

Health & Wellbeing Board 16 July 2015

Performance Report

End of year 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 67 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. End of year data (Q4) is available for the majority of indicators, however data is still not available for 8 indicators. In many cases this is due to the delay in publishing data nationally.
4. End of year performance can be summarised as follows:
 - 28** indicators are Green
 - 14** indicators are Amber (defined as within 5% of target)
 - 12** indicators are Red
 - 8** indicators are awaiting data
 - 5** indicators have data but are for monitoring purposes only and hence not RAG rated. This includes 3 indicators that were to be developed around the Better Care Fund but these measures have not yet been developed nationally.
5. Current performance is generally positive, with 45% (of indicators with targets) meeting the end of year 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. Notable indicators that were rated as Green include:
 - Indicators 2.1 and 2.2. The number of eligible 2 year olds taking up free early education (2112) was much higher than the target of 1800. This follows significant work by the Early Years workers and children's centres in promoting this funding. In addition 86% of Looked After Children eligible for the 2 year old funding took up the free childcare, this is above the target of 80%.
 - Indicator 4.9 - at the end of March only 3.6% of young people were not in education, employment or training (NEET), below the ambitious target of 5%.
 - Indicator 10.2 - 87% of people receiving housing related support departed services to take up independent living against a target of 75%. (Indicator 10.2)
 - Indicator 8.2 - 21% of people aged 40-74 who are eligible for health checks once every 5 years, were invited to attend during the year against a target of 15%. This indicator was green throughout the year.

7. Of the 12 indicators that are rated as Red:
- a. 2 are in Priority 2 – Narrowing the gap for our most disadvantaged and vulnerable groups
 - Indicator 2.3 - persistent absence rates of looked after children (those looked after for at least a year). This increased from 4.7% (7 children) in 2012/13 to 5.3% (8 children) in 2013/14.
 - Indicator 2.8 The free school meal gap (the difference in attainment between pupils known to be eligible for free school meals and their peers) has widened slightly at both key stage 2 and key stage 4. The gap in Oxfordshire remains noticeably wider in Oxfordshire than that nationally.
 - b. 1 is in Priority 4 – Raising achievement for all children and young people
 - 4.7 Only 8% of Oxfordshire pupils at school action plus achieved 5 GCSEs at grades A*-C including in English and in maths. This is a decrease from 2013 and significantly below the national figure of 21%.
 - c. 1 is in Priority 5 – Living and working well
 - Indicator 5.2 – Excess under 75 mortality in adults with serious mental health illness increased to 412.0 from a baseline of 350.3
 - d. 3 are in Priority 6 – Support older people to live independently with dignity whilst reducing the need for care and support
 - Indicator 6.1 – The number of days a patient is delayed in hospital increased to 4420 against a target of 2908 per month.
 - Indicator 6.2 – The number of avoidable emergency admission to hospital for older people increased to 16,492 against a target of 15,849
 - Indicator 6.6 – The number of people referred to reablement from their own home was at 764 compared to a target of 1875.
 - e. 4 are in Priority 8 – Preventing early death and improving quality of life in later years
 - Indicator 8.3 - 53% of people aged 40-74 invited for an NHS Health Checks attended, against a target of 66%
 - Indicator 8.4 - A target was set for 3800 people to quit smoking for at least 4 weeks but the final figure was only half of this (1955).
 - Indicator 8.5 - 6.7% of opiate users successfully left treatment by the end of 14/15, roughly in line with the previous year (6.5%) and below the target of 8.6%.
 - Indicator 8.6 - 20.2% of non-opiate users successfully left treatment by the end of 14/15. This was an increase on 2013/14 performance (15.5%) but noticeably below the target of 38.2%. (Indicator 8.6).
 - f. 2 are in Priority 9 – Preventing chronic disease through tackling obesity
 - Indicator 9.1 – The obesity level of Year 6 children increased from 14.9% to 16.9%.
 - Indicator 9.2 - Annual data from the Active People survey shows the proportion of people who are NOT physically active for at least 30 minutes a week increased from 22.2% to 23%.

