Oxfordshire Health & Wellbeing Board

5 March 2015

Performance Report

Current Performance

- 1. A table showing the agreed measures under each priority in the Joint Health and Wellbeing Strategy, expected performance and current performance is attached as appendix A.
- 2. There are 68 indicators included in the strategy with the majority reported on a quarterly basis. A number have annual targets, with a mixture being reported at the end of the academic year or the end of the financial year.
- 3. Where possible data for Quarter 2 has been provided, however in some cases this data is not yet available and so the summary relates to Quarter 1 performance. Up to date data will be reported to the relevant partnership boards when available.
- 4. Current performance (based on 49 indicators that data is expected to be available for at this point in the year) can be summarised as follows:
 - 22 indicators are Green
 - 11 indicators are Amber (defined as within 5% of target)
 - **12** indicators are Red
 - 2 indicators are awaiting data
 - 2 indicators have data but are for monitoring purposes only and hence not RAG rated.
- 5. Current performance is generally positive, with 45% being on target. Appropriate action is being taken where performance is not currently meeting expected levels. This has been summarised in the notes column of the appendix.
- 6. Of the 12 indicators that are rated as Red:
 - a. 4 are reported on an annual basis
 - 2.3 Maintain the low level of persistent absence from school for looked after children
 - 2.8 Improve the Free School Meal attainment gap at all key stages
 - 4.7 Improve the proportion of children at school action plus achieving at least 5 GCSEs at grades A*-C including English and maths
 - 9.1 Ensure that the obesity level of children in year 6 is held at no more than 15%
 - b. 8 indicators continue to be rated as Red:
 - 5.5 Reduce the number of emergency admissions for acute conditions that should not usually require hospital admission for people of all ages
 - 6.1 Reduce the number of days that a patient is delayed in hospital
 - 6.2 Reduce the number of avoidable emergency admissions to hospital for older people

6.6 – Increase the number of people referred to reablement from their own home (as opposed to a hospital stay)

- 8.3 At least 66% of those invited for NHS Health Checks will attend
- 8.4 Number of people quitting smoking for at least 4 weeks (Q2 data only)
- 8.5 Opiate users successfully leaving treatment (Q2 data only)
- 8.6 Non-opiate users successfully leaving treatment (Q2 data only)

John Jackson Director of Adult Social Care

Alison Wallis, Performance and Information Manager, Joint Commissioning, Tel: (01865) 815140

February 2015

Oxfordshire Health and Wellbeing Board Performance Report

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 report Oct-Dec	R A G	Q4 report Jan-Mar	R A G	Locality spread	Notes
Pric	ority 1: All children have a	healthy sta	rt ir	n life and s	tay	healthy into	adul	thood			
1.1	Increase percentage of women who have seen a midwife or maternity health care professional by 13 weeks of	Expected 90.5%		Expected 91%		Expected 91.5%		Expected 92%			Latest data available is for Q4 13/14 (100.8%). Oxfordshire CCG is ranked 3 rd out of the 10
900	pregnancy from 90% to 92% by end March 2015.	Actual not available		Actual		Actual		Actual			CCG localities in the Thames Valey.
1.2	Reduce the rate of emergency admissions to hospital with infections, for under 18's, maintaining low rates through	Expected 173.1		Expected 168.7		Expected 164.3		Expected 159.8			
900	2014-15 (baseline 152.2 per 10,000 Mar13/14)	Actual not available		Actual not available		Actual		Actual			
Pric	ority 2: Narrowing the gap	for our mo	st d	lisadvanta	ged	and vulnera	ble g	groups			
2.1	Increase the take up of free early education for eligible 2 year olds in 2014/15 to 1800	Expected 350	G	Expected 1020		Expected 1275	•	Expected 1800		Funding is targeted at areas of deprivation	
220	(from 1036 in 13/14)	Actual 392	G	Actual	G	Actual 1539	G	Actual		·	
2.2	Maintain the take up of free early education for 2 year-old Looked After children to 80% (currently at 80% in 13/14)	Expected 80%	Α	Expected 80%	Α	Expected 80%	G	Expected 80%		Not applicable	

