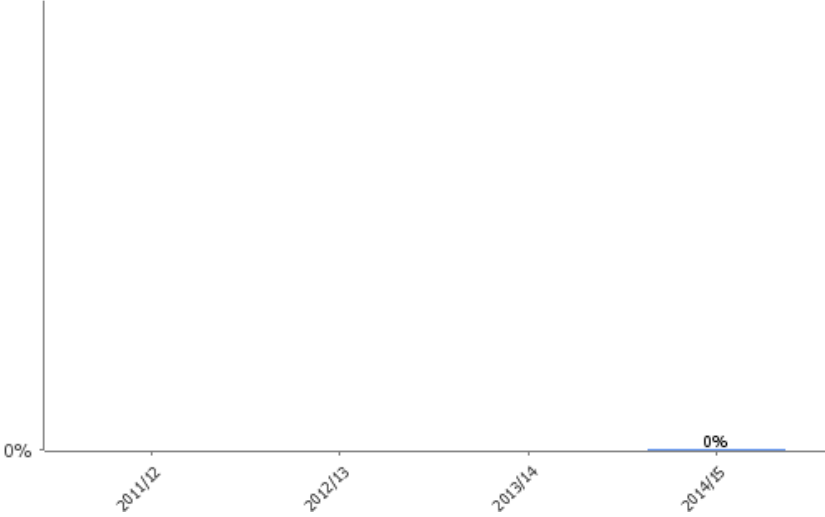
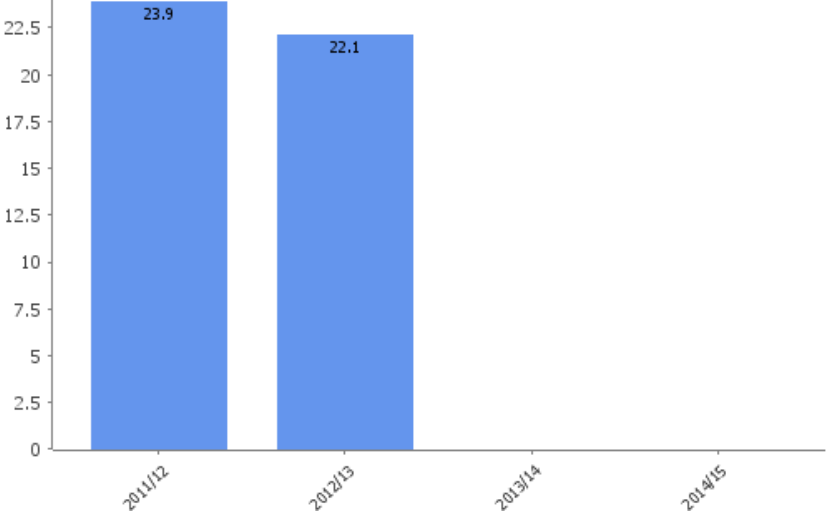
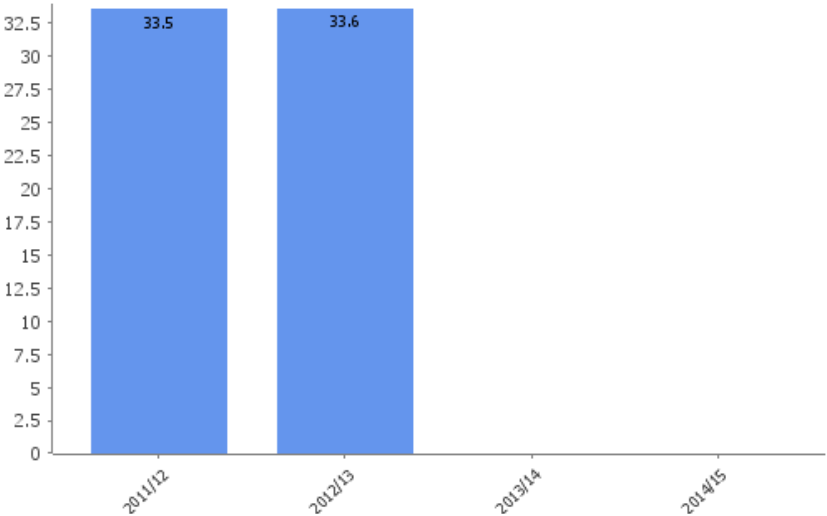


Appendix A



HWBB Priority 1 14/15: Reduce Obesity



Indicator	Trend Chart	Current Value	Performance Story									
<p data-bbox="125 810 271 911">% of Obesity Action Plan complete</p>  <p>The trend chart displays the percentage of the Obesity Action Plan completed over four financial years. The y-axis is labeled '% of Obesity Action Plan complete' and has a 0% mark. The x-axis shows the years 2011/12, 2012/13, 2013/14, and 2014/15. A horizontal line at the 0% level indicates that no progress has been made in completing the action plan across all years shown.</p> <table border="1"> <thead> <tr> <th>Year</th> <th>% of Obesity Action Plan complete</th> </tr> </thead> <tbody> <tr> <td>2011/12</td> <td>0%</td> </tr> <tr> <td>2012/13</td> <td>0%</td> </tr> <tr> <td>2013/14</td> <td>0%</td> </tr> <tr> <td>2014/15</td> <td>0%</td> </tr> </tbody> </table>	Year	% of Obesity Action Plan complete	2011/12	0%	2012/13	0%	2013/14	0%	2014/15	0%	<p data-bbox="1189 847 1227 874">0%</p>	<p data-bbox="1279 371 2123 823">Over the last year PH have: Reviewed the obesity pathway and developed of a 4 tiered approach to the prevention and management of obesity. Carried out evaluations of our current Tier 3 weight management services and used the recommendations in the re-commissioning of the services which started in April 2014. Reviewed the obesity prevention services –through a mapping exercise which included local public and stakeholder consultation and a literature review. The Obesity prevention and Tier 2 weight management services are due to be tendered in Aug 2014 with a service commencement date of April 2015. Within our own organisation a joined-up approach by fully involving other council departments, such as planning, transport, education and leisure could have a huge impact on this agenda. Although there are examples of good practise in Doncaster, such as increasing access to green spaces there is much more we could do if we co-ordinate action across departments, services and partner organisations.</p> <p data-bbox="1279 866 1397 887">Next steps</p> <p data-bbox="1279 898 2136 954">To build on the plans on a page and meet with partners in council departments to identify opportunities and understand how we can support each other’s agendas:</p> <ul data-bbox="1279 965 2063 1351" style="list-style-type: none"> · Transport · Planning and environment · Leisure and culture · Parks and green spaces · Education and learning · Health and social care · Housing · Identify key partners to engage in an obesity Alliance – who have a clear understanding of their roles and contribution to the agenda. · Develop an action plan for each area which will be implemented through working groups which report to the Obesity Alliance. · HWBB would be crucial in influencing engagement in this agenda.
Year	% of Obesity Action Plan complete											
2011/12	0%											
2012/13	0%											
2013/14	0%											
2014/15	0%											

