

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE

18 DECEMBER 2013

2013/14 Q2 PERFORMANCE MONITORING

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Summary

This report summarised the performance of the Council's Key Measures of Success for July – September (Quarter 2) 2013/14 as set out in The Council Plan 2013/15. The following information is provided for each of the Council's four priorities and two values:

- Summary of key measures of success (performance indicators) including service comments
- Customer perception (Customer satisfaction - Tracker Survey: September 2013, and Customer satisfaction measurement at point of contact (GovMetric ☺☹☹): September 2013
- Benchmarking information - where available - how our performance compares with other authorities

Benchmarking

Comparative information was included in the previous Q1 report for the first time. Where there has been no change to the data, this will not be reported again until the end of year Q4 report. Meanwhile, some new comparative information relating to Finance and Adult Social Care services is included in this report for the first time.

Medway compares favourably (top/mid quartile) with its benchmarking partners on the majority of these new benchmarking indicators.

1. Budget and Policy Framework

- 1.1 This report summarises the performance of the Council's Key Measures of Success for Q2 2013/14 as set out in The Council Plan 2013/15.

2. Background

- 2.1 This report sets out the performance summary against the council's four priorities and two values:

Medway's Priorities

- Adults maintain their independence and live healthy lives
- Children and young people have the best start in life in Medway
- Everyone benefiting from regeneration
- Safe, clean and green Medway

Medway's Values

- Putting our customers at the centre of everything we do
- Giving value for money

- 2.2 It focuses on how we have performed against targets, and compares current performance against both the previous quarter (short trend), and also the average data for the previous 4 quarters (long trend).

- 2.3 Detailed background information supporting this report can be found at:

Appendix 1 Performance tables – detailed reports on 13 key measures

3. Summary of performance

3.1 Where we performed well in Quarter 2 2013/2014

There are 13 HASC O&S key measures of success for that are monitored to assess the delivery of the Council Plan. Not all of these measures have been reported for Q2 resulting in the differences in the number of measures outlined in the summary below. There are various reasons for this, including new indicators that have no historical data to compare against, indicators that are not reported each quarter and indicators where the data has not been available by the reporting deadline. Please note NI 123 data is reported one quarter in arrears due to data lag.

- 6 out of 10 Council Plan Key measures of success where we have set targets and report on a quarterly basis are achieving target. This compares with 4 out of 9 in Quarter 1 2013/14 and the same figure in Q4 2012/13.
- 4 out of 11 of Key measures of success improved over the short term (compared with the previous quarter, where comparative data is available). This compares with 2 out of 7 for Quarter 1 2013/14.
- 2 out of 10 Key measures of success improved over the long term (compared with average performance over previous four quarters). This compares with 2

out of 7 of Key measures of success in the last quarter, which had improved over the long term.

- 86% (149/173) were satisfied with their phone contact with Medway Council (GovMetric – Sept 2013)
- 64% (1,366/2,142, GovMetric – Sept 2013) were satisfied with their face to face contact
- 62.5% (309/494) of complaints were dealt with within 10 working days

3.2 **Where we compared well with other authorities (top quartile or equivalent)**

- Customer satisfaction on telephone contact
- The proportion of people who use services who say that those services have made them feel safe and secure (Adult Social Care)

3.3 **Where our performance is average compared with other authorities (mid quartiles or equivalent)**

- Customer satisfaction on web contact
- Customer satisfaction on face to face contact
- Satisfaction with social care services for older and disabled people
- Satisfaction with social care services for carers
- The proportion of people who use services who feel safe (Adult Social Care)
- Social care clients receiving Self Directed Support (Adult Social Care)



3.4 **Where we did not perform well in Quarter 2 2013/14;**

- 3 out of 10 Key measures of success were significantly below target, compared to 5 out of 9 in Quarter 1.
- 6 out of 11 Key measures of success have decreased in performance over the short term (compared with the previous quarter), compared with 4 out of 7 in Quarter 1.
- 8 out of 10 Key measures of success have decreased in performance in the long term (compared with average performance over previous four quarters), compared with 4 out of 7 in Quarter 1.

4. **Adults maintain their independence and live healthy lives**

4.1 **Customer Perception**

Percentage of respondents who agree that Medway's services enable adults to maintain their independence and live healthy lives.

| Q2 13/14 (%) | Q1 13/14 (%) | Q2 12/13 (%) | Short Trend | Long Trend |
|--------------|--------------|--------------|---|---|
| 58 | 48 | 55 |  |  |

Source: Quarterly Tracker. Short Trend: Comp with previous quarter. Long Trend: Comparison with same period previous year.

