

Board report line	2010/2011 Indicators	Indicator Number	Workstream	Lead	2009/10 Outturn	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	2010/11 outturn	Cumulative/Average/Actual data	Year end target	Direction compared to last year	Risk on Register
Strategic Objective: 1. Improving Health, Keeping Well																						
1a	Number of 4 week smoking quitters who attended NHS stop smoking services - cumulative	NI123 Care Quality Commission	Staying healthy	HE	Actual 1240 Plan 1005	Actual 51 Target 27	Actual 84 Target 47	Actual 164 Target 146	Actual 248 Target 247	Actual 341 Target 298	Actual 416 Target 440	Actual 507 Target 468	Actual 572 Target 519	Actual 679 Target 665	Actual 754 Target 715	Actual 847 Target 795	Prov actual 1118 Target 1016	Prov actual 1118 Target 1016	C	Number of quitters 1016	↓	
1b	Number of 4 week smoking quitters who attended NHS stop smoking services - cumulative (rate per 100,000 population)	WCC	Staying healthy	HE	838			Actual 110.8			Actual 281.1			Actual 458.8			Prov actual 756	Prov actual 756	C	767	↓	
1c.	Percentage of 15-24 year olds tested outside of GUM or screened in any setting for Chlamydia. (NB: only provisional quarterly figures available. Actuals at year end will be slightly higher).	VSB 13 Care Quality Commission NI 113	Staying healthy	DM	Prov. 18.5% Target 25%			Prov. 4.7% Target 8.8 %			Prov. 9.5% Target 16.8%			Prov. 14.0% Target 25.9%			Prov. 23% Target 35.0%	Prov. 23% Target 35.0%	C	35%	↑	✓
1d.	Breastfeeding at 6-8 weeks: recording (coverage)	VSB11 NI53	Staying healthy	JL	Actual 95% Target 90%			Actual 96.4% Target 95%			Actual 96.7% Target 95%			Actual 98.6% Target 95%			Actual 100% Target 95%	Actual 99% Target 95%	Ac	95.1%	↑	
1e.	Breastfeeding at 6-8 weeks: breastfeeding (prevalence)	VSB11 NI54	Staying healthy	JL	Actual 58% Target 45%			Actual 57.8% Target 49.1%			Actual 57.4% Target 49.1%			Actual 60.0% Target 49.1%			Actual 61.0% Target 49.1%	Actual 60.1% Target 49.1%	Av	49.1%	↑	
1f.	Proportion of people who spend at least 90% of their time on a stroke unit	VSA 14 WCC	Unplanned Care	CE	26.00%			54.69%			55.00%			44.80%			53.85%	53.85%	Av	83%	↑	
1g	Proportion of people who spend at least 90% of their time on a stroke unit - RUH	VSA 14	Unplanned Care	CE	25.5%	Actual 30.6% Plan 32%	Actual 35.1% Plan 35%	Actual 72% Plan 45%	Actual 58.1% Plan 50%	Actual 61.7% Plan 55%	Actual 73.5% Plan 60%	Actual 77.8% Plan 65%	Actual 71.0% Plan 70%	Actual 84.8% Plan 75%	Actual 67.9% Plan 80%	Actual 61.9% Plan 80%	Actual 80% Plan 80%	Actual 80% Plan 80%	Ac	80%	↑	✓
1h.	50% of higher risk TIA cases to be treated within 24 hours.	VSA 14	Unplanned Care	CE	20.93%			73.68%			62.50%			41.67%			80.00%	80.00%	Av	67%	↑	
1i.	All-age all cause mortality rates for men and women (2007-09)	(NI120) VSB 01	Staying Healthy	PS	2008/09 492.06													Actual 495.66	Ac	481	↓	
1j	Mortality rate per 100,000 (directly age standardised) from all circulatory diseases at ages under 75 (07-09)	(NI121) VSB 02 CQC National Priority/LAA	Staying healthy	PS	2008 46.26													Actual 46.97	Ac	46.04	↓	
1k	Mortality rate per 100,000 population under 75 from cancer (07-09)	(NI122) VSB 03	Staying healthy	PS	2008 97.22													Actual 98.96	Ac	97.44	↓	
1l	Healthy life expectancy at age 65	NI 137	Staying Healthy	PS	19.0m, 21.3f 05-07													19.3m, 21.4f 2007-09	Ac	15.3	↑	
1m	Improved life expectancy by 1 year by 2015 (Male)	WCC	Staying Healthy	PS	79.7													80.3 2007-09	Ac	80.1	↑	
1n	Improved life expectancy by 1 year by 2015 (Female)	WCC	Staying Healthy	PS	83.2													83.9 2007-09	Ac	83.5	↑	