Indicator	Trend Chart	Current Value	Performance Story										
<p>% Of children aged 4–5 that are classified as overweight or obese</p>	 <table border="1"> <caption>Percentage of children aged 4–5 that are classified as overweight or obese</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2011/12</td> <td>23.9</td> </tr> <tr> <td>2012/13</td> <td>22.1</td> </tr> <tr> <td>2013/14</td> <td>-</td> </tr> <tr> <td>2014/15</td> <td>-</td> </tr> </tbody> </table>	Year	Percentage	2011/12	23.9	2012/13	22.1	2013/14	-	2014/15	-	<p>22.1</p>	<p>Doncaster has similar levels of Childhood Obesity to the national average (22.2%) but this indicator is unlikely to change over a longer period of time, although this indicator has improved over the past two years. Data up to and including 2012/13 is available with 2013–14 available later in 2014 or early 2015.</p>
Year	Percentage												
2011/12	23.9												
2012/13	22.1												
2013/14	-												
2014/15	-												
<p>% Of children aged 10–11 that are classified as overweight or obese</p>	 <table border="1"> <caption>Percentage of children aged 10–11 that are classified as overweight or obese</caption> <thead> <tr> <th>Year</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>2011/12</td> <td>33.5</td> </tr> <tr> <td>2012/13</td> <td>33.6</td> </tr> <tr> <td>2013/14</td> <td>-</td> </tr> <tr> <td>2014/15</td> <td>-</td> </tr> </tbody> </table>	Year	Percentage	2011/12	33.5	2012/13	33.6	2013/14	-	2014/15	-	<p>33.6</p>	<p>Doncaster has similar levels of Childhood Obesity to the national average (33.3%) but this indicator is unlikely to change over a longer period of time. Data up to and including 2012/13 is available with 2013–14 available later in 2014 or early 2015.</p>
Year	Percentage												
2011/12	33.5												
2012/13	33.6												
2013/14	-												
2014/15	-												



Indicator	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel
		2013/14	2013/14	2013/14	2013/14		2014/15		
		Value	Value	Value	Value		Value		



HWBBP1 % of Obesity Action Plan complete		New Indicator 2014/15						0%	0%	
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PHOF2.06i % Of children aged 4–5 that are classified as overweight or obese		Data Only Available up to 2012/13								
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PHOF2.06ii % Of children aged 10–11 that are classified as overweight or obese		Data Only Available up to 2012/13								
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Performance Measures	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel
		2013/14	2013/14	2013/14	2013/14		2014/15		
		Value	Value	Value	Value		Value		

P2 Outcome 6f (PH) Number of children successfully completing tier 3 weight management service		The Tier 3 weight management services were re-commissioned to start in April 14 following a service evaluation and subsequent redesign. The services are now made up of a 6 month intervention with a further 6 month follow up. The data from the first cohort to enter the service and complete the initial 6 months will be available in Qtr 3								
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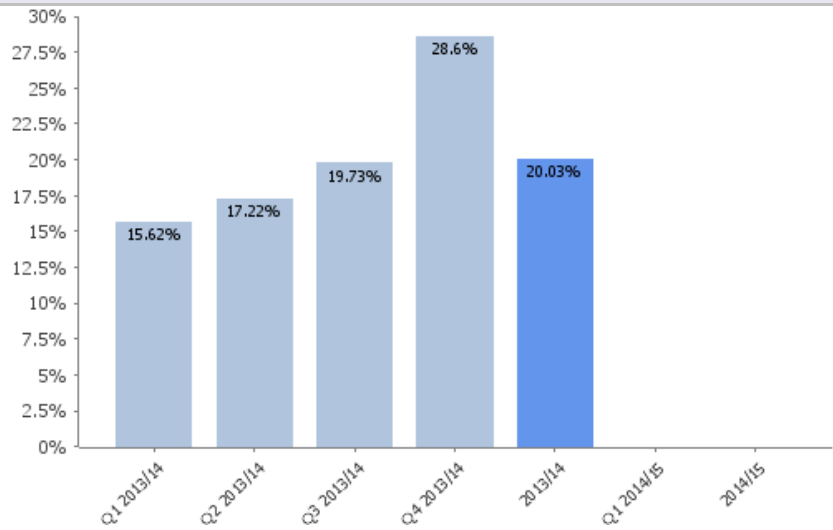
P2 Outcome 6h (PH) Number of adults losing 5% of body weight in tier 3 weight management service		The Tier 3 weight management services were re-commissioned to start in April 14 following a service evaluation and subsequent redesign. The services are now made up of a 6 month intervention with a further 6 month follow up. The data from the first cohort to enter the service and complete the initial 6 months will be available in Qtr 3								
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HWBB Priority 2 14/15 Q1: Alcohol Misuse