4.2 Key measures of success - Summary

Details of the 8 key measures of success for this Council priority are included in Appendix 1.

Of the 8 measures of success for this council priority we track performance on 7 on a quarterly basis. We do not set a target for ASC07 (Number of acute delayed transfers of care (local monitoring)), but do monitor our performance over time.

- 4 out of 7 measures of success have achieved/exceeded target
- 3 out of 8 measures have improved since last quarter
- 2 out of 8 measures have improved compared with the average of the previous four quarters

Service Comments

4.3 Linked service centres for older people

The last two linked service centres formally transferred from the council to Agincare on 1st September 2013. The transfer went smoothly, with no adverse impact on service delivery and the quality of service for residents of the two homes.

4.4 Supporting the transition of children with special needs to adult services

The statement of purposes for the Napier Unit and Birling Avenue has been changed to accept young adults from 16 onwards to support a better transition to adult services.

4.5 Local Healthwatch

The local Healthwatch service has been formally launched across Medway. The website has been launched and the performance of the provider is being monitored.

4.6 Frameworki

The decision was taken to defer the Go Live date for Adult Social Care migration due to the intricacies of the financial modules. With payments being made of £38 million per annum and charges to Service Users of £11.5 million per annum, it is essential that these areas are correct. Several migrations of Case Management data have been made from CareDirector to Frameworki and User Acceptance Testing found minimal errors, which have since been rectified. Frameworki went live for adults on 2 December.

4.7 Other Comments

The Carers Support Team continue to work with Adult Social Care teams to promote the take up of carers' assessments and reviews and all teams assessed more carers in Q2 than in Q1

4.8 Public Health


Healthy lifestyles programmes, which promote healthy weight and increased physical activity, continue to perform well, with high demand for services via GP referrals and demonstrate good outcomes. The network of health walks is thriving, with increased demand for volunteers to lead community walks.

Maintaining our good rate of smoking quits is challenging, in line with national trends. Proposals to give this service a High Street presence are moving forward, which will help to build on the increase in referrals generating by the Stoptober campaign.

4.9 How our performance compares with other authorities


Our benchmarking summary has referred to the Unitary Place Benchmarking group which includes 55 unitary authorities.

ASC01 % Satisfaction with social care services for older and disabled people

| Medway 12-13 | CIPFA Family Average | CIPFA Family Place | England Average | Medway 11-12 | Trend |
|--------------|----------------------|--------------------|-----------------|--------------|---|
| 62.7 | 64.4 | 11/16 | 63.7 | 60.8 |  |


Source: Adult Social Care Survey - Health and Social Care Information Centre (ASCOF 3A - Percentage of adults using services who are satisfied with the care and support they receive) provisional data- based on 1st cut

ASC02 % Satisfaction with social care services for carers

| Medway 12-13 | CIPFA Family Average | CIPFA Family Place | England Average | Medway 11-12 | Trend |
|--------------|----------------------|--------------------|-----------------|--------------|---|
| 43.7 | 44.7 | 10/16 | 42.7 | - |  |

Source: Carer Survey - Health and Social Care Information Centre (ASCOF 3B Overall satisfaction of carers with social services, expressed as a percentage) provisional data- based on 1st cut

ASC03 The proportion of people who use services who feel safe

| Medway 12-13 | CIPFA Family Average | CIPFA Family Place | England Average | Medway 11-12 | Trend |
|--------------|----------------------|--------------------|-----------------|--------------|---|
| 65.8 | 64.3 | 6/16 | 65.0 | 63.0 |  |

Source: Adult Social Care Survey - Health and Social Care Information Centre (ASCOF 4A The proportion of people who use services who feel safe, expressed as a percentage) provisional data based on 1st cut

ASC04 The proportion of people who use services who say that those services have made them feel safe and secure

| Medway 12-13 | CIPFA Family Average | CIPFA Family Place | England Average | Medway 11-12 | Trend |
|--------------|----------------------|--------------------|-----------------|--------------|-------|
| 83.9 | 75.3 | 4/16 | 77.9 | 86.9 | ↓ |

Source: Adult Social Care Survey - Health and Social Care Information Centre (ASCOF 4B The percentage of people who use services who say that those services have made them feel safe and secure) provisional data based on 1st cut

ASC06 Social care clients receiving Self Directed Support

| Medway 12-13 | CIPFA Family Average | CIPFA Family Place | England Average | Medway 11-12 | Trend |
|--------------|----------------------|--------------------|-----------------|--------------|-------|
| 56.4 | 53.1 | 8/16 | 55.6 | 42.5 | ↑ |

Source: RAP return - Health and Social Care Information Centre (ASCOF 1Ci Number of adults, older people and carers receiving self-directed support in the year to 31March as a percentage of all clients receiving community based services and carers receiving carer specific services) provisional data based on 1st cut

5. Other priorities

5.1 Key measures of success - Summary

There are 5 HASC O&S key measures of success, which sit across the 3 other Council Priorities. Details of the 5 key measures of success for this Council priority are included in Appendix 1.