1o	Reduced Health Inequalities by 10% by 2015 (Male)	WCC	Staying Healthy	PS	5.6													6.3 2007-09	Ac	5.4	↓	
1p	Reduced Health Inequalities by 10% by 2015 (Female)	WCC	Staying Healthy	PS	3.6													3.5 2007-10	Ac	3.5	↑	
1q	Coronary Heart Disease (CHD controlled blood pressure (to exceed current best in country by 2015	WCC	Primary Care	JG	89.5%	52.62%	61.30%	68.73%	74.42%	77.04%	79.93%	82.22%	84.52%	85.62%	86.22%	88.32%	89.88%	89.88%	Ac	90%	↑	
1r	Reduce deaths from Cardio Vascular Disease (CVD) by 10% by 2015	WCC	Staying Healthy	PS	56.2													46.97%		54.7	↑	
1s	To reduce the proportion of women who smoke at the time of delivery by 0.5% from the 2005/6 baseline (13.5%) by 2010/11.	DoH monitoring	Staying healthy	HE	10.40%													10.00%			↑	
1t	BMI measurements of children in reception and year 6 classes	WCC	Staying healthy	JL	13.40%													Known January 2012		12.50%		

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1u	Percentage of reception year children recorded as obese	WCC VSB09(12-14)	Staying healthy	JL	Actual 8.43% Plan 7.48%													Known January 2012		7.01%		
1v	Percentage of year 6 children recorded as obese	WCC VSB09(12-14)	Staying healthy	JL	Actual 16.7% Plan 12.5%													Known January 2012		12.00%		
1w	Rate of hospital admissions for alcohol related harm per 100,000 population	VSC26 NI39	Staying healthy	PA	1385 full yr. 339 Q4			Prov. Actual 385			Prov. Actual 397			Prov. Actual 396			Due September 2011	Due September 2011		366		
1x	No. of drug users in effective treatment. Effective treatment for all clients in contact with tier 3 or 4 services with a mortality start date who are retained in treatment for 12 or more weeks from their triage date or have a planned discharge	VSB14 NI40	Mental Health	CS	581			581			607			601			603	603	AC	594	↑	
1y	Suicide and Injury of undetermined Intent: mortality rate (2007-09)	VSB 04	Staying healthy	PS	5.6 (2006-08)													6.5		6 by 2009-11, known in early 2013	↑	
1z	Improving Health and Reducing Health Inequalities - Emotional health and well being and child and adolescent health services (CAMHS) (4 indicators can each score 1 to 4)	VSB12 NI50 NI51	Mental Health	LP	15															Not known		
1za	Percentage of women aged 47 to 49 and 71 to 73 offered screening for breast cancer within last 3 years	VSA09	Staying healthy	PS	N/A													0.00%				
1zb	Percentage of women receiving cervical cancer screening test results within two weeks	VSA15	Planned Care	HM	84.50%													99.70%			↑	
1zc	Percentage women aged 25-49 screened within 3.5 years and 50-64 screened within 5 years	CQC national priority	Staying healthy	PS	80.80%													80.20%			↓	
1zd	Guaranteed access to GUM clinic within 48 hrs of contacting a service	CQC Existing Commitment 09/10	Planned Care	HM	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	Ac	100%	↔	
1ze	Percentage of children aged 1 immunised for DTaP/IPV/HIB	VSB10	Staying healthy	CP & MF	95.6%			96.1%			97.1%			96.1%			94.7%	96.1%	Ac	97%	↑	
1zf	Percentage of children aged 2 immunised for PCV	VSB10	Staying healthy	CP & MF	90.3%			89.9%			92.6%			91.7%			91.0%	91.7%	Ac	95.1%	↑	
1zg	Percentage of children aged 2 immunised for Hib/MenC	VSB10	Staying healthy	CP & MF	91.2%			91.5%			92.6%			91.7%			91.2%	91.7%	Ac	95.1%	↑	
1zh	Percentage of children aged 5 immunised for DTaP/IPV/Hib	VSB10	Staying healthy	CP & MF	90.0%			91.6%			90.0%			89.7%			90.1%	90.1%	Ac	95.1%	↑	
1zi	Percentage of children aged 2 immunised for MMR	VSB10	Staying healthy	CP & MF	87.6%			88.4%			91.1%			90.3%			89.0%	90.3%	Ac	95.1%	↑	
1zj	Percentage of children aged 5 immunised for MMR	VSB10	Staying healthy	CP & MF	84.1%			83.6%			86.1%			84.5%			84.9%	84.5%	Ac	95.1%	↑	