	<u> </u>	A - 11	A - 4 1		A - 4 1	A - 11	I	T -	
		Actual	Actual		Actual	Actual			
220		78%	78%		96%				
2.3	Maintain the current low level of persistent absence from school for looked after children. The		Expected 3.3%						
220	target for 2013-14 academic year is 3.3%		Actual 5.3%	R					
2.4	Maintain the number of looked after children permanently excluded from school at zero		Expected Zero						
220	(13/14)		Actual Zero	G					
2.5	Decrease the rate of persistent absence from school of children in need from school from 19.8%		2010			Expected <19.8%			
000	(handling 10/10 anadomic year)					Actual			
2.6	Establish a baseline of children and young people on the autistic spectrum who have had an exclusion from school (over a school year) and work to reduce					Expected Baseline and target established			
ပ္ပိုင္ပ	this number in future years					Actual			
2.7	Identify, track and measure the outcomes of all 810 families in Oxfordshire meeting the national Troubled Families criteria		a) 90% b) 80%	G		Expected a) 90% b) 80%	G		

000	a) working with 90% of identified families b) turning around 80% of identified families			Actual a) 100% b) 90%				Actual a) 100% b) 96%	
2.8	Improve the free school meals attainment gap at all key stages and aim to be in line with the national average by 2014 a) KS2: 23% points; b) KS4 26% points (currently the free school meal attainment gap in Oxfordshire is in line or above the gap nationally in all key stages)					Expected In line with national KS2: (19%pts in 12/13); KS4 (27%pts in 12/13) Actual	R		KS2 the Free School; Meal gap has widened to 23%points, nationally it has remained at 19%pts
220	nationally in all key stages)					KS2 – 23%pts KS4 – 34%pts			
Prio	rity 3: Keeping all childre	n and your	ıg p	eople safe					
3.1	Establish a baseline in order to reduce the assessed level of risk of high risk Domestic Abuse victims managed through Multi-							Expected Baseline established	
	Agency Risk Assessment Conferences (MARAC).	Actual 82%		Actual 84%		Actual 80%		Actual	
0.0	Every child considered likely to be at risk of Child Sexual	Expected		Expected		Expected		Expected	
3.2	Exploitation (identified using the	100%	G	100%	G	100%		100%	

	CSE screening tool) will have a	Actual		Actual		Actual	Actual		
ပ္ပ	multi-agency plan in place	100%		100%					
000									
3.3	Reduce prevalence of Child Sexual Exploitation in Oxfordshire through quarterly reporting on victims and perpetrators to the Child Sexual Exploitation sub group of the Oxfordshire Safeguarding Children's Board	Prevalence reported and action taken as appropriate	G	Prevalence reported and action taken as appropriate	G	Prevalence reported and action taken as appropriate	Prevalence reported and action taken as appropriate		
		Actual		Actual		Actual	Actual		
220		Prevalence reported and action taken as appropriate		Prevalence reported and action taken as appropriate					
	Monitor the number of children who go missing from home and	Expected		Expected		Expected	Expected		
3.4	the proportion who go missing 3 or more times within a 12 month period	No target		No target		No target	No target		
1.	, poiled	Actual		Actual		Actual	Actual		
000		25/179		56/356		90/527			
3.5	Increase the proportion of quality assurance audits undertaken and reviewed through the Oxfordshire						Expected >76%		Oxfordshire's Safeguarding Children Board covering the

220	Safeguarding Children Board that show a positive overall impact from a baseline of over 76% (13/14)						Actual	following agencies: children's social care; youth offending service; education services; children and adult health services; early intervention services; services provided by the police.
Pric	ority 4: Raising achieveme	ent for all ch	nildr	en and yo	ung	people		
	Increase the number of funded	Expected		Expected		Expected	Expected	
4.1	2-4 year olds attending good and outstanding early years settings to 85% (baseline 83%	83.5%		84.0%		84.5%	85%	
	13/14)	Actual	Α	Actual	G	Actual	Actual	
220		82.1%		84.5%		nya		
4.2	84% of children will achieve Level 2b or above in reading at			Expected				
	the end of Key Stage 1 of the academic year 2012/13			84% Actual	-			
	(baseline 81% 12/13 academic				Α			
220	year)			82%				
1.0	80% of children at the end of			Expected				
4.3	Key Stage 2 will achieve Level 4 or above in reading, writing and			80%				
\circ	maths (baseline 78% 12/13 academic year)			Actual	Α			
220	, , , , , , , , , , , , , , , , , , , ,			77%				
	63% of young people achieve 5 GCSEs at A*-C including			Expected	ge			Change of definition within the academic
4.4	English and Maths at the end of				change of			year means that the
	the academic year 2013/14							published figure (based