- 5.2 Of the 5 measures of success for this council priority we track performance on 3 on a quarterly basis. We do not set a target for ASC09 (Percentage of adult safeguarding referrals where domestic abuse is a factor) but do monitor our performance over time. The data for PH4 (NEW % of drug and alcohol misusers successfully complete treatment) is not available for this quarter due to changes in national data sets. Further detail on this is available in Appendix 1.

2 out of 3 measures of success have achieved/exceeded target

1 out of 3 measures have improved since last quarter

0 out of 2 measures have improved compared with the average of the previous four quarters

Service Comments

- 5.3 The delegation of authority to KCC for commissioning of drug and alcohol services has now been signed, which will allow recommissioning of treatment services to proceed. These arrangements will provide us with an opportunity to make a significant improvement in outcomes for these services.
- 5.4 The Council through its Joint Health and Well-being Strategy and Local Transport Plan aims to contribute to better health by encouraging walking and cycling. During this quarter, works commenced on installing controlled crossings for cyclists and pedestrians on Wood Street and Dock Road together with associated cycle paths. A Draft Cycle Action Plan has been produced and will be subject to consultation in Quarter 3.

5.5 **Project – Sporting Legacy**

The Medway Sporting Legacy will provide the blueprint for the development of sporting initiatives across Medway for future years. It covers the breadth of interests and abilities, from helping residents to start participating right through to the delivery of international sporting events.

The legacy document was officially launched at the Medway Mile on July 26 and sets out the vast range of activities being delivered by the council and partners to create a meaningful legacy from the London 2012 Olympic and Paralympic Games.

5.6 **On Your Marks**

A number of initiatives to encourage Medway residents to either take up exercise or return to exercise have been developed under the On Your Marks brand. Programmes range from sports centre activities to dance classes to community clubs and cover the age spectrum or 16-80 years.

The programme is funded by Public Health and commenced in May. More than 200 customers have taken part in the pilot projects and, when surveyed, 97% of respondents said they were more active or considerably more active as a result of the On Your Marks classes.

The programme is now being expanded with the introduction of Mums and Babies classes, initiatives linked to Medway's active retirement associations, and the launch in September of parkrun, a free weekly run being held at the Great Lines Heritage Park. The first run on 28 September attracted 144 runners and walkers, the highest number of participants for a launch parkrun event anywhere in Kent.

5.7 **Festival of Sport**

Medway's biggest-ever Festival of Sport started in May and ran for ten weeks with over 50 events, ranging from schools competitions to new events including the Medway 10K and Medway Masters football tournament. 22,323 participants took part culminating in the annual Medway Mile at Rochester Cathedral, with a capacity 3,000 participants taking part and many more turning up to enjoy the evening's fun which culminated in a spectacular fireworks display.

5.8 **Project – Enjoy Medway**

The activities described above at points 5.5-5.7 support this project.

5.9 **How our performance compares with other authorities**

No new comparative information this quarter.

6. Values 1: Putting our customers at the centre of everything we do

6.1 Customer Perception

Percentage of respondents who agree with the following statements which reflect how Medway put its customers at the centre of everything we do.

Provide high quality services

| Q2 13/14 (%) | Q1 13/14 (%) | Q2 12/13 (%) | Short Trend | Long Trend |
|--------------|--------------|--------------|-------------|------------|
| 67 | 57 | 63 | ↑ | ↑ |

Source: Quarterly Tracker. Short Trend: Comp with previous quarter. Long Trend: Comparison with same period previous year.

Acts on concerns of local residents

| Q2 13/14 (%) | Q1 13/14 (%) | Q2 12/13 (%) | Short Trend | Long Trend |
|--------------|--------------|--------------|-------------|------------|
| 58 | 50 | 54 | ↑ | ↑ |

Source: Quarterly Tracker. Short Trend: Comp with previous quarter. Long Trend: Comparison with same period previous year.