1zk	Percentage of females aged 12-13 immunised for HPV	VSB10	Staying healthy	CP & MF	73.2%			73.20%										76.30%	Ac	90%	↑	
Strategic Objective: 2 Developing Independence and Choice																						
2a	Admissions of people to permanent residential and nursing care - people aged 65+ per 10,000 population	LAA Stretch (PAF C72)	Unplanned Care	SS	95	142	128	107	99	96	93	97	96	94	95	95	data not available	95	Ac	less than 60	↔	
2b	Adults aged 18-64 admitted on a permanent basis in the year to residential or nursing care per 10,000 population	C73	Unplanned Care	SS	1.3	3.2	3.2	2.5	2.4	2.1	1.8	1.5	1.3	1.4	1.5	1.3	data not available	1.3	Ac	less than 1.2	↔	
2c	People supported to live independently through social services (all ages). Excluding grant funded services.	NI 136	Unplanned Care	SS	1951	1755	1780	1790	1787	1812	1852	1864	1878	1897	1890	1808	1822	1822	Ac	more than 2800	↓	

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2c(2)	People supported to live independently through social services (all ages). This is an estimated total based on current figures above and 08/09 GFS figures	NI 136	Unplanned Care	SS	2486	2285	2310	2321	2317	2343	2382	2395	2409	2428	2420	2338	2353	2353	Ac	more than 2800	↓		
2d	Achieving independence for older people through rehabilitation/intermediate care	NI 125	Unplanned Care	CE	90%	87%	89%	90%	89%	89%	91%	92%	93%	93%	93%	94%	94%	94%	Ac	90%	↑		
2e.	Number of vulnerable people achieving independent living	NI 141	Unplanned Care	CE	70.60%			63.3%			67.6%			68.9%			75.00%	75.00%	Av	65%	↑		
2f	People with long-term conditions supported to be independent and in control of their condition	NI 124 VSC11 LAA	Unplanned Care	CE	83%	Annual GP survey														85%			
2g	The extent to which older people receive the support they need to live independently at home	NI 139 LAA	Unplanned Care	CE	2008 33.4%	No place survey taking place but question in Voicebox.																	
2h	End of life care - Proportion of all deaths that occur at home.	NI 129 WCC	Unplanned Care	ST	18.97%	23.2%	18.0%	24.2%	24.2%	21.2%	20.7%	21.4%	21.8%	22.2%	21.6%	24.0%	18.5%	21.9%		20%	↑		
2i	Number of vulnerable people who are supported to maintain independent living	NI 142	Unplanned Care	SS	98.2%			98.3%			97.3%			98.2%				98.4%		98.2%	↑		
2j	To reduce emergency admissions as a result of a fall in people aged 65+ by 150 per year by 2015	WCC	Unplanned Care	ST	994	60	73	62	66	52	74	69	51	78	57	47	63	752		957	↑		
Strategic Objective: 3 Improving Access to Services																							
3a	Timeliness of social care assessment.	NI 132	Long Term, End of Life, Older People	SS	90.90%	72.8%	74.4%	75.1%	75.5%	73.5%	74.0%	73.8%	73.7%	74.4%	76.0%	77.7%	79.3%	79.3%	Ac	more than 90%	↓		
3b	Timeliness of social care packages.	NI 133	Long Term, End of Life, Older People	SS	92.90%	90.2%	88.8%	89.0%	90.9%	89.3%	90.2%	90.6%	88.5%	89.0%	90.0%	90.1%	90.4%	90.4%	Ac	more than 95%	↓		
3c	All cancers: Subsequent treatment within 31 days - (PCT population)	VSA 11/12	Planned Care, Cancer and Maternity	HM	95.77% Surgery	100% Surgery	96.6% Surgery	96.3% Surgery	100% Surgery	96.2% Surgery	100% Surgery	100% Surgery	91.7% Surgery	92.6% Surgery	96.0% Surgery	95.7% Surgery	100% Surgery	96.9% Surgery	N	Surgery 94%	↑		
3c	All cancers: Subsequent treatment within 31 days - (PCT population)				97.14% Drug Treatment	100% Drug Treatment	100% Drug Treatment	100% Drug Treatment	100% Drug Treatment	93.3% Drug Treatment	100% Drug Treatment	100% Drug Treatment	93.3% Drug Treatment	100% Drug Treatment	93.3% Drug Treatment	100% Drug Treatment	97.9% Drug Treatment	100% Drug Treatment	100% Drug Treatment	98.8% Drug Treatment	N	Drug treatment 98%	↑