220	(baseline 61% 12/13 academic year)			Actual 58.6%						on pupils first entry results) cannot be directly compared to last year and to target (based on best results). However in 2014 Oxfordshire's results were significantly above the national average (56.1%)
4.5 a	a) At least 72% of young people will make the expected 3 levels of progress between key stages 2-4 in English			Expected 72%	G					
000	(baseline 70% 12/13 academic year)			Actual 74%						
4.5 b	b) At least 73% of young people will make the expected 3 levels of progress between key stages			Expected 73%						
220	2 and 3 in maths. (baseline 71% 12/13 academic year)			Actual 71%	A					
4.6	Increase the proportion of pupils attending good or outstanding: a) primary schools to 86% at the end of 14/15 academic year (baseline 82% 13/14 academic year)	Expected Primary: 75% Secondary: 87%	A	Primary: 75% Secondar y: 87%	A	Primary: 86% Secondary: 85%	A	Expected Primary: tbc Secondary: tbc		Indicator for 2013/14 academic year was for proportion of pupils attending good/ outstanding schools. For 2014/15 (Q3 onwards) this has

	b) secondary schools to 85%	Actual		Actual		Actual		Actual	changed to proportion of
	at the end of 14/15 academic year (baseline 82% 13/14)	Primary		Primary:		Primary:		Primary:	schools that are good/ outstanding
	year (baseline 62 /6 13/14)	78%		79%		81%		Filliary.	Outstanding
				0 1				Secondary:	
220		Secondary 85%		Secondar y: 85%		Secondary: 82%			
	Of those pupils at School Action					Expected			
4.7	Plus, increase the proportion achieving 5 GCSEs at A* - C including English and Maths to					17%	R		
220	17% (baseline 10%12/13 academic year)					Actual			
ŏ	,					8%			
4.8 a	To reduce the persistent absence rates in primary schools to 2.8% (baseline 3.2% 12/13 academic year)			Primary: 2.8%	G				Data remains provisional. Official figures will be published by the Dfe in March 2015.
220				Actual 2.0% provisiona	G				Indicator relating to secondary schools not rated due to incomplete set of data received
4.8 b	To reduce the persistent absence rates in secondary schools to 6.7%			Expected 6.7%	р				
	(baseline 7.4% 12/13 academic			Actual	rate				
220	year)			6.0% provisiona	Not rated				
4.9	Continue to reduce the number of young people not in education, employment or training to below 5% (baseline	Expected <7%	G	Expected <7%	G	Expected <5%	G	Expected <5%	NEET and not known data follows a cyclical pattern with distinct peaks in September

	4.7% - 937 young people,	Actual		Actual		Actual		Actual		following young people's
220	2013/14)	5.4%		6.0%		3.7%				transition from school.
	Continue to reduce the	Expected		Expected		Expected		Expected		
4.1 0	proportion of young people whose NEET status is not known, to less than 5% (March 15) (Baseline 11% March 14)	<10%	G	<64%	G	<20%	G	<5%		
	, ,	Actual		Actual		Actual		Actual		
220		5.4%		47.6%		7.5%				

Priority 5: Living and working well: Adults with long-term conditions, physical disabilities, learning disabilities or mental health problems living independently and achieving their full potential

	1800 people to receive information and advice about	Expected	Expected		Expected		Expected	
5.1	areas of support as part of community information networks	450	900		1350		1800	
	,	Actual	Actual	G	Actual	G	Actual	
220			1284		Not yet available			
5.2	Excess under 75 mortality in adults with serious mental hall illness						Expected tbc	Target to be determined
900	(PHOF 4.9 from outcomes framework) Baseline 350.3 in 2011/12 (England average 337.4).						Actual	
5.3	Access to psychological therapies to be improved so that		Expected				Expected	Figure given is for Q2 2014-15
	more than 50% of people who have completed treatment		>50%	G			>50%	
ပ္က	having attended at least 2 treatment contacts are moving		Actual				Actual	
220	to recovery		61%					