Talk positively with family about Medway Council

| Q2 13/14 (%) | Q1 13/14 (%) | Q2 12/13 (%) | Short Trend | Long Trend |
|--------------|--------------|--------------|-------------|------------|
| 45 | 42 | 43 | ↑ | ↑ |

Source: Quarterly Tracker. Short Trend: Comp with previous quarter. Long Trend: Comparison with same period previous year.

Satisfied with overall telephone contact

| Sept 2013 (%) | April 2013 (%) | July 2012 (%) | Short Trend | Long Trend |
|---------------|----------------|---------------|-------------|------------|
| 86 (149/173) | 92 (373/405) | N/A | ↓ | N/A |

Source: GovMetric. Short Trend: Comp. with previous quarter. Note: revs & bens and switchboard calls not measured

Satisfied with face to face contact

| Sept 2013 (%) | April 2013 (%) | July 2012 (%) | Short Trend | Long Trend |
|---------------|----------------|---------------|-------------|------------|
| 64(1366/2143) | 65 (1507/2321) | N/A | ↓ | N/A |

Source: GovMetric. Short Trend: Comp. with previous quarter

Satisfied with web contact

| Sept 2013 (%) | April 2013 (%) | July 2012 (%) | Short Trend | Long Trend |
|---------------|----------------|---------------|-------------|------------|
| 47 (209/449) | 52 (295/572) | N/A | ↓ | N/A |

Source: GovMetric. Short Trend: Comp. with previous quarter

6.2 How our performance compares with other authorities

- We participate in a benchmarking group comprising 70 authorities who all subscribe to the GovMetric service in England.
- We were in the medium-to-high quartile for customer satisfaction on web contact in September 2013. (Source: GovMetric)
- We were in the medium-to-low quartile for customer satisfaction on face to face contact in September 2013 (Source: GovMetric)
- We were in the top-quartile for customer satisfaction on telephone contact in September 2013 (Source: GovMetric)

6.3 Complaints (Q2 Performance)

| | |
|---|-------|
| Total number of complaints received | 508 |
| Total number of cases closed | 494 |
| Total number of cases dealt with within 10 days | 309 |
| % of cases dealt with within 10 days | 62.5% |



6.4 Service Comments

Although the 10-day turnaround time has improved each month between July and September, the August and September achievement was below the Q.1 average of 65%, dipping the Q.2 average to 62.5%. It was encouraging that the September turnaround time was 73%. As said at Q.1, we remain some way from the Council target of 95%, and until the backlog is cleared and services are able to improve their response times we cannot attain this level of performance in the current financial year.

A breakdown of all live cases by service area has been shared with services, seeking cooperation from Service Managers to examine performance in their own areas. That data was shared at the end of September so this exercise would not have yet impacted on performance improvement. That data showed that complaints were spread evenly across services, with only 3 Service Managers having more than 5 live complaints in their area. The information sharing exercise will be repeated at the end of October. Discussions with service managers are continuing to improve performance.

7. Values 2: Giving value for money

7.1 Customer Perception

| Q2 13/14 (%) | Q1 13/14 (%) | Q2 12/13 (%) | Short Trend | Long Trend |
|--------------|--------------|--------------|---|---|
| 68 | 61 | 63 |  |  |

Source: Quarterly Tracker. Short Trend: Comp with previous quarter. Long Trend: Comparison with same period previous year.

7.2 How we compare with other authorities

2013/14 Central Government Grant Settlement per capita

| Medway (value) | Family Average (value) | Family Maximum (value) | Family Minimum (value) | Family Place |
|----------------|------------------------|------------------------|------------------------|--------------|
| £398.00 | £463.37 | £640.69 | £275.25 | 13/16 |

Source: CIPFA Council Tax Demands and Precepts Statistics 2013-14. Comparator group – Nearest Neighbour.

Cost of Band D Council Tax (inc. precepts)

| Medway (value) | Family Average (value) | Family Maximum (value) | Family Minimum (value) | Family Place |
|----------------|------------------------|------------------------|------------------------|--------------|
| £1,146.01 | £1,219.45 | £1,412.95 | £1,124.64 | 13/16 |

Source: CIPFA Council Tax Demands and Precepts Statistics 2013-14. Comparator group – Nearest Neighbour.

8 Risk management

- 8.8 Risk helps to deliver performance improvement and is at the core of decision-making, business planning, managing change and innovation. It is practised at both management and service delivery level and enables the effective use of resources, secures the assets of the organisation and its continued financial and organisational well-being.
- 8.9 The purpose of the Council Plan performance monitoring reports during the year is to enable managers and members to manage the key risks identified in delivering priorities.