3d	All cancers: Overall treatment within 62 days - (PCT population) (original plan)	VSA 13	Planned Care, Cancer and Maternity	HM	86.67%	85.2%	97.1%	91.3%	90.9%	88.5%	85.7%	91.7%	85.0%	89.3%	96.0%	100.0%	89.7%	90.5%	Av	85%	↑		
3d	Treatment within 62 days for patients identified through screening programmes (PCT population)				96.55%	100.0%	No data available	100.0%	100.0%	100.0%	100.0%	75.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	97.1%	Av	90%	↔	
3d	Treatment within 62 days for patients identified through consultant upgrades (PCT population)				93.33%	100.0%	No data available	100.0%	100.0%	100.0%	No data available	100.0%	No data available	0.0%	100.0%	100.0%	No data available	93.3%	Av	90%	↔		
3e	All cancers: two week wait - (PCT population) (Original Plan)	Care Quality Commission	Planned Care, Cancer and Maternity	HM	94.40%	92.6%	97.4%	94.3%	93.1%	93.4%	96.6%	95.3%	92.8%	95.9%	90.0%	97.5%	93.2%	94.4%	Av	93%	↔		
3f	All cancers: Subsequent treatment within 31 days - PCT) (Original Plan)	VSA 11/12	Planned Care, Cancer and Maternity	HM	98.09%	97.8%	100.0%	98.8%	98.6%	98.7%	100.0%	98.9%	96.6%	100.0%	100.0%	100.0%	97.0%	98.8%		96%	↑		
3g	Subsequent treatment within 31 days, Radiotherapy - (PCT) (Original Plan)	VSA 12	Planned Care, Cancer and Maternity	HM	93.02%	55.6%	63.6%	51.7%	71.9%	82.6%	64.7%	85.3%	96.2%	85.0%	88.5%	100.0%	96.3%	94.7%		94%	↓		

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3h	Two week wait for urgent referral for breast symptoms other than suspected cancer (PCT population)	VSA 08	Planned Care, Cancer and Maternity	HM	98.09%	97.4%	94.3%	96.2%	99.2%	97.7%	98.9%	98.9%	99.0%	100.0%	100.0%	98.9%	99.2%	98.4%		93%	↑	
3i	Percentage of admitted patients with a referral to treatment pathway of 18 weeks or less	VSA 04	Planned Care, Cancer and Maternity	HM	Actual 74.55% Plan 90%	Actual 75.34% Plan 90%	Actual 82.1% Plan 90%	Actual 91.8% Plan 90%	Actual 93.2% Plan 90%	Actual 92.4% Plan 90%	Actual 88.6% Plan 90%	Actual 85.3% Plan 90%	Actual 85.7% Plan 90%	Actual 86.7% Plan 90%	Actual 80.1% Plan 90%	Actual 80.5% Plan 90%	Actual 80.3% Plan 90%	Actual 80.3% Plan 90%	Ac	Monthly target	↑	✓
3j	Percentage of non- admitted patients with a referral to treatment pathway of 18 weeks or less	VSA 04	Planned Care, Cancer and Maternity	HM	Actual 98.11% Plan 95%	Actual 98.38% Plan 95%	Actual 98.6% Plan 95%	Actual 99.0% Plan 95%	Actual 98.4% Plan 95%	Actual 97.6% Plan 95%	Actual 97.5% Plan 95%	Actual 98.1% Plan 95%	Actual 94.6% Plan 95%	Actual 96.4% Plan 95%	Actual 96.1% Plan 95%	Actual 96.0% Plan 95%	Actual 97.2% Plan 95%	Actual 97.2% Plan 95%	Ac	Monthly target	↓	✓
3k	Supporting measures for VSA 04: number of diagnostic waits >6 weeks (currently includes those who choose to wait longer than 6 weeks)	VSA 04	Planned Care, Cancer and Maternity	SB	Actual 77 Plan 0	Actual 0 Plan 0	Actual 4 Plan 0	Actual 4 Plan 0	Actual 1 Plan 0	Actual 9 Plan 0	Actual 2 Plan 0	Actual 1 Plan 0	Actual 3 Plan 0	Actual 5 Plan 0	Actual 1 Plan 0	Actual 0 Plan 0	Actual 16 Plan 0	Actual 46 Plan 0	C	0	↑	
3l	Supporting measures for VSA 04: Activity levels for 15 diagnostic tests	VSA 05	Planned Care, Cancer and Maternity	SB	Actual 50289 Plan 41591	Actual 3786 Plan 3716	Actual 3778 Plan 3716	Actual 4246 Plan 3716	Actual 4025 Plan 3716	Actual 3963 Plan 3716	Actual 4085 Plan 3716	Actual 3919 Plan 3716	Actual 4304 Plan 3716	Actual 3649 Plan 3716	Actual 4346 Plan 3716	Actual 4068 Plan 3716	Actual 4435 Plan 3716	Actual 48604 Plan 44592	C	more than 44592	↓	
