

# **HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE**

**8 APRIL 2014**

## **2013/14 Q3 PERFORMANCE MONITORING**

Report Coordinated by: Stephanie Goad AD Communications, Performance and Partnerships

Contributors: Children and Adults Directorate  
Public Health Directorate  
Corporate Performance and Intelligence Team

### **Summary**

This report summarises the performance of the Council's Key Measures of Success for October – December (Quarter 3) 2013/14 as set out in The Council Plan 2013/15. The following information is provided for the relevant Council priority for this committee:

- Summary of key measures of success (performance indicators) including service comments

## **1. Budget and Policy Framework**

- 1.1 This report summarises the performance of the Council's Key Measures of Success for Q3 2013/14 as set out in The Council Plan 2013/15.

## **2. Background**

- 2.1 This report sets out the performance summary against the relevant Council priority for this committee, and the Medway values:

### **Medway's Priorities**

- Adults maintain their independence and live healthy lives

### **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). For cumulative measures the short trend compares to the same period last year, and the long trend compares to the average of the same period for the past 2 years.

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 3 2013/2014

There are 13 quarterly key measures of success that are monitored to assess the delivery of the Council Plan. Not all of these measures have been reported for Q3 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 and PH4 data is reported one quarter in arrears due to data lag.

### 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.

Q3 13/14 (%)	Q2 13/14 (%)	Q3 12/13 (%)	Short Trend	Long Trend
55%	58	52		

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

#### Service Comments

#### 4.2 Supporting the transition of children with special needs to adult services

Agreement has been reached with Care Quality Commission (CQC) that young people from age 16 yrs can access Napier Unit and Birling Avenue (Adult Social Care services) to support their transition to adulthood. In the context of changes to NHS respite care for children and young people locally this creates additional capacity and choice and supports young people and their families to access high quality local services.

#### 4.3 Support for Carers

The Carers Support Team continues to work with Adult Social Care teams to promote the take up of carers' assessments and reviews. An audit of 400

cases resulted in us holding cases until full data was recorded in the new IT system to ensure integrity of performance reporting. This resulted in red rating for Q3 but as of 21 March 2014 performance is confirmed as 22.7%, before the Social Care Carer Assessments from the Hospice are added in at the year end.

The latest Carers' Survey has just reported – the survey was sent to 307 carers in Medway with a 42.7% return (131/307). Over the last year, Medway Council has seen an 6.1% increase in the proportion of carers who felt they had encouragement and support in their caring role; a 3% increase in the proportion of carers who reported that overall they were satisfied with social services and a 2.1% increase in the number of carers who felt involved and consulted in discussions regarding the person they care for. The full survey analysis will be shared more widely in Q4.

#### **4.4 Frameworki**

Frameworki for Adult Social Care went live in Q3, which means that the new social care electronic care records system is now operational across Children and Adult Social Care.

The migration of Adult Social Care cases and the first run of monthly processes, including Finance, have been successful as per test and preparation arrangements. Adult Social Care staff are receiving ongoing support and training (refresher) to ensure that they can use the new system well and that performance reporting from the system is developed to meet statutory returns which will be due in the near future.

#### **4.5 Adult Mental Health Social Work Service**

The service worked with around 450 people assessed with critical or substantial needs at any time during this quarter. In addition, it supported carers and families and carried out Approved Mental Health Professional (AMHP) assessments under the Mental Health Act 1983.

A Care Quality Commission (CQC) Mental Health Act 1983 monitoring visit to the social work team and mental health trust Kent and Medway NHS and Social Care Partnership Trust (KMPT) took place in Medway during Q3. The visit looked, in particular, at AMHP arrangements around assessment and detention and hospital admissions. There were no significant areas of concern raised for the Council by this inspection. The Inspectors recognised the refocus on social work by the team.

A review of AMHP out-of-hours services resulted in improved arrangements in sharing information with the social work team of out-of-hours AMHP actions and outcomes. A Memorandum of Understanding covering this aspect of partnership working has been agreed with KCC and KMPT.

A review of mental health services in Medway by a Councillor Scrutiny Review Group presented its report to this committee in December.