9 Financial and legal implications

- 9.1 There are no finance or legal implications arising from this report.

10 Recommendations

- 10.1 It is recommended that members consider the second quarter performance against the Key Measures of Success used to monitor progress against the Council Plan 2013/15.

Lead officer contact

Anthony Lewis, Corporate Performance and Intelligence Manager, Gun Wharf, ext.2092










Background papers

Council Plan 2013/15

Appendix 1



Council Plan Monitoring - Q2 2013/14









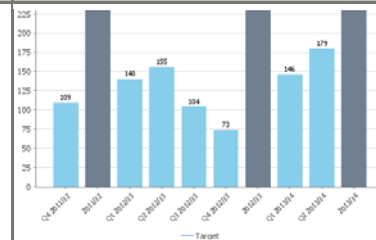
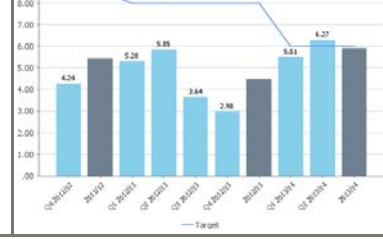
| PI Status | Trend Arrows | Success is |
|---|---|---|
|  This PI is significantly below target |  The performance of this PI has improved |  Higher figures are better |
|  This PI is slightly below target |  The performance of this PI has worsened |  Lower figures are better |
|  This PI has met or exceeded the target |  The performance of this PI is static | N/A - Desired performance is neither too high nor too low |
|  This PI is data only. There is no target and is provided for reference only. | The long trend measures average performance over the previous four quarters | |
| N/A – Rating not appropriate / possible | The short trend measures performance since the previous quarter | |

1.0 Adults maintain their independence and live healthy lives

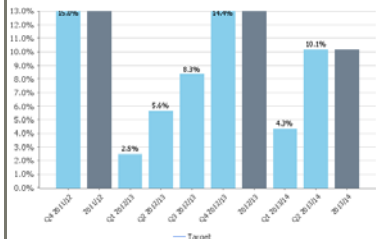
1.1 Ensure older people and disabled adults are safe & supported

| Code | Short Name | Success is |
|-------|--|---|
| ASC07 | Number of acute delayed transfers of care (local monitoring) |  |
| ASC08 | Average rate of acute delayed transfers of care each week, per 100,000 population (local monitoring) |  |

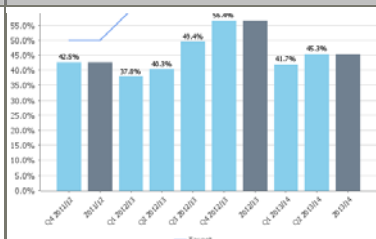
| 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | | 2013/14 |
|---------|---------|------------|------------|--------|---|---|---|---------|
| Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| 557 | 472 | 146 | 179 | - |  |  |  | - |
| 5.42 | 4.45 | 5.51 | 6.27 | 6.00 |  |  |  | 6.00 |

| Note | Chart |
|--|---|
| 09-Oct-2013 There were 179 delays in Q2. This is an increase on Q1 (146 delays) and reflects the issues that the hospital were experiencing during this time. None of these delays were attributable to Adult Social Care. |  |
| 09-Oct-2013 There were 179 delays in Q2. This is an increase on Q1 (146 delays) and reflects the issues that the hospital were experiencing during this time. None of these delays were attributable to Adult Social Care. |  |









1.2 We will support carers in the valuable work they do

| Code | Short Name | Success is | 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | 2013/14 | Note | Chart |
|-------|--|------------|---------|---------|------------|------------|--------|--------|-------------|------------|-------|---|
| | | | Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | | |
| ASC10 | Carers receiving an assessment or review | + | 15.0% | 14.4% | 4.3% | 10.1% | 10.0% | ✓ | ↑ | ↑ | 20.0% | <p>09-Oct-2013 Performance for Q2 is at 10.1% exceeding the Q2 target. This figure does not include data from the Wisdom Hospice but arrangements are being made that will allow this data to be included each quarter. The carers' support team continue to work with ASC teams to promote the take-up of carers assessments and reviews - all teams assessed more carers in Q2 than they did in Q1.</p>  |