5.4	At least 60% of people with learning disabilities will have an annual physical health check by						Expected 60%			
900	their GP (baseline 45.7% 2013/14)						Actual Not yet available			
5.5	Reduce the number of emergency admissions for acute conditions that should not usually require hospital admission for people of all ages	Expected Less than 951.4 per 100,000	Expected Less than 951.4 per 100,000	L	Expected Less than 951.4 per 100,000	R	Expected Less than 951.4 per 100,000			
cce	(2013/14 baseline: 951.4 per 100,000 population)	Actual na	Actual 1010.8		Actual 966.1		Actual			
5.6	Reduce unplanned hospitalisation for chronic conditions that can be actively managed (such as congestive heart failure, diabetes, asthma,	Expected 565.4 per 100,000 Actual	565.4 per 100,000	Į.	Expected 565.4 per 100,000	G	Expected 565.4 per 100,000			
900	angina, epilepsy and hypertension) for people of all ages.(2012/13 baseline 565.4 per 100,000 population)	na	534.7		538.7		Actual			
5.7	Increase the employment rate amongst people with mental illness from a baseline of 33.2%						Expected >33.2%			
(1)	in 2013/14						Actual			
SCG										
Prio	ority 6: Support older peop	ple to live in	dependently v	vith di	gnity whil	st re	educing the I	need for c	are and supp	ort
6.1	Reduce the number of days that a patient is delayed in hospital by 38% from an average of 4688	Expected 2908	Expected 2908	R	Expected 2908	R	Expected 2908 per			Monthly average since April. Currently 43% over target.

	per month in 2012/13 to 2908 per month in 2014/15 (baseline							month		
	14.8 days in acute hospitals)	Actual		Actual		Actual		Actual		
220		3603		3922		4116				
6.2	Reduce the number of avoidable emergency admissions to hospital for older people (aged 65+) per 100,000 population	Expected		Expected <15,849	,	Expected <15,849	_	Expected <15,849		
900	from a baseline of 15,849 in 13/14	Actual		Actual 16,161	ĸ	Actual 16,685	R	Actual		
6.3	Reduce the number of permanent admissions of older people (aged 65+) to residential and nursing care homes from	Expected 136		Expected 275		Expected 410		Expected 546		Activity is year to date .11.4 per week compared to a target of 10.5 per week.
220	582 in 2012/13 to 546 in 2014/15	Actual 172	Α	Actual 324	A	Actual 445	Α	Actual		
6.4	Increase the proportion of older people with an ongoing care package supported to live at home from 60.0% in April 2014	Expected 60.0%		Expected 60.7%		Expected 61.3%		Expected 61.9%		
220	to 61.9% in April 2015	Actual 61.4%	Α	Actual 62.0%	G	Actual 61.9%	G	Actual		
6.5	60% of the expected population (5134 out of 8557) with dementia will have a recorded diagnosis (baseline 44.2% or	Expected 48.2%		Expected 52.2%	ar data	Expected 56.6%		Expected 60.0%		
900	3929 people	Actual na		Actual 47.4%	No clear	Actual 53.4%	Α	Actual		

6.6	Increase the number of people referred to reablement from their own home (as opposed to a hospital stay) to 1875 in 2014/15	Expected 469	R	Expected 938		Expected 1406	R	Expected 1875	The issue remains low levels of community based referrals (with referrals from hospital above the expected contract level)
220	from a baseline of 881 in 2013/14	Actual 196	K	Actual 391	K	Actual 570	K	Actual	
6.7	Increase proportion of older people (aged 65+) who were still at home 91 days after discharge from hospital into reablement/							Expected 80%	
220	rehabilitation services to 80% by April 2015 from a baseline of 71.7% in April 2013							Actual	
6.8	Maintain the number of organisations providing social care in Oxfordshire that meet the standard of treating people	Expected 95%		Expected 95%	,	Expected 95%		Expected 95%	
220	with respect and involving them in their care at above 95%	Actual 95%	G	Actual 96%	G	Actual 96%		Actual	
6.9	Target to be developed around the Better Care Fund national patient/ service user experience							Expected	
220	measure							Actual	
6.1 0	Ensure an additional 523 Extra Care Housing places by the end of Mar 2015, bringing the total			Expected		Expected		Expected 768	512 flats in operation and due to open a further 256 in the next 6 months
220	number of places to 768 by the end of March 2015			Actual 512	G	Actual 512	G	Actual	

