activities and support services.
- Catalyse the sharing of knowledge and good practice on tackling loneliness.

In January 2018, the Prime Minister tasked the Office for National Statistics (ONS) with developing national indicators of loneliness suitable for use on major studies to inform future policy in England, including people across society and of all ages. ONS worked with experts in the field to agree a working definition of loneliness, and ideal criteria for the indicators and for the collection of data.

In December 2018 the Office of National Statistics published guidance and analysis on the National Measurement of Loneliness. One of the recommendations made by researchers was that; the introduction or preamble should not mention loneliness and should introduce the topic as focusing on the participant's relationships with others. (ONS, (2018), Testing of loneliness questions in surveys. Accessed online: https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/compendium/nationalmeasurementofloneliness/2018/testingoflonelinessquestionsinsurveys)

The Local Government Association (LGA) have produced a guide for councils to enable them to see how effectively they are tackling loneliness. The guide makes the case for this important public health issue to have a whole system preventative approach and encourages local areas to define the nature of loneliness in their local area, knowing who is at risk. https://www.local.gov.uk/sites/default/files/documents/22.28%20-%20Loneliness%20Must%20Know_02.pdf. The LGA guide comments that whilst many people may know about the need to make healthy lifestyle choices there is less awareness about the importance of having social connections.

One of the announcements in the 2019 NHS Long Term was for people to have more control over their health and more personalised case when they needed it. The introduction of link Workers for Primary Care Networks (PCNs), under the GP contract reforms, was one of the actions to address this. Social prescribing link workers are one of five additional roles being funded within primary care, to bring additional capacity into the multi-disciplinary team, under the Network Contract Directly Enhanced Services (DES).

With one in five GP appointments focusing on wider social needs, rather than acute medical issues, many GPs report that they spend significant amounts of time dealing with the consequences of poor housing, debt, stress and loneliness. Social prescribing and community-based approaches aim to assist with this by reducing pressure on clinicians like GPs, improving people's lives, helping with community resilience and ensuring that the needs of diverse and multi-cultural communities can be met.

https://www.england.nhs.uk/wp-content/uploads/2019/07/pcn-reference-guide-social-prescribing.pdf

Regional ICS

Tackling loneliness is a common challenge across the ICS that requires a response that is broader than can be delivered by health and care partners alone. Work to tackle loneliness was identified in March 2019 as one of the three priority areas in which to explore potential collaborative

work between Local Authorities in South Yorkshire and Bassetlaw and the South Yorkshire and Bassetlaw Integrated Care System. It is acknowledged that given the breadth and complexity of this area it will not be practically possible to scope out all existing activities that are taking place that contribute to promoting social connections and tackling loneliness. However, it makes sense to work with stakeholders in each place to understand the main areas of activity, the local plans to respond to the National Strategy and together identify any gaps, common challenges, barriers and potential opportunities that may benefit from collaborative action.

Local picture

Public Health England (PHE) profile data shows that in Rotherham:

- Just below half (47.5%) of adult social care users aged 18+ had as much social contact as they would like in 2017/18. For those aged 65+ this was 42.6%.
- In 2016/17 37.3% of adult carers aged 18+ had as much social contact as they would like. For those aged 65+ this was 44.1%.
- 32% of people aged 65 and over lived alone as at the 2011 Census. By ward this ranged from 24% in Anston and Woodsetts to 40% in Rotherham East.
- 7.3% of households were occupied by lone parent families as at the 2011 Census.

PHE plan to include loneliness indicators in the Public Health Outcomes Framework this year, which will give a more detailed picture for Rotherham. However, there have been some focused work with specific communities of interest in Rotherham to establish how loneliness affects them.

Older people

In January 2017 the Rotherham Older Peoples Forum (ROPF) secured funding from South Yorkshire Community Foundation to survey older people in Rotherham to find out exactly what loneliness means to them and the effect it has. The survey found that 82% of the respondents felt lonely sometimes or most of the time. The respondents commented that loneliness affected their confidence, motivation and health and wellbeing. Most often loneliness was triggered by a life event such as change in health or bereavement. The full report can be found below however the main summary points were:

- Loneliness is a feeling it is how we perceive ourselves to be rather than physically being alone.
- Loneliness means different things to different people.
- There is a clear need to generate social activities in the more rural areas of Rotherham and to make sure information about available activities reaches older people in those areas.