3m	Reduce delayed transfers of acute care to a minimal level - RUH (Currently this includes all RUH data not just BANES residents)	Local indicator	Unplanned Care	CE	3.2%	N/A	3.3%	2.6%	1.5%	3.3%	4.1%	3.0%	3.0%	2.7%	2.8%	4.5%	3.6%	3.1%	Ac	1% local target	↑	
3n	Reduce delayed transfers of acute care to a minimum level - RUH (B&NES residents only-monthly average)	Local indicator	Unplanned Care	CE	2.0%	2.4%	2.0%	1.3%	1.9%	2.3%	2.7%	2.6%	0.9%	1.9%	2.9%	1.9%	1.5%	2.0%	Ac	1% local target	↔	
3o	Reduce delayed transfers of care to a minimal level - Community Health and Social Care Services (monthly average)	Local indicator	Unplanned Care	CE	16.0%	10.3%	9.1%	9.5%	9.5%	12.7%	11.6%	7.8%	8.6%	8.9%	11.2%	17.0%	8.3%	10.4%	Ac	local target agreed 5%	↑	
3p	Reduce delayed transfers of care to a minimal level - AWP (Mental Health)	Local indicator	Mental Health	AM	23.0%	5.7%	5.4%	5.0%	6.4%	9.6%	1.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	Ac	Less than 7.5%	↑	
3q	Average weekly rate of delayed transfers of care from all NHS hospitals, acute and non-acute, per 100,000 18+ population (includes mental health)	Care Quality Commission NI131	Unplanned Care	CE	13	9	7	6	8	12	13	6	6	10	10	10	8	8.8	Ac	15 for 08/09, 09/10 not yet set	↑	
3r	Ambulance Trusts to respond to 75 % of Category A calls within 8 minutes (GWAS)	Care Quality Commission	Unplanned Care	CE	75.0%	78.3%	78.1%	76.3%	77.6%	75.8%	74.4%	74.9%	73.8%	64.7%	72.2%	73.9%	77.8%	74.3%	Av	75%	↓	✓
3s	Ambulance Trusts to respond to 95 % of Category A calls within 19 minutes (GWAS)	Care Quality Commission	Unplanned Care	CE	95.1%	96.0%	96.0%	94.9%	95.7%	95.2%	95.4%	94.7%	94.9%	90.3%	94.6%	95.0%	96.6%	94.8%	Av	95%	↓	✓
3t	Ambulance Trusts to respond to 95% of Category B calls within 19 minutes (GWAS)	Care Quality Commission	Unplanned Care	CE	90.7%	93.2%	93.8%	91.8%	92.5%	92.8%	91.7%	91.4%	91.6%	84.6%	90.7%	91.6%	91.1%	91.4%	Av	95%	↑	✓
3u	Four hour maximum wait in A&E from arrival to admission, discharge or transfer. RUH (all RUH data not just BANES residents).	Local indicator	Unplanned Care	CE	95.2%	97.0%	98.8%	98.7%	99.1%	99.3%	99.1%	98.4%	99.2%	97.8%	98.5%	97.8%	95.6%	98.3%	Av	98%	↑	✓
3v	Four hour maximum wait in A&E from arrival to admission, discharge or transfer. Combined RUH and Minor Injury Units	Care Quality Commission	Unplanned Care	CE	97.7%	98.8%	99.4%	99.4%	99.6%	99.7%	99.6%	99.3%	99.6%	99.0%	99.2%	99.0%	98.0%	99.2%	Av	98.0%	↑	✓
3w	% Cancelled operations breaching the 28 day rule (RUH figures only) These percentages are a month in arrears due to data collection.	Care Quality Commission (target for acute only)	Planned Care	HM	15.60%	20.6%	15.8%	7.4%	11.8%	0.0%	0.0%	0.0%	9.1%	3.6%	4.8%	3.0%	1.0%	5.8%	Av	Less than 5%	↑	
3x	PCT Booking - Ensure every hospital appointment is booked for the convenience of the patient	Local indicator	Planned Care	HM	83.0%	66%	71%	70%	66%	66%	62%	65%	68%	53%	62%	67%	65%	65%	Av	more than 90%	↓	

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3y	Deliver local share of patients who need it to have access to a Crisis Resolution Home Treatment each year (cumulative) (For the purpose of performance assessment, this target is taken to be equivalent to the number of separate episodes of home treatment)	Care Quality Commission Existing Commitment	Mental Health	AM	Actual 283 Target 265	Actual 27 Target 22	Actual 63 Target 44	Actual 91 Target 66	Actual 125 Target 88	Actual 158 Target 110	Actual 183 Target 133	Actual 224 Target 155	Actual 252 Target 177	Actual 283 Target 199	Actual 315 Target 221	Actual 346 Target 243	Actual 373 Target 265	Actual 373 Target 265	C	265	↑	
3z	Diabetic retinopathy screening.	CQC Existing Commitment	Unplanned Care	KG	105%			102%			100.3%			100.7%			102.3%	102.3%			↓	