Recommendations were approved by Cabinet in January and a delivery plan is currently being developed with partners.

#### **4.6 Extra Care Housing (Flexicare Housing)**

The Medway-wide programme continued at pace in Q3 and the care contract for Medway's third scheme was awarded. The care staff are in place and have completed their induction in preparedness for the first residents moving in during Q4. Negotiations with housing partners has resulted in agreement being reached for the next schemes in Medway to include mixed tenure which will widen this choice to home owners, whilst retaining 100% allocations for Medway Council for all social housing units in the schemes.

#### **4.7 Public Health**

- 4.7.1 Nationally there is a downturn in smoking cessation activity of approximately 11%, which is believed to be linked to the availability of e-cigarettes. The service is undertaking promotional activities to generate referrals. Final data for 2012/13 show that Medway smoking quit rate per 100,000 population was 1075, which was considerably higher than the England rate (868) and the highest in South East Coast region (regional average 643).
- 4.7.2 This year's report Annual Public Health Report – The Health of School Aged Children - has now been published and has been well received.
- 4.7.3 A self-evaluation has been undertaken against the Healthy Child Programme (5-19 years) (HCP). The process was challenging due to the changes to systems since the HCP was written, the vagueness of the HCP in relation to provision and identifying who was leading on particular areas. However the identification of some gaps has already led to some new ways of working, for example linking school nursing more effectively into the Common Assessment Framework (CAF) process. The outcomes of this assessment will now be used to build the basis of a child health action plan, bringing together partners to co-ordinate this.
- 4.7.4 The ASSIST programme (a peer support programme to prevent smoking uptake in young people) started in September and 2-day Peer Supporter training has been completed with pupils from the Howard School and Hundred of Hoo Academy. Follow-up sessions are now underway in both schools as per the ASSIST Manual. Greenacre and Strood Academy began training in February.
- 4.7.5 The Health Checks Outreach service has now been operational for 6 months and has been successful in reaching the target client groups who do not attend GP Health Checks and in making onward referral to public health services to support lifestyle changes in healthy eating and physical activity. We have been shortlisted in the LGC Awards for our work on commissioning this service.

- 4.7.6 There has been a significant reduction in teenage pregnancy rates in Medway (now 38.8 per 1000), which is the lowest it has been since the National Teenage Pregnancy strategy was launched in 1999. This is an important determinant of health inequalities and remains a priority, with work on Personal, Social and Health Education (PSHE) and sex education in schools continuing alongside improvements in the quality of sexual health and contraception services.

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

No new comparative information this quarter.

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

**5.1 Customer Perception (Council wide)**

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

**6. Risk Management**

- 6.1 Risk Management 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.
- 6.2 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.

**7. Financial and legal implications**

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

**8. Recommendations**

- 9.1 It is recommended that Members consider third 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







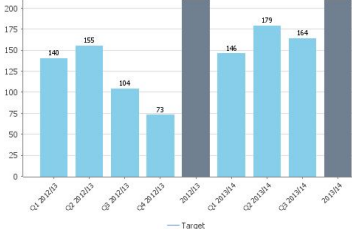




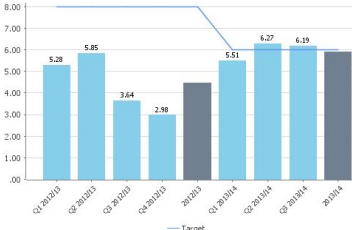
## Appendix 1

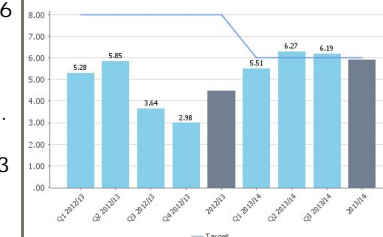
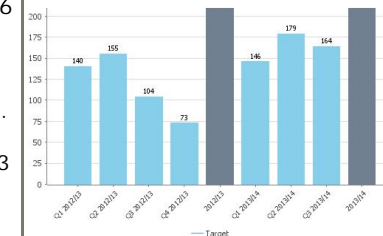
### Council Plan Monitoring - Q3 2013/14