Alison Wallis

Performance & Information Manager, Joint Commissioning July 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
Priority 1: All children have a healthy start in life and stay healthy into adulthood											
1.1	Increase percentage of women who have seen a midwife or maternity health care professional by 13 weeks of pregnancy from 90% to 92% by end March 2015.	Expected 90.5%	G	Expected 91%		Expected 91.5%		Expected 92%			Updated. Q1 14/15 data has only just been made available by NHS England. National rate – 96.1%
CCG		Actual 95.8%		Actual		Actual		Actual			
1.2	Reduce the rate of emergency admissions to hospital with infections, for under 18's, maintaining low rates through 2014-15 (baseline 152.2 per 10,000 Mar13/14)	Expected 173.1		Expected 168.7		Expected 164.3		Expected 159.8			
CCG		Actual not available		Actual not available		Actual not available		Actual not available			
Priority 2: Narrowing the gap for our most disadvantaged and vulnerable groups											
2.1	Increase the take up of free early education for eligible 2 year olds in 2014/15 to 1800 (from 1036 in 13/14)	Expected 350	G	Expected 1020	G	Expected 1275	G	Expected 1800	G	Funding is targeted at areas of deprivation	
CCG		Actual 392		Actual 1398		Actual 1539		Actual 2112			
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%	A	Expected 80%	A	Expected 80%	G	Expected 80%	G	Not applicable	

OCC		Actual 78%		Actual 78%		Actual 96%		Actual 86%			
2.3	Maintain the current low level of persistent absence from school for looked after children. The target for 2013-14 academic year is 3.3%			Expected 3.3%	R						
OCC				Actual 5.3%							
2.4	Maintain the number of looked after children permanently excluded from school at zero (13/14)			Expected Zero	G						
OCC				Actual Zero							
2.5	Decrease the rate of persistent absence from school of children in need from school from 19.8% (baseline 12/13 academic year)							Expected <19.8%	G		Rate is lower than last academic year. Nationally the figure is 13.8%
OCC								Actual 15.0%			
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 this number in future years							Expected	G		
OCC								Baseline established Actual 4.3%			
2.7	Identify, track and measure the outcomes of all 810 families in Oxfordshire meeting the national Troubled Families criteria			Expected a) 90% b) 80%	G			Expected a) 90% b) 80%	G		Q4 data updated

OCC	a) working with 90% of identified families b) turning around 80% of identified families			Actual a) 100% b) 90%				Actual a) 100% b) 100%		
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)	R			KS2 the Free School; Meal gap has widened to 23%points, nationally it has remained at 19%pts
OCC						Actual KS2 – 23%pts KS4 – 34%pts				
Priority 3: Keeping all children and young people safe										
3.1	Establish a baseline in order to reduce the assessed level of risk of high risk Domestic Abuse victims managed through Multi-Agency Risk Assessment Conferences (MARAC).							Expected Baseline established		Overall baseline for year – 80%.
		Actual 82%		Actual 84%		Actual 80%		Actual 72%		
3.2	Every child considered likely to be at risk of Child Sexual Exploitation (identified using the	Expected 100%	G	Expected 100%	G	Expected 100%	G	Expected 100%		

OCC	CSE screening tool) will have a multi-agency plan in place	Actual 100%		Actual 100%		Actual 100%		Actual			
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	Expected Prevalence reported and action taken as appropriate	G	Expected Prevalence reported and action taken as appropriate	G	Expected Prevalence reported and action taken as appropriate	G	Expected Prevalence reported and action taken as appropriate	G		
OCC		Actual Prevalence reported and action taken as appropriate		Actual Prevalence reported and action taken as appropriate		Actual Prevalence reported and action taken as appropriate		Actual Prevalence reported and action taken as appropriate			
3.4	Monitor the number of children who go missing from home and the proportion who go missing 3 or more times within a 12 month period	Expected No target		Expected No target		Expected No target		Expected No target			
OCC		Actual 25/179	Actual 56/356	Actual 90/527	Actual 132/694						
3.5	Increase the proportion of quality assurance audits undertaken and reviewed through the Oxfordshire Safeguarding Children Board that show a positive overall impact from a baseline of over 76% (13/14)							Expected >76%	G		
OCC						Actual 87.5%					