3za	A three-month maximum wait for revascularisation	CQC Existing Commitment	Unplanned Care	CE	100%	100%	100%	100%	100%	100%												
3zb	Thrombolysis 'call to needle' of at least 68 per cent within 60, minutes , where thrombolysis is the preferred local treatment for heart attack	CQC Existing Commitment	Unplanned Care	CE	Low numbers												N/A					
3zc	Patient experience of access to primary care - Able to get appointment same day or in next 2 weeks	VSA06	Primary Care	JG	85.5%	Primary Care Annual Survey																
3zd	Patient experience of access to primary care - Able to get an appointment more than 2 full weekdays in advance	VSA06	Primary Care	JG	84.6%	Primary Care Annual Survey																
3ze	Patient experience of access to primary care - Satisfied with GP opening hours	VSA06	Primary Care	JG	86.0%	Primary Care Annual Survey																
3zf	Supporting measures for VSA06: Extended opening hours for GP practices, Increased capacity in primary care.	VSA07	Primary Care	JG	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			↔	
3zg	For women to have a health and social care assessment of needs, risks and choices by 12 weeks of pregnancy.	VS06 NI 126	Planned Care	SB		Data lagged by 2 quarters		86.30%			92.10%			lag			lag	92.10%	Ac			
3zh	Improving Access: Access to Personalised and Effective Care - Number of patients receiving NHS primary dental services located within the PCT area within a 24 month period	VS06 NI 126	Primary Care	JG	Actual 94006 Plan 112920	Actual 94006 Planned 94328	Actual 95174 Planned 95286	Actual 95531 Planned 96459	Actual 95908 Planned 97556	Actual 96131 Planned 98850	Actual 96937 Planned 100036	Actual 97455 Planned 10171	Actual 97957 Planned 102534	Actual 98797 Planned 103694	Actual 99042 Planned 104734	Actual 99672 Planned 105791	Actual 100550 Planned 106690	Actual 100550 Planned 106690	Ac		↑	
3zi	The number of emergency bed days per head of weighted population	NI134	Unplanned Care	CE	7899	5240	6430	7067	6206	6604	6840	7048	6945	7159	6938	6500	7200	7200		No target set but improvement on previous year	↑	
3zj	Ambulance conveyance rate to A&E	VSC14	Unplanned Care	CE	66%	67.2%	66.1%	66.3%	65.5%	66.2%	67.4%	66.9%	67.3%	65.1%	66.7%	67.2%	67.4%	66.9%		Target not set as not selected as local vital sign	↑	
Strategic Objective: 4 Improving Quality & Safety																						
4a	MRSA number of infections - RUH	VSA 01	Quality	ML	Actual 17 Target 19	Actual 0 Target 0	Actual 0 Target 1	Actual 0 Target 1	Actual 0 Target 0	Actual 0 Target 1	Actual 1 Target 0	Actual 0 Target 1	Actual 1 Target 1	Actual 0 Target 0	Actual 0 Target 0	Actual 0 Target 0	Actual 0 Target 0	Actual 2 Target 5	C	less than 5	↑	✓
4b	MRSA number of infections - PCT	VSA 01	Quality	ML	Actual 10 New target	Actual 3 Plan 0	Actual 1 Plan 1	Actual 0 Target 0	Actual 0 Target 1	Actual 0 Target 1	Actual 1 Target 0	Actual 0 Target 1	Actual 0 Target 0	Actual 0 Target 0	Actual 0 Target 1	Actual 0 Target 1	Actual 0 Target 0	Actual 5 Plan 6	C	less than 6	↑	✓
4c	Clostridium Difficile - RUH (all ages monthly target post 48 hours)	Care Quality Commission VSA 03	Quality	ML	Actual 113 Plan 127	Actual 3 Plan 4	Actual 5 Plan 5	Actual 8 Plan 5	Actual 4 Plan 8	Actual 3 Plan 4	Actual 6 Plan 4	Actual 5 Plan 4	Actual 6 Plan 3	Actual 2 Plan 5	Actual 3 Plan 6	Actual 4 Plan 7	Actual 4 Plan 8	Actual 53 Plan 63	C	less than 63	↑	✓
4d	Clostridium Difficile - PCT	Care Quality Commission VSA 03	Quality	ML	Actual 138 Plan 174	Actual 13 Plan 7	Actual 5 Plan 9	Actual 6 Plan 6	Actual 7 Plan 10	Actual 3 Plan 6	Actual 19 Plan 9	Actual 11 Plan 10	Actual 7 Plan 11	Actual 7 Plan 12	Actual 3 Plan 13	Actual 8 Plan 11	Actual 7 Plan 15	Actual 96 Plan 119	C	less than 119	↑	✓