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	





## 1.1 Ensure older people and disabled adults are safe & supported

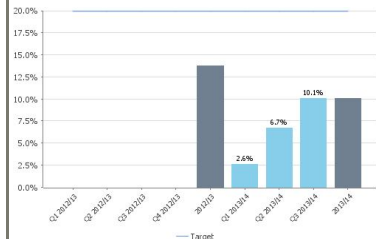
Code	Short Name	Success is	2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target	
ASC07	Number of acute delayed transfers of care (local monitoring)		472	146	179	164	-				-	<div><p>17-Jan-2014 The number of acute delays for Q3 is 164. This compares to 179 in Q2 and 146 in Q1. The per 100,000 population rate is at 6.19 - slightly above target but still below the comparator average. No acute delays were attributable to social care in Q3 and Medway ASC are working with KCC and NHS colleagues to assist them with their performance to this system-wide performance indicator.</p></div>
ASC08	Average rate of acute delayed transfers of care each week, per 100,000 population (local monitoring)		4.45	5.51	6.27	6.19	6.00				6.00	<div><p>17-Jan-2014 The number of acute delays for Q3 is 164. This compares to 179 in Q2 and 146 in Q1. The per 100,000 population rate is at 6.19 - slightly above target but still below the comparator average. No acute delays were attributable to social care in Q3 and Medway ASC are working with KCC and NHS colleagues to assist them with their performance to this system-wide performance indicator.</p></div>









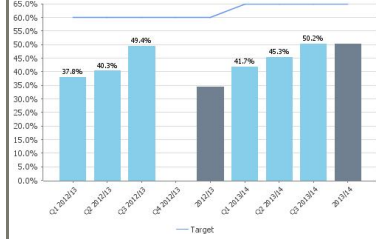
## 1.2 We will support carers in the valuable work they do

Code	Short Name	Success is	2012/ 13	Q1 2013/ 14	Q2 2013/ 14	Q3 2013/14				2013/ 14	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
ASC10	Carers receiving an assessment or review		13.7%	2.6%	6.7%	10.1%	15.0%				20.0%





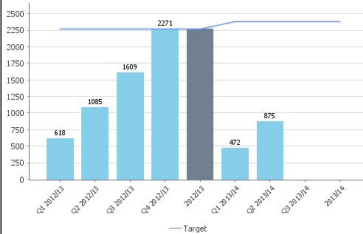
Note	Chart																		
17-Jan-2014 After good progress in Q2, the implementation of Frameworki and an audit of 400 cases in Q3 highlighted some process and data quality issues and these are actively being addressed in Q4. Shared best practices from other local authorities who perform well in this area has highlighted some new ways of working that are being taken forward.	 <table><caption>Carers receiving an assessment or review - Performance Data</caption><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q1 2013</td><td>13.7%</td><td>20.0%</td></tr><tr><td>Q2 2013</td><td>2.6%</td><td>20.0%</td></tr><tr><td>Q3 2013</td><td>6.7%</td><td>20.0%</td></tr><tr><td>Q4 2013</td><td>10.1%</td><td>20.0%</td></tr><tr><td>Q1 2014</td><td>15.0%</td><td>20.0%</td></tr></tbody></table>	Quarter	Value	Target	Q1 2013	13.7%	20.0%	Q2 2013	2.6%	20.0%	Q3 2013	6.7%	20.0%	Q4 2013	10.1%	20.0%	Q1 2014	15.0%	20.0%
Quarter	Value	Target																	
Q1 2013	13.7%	20.0%																	
Q2 2013	2.6%	20.0%																	
Q3 2013	6.7%	20.0%																	
Q4 2013	10.1%	20.0%																	
Q1 2014	15.0%	20.0%																	

## 1.3 Personalised services to meet older & disabled adults needs

Code	Short Name	Success is	2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14				2013/14	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
ASC06	Adult Social Care clients receiving Self Directed Support		34.3%	41.7%	45.3%	50.2%	50.0%				65.0%