Indicator	Trend Chart	Current Value	Performance Story																
Alcohol related A & E Admissions	<table border="1"> <caption>Alcohol related A & E Admissions</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>718</td> </tr> <tr> <td>Q2 2013/14</td> <td>727</td> </tr> <tr> <td>Q3 2013/14</td> <td>390</td> </tr> <tr> <td>Q4 2013/14</td> <td>195</td> </tr> <tr> <td>2013/14</td> <td>2,030</td> </tr> <tr> <td>Q1 2014/15</td> <td>121</td> </tr> <tr> <td>2014/15</td> <td>121</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	718	Q2 2013/14	727	Q3 2013/14	390	Q4 2013/14	195	2013/14	2,030	Q1 2014/15	121	2014/15	121	<p>121</p>	<p>Alcohol related A&E admissions are a crude way to measure the negative impact of alcohol on a given population. Working with stakeholders and partners to reduce this figure will have a positive impact on the direct harms related to alcohol.</p>
Period	Value																		
Q1 2013/14	718																		
Q2 2013/14	727																		
Q3 2013/14	390																		
Q4 2013/14	195																		
2013/14	2,030																		
Q1 2014/15	121																		
2014/15	121																		
The numbers accessing alcohol treatment services	<table border="1"> <caption>The numbers accessing alcohol treatment services</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>246</td> </tr> <tr> <td>Q2 2013/14</td> <td>256</td> </tr> <tr> <td>Q3 2013/14</td> <td>215</td> </tr> <tr> <td>Q4 2013/14</td> <td>107</td> </tr> <tr> <td>2013/14</td> <td>824</td> </tr> <tr> <td>Q1 2014/15</td> <td>646</td> </tr> <tr> <td>2014/15</td> <td>646</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	246	Q2 2013/14	256	Q3 2013/14	215	Q4 2013/14	107	2013/14	824	Q1 2014/15	646	2014/15	646	<p>646</p>	<p>Increasing the numbers in treatment involves health promotion and targeted interventions at a wide range of individuals. NICE states that to have 1 extra individual in treatment requires 77 individuals to be targeted.</p>
Period	Value																		
Q1 2013/14	246																		
Q2 2013/14	256																		
Q3 2013/14	215																		
Q4 2013/14	107																		
2013/14	824																		
Q1 2014/15	646																		
2014/15	646																		

Indicator	Trend Chart	Current Value	Performance Story
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The numbers leaving alcohol treatment services successfully

















20.03%

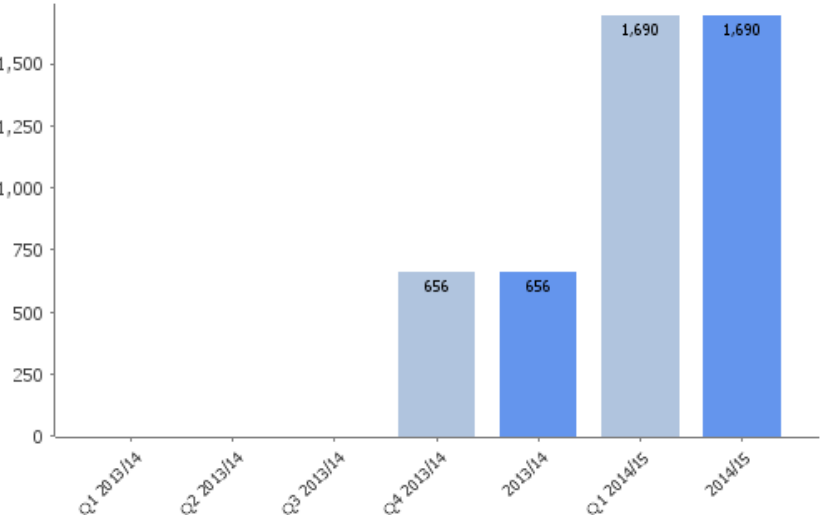
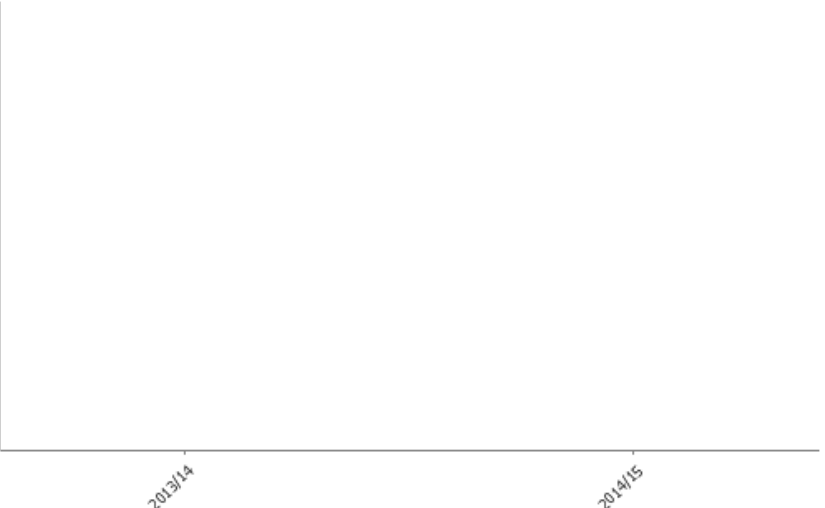
Increasing treatment outcomes for patients increases the number of individuals being free from alcohol as a dependency, therefore increasing life expectancy as well as productivity.