1.3 Personalised services to meet older & disabled adults needs

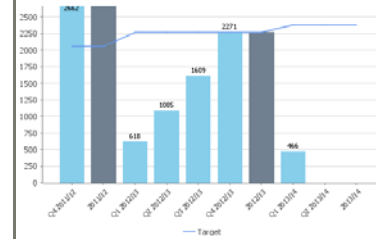
| Code | Short Name | Success is | 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | 2013/14 | Note | Chart |
|-------|---|------------|---------|---------|------------|------------|--------|--------|-------------|------------|-------|---|
| | | | Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | | |
| ASC06 | Social care clients receiving Self Directed Support | + | 42.5% | 56.4% | 41.7% | 45.3% | 33.0% | ✓ | ↑ | ↓ | 65.0% | <p>09-Nov-2013 The service continues to focus on ensuring all clients go through the self directed support process.</p>  |

1.4 We will promote and encourage healthy lifestyles for adults

| Code | Short Name | Success is | 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | 2013/14 | |
|--------|--|---|---------|---------|------------|------------|--------|---|---|---|--------|
| | | | Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| NI 123 | Rate of self-reported 4 week smoking quitters aged 16 or over |  | 2662 | 2271 | 466 | N/A | 1045 |  |  |  | 2378 |
| PB7 | Number of Medway Businesses taking part in the healthy workplace initiatives |  | | 30 | 13 | 20 | 20 |  |  |  | 40 |

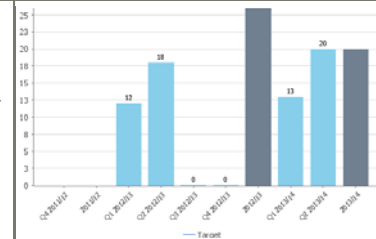
10-Oct-2013 There is a time lag in obtaining 4 week quit data as it has to be collected from a range of sources and outcomes are not always known in the same quarter that quit date is set. Nationally there is an downturn in smoking cessation activity of approximately 12%, which is it believed to be linked to the availability of e-cigarettes. The service are undertaking a range of promotional activities in order to ensure sufficient referrals are made to the service to achieve this target.

Please note status and trend is against Q1 performance due to time lag in obtaining data. Q1 target = 546



| Quarter | Value | Target |
|------------|-------|--------|
| Q4 2012/13 | 2662 | 546 |
| Q1 2013/14 | 466 | 546 |
| Q2 2013/14 | N/A | 546 |
| Q3 2013/14 | 1045 | 546 |
| Q4 2013/14 | 2378 | 546 |

10-Oct-2013 So far 20 workplaces have signed up to the Better Medway Healthy Workplace Programme. The co-ordinator post has recently been vacated and recruitment is underway, and future direction of the programme is being considered.



| Quarter | Value | Target |
|------------|-------|--------|
| Q4 2012/13 | 30 | 40 |
| Q1 2013/14 | 13 | 40 |
| Q2 2013/14 | 20 | 40 |
| Q3 2013/14 | 20 | 40 |
| Q4 2013/14 | 20 | 40 |


| Code | Short Name | Success is |
|------|--|------------|
| | | |
| PB8 | Number of people receiving support from a Health and Lifestyle Trainer | + |
| PH1 | Number of adults taking part in healthy weight and exercise referral interventions | + |




| 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | | 2013/14 |
|---------|---------|------------|------------|--------|--------|-------------|------------|---------|
| Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| | | | | | | | | |
| | 359 | 97 | 151 | 246 | ⬛ | ⬇️ | ⬇️ | 490 |
| 1030 | 1107 | 271 | 430 | 313 | ✅ | ⬆️ | ⬆️ | 1250 |

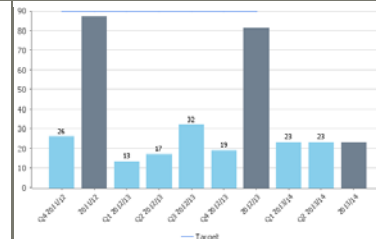
| Note | Chart |
|--|-------|
| 6 Businesses have agreed to support the Stoptober stop smoking campaign and a number of businesses have engaged in our first Mental Health First Aid course. | |
| 10-Oct-2013 There is a time lag in reporting data, so Q1 figure has been uplifted, and Q2 numbers will inevitably increase. However, numbers accessing this service are disappointingly low. The provider has developed an improvement plan to address low activity levels. Recommissioning of this contract will commence in Q3 and will consider whether there is a need for service redesign. | |
| 10-Oct-2013 283 adults have attended the exercise referral programme, and 145 have attended the weight management programme. | |