- There are strong links between loneliness and mental health. People become unable to help themselves as it firstly affects their confidence and motivation which in turn affects their health, and so it becomes a downward spiral.
- The long-term effects of loneliness can be so profound we need to find effective ways to tackle it or the demand on statutory health and social care services will only continue to increase.

The older people consulted suggested three solutions; befriending support, personal self-help strategies and joining local groups.

https://www.varotherham.org.uk/wp-content/uploads/2017/11/Ropf-Report-on-Loneliness-2017.pdf

Tenants

Two focus groups were held with RMBC tenants in summer and autumn of 2019. Tenants were asked:

How often do you feel left out? How often do you feel you like companionship? How often do you feel isolated?

The majority of TARA members stated that they lived alone (75%) Tenants were more likely to say they were lonely if they were in poor health (self-described) or had recently arrived in the area. While the data set is small it does support national findings of the ONS. Expanding TARA groups was the most common suggestion for how loneliness might be tackled in the area.

Young people

Nationally it is known that loneliness can be experienced throughout childhood, even amongst very young children and this is particularly the case where parents themselves experience loneliness. Some research has in fact indicated that younger people (16-24 year olds) may experience loneliness more often than older people. In Rotherham there has been little consultation with young people into their experiences of loneliness. Rotherham Public Health wanted to explore with young people what the issues were for them. Rotherham Children, Young People and Families Consortium were approached and asked to work with young people to provide a snapshot of youth loneliness in Rotherham. The five organisations of the Children, Young People and Families Consortium held focus groups with 130 young people aged 10-25 years of age, between April and June 2019. These organisations were:

- Endeavour
- Clifton Learning Partnership
- YWCA Yorkshire

- Rush House
- United Multicultural Centre

The focus groups asked the young people the following questions:

- What the issues are for young people in relation to loneliness?
- How common is loneliness amongst young people?
- Are any triggers or sub-groups that can predict loneliness?
- What is working well and what could be done to alleviate the problems?

The focus groups found that loneliness was an important issue for the young people consulted. The following themes were important to the young people consulted:

- Having a relationship with a trusted adult.
- Having opportunities to celebrate diversity and difference, allowing young people to learn about each other.
- Giving young people opportunities to take on responsibilities, fundraising was given as an example.
- Educating others about loneliness and the signs and symptoms young people may present with.
- Supporting young people's emotional wellbeing since mental health and loneliness are inextricably linked.

Helpful resources on loneliness

- Bellis, A (2019), Tackling Loneliness, Briefing Paper, Number 8514, 5 August 2019, House of Commons Library.
 https://researchbriefings.files.parliament.uk/documents/CBP-8514/CBP-8514.pdf
- Campaign to End Loneliness, guidance for councils and commissioners. https://www.campaigntoendloneliness.org/%20guidance
- Department for Digital Culture, Media and Sport (2019), Loneliness Fact Sheet from the Community Life Survey for England 2018-19 https://www.gov.uk/government/statistics/community-life-survey-2018-19
- Jo Cox Commission on Loneliness: A call to action https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/active-communities/rb dec17 jocox commission finalreport.pdf
- Local Government Association (2018), Loneliness How do you know your council is actively tackling loneliness? https://www.local.gov.uk/sites/default/files/documents/22.28%20-%20Loneliness%20Must%20Know 02.pdf
- NHS England and NHS Improvement (2019) Social prescribing link workers: Reference guide for primary care networks; https://www.england.nhs.uk/wp-content/uploads/2019/07/pcn-reference-guide-social-prescribing.pdf
- Royal College of General Practitioners, (2018), Tackling Loneliness A Community Action Plan https://www.rcgp.org.uk/-/media/Files/News/2018/RCGP-tackling-loneliness-may-2018.ashx?la=en
- What Works Wellbeing (2018), What do we know about tackling loneliness.
 https://whatworkswellbeing.org/wp/wp-content/uploads/woocommerce_uploads/2018/10/briefing-tackling-loneliness-Oct-2018.pdf

Aim 1. To make loneliness everyone's responsibility.