6.1 1	Increase the proportion of people approaching the end of life who receive consistent care that is coordinated effectively							Expected Target tbc		
900	across all relevant settings leading to patients dying in their preferred place of care. Baseline and targets to be determined							Actual		
Pric	ority 7: Working together to									
7.1	A measure to be developed relating to how the County Council and the Clinical Commissioning Group and Oxford Health FT are responding to Better Care Fund national conditions for shared							Expected		Work to agree Better Care Fund ongoing, including response to national conditions. Measures will be developed and agreed as part of this process.
	care coordination, 7 day access and accountable lead professionals							Actual		
7.2	A national measure of patient/ service user experience to be developed in line with the Better Care Fund							Expected To be developed Actual		Work to agree Better Care Fund plan ongoing to March 2015, measures being developed as part of its process
7.3	Increase the number of carers known and supported by adult social care by 10% to 17,000 (baseline 15,474 Apr 2014)	Expected 15,855	A	Expected 16,235	A	Expected 16,615	A	17,000		
200		Actual 15,723		Actual 15,843		Actual 16,039		Actual		

	At least 880 carers breaks jointly	Expected		Expected		Expected		Expected	
7.	funded and accessed via GPs (currently 880 at Apr 2014)	220		440		660		880	
		Actual	G	Actual	G	Actual	G	Actual	
		459		747		880			

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 Oct-Dec	R A G	Q4 Jan-Mar	R A G	Locality spread	Notes				
Pric	Priority 8: Preventing early death and improving quality of life in later years														
8.1	At least 60% of those sent bowel screening packs will complete and return them (ages 60-74 years)	Expected 60%		Expected 60%		Expected 60%		Expected 60%			Indicator was previously separated into 60-69 and 70-74 age groups, however from Q2 these				
NHS England		Actual	R	Actual 57.3%		Actual		Actual			are no longer reported separately. Q2 data updated				
8.2	Of people aged 40-74 who are eligible for health checks once every 5 years, at least 15% are invited to attend during the year.	Expected 3.75%		Expected 7.5%		Expected 11.25%		Expected 15%		Q3 - All localities on target to achieve 15%. Only Oxford City and West	Q2 data has been updated				
220	No CCG locality should record less than 15% and all should aspire to 20%	Actual 5.4%	G	Actual 11.6%	G	Actual 16.9%		Actual		localities at risk of not achieving the aspired 20%.					
8.3	At least 66% of those invited for NHS Health Checks will attend (ages 40-74) and no CCG locality should record less than	Expected 46%	R	Expected 50%		Expected 58%		Expected 66%		Q3 - Two CCG localities currently over 50% (West and North). All					
220	50% with all aspiring to 66% (Baseline 46% Apr 2014)	Actual 41.5%	K	Actual 43.1%	R	Actual 48.3	R	Actual		others below 50%. Lowest South East at 40.6%.					
8.4	At least 3800 people will quit smoking for at least 4 weeks (Baseline 3622 in 13/14) Baseline women smoking in	Expected 868	R	Expected 1672	R	Expected 2574		Expected 3800			Women smoking in pregnancy – 8% Q3 data due end of Feb				

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 Oct-Dec	R A G	Q4 Jan-Mar	R A G	Locality spread	Notes
	pregnancy (%) - 9% (Q4 1314)	Actual		Actual		Actual		Actual			
ي		626		1133		nya					
000		Women smoking in pregnancy - 8%									
	8.6% of opiate users	Expected		Expected		Expected		Expected			The number of non-
8.5	successfully leaving treatment by the end of 14/15 (baseline 6.5% 2013/14)	7.0%	G	7.5%	R	8.0%		8.6%			opiates users successfully completing treatment is below the set target.
O	0.070 2010/14/	Actual	G	Actual	IX.	Actual		Actual			Through the introduction
220		7.1%		6.9%		nya					of the Public Health Outcome Framework the
8.6	38.2% of non-opiate users successfully leaving treatment	Expected		Expected		Expected		Expected			performance measure has changed from counting
	by the end of 14/15 (baseline 15.5% 2013/14)	21.2%		26.9%		32.6%		38.2%			drug users safely supported in services to
	10.070 2010/11/	Actual		Actual		Actual		Actual			counting those who successfully complete
220		14.5%	R	17.7%	R	nya					treatment. Current performance is being addressed with a comprehensive recovery plan with Public Health England support to
											develop and implement system wide action plans.
Pric	ority 9: Preventing chronic	disease thro	ougl	h tackling o	bes	ity					
9.1	Ensure that the obesity level in Year 6 children is held at no more than 15% and no district population should record more than 19% (Baseline 15.2% in			Expected 14.9% or less	R					Oxford City – 21% Is the only locality above 19%. South Oxfordshire has the lowest	