HWBB Priority 3 14/15 Q1: Stronger Families

Indicator	Trend Chart	Current Value	Performance Story																
<p>(P3 Obj 1) Percentage of stronger family cohort that has received services</p>	 <table border="1"> <caption>Percentage of stronger family cohort that has received services</caption> <thead> <tr> <th>Period</th> <th>Percentage</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>68.5</td> </tr> <tr> <td>Q2 2013/14</td> <td>71.2</td> </tr> <tr> <td>Q3 2013/14</td> <td>81.9</td> </tr> <tr> <td>Q4 2013/14</td> <td>88.6</td> </tr> <tr> <td>2013/14</td> <td>88.6</td> </tr> <tr> <td>Q1 2014/15</td> <td>92.6</td> </tr> <tr> <td>2014/15</td> <td>92.6</td> </tr> </tbody> </table>	Period	Percentage	Q1 2013/14	68.5	Q2 2013/14	71.2	Q3 2013/14	81.9	Q4 2013/14	88.6	2013/14	88.6	Q1 2014/15	92.6	2014/15	92.6	<p>92.6</p>	<p>The programme is built on the national criteria set out by DCLG the cohort has been mainly identified through a data matching process linked to these criteria. We have agreed to 'turn around' 870 families under the programme in Doncaster; to date we have identified 1055 families so far who met the criteria This number of 1055 is a cumulative number of families identified from the outset of the programme, one of the numbers we have to report to DCLG via our quarterly reporting process. The 977 families that are active refer to the families who we are working with or receiving services. The difference between this and the 977 active families is due to families leaving the area.</p> <p>We will continue to identify families who meet the criteria as the programme progresses, however this is mainly through referral processes now rather than large scale data matching that was required previously. The numbers shown as identified will continue to rise and so will the number of active families but there will continue to be a rate families who are no longer considered 'live' and so this figure may fluctuate against the rate of identification.</p>
Period	Percentage																		
Q1 2013/14	68.5																		
Q2 2013/14	71.2																		
Q3 2013/14	81.9																		
Q4 2013/14	88.6																		
2013/14	88.6																		
Q1 2014/15	92.6																		
2014/15	92.6																		
<p>(A&C P4 Outcome 12a) Number of family claims made to CLG through the Stronger Families Programme</p>	 <table border="1"> <caption>Number of family claims made to CLG through the Stronger Families Programme</caption> <thead> <tr> <th>Period</th> <th>Number of Claims</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>0</td> </tr> <tr> <td>Q2 2013/14</td> <td>57</td> </tr> <tr> <td>Q3 2013/14</td> <td>89</td> </tr> <tr> <td>Q4 2013/14</td> <td>218</td> </tr> <tr> <td>2013/14</td> <td>218</td> </tr> <tr> <td>Q1 2014/15</td> <td>395</td> </tr> <tr> <td>2014/15</td> <td>626</td> </tr> </tbody> </table>	Period	Number of Claims	Q1 2013/14	0	Q2 2013/14	57	Q3 2013/14	89	Q4 2013/14	218	2013/14	218	Q1 2014/15	395	2014/15	626	<p>626</p>	<p>The process of claims to DCLG has evolved as the programme has developed to allow for partial claims against individual criteria rather than an 'all or nothing' claim. While this is good for us to be able to draw in payments by results we must be clear that the definition for turned around by Government is those families who have met either the ASB/crime & Education criteria or sustained continuous employment (or both). While we have claimed for 395 families up to the end of April, a number of these are for progress to work only. The recent jump in figures for this criteria reflect the recent change in delivery of the related ESF programme locally following previous providers failure to deliver, leaving us disadvantaged. While this jump is good news for those families and us, it does not meet the definition of turned around this figure is 238 families.</p> <p>We continue to develop our process for claims and data clarity, which has improved no end due to the vigilance and efforts of those officers involved. The case management system is much closer to going live but not available to support the July claim. The system is undergoing tests and we are awaiting a cost and timescale for uploading the cohort data onto the system which could delay the implementation past the October claim.</p>
Period	Number of Claims																		
Q1 2013/14	0																		
Q2 2013/14	57																		
Q3 2013/14	89																		
Q4 2013/14	218																		
2013/14	218																		
Q1 2014/15	395																		
2014/15	626																		

Indicator	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel	
		2013/14	2013/14	2013/14	2013/14		2014/15			
		Value	Value	Value	Value		Value			
SF01 (P3 Obj 1) Percentage of stronger family cohort that has received services		68.5	71.2	81.9	88.6	88.6	92.6	92.6		
SF02 (A&C P4 Outcome 12a) Number of family claims made to CLG through the Stronger Families Programme		0	57	89	218	218	395	626		
HoS MC 01 No of Families who meet the reduction in ASB / crime & school attendance criteria							206			
HoS MC 02 No of families who meet the pathway to employment criterion							211			
HoS MC 03 No of families who meet the continuous work criterion.							27			
Indicator	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel	
		2013/14	2013/14	2013/14	2013/14		2014/15			
		Value	Value	Value	Value		Value			
HoS MC 04 Number trained in the trainer programme for Combined DV, mental health and substance misuse impact on families.		New Performance Measure 2014/15						17	17	
P4 Outcome 12b (A&C) – Deliver Child & Family Assessment training and other working with families training to key staff		New Performance Measure 2014/15						82	82	