Note	Chart																											
17-Jan-2014 The service continues to focus on ensuring that all eligible clients are offered self-directed support. Review of clients who are not accessing self-directed support will continue in Q4. ASC implemented a new social care system in Q3. Migrated SDS data is being audited to ensure that SDS data is accurate and complete.	 <table><caption>Adult Social Care clients receiving Self Directed Support - Performance Data</caption><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q1 2013</td><td>37.8%</td><td>65.0%</td></tr><tr><td>Q2 2013</td><td>40.3%</td><td>65.0%</td></tr><tr><td>Q3 2013</td><td>41.4%</td><td>65.0%</td></tr><tr><td>Q4 2013</td><td>34.3%</td><td>65.0%</td></tr><tr><td>Q1 2014</td><td>41.7%</td><td>65.0%</td></tr><tr><td>Q2 2014</td><td>45.3%</td><td>65.0%</td></tr><tr><td>Q3 2014</td><td>50.2%</td><td>65.0%</td></tr><tr><td>Q4 2014</td><td>50.0%</td><td>65.0%</td></tr></tbody></table>	Quarter	Value	Target	Q1 2013	37.8%	65.0%	Q2 2013	40.3%	65.0%	Q3 2013	41.4%	65.0%	Q4 2013	34.3%	65.0%	Q1 2014	41.7%	65.0%	Q2 2014	45.3%	65.0%	Q3 2014	50.2%	65.0%	Q4 2014	50.0%	65.0%
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Q2 2013	40.3%	65.0%																										
Q3 2013	41.4%	65.0%																										
Q4 2013	34.3%	65.0%																										
Q1 2014	41.7%	65.0%																										
Q2 2014	45.3%	65.0%																										
Q3 2014	50.2%	65.0%																										
Q4 2014	50.0%	65.0%																										

#### 1.4 We will promote and encourage healthy lifestyles for adults





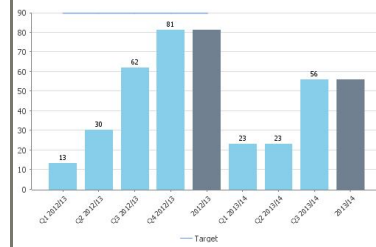
Code	Short Name	Success is	2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14																											
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target																											
NI 123	Rate of self-reported 4 week smoking quitters aged 16 or over		2271	472	875	N/A	-				2378																											
			<p>14-Jan-2014 Q2 is the most recent data. Nationally there is an downturn in smoking cessation activity of approximately 11%, which is it believed to be linked to the availability of e-cigarettes. The service are undertaking promotional activities to generate referrals. Final data for 2012/13 show that Medway quit rate per 100,000 population was 1075, which was considerably higher than the England rate (868) and the highest in South East Coast region (regional average 643). Since the introduction of the BabyClear project to reduce prevalence of smoking in pregnancy, the % of women known to be smokers at time of delivery has reduced from 18.97% (2012/13) to 16.26% (quarter 2). 07-Jan-2014 There has been a review of the programme to ensure that it is fit for purpose, and the recommendations of the review will be a key area for development in Q4.</p> <p><b>Please note status and trend is against Q2 performance due to time lag in obtaining data. Q2 target = 1045</b></p>																																			
			 <table><caption>Smoking Cessation Activity Data</caption><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q2 2013/13</td><td>618</td><td>1045</td></tr><tr><td>Q2 2013/14</td><td>1085</td><td>1045</td></tr><tr><td>Q2 2013/15</td><td>1689</td><td>1045</td></tr><tr><td>Q4 2013/15</td><td>2271</td><td>1045</td></tr><tr><td>2013/15</td><td>2271</td><td>1045</td></tr><tr><td>Q2 2014/14</td><td>472</td><td>1045</td></tr><tr><td>Q2 2014/15</td><td>875</td><td>1045</td></tr><tr><td>Q2 2014/16</td><td>-</td><td>1045</td></tr></tbody></table>									Quarter	Value	Target	Q2 2013/13	618	1045	Q2 2013/14	1085	1045	Q2 2013/15	1689	1045	Q4 2013/15	2271	1045	2013/15	2271	1045	Q2 2014/14	472	1045	Q2 2014/15	875	1045	Q2 2014/16	-	1045
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Q2 2014/16	-	1045																																				