4e	Deliver local share of national target (7,500) new cases of psychosis served by early intervention team per year	CQC Existing Commitment	Mental Health	AM	Actual 39	Actual 10 Target 5	Actual 6 Target 2	Actual 10 Target 3	Actual 10 Target 5	Actual 12 Target 7	Actual 14 Target 10	Actual 15 Target 12	Actual 15 Target 13	Actual 16 Target 15	Actual 17 Target 17	Actual 19 Target 18	Actual 21 Target 20	Actual 21 Target 20	C	20	↓	
Strategic Objective: 5 Improving Effectiveness & Value for Money																						

Board report line	2010/2011 Indicators	Indicator Number	Workstream	Lead	2009/10 Outturn	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	2010/11 outturn	Cumulative/Average/Actual data	Year end target	Direction compared to last year	Risk on Register					
5a	Progress against 11m savings plan	New local indicator	All	TC/JS	New for 10/11		Actual 1480 Plan 1851	Actual 2340 Plan 2502	Actual 3382 Plan 3702	Actual 4125 Plan 4629	Actual 5363 Plan 5554	Actual 6480 Plan 6480	Actual 7406 Plan 7406	Actual 8332 Plan 8332	Actual 9256 Plan 9256	Actual 10183 Plan 10183	Actual 11109 Plan 11109	Actual 11109 Plan 11109	C	11,108	New	New					
5b	On track for control total	New local indicator	All	TS	New for 10/11		Actual 448 Plan 448	Actual 672 Plan 672	Actual 895 Plan 895	Actual 1119 Plan 1119	Actual 1342 Plan 1342	Actual 1556 Plan 1556	Actual 1790 Plan 1790	Actual 2014 Plan 2014	Actual 2240 Plan 2240	Actual 2461 Plan 2461	Actual 2685 Plan 2685	Actual 2685 Plan 2685	C	2,685	New	New					
Strategic Objective: 6 Reducing Inequalities & Social Exclusion																											
6a.	Number of affordable homes delivered (gross)	NI 155	Housing	GS	151			Actual 35 Target 30			Actual 48 Target 64			Actual 105 Target 64			Actual 160 Target 157	Actual 160 Target 157	C		↑						
6b	Number of households living in Temporary Accommodation	NI 156	Housing	GS	19	21	16	24	34	37	41	34	32	27	28	30	29	29		37	↓						
6c	Tackling fuel poverty – people receiving income based benefits living in homes with a low energy efficiency rating	NI 187	Housing	GS	09/10 met	Annual survey																					
6d	Conception rate per 1,000 females aged 15-17 (% change from baseline).	VSB08 NI112	Staying Healthy	DB/L P/HM	26% 2008													22% 2009	Ac	40% by 2008	↑						
6e	Services for disabled children	NI054	Childrens Services	LP	64%	Parents Survey																	Not set				
6f	Data quality on ethnic group	CQC Existing Commitment			87.41%																						
Strategic Objective: 7 Improving Services to Vulnerable Groups																											
7a	Carers receiving a service or advice and information as an outcome of an assessment or review- cumulative target	NI 135 WCC	Long Term, End of Life, Older People	SS	22.6% AWP included	3.1% AWP included	5.1% AWP included	6.9% AWP included	8.5% AWP included	9.9% AWP included	11.2% AWP included	12.7% AWP included	14.2% AWP included	15.7% AWP included	16.5% AWP included	18.4% AWP included	19.5% AWP included	19.5% AWP included	Ac	more than 25%	↓						
7a(2)	Carers assessed and getting services or information YTD including estimated voluntary services	NI 135 including estimated vol services WCC	Long Term, End of Life, Older People	SS	21.9%	4.7%	6.6%	8.4%	10.0%	11.3%	12.5%	14.0%	15.5%	17.0%	17.7%	19.7%	20.7%	20.7%	Ac	more than 25%	↓						