Priority 4: Raising achievement for all children and young people										
4.1	Increase the number of funded 2-4 year olds attending good and outstanding early years settings to 85% (baseline 83% 13/14)	Expected	A	Expected	G	Expected	G	Expected	G	Varies between Oxford City – 78% And Vale of WH – 91%
OCC		83.5%		84.0%		84.5%		85%		
		Actual		Actual		Actual		Actual		
		82.1%		84.5%		84.7%		87.8%		
4.2	84% of children will achieve Level 2b or above in reading at the end of Key Stage 1 of the academic year 2012/13 (baseline 81% 12/13 academic year)	Expected		Expected	A					
OCC		84%		Actual		82%				
4.3	80% of children at the end of Key Stage 2 will achieve Level 4 or above in reading, writing and maths (baseline 78% 12/13 academic year)	Expected		Expected	A					
OCC		80%		Actual		77%				
4.4	63% of young people achieve 5 GCSEs at A*-C including English and Maths at the end of the academic year 2013/14	Expected		change of						Change of definition within the academic year means that the published figure (based

OCC	(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					
OCC	(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 2 and 3 in maths.			Expected 73%	A					
OCC	(baseline 71% 12/13 academic year)			Actual 71%						
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	Expected Primary: 75% Secondary: 87%	A	Expected Primary: 86% Secondary: 85%	A	Expected Primary: 86% Secondary: 85%	A	Indicator for 2013/14 academic year was for proportion of pupils attending good/ outstanding schools. For 2014/15 (Q3 onwards) this has

OCC	b) secondary schools to 85% at the end of 14/15 academic year (baseline 82% 13/14)	Actual Primary 78% Secondary 85%		Actual Primary: 79% Secondary: 85%		Actual Primary: 81% Secondary: 82%		Actual Primary: 84% Secondary: 86%		changed to proportion of schools that are good/ outstanding	
4.7	Of those pupils at School Action Plus, increase the proportion achieving 5 GCSEs at A* - C including English and Maths to 17% (baseline 10% 12/13 academic year)					Expected 17%	R				
OCC						Actual 8%					
4.8 a	To reduce the persistent absence rates in primary schools to 2.8% (baseline 3.2% 12/13 academic year)			Expected Primary: 2.8%	G					Data updated with validated figures	
OCC				Actual 1.9%							
4.8 b	To reduce the persistent absence rates in secondary schools to 6.7% (baseline 7.4% 12/13 academic year)			Expected 6.7%	G						
OCC				Actual 6.4%							
4.9	Continue to reduce the number of young people not in education, employment or training to below 5% (baseline 4.7% - 937 young people, 2013/14)	Expected <7%	G	Expected <7%	G	Expected <5%	G	Expected <5%	G	West Oxfordshire hub area – 2.9% Banbury and Littlemore hub areas – 5.3%	. This equates to 657 young people.
OCC		Actual 5.4%		Actual 6.0%		Actual 3.7%		Actual 3.6%			

4.1 0	Continue to reduce the proportion of young people whose NEET status is not known, to less than 5% (March 15) (Baseline 11% March 14)	Expected		Expected		Expected		Expected	A	S W Oxon hub area – 4.1% Banbury and Bicester hub areas – 6.4%
OCC		<10%	G	<64%	G	<20%	G	<5%		
		Actual		Actual		Actual		Actual		
		5.4%		47.6%		7.5%		5.2%		