Code	Short Name	Success is
PB7	Number of Medway Businesses taking part in the healthy workplace initiatives	⊕
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	⊕

2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
30	13	20	33	30	✓	↑	↑	40
359	102	181	259	368	⛔	↑	↑	490
1107	271	430	357	313	✓	↓	↑	1250

Note	Chart																														
14-Jan-2014 There has been a review of the programme to ensure that it is fit for purpose, and the recommendations of the review will be a key area for development in Q4.	<table><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q1 2013</td><td>12</td><td>36</td></tr><tr><td>Q2 2013</td><td>30</td><td>36</td></tr><tr><td>Q3 2013</td><td>30</td><td>36</td></tr><tr><td>Q4 2013</td><td>30</td><td>37</td></tr><tr><td>2013</td><td>30</td><td>37</td></tr><tr><td>Q1 2014</td><td>13</td><td>40</td></tr><tr><td>Q2 2014</td><td>20</td><td>40</td></tr><tr><td>Q3 2014</td><td>33</td><td>40</td></tr><tr><td>2014</td><td>33</td><td>40</td></tr></tbody></table>	Quarter	Value	Target	Q1 2013	12	36	Q2 2013	30	36	Q3 2013	30	36	Q4 2013	30	37	2013	30	37	Q1 2014	13	40	Q2 2014	20	40	Q3 2014	33	40	2014	33	40
Quarter	Value	Target																													
Q1 2013	12	36																													
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2013	30	37																													
Q1 2014	13	40																													
Q2 2014	20	40																													
Q3 2014	33	40																													
2014	33	40																													
14-Jan-2014 There is a time lag in reporting data, so Q3 figure is likely to be understated. Numbers accessing the service have been slowly increasing over the length of the contract, but remain below target. Recommissioning intentions for this contract are currently being considered.	<table><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q1 2013</td><td>106</td><td>490</td></tr><tr><td>Q2 2013</td><td>172</td><td>490</td></tr><tr><td>Q3 2013</td><td>230</td><td>490</td></tr><tr><td>Q4 2013</td><td>359</td><td>490</td></tr><tr><td>2013</td><td>359</td><td>490</td></tr><tr><td>Q1 2014</td><td>102</td><td>490</td></tr><tr><td>Q2 2014</td><td>181</td><td>490</td></tr><tr><td>Q3 2014</td><td>259</td><td>490</td></tr><tr><td>2014</td><td>259</td><td>490</td></tr></tbody></table>	Quarter	Value	Target	Q1 2013	106	490	Q2 2013	172	490	Q3 2013	230	490	Q4 2013	359	490	2013	359	490	Q1 2014	102	490	Q2 2014	181	490	Q3 2014	259	490	2014	259	490
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Q3 2014	259	490																													
2014	259	490																													
09-Jan-2014 In quarter 3, 357 people accessed the two services, with 272 attending exercise referral and 85 attending weight management services	<table><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q1 2013</td><td>284</td><td>1250</td></tr><tr><td>Q2 2013</td><td>203</td><td>1250</td></tr><tr><td>Q3 2013</td><td>307</td><td>1250</td></tr><tr><td>Q4 2013</td><td>313</td><td>1250</td></tr><tr><td>2013</td><td>490</td><td>1250</td></tr><tr><td>Q1 2014</td><td>271</td><td>1250</td></tr><tr><td>Q2 2014</td><td>430</td><td>1250</td></tr><tr><td>Q3 2014</td><td>357</td><td>1250</td></tr><tr><td>2014</td><td>490</td><td>1250</td></tr></tbody></table>	Quarter	Value	Target	Q1 2013	284	1250	Q2 2013	203	1250	Q3 2013	307	1250	Q4 2013	313	1250	2013	490	1250	Q1 2014	271	1250	Q2 2014	430	1250	Q3 2014	357	1250	2014	490	1250
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## 2.3 Promote and encourage healthy lifestyles