7b	Adult and older clients receiving a review as a percentage of those receiving a service - cumulative target	Local indicator (D40)	Unplanned Care	SS	76%	Actual 15% Plan 8%	Actual 28% Plan 16%	Actual 36% Plan 20%	Actual 42% Plan 30%	Actual 46% Plan 35%	Actual 51% Plan 40%	Actual 53% Plan 47%	Actual 55% Plan 54%	Actual 58% Plan 61%	Actual 60% Plan 67%	Actual 66% Plan 73%	Actual 63% Plan 80%	Actual 63% Plan 80%	Ac	80%	↓						
7c	Percentage of adults with learning difficulties in settled accommodation	NI 145	Learning Difficulties	MM	35.30%	Actual 19.4% Plan 5.3%	Actual 27.4% Plan 11%	Actual 31.2% Plan 16%	Actual 34.4% Plan 21.5%	Actual 33.5% Plan 26%	Actual 34.6% Plan 31.5%	Actual 36.0% Plan 37%	Actual 36.7% Plan 41.6%	Actual 35.8% Plan 47%	Actual 38.4% Plan 52%	Actual 38.0% Plan 58%	Actual 34.9% Plan 63%	Actual 34.9% Plan 63%	Ac	63%	↓						
7d	Adults with learning difficulties in employment	NI 146	Learning Difficulties	MM	4.6%	3.2%	3.2%	2.2%	4.8%	5.1%	6.3%	7.1%	6.9%	6.8%	6.7%	6.1%	5.2%	5.2%	Ac	5.5%	↑						
7e	Adults in contact with secondary mental health services in settled accommodation	NI 149 LAA	Mental Health	AM	Actual 90 Plan 70	Actual 70% Target 91%	Actual 91% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 92% Target 91%	Actual 76% Target 91%	Actual 78% Target 91%	Actual 78% Target 91%	C	More than 91	↓						
7f	Adults in contact with secondary mental health services in employment	NI 150	Mental Health	AM	17%	16%	18%	18%	18.0%	19%	19%	20%	19.5%	20.0%	21.0%	18.0%	18.0%	18.0%	Ac	20.0%	↑						

Board report line	2010/2011 Indicators	Indicator Number	Workstream	Lead	2009/10 Outturn	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	2010/11 outturn	Cumulative/Average/Actual data	Year end target	Direction compared to last year	Risk on Register	
7g	Safeguarding adults training - Social Care	CQC Self Assessment	Safeguarding Adults	LH	TBC									91.0%			96.0%	96.0%	Ac	97.0%	↑		
Strategic Objective: 8 Being Better Informed																							
8a	Social care clients receiving Self Directed Support (DP's & IB's). Rate per 100,000 population	NI 130 LAA	Unplanned Care	SS	521	Actual 428 Plan 450	Actual 472 Plan 495	Actual 524 Plan 535	Actual 572 Plan 579	Actual 619 Plan 622	Actual 656 Plan 665	Actual 712 Plan 708	Actual 763 Plan 751	Actual 794 Plan 793	Actual 836 Plan 836	Actual 874 Plan 879	Actual 919 Plan 922	Actual 919 Plan 922	Ac	922	↑	✓	
8b	Percentage of social care clients receiving Self Directed Support.	NI 130 CQC	Unplanned Care	SS	17.9%	Actual 21.3% Plan 15%	Actual 22.2% Plan 17%	Actual 23.8% Plan 19%	Actual 25.4% Plan 21%	Actual 26.6% Plan 23%	Actual 27.3% Plan 25%	Actual 28.7% Plan 26%	Actual 29.6% Plan 27%	Actual 30.1% Plan 28%	Actual 30.4% Plan 29%	Actual 32.7% Plan 29%	Actual 31.6% Plan 30%	Actual 31.6% Plan 30%	Ac	30%	↑	✓	
8c	Self reported experiences of patients and users	VSB 15 CQC National Priority		DT	397.86	Patient Survey																	
8d	National NHS Staff Survey based measures of job satisfaction	VSB17 CQC National Priority		AP	3.64869	Staff Survey																	
8e	Self reported experiences of social care users	NI 127	Unplanned Care	JS		Home Care User Survey																	
Strategic Objective: 9 Effective Organisations																							

There are no performance indicators within this strategic objective

Key

- ↑ Improved performance compared to previous month
- ↓ Fall in performance compared to previous month
- ↔ No change in performance compared to previous month
- C Cumulative
- Ac Actual
- Av Average

Traffic lights:

- Red: Major cause of concern as a key target likely to be missed by a significant margin
- Amber: Performance is not a major cause of concern, although target may not be fully met
- Green: Target is expected to be met

Note: These traffic lights are internal judgements on progress, not official DH bandings.