Actions	Who will load?	By when?	What do we work to	Drogress to data
Actions	who will lead?	by when?		Progress to date
		Starting March 2020	 Consistent 	
and consistent	Leads and identified		messages about	
messages in	champions from all		loneliness which	
relation to	H&WbB partners.		are supported and	
loneliness, the			communicated by	
affects and impact			all H&WbB	
•			partners.	
the whole life			People living and	
course.				
 Partners of the 			Rotherham having	
H&WbB to use			a good	
agreed messages			understanding of	
in communications			how they can help	
to their workforce			themselves and	
and general public.			others.	
•			 Five Ways to 	
•				
messages which			_	
<u> </u>				
			,	
social connections				
			_	
•				
	relation to loneliness, the affects and impact on people across the whole life course. Partners of the H&WbB to use agreed messages in communications to their workforce and general public. To develop clear self-care/self-help messages which encourage and help people to develop and maintain good	 To develop clear and consistent messages in relation to loneliness, the affects and impact on people across the whole life course. Partners of the H&WbB to use agreed messages in communications to their workforce and general public. To develop clear self-care/self-help messages which encourage and help people to develop and maintain good social connections using the themes of Five Ways to 	To develop clear and consistent messages in relation to loneliness, the affects and impact on people across the whole life course. Partners of the H&WbB to use agreed messages in communications to their workforce and general public. To develop clear self-care/self-help messages which encourage and help people to develop and maintain good social connections using the themes of Five Ways to Communication Leads and identified champions from all H&WbB partners. Starting March 2020 Starting March 2020	 To develop clear and consistent messages in relation to loneliness, the affects and impact on people across the whole life course. Partners of the H&WbB to use agreed messages in communications to their workforce and general public. To develop clear self-care/self-help messages which encourage and help people to develop and maintain good social connections using the themes of Five Ways to Communication Leads and identified champions from all H&WbB partners. Starting March 2020 Consistent messages about loneliness which are supported and communicated by all H&WbB partners. People living and working in Rotherham having a good understanding of how they can help themselves and others. Five Ways to Wellbeing messages prominently used as a way of promoting wellbeing. People reporting that they feel that

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
response to address loneliness.	To be Active To Connect To Give To keep Learning To Take Notice. To develop clear messages about how people can look out for others. To work with Comms colleagues to have a scheduled programme to promote these messages throughout the year, linking in with national campaigns where appropriate. To promote and celebrate examples of good practice.			connected and supported by the people they live and work with.	
Utilise local assets to address loneliness and improve opportunities for	 H&WbB partners to understand how local assets can be used as community hubs. Actions in place to use local assets as 	H&WbB partners		Creation of more community hubs/opportunities for people to connect.	

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
people to connect.	places for people to connect.				
Involve local people in coproducing solutions to tackle loneliness, utilising local assets.	 To work with local communities where loneliness is identified in Ward plans. To work with community of interest groups to look at solutions to address loneliness. To look to use local assets to address loneliness within geographical communities and communities of interest. To share learning and best practice from ward activity with other areas. 	Neighbourhoods, RMBC working with Elected Members Local community Communities of interest- CYPS, AC, H & PH, VCS and partners of the H&WbB.	Ward plans- work ongoing.	 More inclusive and connected communities. More people engaged in community volunteering roles. Empowered communities which use their local assets to address loneliness. Shared good practice being adopted in other areas. 	
For partners to mitigate against loneliness in the planning, commissioning and development	To agree a set of measures to ensure social connectivity is considered in place-based initiatives such as planning,	Champions from H&WbB.		Evidence of social connections being considered in place-based initiatives such as planning, commissioning of	

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
of services/policies.	commissioning of services, housing and transport.			services, housing and transport.	

Aim 2. Improving how organisations and services in Rotherham connect people at risk of experiencing loneliness to support.

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
Identify the levels of loneliness in Rotherham overall, paying attention to specific communities, groups and in relation to rurality.	 To include the new Public health outcomes Framework data on loneliness in JSNA. To build on the initial needs analysis with older people, young people and tenants, identifying other specific groups/communities to listen to. To ensure that the JSNA makes specific reference to loneliness and its impact on specific groups/communities. 	Neighbourhoods, PH with support from partners of the H&WbB.		 JSNA data on loneliness informing commissioning intentions and provision of services. Service providers and commissioners having a good understanding of the needs of vulnerable and at-risk groups. 	