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

5.1	1800 people to receive information and advice about areas of support as part of community information networks	Expected		Expected		Expected		Expected	G	Contract runs from 1 st November. The target for the first year of the contract (1 st Nov 2013 – 31 st Oct 2014) was 6,800.
OCC		450		900	G	1350	G	1800		
		Actual		Actual		Actual		Actual		
				1284		Not yet available		25,650		
5.2	Excess under 75 mortality in adults with serious mental health illness (PHOF 4.9 from outcomes framework) Baseline 350.3 in 2011/12 (England average 337.4).							Expected	R	Figure is for 2012/13 and represents an increase. National data is 347.2. This figure is historical and does not reflect impact of in-year activity. This measure forms part of the outcomes based contract and will be measured from 2017-18 when that contract should have impacted on the physical health issues that drive this measure. In the meantime measures have been introduced into the outcomes based contract to reduce smoking and obesity prevalence amongst people with severe mental illness.
CCG								< 350.3		
								Actual		
								412.0		

5.3	Access to psychological therapies to be improved so that more than 50% of people who have completed treatment having attended at least 2 treatment contacts are moving to recovery			Expected						Good levels of recovery achieved by local providers.
OCC				>50%	G					
				Actual						
				61%						
5.4	At least 60% of people with learning disabilities will have an annual physical health check by their GP (baseline 45.7% 2013/14)						Expected			Figure remains provisional as data not yet received from all practices.
CCG							60%			
							Actual			
							nya			
5.5	Reduce the number of emergency admissions for acute conditions that should not usually require hospital admission for people of all ages (2013/14 baseline: 951.4 per 100,000 population)	Expected		Expected		Expected		Expected		Although performance across the year has not improved on last year, it has improved each quarter and is considerably better than the national rate of 1112.
		Less than 951.4 per 100,000		Less than 951.4 per 100,000	R	Less than 951.4 per 100,000	R	Less than 951.4 per 100,000	A	
CCG		Actual		Actual		Actual		Actual		
		na		1010.8		966.1		964.6		
5.6	Reduce unplanned hospitalisation for chronic conditions that can be actively managed (such as congestive heart failure, diabetes, asthma, angina, epilepsy and hypertension) for people of all ages. (2012/13 baseline 565.4 per 100,000 population)	Expected		Expected		Expected		Expected		
		565.4 per 100,000		565.4 per 100,000	G	565.4 per 100,000	G	565.4 per 100,000	G	
CCG		Actual		Actual		Actual		Actual		
		na		534.7		538.7		536.4		
5.7	Increase the employment rate amongst people with mental illness from a baseline of 9.9% in 2013/14						Expected		G	This represents the % of people with severe mental illness in paid employment from amongst the population of patients
							>9.9%			

CCG								Actual 16%		supported by Oxford Health NHSFT. Employment rates remain a priority for OCCG in outcomes based contracting, and will also form the basis of OCCG performance around mental health for the NHS Quality Premium for 2015/16.
Priority 6: Support older people to live independently with dignity whilst reducing the need for care and support										
6.1	Reduce the number of days that a patient is delayed in hospital by 38% from an average of 4688 per month in 2012/13 to 2908 per month in 2014/15 (baseline 14.8 days in acute hospitals)	Expected		Expected		Expected		Expected		A system wide DTOC plan has been adopted across commissioners and all providers and there are targets to halve DTOC from the January 2015 level and reduce days delayed owing to DTOC within the Better Care Fund. These plans are being reviewed at July 2015 to assess for maximum impact.
OCC		2908	R	2908	R	2908	R	2908 per month	R	
		Actual		Actual		Actual		Actual		
		3603		3922		4116		4420		
6.2	Reduce the number of avoidable emergency admissions to hospital for older people (aged 65+) per 100,000 population from a baseline of 15,849 in 13/14	Expected		Expected		Expected		Expected		Non-elective admissions were up by 2.8% for 2014-15 financial year. A majority of these are attributable to frail older patients with multi-morbidities. There are system wide initiatives to increase the number of people treated in the community including the Better Care Fund. A long term conditions strategy is being developed, and whilst there is an improvement in admissions for ambulatory sensitive our work on ambulatory emergency care incorporated in the Better Care Fund should drive further improvement.
		<15,849		<15,849		<15,849				
		Actual		Actual		Actual		Actual		
CCG				16,161	R	16,685	R	16,492	R	