Code	Short Name	Success is	2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14				2013/14	Note	Chart
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend		
PH3	Numbers completing the MEND programme		81	23	23	56	65				100	<p>14-Jan-2014 The MEND programme has proved more difficult to recruit families to over the last two years. We are conducting a full review of our childhood obesity support programme offer. So far we have completed extensive analysis of the MEND programme data, with a Health Equity Audit (which generally has shown we have very fair access across the service for all groups, with some specific recommendations being taken forward by the team. We have also reviewed our programme outcomes for attending families) and comparing our outcome data to other national programmes (which has shown we have very good outcomes compared to other providers). This tells us that the programme is very effective once people are registered, but the challenge is getting families to commit and sign up. To identify and address the reasons for this we are undertaking an insight gathering task with parents, overweight children and potential referring health professionals which will be completed in September 2014. We are also piloting several</p> 


Code	Short Name	Success is

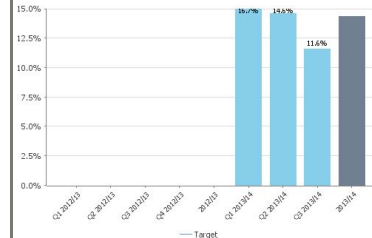
2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target

Note	Chart
different types of obesity support services to families, which are less intensive than the 10 week twice a week MEND programme. Early indications are that this is popular, however we need to assess the outcomes of the young people taking place to ensure it is delivering on the expected objectives (i.e. weight loss, lifestyle change)	

### 3.2 We will support victims of domestic abuse

Code	Short Name	Success is
ASC09	Percentage of adult safeguarding referrals where domestic abuse is a factor	N/A

2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
	16.7%	14.6%	11.6%	-		-	-	-


Note	Chart										
17-Jan-2014 In Q3 there were 8 referrals, out of a total of 69, where domestic abuse was a factor. In all but one case, this being financial abuse. Four of the cases are being case managed by the Mental Health Social Work Team; one by the Physical Disability and three by Older Persons Care Management teams. One of the referrals was from primary health, three from mental health staff, one from Police; two from private and voluntary sector and one of the cases was self-reported. One of the	 <table border="1"> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2013/14</td> <td>16.7%</td> </tr> <tr> <td>Q2 2013/14</td> <td>14.6%</td> </tr> <tr> <td>Q3 2013/14</td> <td>11.6%</td> </tr> <tr> <td>2013/14 Target</td> <td>11.6%</td> </tr> </tbody> </table>	Period	Value	Q1 2013/14	16.7%	Q2 2013/14	14.6%	Q3 2013/14	11.6%	2013/14 Target	11.6%
Period	Value										
Q1 2013/14	16.7%										
Q2 2013/14	14.6%										
Q3 2013/14	11.6%										
2013/14 Target	11.6%										



Code	Short Name	Success is

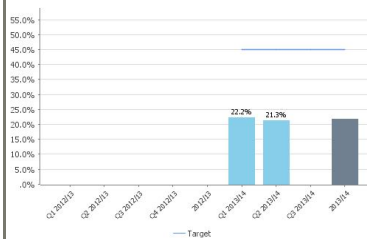
2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target

Note	Chart
alleged victims was male.	







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

Code	Short Name	Success is
PH4	% of drug and alcohol misusers successfully complete treatment	

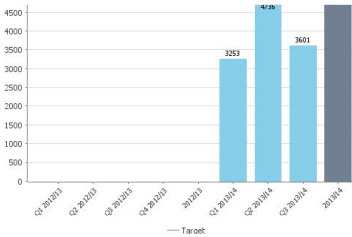
2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
	22.2%	21.3%	N/A	-			N/A	-

Note	Chart												
<p>14-Jan-2014 The most recent data are for Q2. Until recently data was received 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 change in indicator definition means that it is no longer appropriate to monitor against the original target.</p> <p><b>Please note trend is against Q2 performance due to time lag in obtaining data.</b></p>	 <table><caption>Performance Data</caption><thead><tr><th>Quarter</th><th>Value</th><th>Target</th></tr></thead><tbody><tr><td>Q2-2013/14</td><td>22.2%</td><td>45.0%</td></tr><tr><td>Q2-2014</td><td>21.3%</td><td>45.0%</td></tr><tr><td>Q3-2014</td><td>-</td><td>45.0%</td></tr></tbody></table>	Quarter	Value	Target	Q2-2013/14	22.2%	45.0%	Q2-2014	21.3%	45.0%	Q3-2014	-	45.0%
Quarter	Value	Target											
Q2-2013/14	22.2%	45.0%											
Q2-2014	21.3%	45.0%											
Q3-2014	-	45.0%											