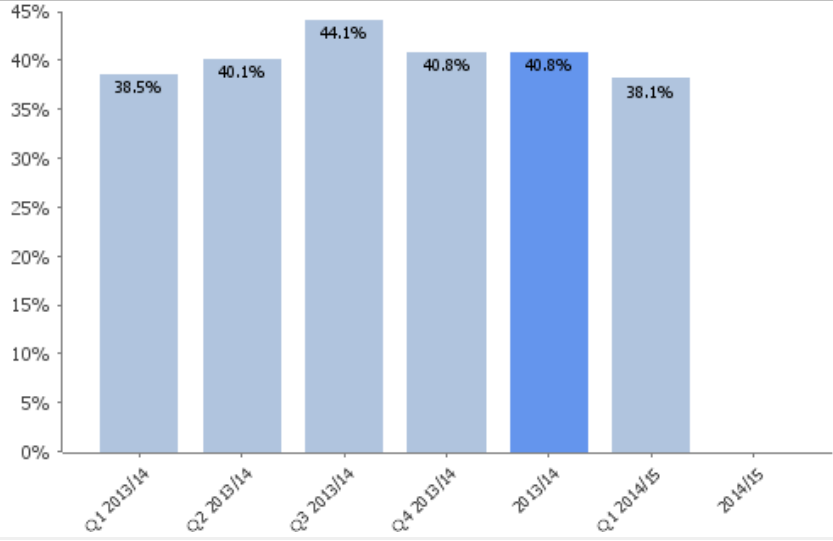
HWBB Priority 4 14/15 Q1: Dementia

Indicator	Trend Chart	Current Value	Performance Story																
<p>Number of Dementia Friends in Doncaster</p>	 <table border="1"> <caption>Number of Dementia Friends in Doncaster</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>0</td> </tr> <tr> <td>Q2 2013/14</td> <td>0</td> </tr> <tr> <td>Q3 2013/14</td> <td>0</td> </tr> <tr> <td>Q4 2013/14</td> <td>656</td> </tr> <tr> <td>2013/14</td> <td>656</td> </tr> <tr> <td>Q1 2014/15</td> <td>1,690</td> </tr> <tr> <td>2014/15</td> <td>1,690</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	0	Q2 2013/14	0	Q3 2013/14	0	Q4 2013/14	656	2013/14	656	Q1 2014/15	1,690	2014/15	1,690	<p>1,690</p>	<p>Dementia Friends are currently over target reaching 56.3% for the years target within Q1.</p>
Period	Value																		
Q1 2013/14	0																		
Q2 2013/14	0																		
Q3 2013/14	0																		
Q4 2013/14	656																		
2013/14	656																		
Q1 2014/15	1,690																		
2014/15	1,690																		
<p>Public Health Survey Results</p>			<p>The first Public Health survey on dementia to set the baseline results will be undertaken during October 2014. A year of awareness raising has been planned before a second survey will be undertaken in 12 months' time.</p>																

Indicator	Trend Chart	Current Value	Performance Story																
<p>Doncaster Action Alliance Members</p>	<table border="1"> <caption>Doncaster Action Alliance Members Data</caption> <thead> <tr> <th>Quarter</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>0</td> </tr> <tr> <td>Q2 2013/14</td> <td>0</td> </tr> <tr> <td>Q3 2013/14</td> <td>0</td> </tr> <tr> <td>Q4 2013/14</td> <td>0</td> </tr> <tr> <td>2013/14</td> <td>0</td> </tr> <tr> <td>Q1 2014/15</td> <td>16</td> </tr> <tr> <td>2014/15</td> <td>0</td> </tr> </tbody> </table>	Quarter	Value	Q1 2013/14	0	Q2 2013/14	0	Q3 2013/14	0	Q4 2013/14	0	2013/14	0	Q1 2014/15	16	2014/15	0	<p>16</p>	<p>Doncaster Action Alliance is currently under target achieving only 8% in the first quarter. Promotional material has now been produced and will be circulated around businesses and venues in Doncaster. It is expected that the target of 200 will be met.</p>
Quarter	Value																		
Q1 2013/14	0																		
Q2 2013/14	0																		
Q3 2013/14	0																		
Q4 2013/14	0																		
2013/14	0																		
Q1 2014/15	16																		
2014/15	0																		
<p>People Diagnosed With Dementia</p>	<table border="1"> <caption>People Diagnosed With Dementia Data</caption> <thead> <tr> <th>Quarter</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>0</td> </tr> <tr> <td>Q2 2013/14</td> <td>0</td> </tr> <tr> <td>Q3 2013/14</td> <td>0</td> </tr> <tr> <td>Q4 2013/14</td> <td>2,075</td> </tr> <tr> <td>2013/14</td> <td>0</td> </tr> <tr> <td>Q1 2014/15</td> <td>0</td> </tr> <tr> <td>2014/15</td> <td>0</td> </tr> </tbody> </table>	Quarter	Value	Q1 2013/14	0	Q2 2013/14	0	Q3 2013/14	0	Q4 2013/14	2,075	2013/14	0	Q1 2014/15	0	2014/15	0	<p>2,075</p>	<p>Annual GP QOF returns will be used to measure the percentage of patient's that are diagnosed with Dementia. A Primary Care Liaison Nurse is now in place who will work with GP Practices and Dementia consultants to improve communication around diagnosis and help improve the quality of data and identifying the prevalence of different types of Dementia within Doncaster. A new post will support 24 practices across Doncaster in the Cantamobile pilot (a screening tool for dementia) which will assist in increasing the number of people diagnosed with dementia in Doncaster. Further work with regard to data cleansing/sharing is planned which will support finding new cases.</p>
Quarter	Value																		
Q1 2013/14	0																		
Q2 2013/14	0																		
Q3 2013/14	0																		
Q4 2013/14	2,075																		
2013/14	0																		
Q1 2014/15	0																		
2014/15	0																		

Indicator	Trend Chart	Current Value	Performance Story
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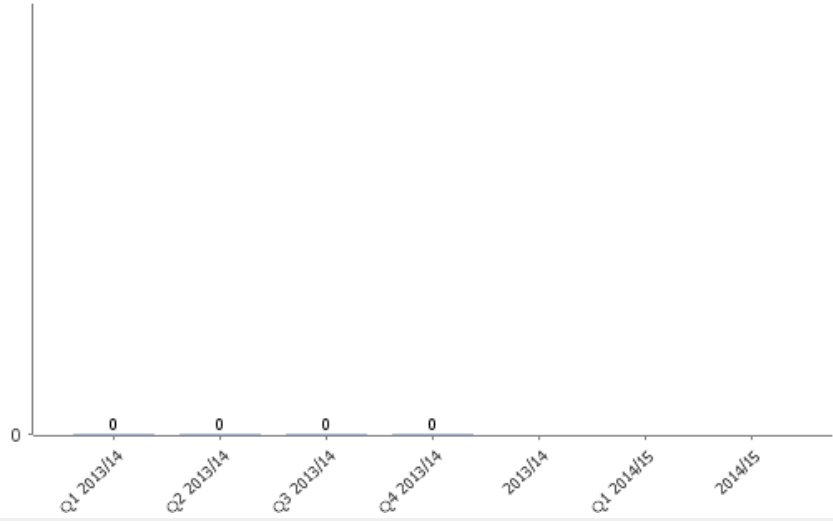
(A&C) Proportion of People with dementia (receiving Social Care) living in the community