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 Oct-Dec	R A G	Q4 Jan-Mar	R A G	Locality spread	Notes
220	2013)			Actual 16.9%						obesity level – 15.2%	
9.2	Reduce by 1% the proportion of people who are NOT physically active for at least 30 minutes a week (Baseline for Oxfordshire							Expected 21.2%			
District	22.2% against 28.5% nationally, 2013-14 Active People Survey)							Actual			
9.3	63% of babies are breastfed at 6-8 weeks of age (currently 60.4%) and no individual health visitor locality should have a rate	Expected 63%		Expected 63%		Expected 63%		Expected 63%		Q3. Banbury locality is 45.3%	
NHS England & CCG	of less than 50%	Actual 60.3%	A	Actual 60.5%	A	Actual 59.7%	A	Actual			

No	Indicator	Q1 Apr- Jun	R A G	Q2 Jul-Sept	R A G	Q3 Oct-Dec	R A G	Q4 Jan-Mar	R A G	Locality spread	Notes
Pric	ority 10: Tackling the broade	er determina	ants	of health t	hrou	igh better h	ous		/ent	ing homelessness	5
10. 1	The number of households in temporary accommodation as at 31 March 2015 should be no greater than the level reported							Expected 197 or less			
Councils	in March 2014 (baseline 197 households in Oxfordshire)							Actual	-		
10. 2	At least 75% of people receiving housing related support will depart services to take up independent living (baseline	Expected 75%		Expected 75%		Expected 75%		Expected 75%		The majority of people receive a service from a county wide service	
220	83.9% in 13/14)	Actual 91%	G	Actual 91%	G	Actual 91%	G	Actual	-	which means it isn't possible to accurately provide data on a locality basis	
10. 3	At least 80% of households presenting at risk of being homeless and known to District Households services or District	Expected 80%		Expected 80%		Expected 80%		Expected 80%			Data not yet available for Cherwell and City – hence indicator not yet rated.
Councils	funded advice agencies will be prevented from becoming homeless (baseline 81% in 2013- 2014 when there were 2837 households known to services)	Actual 82%	G	Actual 86%	G	Actual		Actual			
10. 4	Establish a baseline of the number of households in Oxfordshire who have received significant increases in the							Expected 550			

No	Indicator	Q1 Apr- Jun	R A G	Q2 Jul-Sept	R A G	Q3 Oct-Dec	R A G	Q4 Jan-Mar	R A G	Locality spread	Notes
Affordable Warmth	energy efficiency of their homes or their ability to afford adequate heating, as a result of the activity of the Affordable Warmth Network and their partners. It is hoped that an aspirational baseline target of 550 households will be reached			Actual 712				Actual			
10. 5	Ensure that the number of people estimated to be sleeping rough in Oxfordshire does not exceed the baseline figure of 74							Target < 74			
Councils	in 2013-14							Actual			

No	Indicator	Q1 Apr- Jun	R A G	Q2 Jul-Sept	R A G	Q3 Oct-Dec	R A G	Q4 Jan- Mar	R A G	Locality spread	Notes
Prior	rity 11: Preventing infection	ous disease	thre	ough immu	nisa	ation					
11.1	At least 95% children receive dose 1 of MMR (measles, mumps, rubella) vaccination by age 2 (currently 95.8%) and no CCG locality should perform below 94%	Expected 95%		Expected 95%		Expected 95%		Expected 95%		Two localities fall below the expected 94% target - Oxford City 93.2% (an	
NHS England		Actual 95.2%	G	Actual 94.6%	A	Actual 92.5%	A	Actual	Q1) South East 93.6%. Highest – West	South East 93.6%.	
11.2	At least 95% children receive dose 2 of MMR vaccination by age 5 (currently 93.7%) and no	Expected 95%		Expected 95%		Expected 95%		Expected 95%		Only 2 localities (North East and South East) perform above the	Indicator not rated Green as Oxford City is below the 94%
NHS England	CCG locality should perform	Actual 92.6%	R	Actual 91.9	R	Actual 95.2%	Α	Actual	94%. Lowest – Oxford City – 88.5%	threshold.	
NHS England	At least 60% of people aged under 65 in "risk groups" receive flu vaccination (baseline 55% 13/14)							55% Actual			
NHS England	At least 90% of young women will receive both doses of HPV vaccination. (baseline to be confirmed)							Expected Over 90% Actual			