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
	Partners of the H&WbB to make use of the JSNA data in their commissioning intentions and provision of services thereby ensuring that actions are not contributing to increased loneliness.				
Agree measures/questions for identifying people at risk of experiencing loneliness which can be used by all partners.	 To agree and test questions as part of the MECC pilot in the south of the borough. To finalise questions and use in all MECC training. To roll out MECC and loneliness across Rotherham. 	PH working with H&WbB partner organisations including VAR.		 Staff from H&WbB partners using the same questions/measures to identify people at risk of loneliness. Number of staff trained in MECC and loneliness. Case studies showing how people have been identified and signposted. 	
Raise awareness amongst public sector, local businesses and communities of the causes, triggers and impact of loneliness,	 To incorporate this into MECC training. To update training with any new information from the JSNA. To use the Five Ways to Wellbeing as Rotherham's local 	PH working with H&WbB partner organisations		 Frontline staff aware of at-risk groups and trigger points for loneliness. Increased knowledge used to identify people and signpost to appropriate support 	

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
using training and local campaigns.	campaign to promote the importance of good social connections. To coproduce with groups simple actions everyone can take to look out for others.			and give tailored self- help self-care information.	
Work with Primary Care Network (PCN) to agree actions to address loneliness.	 Provide MECC training for Link Workers. To assist Link Workers in understanding their local communities and the assets available which support good social connections. Link Workers operating within the Making Every Contact Count model. 	PCN, PH and Voluntary Action Rotherham and H&WbB partners.		 Link workers having attended MECC and loneliness training. Link Workers working within the MECC model. Reduction clinician time spent supporting people whose main issue is loneliness. Improved wellbeing of people experiencing loneliness. 	
Engage local businesses/employers in actions to combat loneliness.	 To co-produce with businesses suggested actions to combat loneliness. To look to include loneliness as a theme within the Be Well@Work Scheme. 	PH working with colleagues across South Yorkshire and local businesses.		 Loneliness is an element within the Be Well@Work scheme. Evidence of good practice from employers/businesses in their actions to address loneliness from both within the 	

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
	(For example; allowing community groups use of premises, staff trained to identify people at risk, staff time to have conversations with vulnerable people).			workforce and to the wider community. • Shared examples of good practice.	
Employers of the H&WbB to consider what actions they can take to encourage staff to have good social connections both in and out of work, paying attention to the remote and internet-reliant workforce.	To work with HR in H&WbB partner organisations to develop policies and working practices which outline responsibilities for employers, managers and staff in maintaining good social connections.	HR Leads from H&WbB organisations working (linking into the Be Well @ Work)		 Specific policies and practices being implemented which support good social networks. Evidence of initiatives where staff support each other. Evidence of workforce supporting the wider community through volunteering opportunities. 	

Aim 3 Make it easier for people living and working in Rotherham to access information about local community groups, activities and support services for loneliness.

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
To promote one directory of information for the general public and practitioners to access. (GISMO)	 Partners of the H&WbB to agree to use and promote one directory of services in Rotherham- GISMO. To ensure that this one directory is maintained. 	VAR working with H&WbB partners.		 One directory of services which is used by all H&WbB partners. Website advertised and promoted widely across the borough. Directory updated regularly. 	
Increase awareness amongst the general public of opportunities to access free and affordable activities.	 Promoting the one directory (GISMO) to people who live and work in Rotherham. All H&WbB partners to promote the activities/initiatives they deliver using the Five Ways to Wellbeing branding. 	VAR, Comms Leads from H&WbB partners.		People living and working in Rotherham know where to access information on local activities.	

Aim 4. Spread good practice and encourage knowledge sharing on tackling loneliness across Rotherham.

Objectives	Actions	Who will lead?	By when?	What do we want to see as a result?	Progress to date
Build up the evidence base of what works locally.	To learn from and disseminate good practice at a ward & community level.	Neighbourhoods, PH working with H&WbB partners.		Better communication about what works amongst partner organisations.	
	 To consider holding network/ sharing events for practitioners and communities to come together and share good practice. 			 Better use of resources. Strong local evidence base on which to build upon. 	
Encourage communities/businesses to engage with national based initiatives.	Support local communities/employers to take part in initiatives like Jo Cox Great Get Together weekend & #MincePieMoments Christmas campaign	Neighbourhoods, PH, H&WbB partner leads working with local communities schools, colleges, University and local businesses.		 Reduction in stigma surrounding loneliness. Greater community cohesion. Examples of national initiatives being implemented in Rotherham. Positive media coverage. 	

Progress Summary

Date of meeting	Actions Outstanding	Lead	Actioned By

Grey	Not due to start
Red	Not on target
Amber	Almost achieving target
Green	Achieving Target
Green	On track
Blue	Complete