2.0 Children and young people have the best start in life in Medway

2.3 Promote and encourage healthy lifestyles


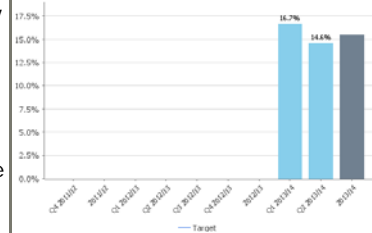
| Code | Short Name | Success is |
|------|---------------------------------------|---|
| PH3 | Numbers completing the MEND programme |  |

| 2011/ 12 | 2012/ 13 | Q1 2013/ 14 | Q2 2013/14 | | | | | 2013/ 14 |
|-------------|-------------|-------------------|------------|--------|---|---|---|-------------|
| Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| 87 | 81 | 23 | 23 | 23 |  |  |  | 100 |


| Note | Chart |
|--|---|
| <p>10-Oct-2013 The MEND programme is delivered in school terms, and so no programmes finished in Q2. A number of 10 and 12 week programmes commenced in September, to complete in December, so data will be available in Q3.</p> |  |

3.0 Safe, clean and green Medway

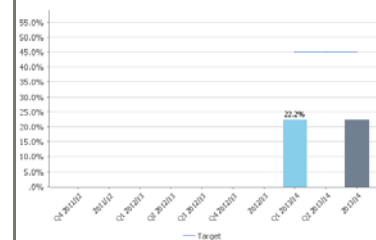
3.2 We will support victims of domestic abuse

| Code | Short Name | Success is | 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | | 2013/14 | | | | | | | | |
|------------|---|------------|--|---------|------------|------------|--------|---|-------------|------------|---------|--------|------------|------------|-------|------------|-------|------------|-------|
| | | | Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target | | | | | | | | |
| ASC09 | Percentage of adult safeguarding referrals where domestic abuse is a factor | N/A | | | 16.7 % | 14.6 % | - |  | N/A | N/A | - | | | | | | | | |
| | | | <p>07-Oct-2013 In Q2 there were 14 referrals, out of a total of 96, where domestic abuse was a factor. In seven cases the primary allegation was physical abuse, in three - emotional abuse, and in two - financial abuse. The alleged perpetrator in four cases was the victim's partner but in the majority of the cases (seven) this was another family member, usually an adult child or sibling. Six of the cases are being case managed by the Mental Health Social Work Team; two each by the Physical Disability and Learning Disability teams; three by Older Persons Care Management teams and one by the Hospital Care Management Team.</p> <p>Nine of the referrals were from Primary Health sources, including two from doctors. None of the cases were self-reported. Two of the alleged victims were male and one of these was a transgender victim. This male was also the only repeat victim.</p> | | | | | | | | | | | | | | | | |
| | | |  <table><caption>Percentage of adult safeguarding referrals where domestic abuse is a factor</caption><tr><th>Period</th><th>Percentage</th></tr><tr><td>Q2 2011/12</td><td>14.6%</td></tr><tr><td>Q2 2012/13</td><td>14.6%</td></tr><tr><td>Q2 2013/14</td><td>16.7%</td></tr></table> | | | | | | | | | Period | Percentage | Q2 2011/12 | 14.6% | Q2 2012/13 | 14.6% | Q2 2013/14 | 16.7% |
| Period | Percentage | | | | | | | | | | | | | | | | | | |
| Q2 2011/12 | 14.6% | | | | | | | | | | | | | | | | | | |
| Q2 2012/13 | 14.6% | | | | | | | | | | | | | | | | | | |
| Q2 2013/14 | 16.7% | | | | | | | | | | | | | | | | | | |

3.5 We will tackle and reduce the harm caused by alcohol and drugs

| Code | Short Name | Success is | 2011/12 | 2012/13 | Q1 2013/14 | Q2 2013/14 | | | | | 2013/14 |
|------|--|---|---------|---------|------------|------------|--------|--------|-------------|------------|---------|
| | | | Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| PH4 | NEW % of drug and alcohol misusers successfully complete treatment |  | | | 22.2 % | N/A | 45.0 % | N/A | N/A | N/A | 45.0% |



23-Oct-2013 We used to receive information on the number of successful completions as a proportion of those who leave treatment (i.e. a measure of how many clients leave treatment services in a planned way rather than drop out). However PHE is no longer providing this detail – we now receive data on the number who successfully complete as a proportion of all in treatment. This means the denominator is now significantly bigger so we will never achieve the 45% target set. This indicator will be reviewed in light of the national changes to outcome indicators.