#### 4.5 We will encourage participation in active travel

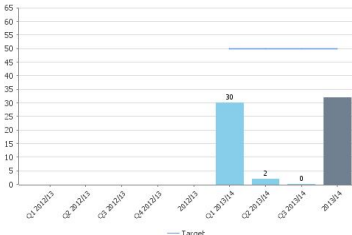
Code	Short Name	Success is	2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14				2013/14	
			Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
PH6	Number of walking hours attributable to the healthy walks programme			3253	4736	3601	2500			N/A	10000
PH7	Number of trained volunteer walk and cycle leaders			30	2	0	50			N/A	50

03-Jan-2014 3,601 walk hours were collated by all the walkers that attended the programme, with 356 brand new walkers registering with the programme for the first time this year




Quarter	Value
Q1 2013	0
Q2 2013	0
Q3 2013	0
Q4 2013	0
Q1 2014	3253
Q2 2014	4736
Q3 2014	3601
Target	10000

14-Jan-2014 We are behind track to achieve the annual target. A multi-platform communications strategy coordinated by the communications team, has not resulted in the volunteers that we initially aimed for. During quarter 3 we have reverted back to tried and trusted methods of face to face engagement with community groups, to try and generate interest in the training days. As a result, we have three training days (two for walking and one for cycling) scheduled in quarter 4 which we expect to recruit 18 people for, therefore meeting the annual target

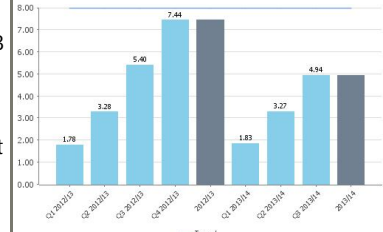


Quarter	Value
Q1 2013	0
Q2 2013	0
Q3 2013	0
Q4 2013	0
Q1 2014	30
Q2 2014	2
Q3 2014	0
Target	50

## 5.0 Better for less

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

2012/13	Q1 2013/14	Q2 2013/14	Q3 2013/14					2013/14
Value	Value	Value	Value	Target	Status	Short Trend	Long Trend	Target
7.44	1.83	3.27	4.94	6.00				6.00

Note	Chart																				
15-Jan-2014 With full Quarter 3 figures received the measure is still on track to achieve performance. The year to date performance is an improvement on the 5.40 figure reported in Q3 2012/13.	 <table border="1"> <caption>Working days lost due to sickness absence (Q1 to Q3)</caption> <thead> <tr> <th>Period</th> <th>Value</th> </tr> </thead> <tbody> <tr> <td>Q1 2012/13</td> <td>1.78</td> </tr> <tr> <td>Q2 2012/13</td> <td>3.28</td> </tr> <tr> <td>Q3 2012/13</td> <td>5.40</td> </tr> <tr> <td>Q4 2012/13</td> <td>7.44</td> </tr> <tr> <td>2013</td> <td>6.00</td> </tr> <tr> <td>Q1 2013/14</td> <td>1.83</td> </tr> <tr> <td>Q2 2013/14</td> <td>3.27</td> </tr> <tr> <td>Q3 2013/14</td> <td>4.94</td> </tr> <tr> <td>2014</td> <td>6.00</td> </tr> </tbody> </table>	Period	Value	Q1 2012/13	1.78	Q2 2012/13	3.28	Q3 2012/13	5.40	Q4 2012/13	7.44	2013	6.00	Q1 2013/14	1.83	Q2 2013/14	3.27	Q3 2013/14	4.94	2014	6.00
Period	Value																				
Q1 2012/13	1.78																				
Q2 2012/13	3.28																				
Q3 2012/13	5.40																				
Q4 2012/13	7.44																				
2013	6.00																				
Q1 2013/14	1.83																				
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Q3 2013/14	4.94																				
2014	6.00																				