38.1%

The proportion of people with dementia receiving social care and living in the community is 38.1%

Number of 4hr RDaSH Emergency responses



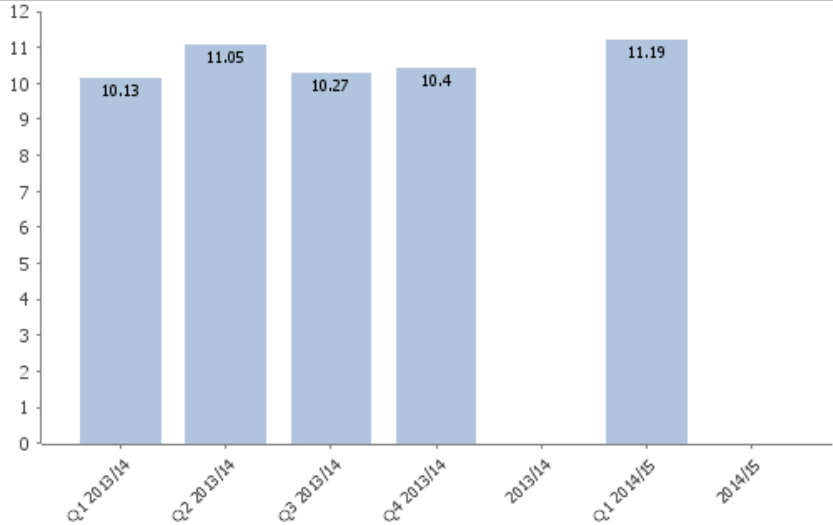
0

Reduction in 4 hour emergency response time is under discussion with RDaSH's lead for the Information for the Older People's Service as the previous year's figures only reflect Out of Hours.

Indicator	Trend Chart	Current Value	Performance Story																
<p>Number of Hospital Admissions</p>	<table border="1"> <caption>Number of Hospital Admissions</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>516</td> </tr> <tr> <td>Q2 2013/14</td> <td>483</td> </tr> <tr> <td>Q3 2013/14</td> <td>545</td> </tr> <tr> <td>Q4 2013/14</td> <td>538</td> </tr> <tr> <td>2013/14</td> <td>2,082</td> </tr> <tr> <td>Q1 2014/15</td> <td>540</td> </tr> <tr> <td>2014/15</td> <td>540</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	516	Q2 2013/14	483	Q3 2013/14	545	Q4 2013/14	538	2013/14	2,082	Q1 2014/15	540	2014/15	540	540	<p>An Older People's Liaison Service has been based within Doncaster Royal Infirmary during 2013/14 with the role of identifying patients who are likely to have dementia and help to reduce admissions and length of stay through increased training and awareness of the condition. During the year this has seen a decrease in the amount of patients being admitted and re-admitted within 30 days of their discharge. In this same period it was noted that the length of stay for people diagnosed with dementia has risen as only those patients with a need for hospital treatment were having stays i.e. fewer people with stays of only 1 day. At present Q1 data has indicated a slight rise in the amount of admissions and readmissions.</p>
Period	Value																		
Q1 2013/14	516																		
Q2 2013/14	483																		
Q3 2013/14	545																		
Q4 2013/14	538																		
2013/14	2,082																		
Q1 2014/15	540																		
2014/15	540																		
<p>Hospital re-admissions within 30 days</p>	<table border="1"> <caption>Hospital re-admissions within 30 days</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>90</td> </tr> <tr> <td>Q2 2013/14</td> <td>79</td> </tr> <tr> <td>Q3 2013/14</td> <td>89</td> </tr> <tr> <td>Q4 2013/14</td> <td>103</td> </tr> <tr> <td>2013/14</td> <td>361</td> </tr> <tr> <td>Q1 2014/15</td> <td>105</td> </tr> <tr> <td>2014/15</td> <td>105</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	90	Q2 2013/14	79	Q3 2013/14	89	Q4 2013/14	103	2013/14	361	Q1 2014/15	105	2014/15	105	105	<p>An Older People's Liaison Service has been based within Doncaster Royal Infirmary during 2013/14 with the role of identifying patients who are likely to have dementia and help to reduce admissions and length of stay through increased training and awareness of the condition. During the year this has seen a decrease in the amount of patients being admitted and re-admitted within 30 days of their discharge. In this same period it was noted that the length of stay for people diagnosed with dementia has risen as only those patients with a need for hospital treatment were having stays i.e. fewer people with stays of only 1 day. At present Q1 data has indicated a slight rise in the amount of admissions and readmissions.</p>
Period	Value																		
Q1 2013/14	90																		
Q2 2013/14	79																		
Q3 2013/14	89																		
Q4 2013/14	103																		
2013/14	361																		
Q1 2014/15	105																		
2014/15	105																		

Indicator	Trend Chart	Current Value	Performance Story
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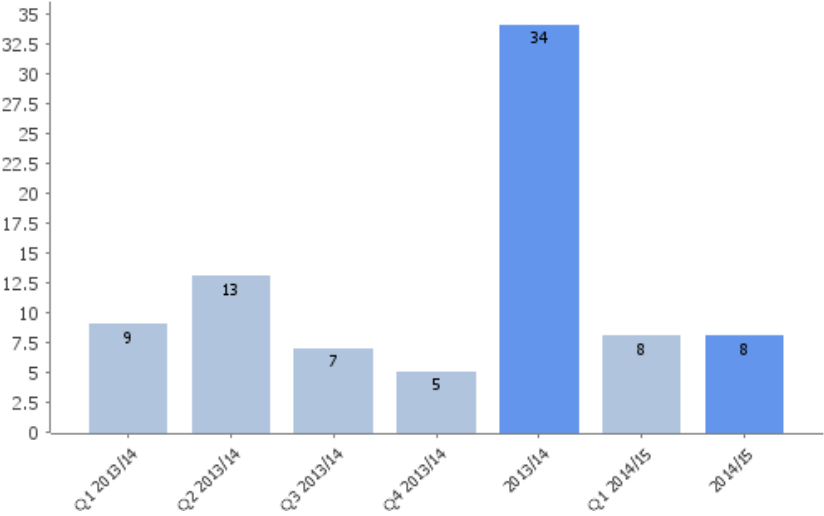
Length Of Stay Of Dementia Patients In An Acute Setting



