

**To the Chair and Members of the
Health & Well Being Board**

PERFORMANCE REPORT Q1 2015-16

EXECUTIVE SUMMARY

1. A refreshed 'outcomes based accountability' (OBA) exercise was completed parallel to the refresh in the Health and Well-being strategy. The five outcome areas remain and specific indicators have been identified which will measure our progress towards these outcomes in 2015-16, shown below,

<p>OUTCOME 1: ALL DONCASTER RESIDENTS TO HAVE THE OPPORTUNITY TO BE A HEALTHY WEIGHT</p> <ul style="list-style-type: none"> • % of Children that are classified as overweight or Obese (Aged 4/5) • % of Children that are classified as overweight or Obese (Aged 10/11) • % of Adults Overweight or Obese • % of adults achieving at least 150 minutes of physical activity per week. 	<p>OUTCOME 2: ALL PEOPLE IN DONCASTER WHO USE ALCOHOL DO SO WITHIN SAFE LIMITS</p> <ul style="list-style-type: none"> • Numbers of people being screened for alcohol use and, where • Alcohol-related attendance at A&E (per 1000 pop) appropriate, receiving brief advice • Alcohol-related violent crime per 1000 pop (2015/16 YTD Only) • Alcohol related admissions to hospital
<p>OUTCOME 3: FAMILIES WHO ARE IDENTIFIED AS MEETING THE ELIGIBILITY CRITERIA IN THE EXPANDED STRONGER FAMILIES PROGRAMME SEE SIGNIFICANT AND SUSTAINED IMPROVEMENT ACROSS ALL IDENTIFIED ISSUES.</p> <ul style="list-style-type: none"> • Number of Families Identified as part of the Phase 2 Stronger Families • Number of families achieving positive outcomes through the Programme 	<p>OUTCOME 5: IMPROVE THE MENTAL HEALTH AND WELL-BEING OF THE PEOPLE OF DONCASTER ENSURES A FOCUS IS PUT ON PREVENTIVE SERVICES AND THE PROMOTION OF WELL-BEING FOR PEOPLE OF ALL AGE'S ACCESS TO EFFECTIVE SERVICES AND PROMOTES SUSTAINED RECOVERY.</p> <ul style="list-style-type: none"> • Proportion of adults in contact with secondary mental health services in paid employment • Proportion of adults in contact with secondary mental health services living independently, with or without support • Proportion of People Completing Treatment and Moving to Recovery • % of patients with agreed care pathway & treatment plans
<p>OUTCOME 4: PEOPLE IN DONCASTER WITH DEMENTIA AND THEIR CARERS WILL BE SUPPORTED TO LIVE WELL. DONCASTER PEOPLE UNDERSTAND HOW THEY CAN REDUCE THE RISKS ASSOCIATED WITH DEMENTIA AND ARE AWARE OF THE BENEFITS OF AN EARLY DIAGNOSIS</p> <ul style="list-style-type: none"> • Dementia Diagnosis Rate (%) • Number of 4hr RDaSH Emergency responses for people with dementia • Reduce the number of Hospital Admissions (DRI) for people with • Length of stay of people with Dementia in an acute setting (average days) • Hospital re-admissions within 30 days (DRI) for people with Dementia • Number of patients having any delayed discharges encountered at RDaSH • Attendances at A&E for people with dementia • Number of people with dementia being admitted from care homes to DRI • Number of Hospital deaths for patients with dementia • Unplanned episodes of Respite for people with Dementia • Proportion of People with dementia (receiving Social Care) living in the community • % of People with dementia accessing social care in the community with a Direct Payment • Proportion of referrals for Assistive Technology that are for people with Dementia 	

2. Further information and narrative around the performance is available in **Appendix A.**

EXEMPT REPORT

3. NA

RECOMMENDATIONS

4. The Board is asked to:-
- Note the performance against the key priorities
 - Agree that further in depth information will be provided on a rolling quarterly basis on the 5 outcome areas in this report starting in Q2 2015-16

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

5. Good Performance Management arrangements of the priorities set out in the Health and well-being strategy will ensure services improve and peoples experience in the health and well-being system is positive.

BACKGROUND

6. The Health and Well Being Board have chosen to use Outcomes Based Accountability (OBA) to support the delivery of improvement against the key priorities in the health and well-being strategy. *Appendix A* sets out the five outcomes and the main *indicators* associated with each. The OBA methodology moves away from targets for the whole population indicators and this is reflected in this report, instead the trend and direction of travel is the key success criteria.
7. We have introduced a basic forecast into some of the indicators contained within Appendix A which should help the board to assess if the direction of travel is acceptable and if not seek to understand the options and implications of such a trend. The forecast is a linear forecast and only used if there is an acceptable amount of data to base a forecast on. Furthermore if there have been any significant deviation within the period that may impact on the validity of a linear trend a forecast has not been made.
8. It would be sensible for the Board to consider further in depth information on each specific outcome on a rolling quarterly basis. This would allow the performance report to be considered but directly afterwards a further in depth presentation on one of the outcomes which would allow the board to gain a greater understanding of the area, ask specific questions of the lead officer and ensure greater accountability. The draft proposal would mean Outcome 1 (Obesity) would be considered in Q2 2015-16 and Outcome 2 (Alcohol) in Q3 2015-16 and would follow on accordingly.

OPTIONS CONSIDERED

9. NA

REASONS FOR RECOMMENDED OPTION

10. NA

IMPACT ON THE COUNCIL'S KEY PRIORITIES

11.

Priority	Implications
<p>We will support a strong economy where businesses can locate, grow and employ local people.</p> <ul style="list-style-type: none"><i>Mayoral Priority: Creating Jobs and Housing</i><i>Mayoral Priority: Be a strong voice for our veterans</i><i>Mayoral Priority: Protecting Doncaster's vital services</i>	

<p>We will help people to live safe, healthy, active and independent lives.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	<p>Reduce Obesity. Reduce Alcohol Misuse Dementia Mental Health</p>
<p>We will make Doncaster a better place to live, with cleaner, more sustainable communities.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Creating Jobs and Housing</i> • <i>Mayoral Priority: Safeguarding our Communities</i> • <i>Mayoral Priority: Bringing down the cost of living</i> 	
<p>We will support all families to thrive.</p> <ul style="list-style-type: none"> • <i>Mayoral Priority: Protecting Doncaster's vital services</i> 	<p>Stronger Families Programme</p>
<p>We will deliver modern value for money services.</p>	
<p>We will provide strong leadership and governance, working in partnership.</p>	

RISKS AND ASSUMPTIONS

12. NA

LEGAL IMPLICATIONS

13. There are no specific legal implications for this report.

FINANCIAL IMPLICATIONS

14. Any financial implications will be associated with specific indicator improvement and will be associated with separate reports as appropriate.

HUMAN RESOURCES IMPLICATIONS

15. There are no specific HR implications associated with this report.

EQUALITY IMPLICATIONS

16. There are no specific Equalities implications associated with this report. However specific programmes or projects aimed at improving performance and changing services will need to have a comprehensive analysis detailing the impacts on protected groups.

CONSULTATION

17. This report has significant implications in terms of the following:

Procurement		Crime & Disorder	
Human Resources		Human Rights & Equalities	
Buildings, Land and Occupiers		Environment & Sustainability	
ICT		Capital Programme	

BACKGROUND PAPERS

18. NA

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