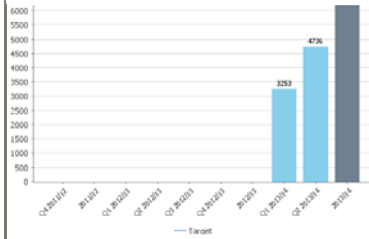
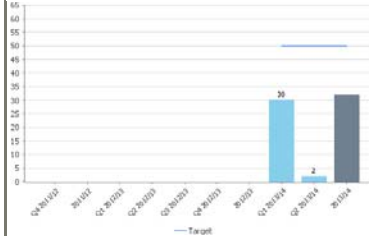
| Quarter | Value (%) | Target (%) |
|------------|-----------|------------|
| Q2 2010/11 | 0.0 | 45.0 |
| Q3 2010/11 | 0.0 | 45.0 |
| Q4 2010/11 | 0.0 | 45.0 |
| Q1 2011/12 | 0.0 | 45.0 |
| Q2 2011/12 | 0.0 | 45.0 |
| Q3 2011/12 | 0.0 | 45.0 |
| Q4 2011/12 | 0.0 | 45.0 |
| Q1 2012/13 | 0.0 | 45.0 |
| Q2 2012/13 | 0.0 | 45.0 |
| Q3 2012/13 | 0.0 | 45.0 |
| Q4 2012/13 | 0.0 | 45.0 |
| Q1 2013/14 | 0.0 | 45.0 |
| Q2 2013/14 | 22.2 | 45.0 |

4.0 Everybody travelling easily around Medway

4.5 We will encourage participation in active travel

| Code | Short Name | Success is |
|------|---|---|
| PH6 | NEW Number of walking hours attributable to the healthy walks programme |  |
| PH7 | NEW Number of trained volunteer walk and cycle leaders |  |

| 2011/ 12 | 2012/ 13 | Q1 2013/ 14 | Q2 2013/14 | | | | | 2013/ 14 |
|-------------|-------------|-------------------|------------|----------|---|---|---|-------------|
| Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| | | 325 3 | 473 6 | 100 0 |  |  | N/A | 10000 |
| | | 30 | 2 | 50 |  |  |  | 50 |

| Note | Chart |
|---|---|
| 10-Oct-2013 Free volunteer walks will continue throughout the autumn and winter months. |  |
| 10-Oct-2013 A marketing campaign has been underway to encourage uptake of training for walking and cycling leaders. |  |

5.0 Better for less

| Code | Short Name | Success is |
|------|---|------------|
| LX5 | Working days lost due to sickness absence | ⊖ |

| 2011/ 12 | 2012/ 13 | Q1 2013/ 14 | Q2 2013/14 | | | | | 2013/ 14 |
|-------------|-------------|-------------------|------------|--------|--------|----------------|---------------|-------------|
| Value | Value | Value | Value | Target | Status | Short Trend | Long Trend | Target |
| 7.43 | 7.44 | 1.83 | 3.27 | 4.00 | ✅ | ⬆️ | ⬇️ | 8.00 |

| Note | Chart | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|-------|--------|------------|------|------|------------|------|------|------------|------|------|------------|------|------|------------|------|------|------------|------|------|------------|------|------|
| 22-Oct-2013 Q2 figures confirmed, on track to achieve target, though sickness levels do tend to rise in winter months. | <table><caption>Working days lost due to sickness absence (Q2)</caption><thead><tr><th>Period</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q2 2012/13</td><td>7.43</td><td>8.00</td></tr><tr><td>Q2 2013/14</td><td>1.76</td><td>8.00</td></tr><tr><td>Q2 2014/15</td><td>3.27</td><td>8.00</td></tr><tr><td>Q2 2015/16</td><td>5.48</td><td>8.00</td></tr><tr><td>Q2 2016/17</td><td>7.44</td><td>8.00</td></tr><tr><td>Q2 2017/18</td><td>1.83</td><td>8.00</td></tr><tr><td>Q2 2018/19</td><td>3.27</td><td>8.00</td></tr></tbody></table> | Period | Value | Target | Q2 2012/13 | 7.43 | 8.00 | Q2 2013/14 | 1.76 | 8.00 | Q2 2014/15 | 3.27 | 8.00 | Q2 2015/16 | 5.48 | 8.00 | Q2 2016/17 | 7.44 | 8.00 | Q2 2017/18 | 1.83 | 8.00 | Q2 2018/19 | 3.27 | 8.00 |
| Period | Value | Target | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2012/13 | 7.43 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2013/14 | 1.76 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2014/15 | 3.27 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2015/16 | 5.48 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2016/17 | 7.44 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2017/18 | 1.83 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Q2 2018/19 | 3.27 | 8.00 | | | | | | | | | | | | | | | | | | | | | | | |