11.19

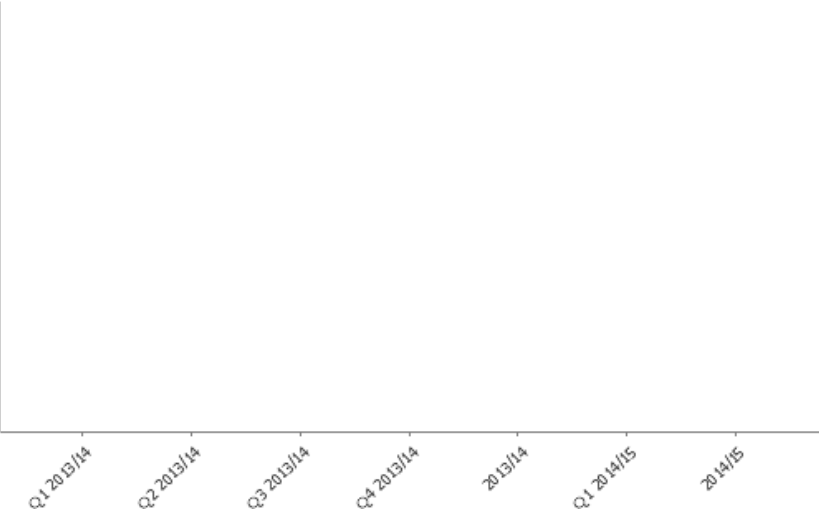
An Older People's Liaison Service has been based within Doncaster Royal Infirmary during 2013/14 with the role of identifying patients who are likely to have dementia and help to reduce admissions and length of stay through increased training and awareness of the condition. During the year this has seen a decrease in the amount of patients being admitted and re-admitted within 30 days of their discharge. In this same period it was noted that the length of stay for people diagnosed with dementia has risen as only those patients with a need for hospital treatment were having stays i.e. fewer people with stays of only 1 day. At present Q1 data has indicated a slight rise in the amount of admissions and readmissions.













Carers Requiring Emergency Respite



8

The number of Carers that required an 'unplanned' period of respite in the period was 8.

Indicator	Trend Chart	Current Value	Performance Story
Patient/Carer Quality Of Life Score			<p>We are currently liaising with our Acute Provider (RDaSH) and 3 community providers (SYCIL, Sue Ryder and the Alzheimer’s Society) to set up a system that captures this data quarterly so we can present it in the following definition.</p> <p><i>The 4 providers have assessed (for example 300) people this quarter and of those 97% reported an improvement in the Quality of Life.</i></p> <p>We will attempt to capture this data retrospectively for Q1 but realistically we will have Q2 s data in October</p>

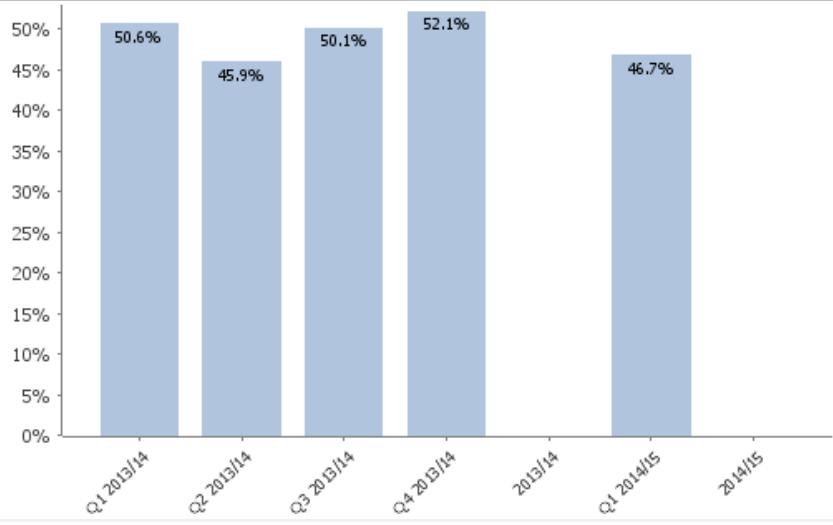
Indicator	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel
		2013/14	2013/14	2013/14	2013/14		2014/15		
		Value	Value	Value	Value		Value		
Doncaster will have increased awareness of Dementia and there will be a reduction in stigma									
PCT1.01 Number of Dementia Friends in Doncaster					656	656	1,690	1,690	
PCT1.02 Public Health Survey Results		New Indicator 2014/15							
PCT1.03 Doncaster Action Alliance Members		New Indicator 2014/15						16	
More People will receive a diagnosis of Dementia									
PCT1.04 People Diagnosed With Dementia					2,075				
More people will live independently									
PCT1.05 Number of 4hr RDaSH Emergency responses		0	0	0	0				
PCT1.06 Number of Hospital Admissions		516	483	545	538	2,082	540	540	
PCT1.07 Hospital re-admissions within 30 days		90	79	89	103	361	105	105	
PCT1.08 Length Of Stay Of Dementia Patients In An Acute Setting		10.13	11.05	10.27	10.4		11.19		
PCT1.09 Carers Requiring Emergency Respite		9	13	7	5	34	8	8	
PCT1.10 Patient/Carer Quality Of Life Score		New Indicator 2014/15							
P2 Outcome 4e (A&C) Proportion of People with dementia (receiving Social Care) living in the community		38.5%	40.1%	44.1%	40.8%	40.8%	38.1%		

HWBB Priority 5 14/15 Q1: Mental Health

Indicator	Trend Chart	Current Value	Performance Story																
<p>Proportion of adults in contact with secondary mental health services in paid employment</p>	<table border="1"> <caption>Proportion of adults in contact with secondary mental health services in paid employment</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>4%</td> </tr> <tr> <td>Q2 2013/14</td> <td>5.3%</td> </tr> <tr> <td>Q3 2013/14</td> <td>6%</td> </tr> <tr> <td>Q4 2013/14</td> <td>5%</td> </tr> <tr> <td>2013/14</td> <td>5%</td> </tr> <tr> <td>Q1 2014/15</td> <td>6%</td> </tr> <tr> <td>2014/15</td> <td>6%</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	4%	Q2 2013/14	5.3%	Q3 2013/14	6%	Q4 2013/14	5%	2013/14	5%	Q1 2014/15	6%	2014/15	6%	<p>6%</p>	<p>The measures for the amount of adults in settled accommodation and in employment are both on track at 82% and 6% against targets of 75% and 6% respectively.</p>
Period	Value																		
Q1 2013/14	4%																		
Q2 2013/14	5.3%																		
Q3 2013/14	6%																		
Q4 2013/14	5%																		
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Q1 2014/15	6%																		
2014/15	6%																		
<p>(A&C P3 Outcome 9b) Proportion of adults in contact with secondary mental health services living independently, with or without support</p>	<table border="1"> <caption>Proportion of adults in contact with secondary mental health services living independently, with or without support</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>88%</td> </tr> <tr> <td>Q2 2013/14</td> <td>88%</td> </tr> <tr> <td>Q3 2013/14</td> <td>85.5%</td> </tr> <tr> <td>Q4 2013/14</td> <td>79%</td> </tr> <tr> <td>2013/14</td> <td>79%</td> </tr> <tr> <td>Q1 2014/15</td> <td>82%</td> </tr> <tr> <td>2014/15</td> <td>81%</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	88%	Q2 2013/14	88%	Q3 2013/14	85.5%	Q4 2013/14	79%	2013/14	79%	Q1 2014/15	82%	2014/15	81%	<p>81%</p>	<p>The measures for the amount of adults in settled accommodation and in employment are both on track at 82% and 6% against targets of 75% and 6% respectively. For Settled Accommodation Doncaster is performing the best regionally and compared to statistical neighbours.</p>
Period	Value																		
Q1 2013/14	88%																		
Q2 2013/14	88%																		
Q3 2013/14	85.5%																		
Q4 2013/14	79%																		
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Indicator	Trend Chart	Current Value	Performance Story
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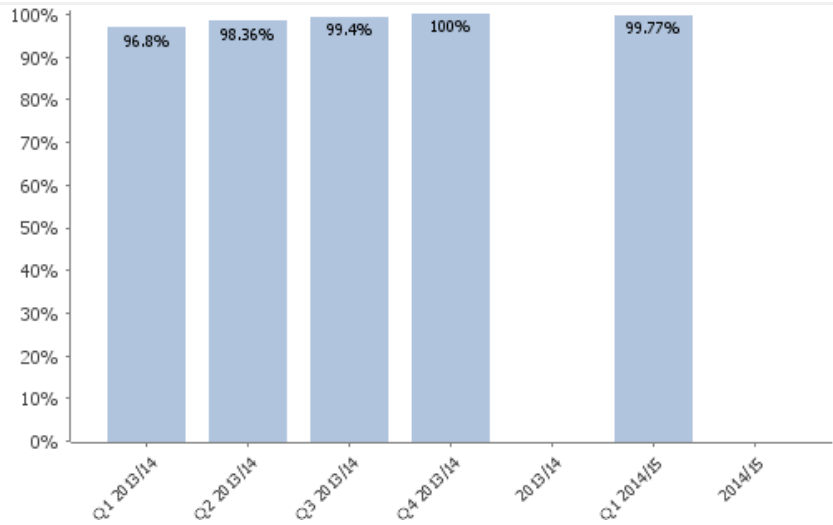
IAPT: Number of People Completing Treatment and Moving to Recovery



46.7%

IAPT's target of 50% has been breached for Q1 with a figure of 46.7%. Work is being undertaken around the dataset supplied by IAPT following further national guidance





CAMHS: % of patients with agreed care pathway & treatment plans






99.77%

CAMHS data and breaches to measures are retrospectively reviewed by commissioners and providers in joint quarterly performance meetings. At present all measures are on track if exceptions are agreed at the next meeting as expected.

Indicator	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel
		2013/14	2013/14	2013/14	2013/14		2014/15		
		Value	Value	Value	Value		Value		
ASCOF_1F Proportion of adults in contact with secondary mental health services in paid employment		4%	5.3%	6%	5%	5%	6%	6%	
ASCOF_1H (A&C P3 Outcome 9b) Proportion of adults in contact with secondary mental health services living independently, with or without support		88%	88%	85.5%	79%	79%	82%	81%	
PCT1.11 IAPT: Number of People Completing Treatment and Moving to Recovery		50.6%	45.9%	50.1%	52.1%		46.7%		
PCT1.12 CAMHS: % of patients with agreed care pathway & treatment plans		96.8%	98.36%	99.4%	100%		99.77%		
Performance Measures	Status	Q1	Q2	Q3	Q4	2013/14	Q1	2014/15	Direction of Travel
		2013/14	2013/14	2013/14	2013/14	Value	2014/15	Value	
		Value	Value	Value	Value	Value	Value	Value	
PCT1.13 CAMHS: % of referrals starting a treatment plan within 8 weeks		100%	100%	100%	100%		100%		
PCT1.15 CAMHS: % of referrals via A&E assessed with 24 hours		100%	100%	100%	100%		100%		
PCT1.14 CAMHS: % of non-urgent referrals assessed within 4 weeks		87%	94%	69.8%	90.3%		80.03%		

PI Status	
	Alert
	Warning
	OK
	Data Only

Long Term Trends	
	Improving
	No Change
	Getting Worse