6.3	Reduce the number of permanent admissions of older people (aged 65+) to residential and nursing care homes from 582 in 2012/13 to 546 in 2014/15	Expected		Expected		Expected		Expected		10% above target. 3% above benchmark (12/13 data in line with Better care Fund). 4% reduction on last year
OCC		136	A	275	A	410	A	546	A	
		Actual		Actual		Actual		Actual		
		172		324		445		598		
6.4	Increase the proportion of older people with an ongoing care package supported to live at home from 60.0% in April 2014 to 61.9% in April 2015	Expected		Expected		Expected		Expected		
OCC		60.0%	A	60.7%	G	61.3%	G	61.9%	G	
		Actual		Actual		Actual		Actual		
		61.4%		62.0%		61.9%		62.7%		
6.5	60% of the expected population (5134 out of 8557) with dementia will have a recorded diagnosis (baseline 44.2% or 3929 people)	Expected		Expected		Expected		Expected		Oxfordshire did not quite meet the local target of 60% for 2014-15 in spite of a considerable investment of time and resources from the CCG and local GPs. In 2015/16 we are required to achieve the national target of 67%. A change in the way that Oxfordshire's prevalence is calculated (reduced levels of vascular dementia) means that the figure of <60% on 31/3/15 becomes >60% on 1/4/15. The current procurement of a new Dementia Support Service will encourage engagement with this KPI from primary care during 2015/16.
CCG		48.2%		52.2%	No clear data	56.6%	A	60.0%	A	
		Actual		Actual		Actual		Actual		
		na		47.4%		53.4%		57.8		
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	R	Expected	R	Expected	R	Expected	R	The issue remains low levels of community based referrals (with referrals from hospital above the expected contract level)..
		469		938		1406		1875		

OCC	from a baseline of 881 in 2013/14	Actual 196		Actual 391		Actual 570		Actual 764		
6.7	Increase proportion of older people (aged 65+) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services to 80% by April 2015 from a baseline of 71.7% in April 2013							Expected 80%		Data not available until end of July 2015
OCC								Actual		
6.8	Maintain the number of organisations providing social care in Oxfordshire that meet the standard of treating people with respect and involving them in their care at above 95%	Expected 95%	G	Expected 95%	G	Expected 95%	G	Expected 95%	G	
OCC		Actual 95%		Actual 96%		Actual 96%		Actual 96%		
6.9	Target to be developed around the Better Care Fund national patient/ service user experience measure							Expected		Measure not yet developed nationally
OCC								Actual		
6.10	Ensure an additional 523 Extra Care Housing places by the end of Mar 2015, bringing the total number of places to 768 by the end of March 2015			Expected	G	Expected	G	Expected 768	A	714 units delivered. One scheme for 54 flats in Kidlington will not complete building works until May.
OCC				Actual 512		Actual 512		Actual 714		
6.11	Increase the proportion of people approaching the end of life who receive consistent care that is coordinated effectively							Expected Target tbc		Work is still underway to achieve a useful local dataset to inform this indicator. National End of Life Intelligence data that is

CCG	across all relevant settings leading to patients dying in their preferred place of care. Baseline and targets to be determined							Actual			rolling annual data and latest is 13/14 Q4 to 14/15 Q3 which gives an Oxfordshire figure of 48.3% deaths in usual place of residence vs an England figure of 45.1%.
Priority 7: Working together to improve quality and value for money in the Health and Social Care System											
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 care coordination, 7 day access and accountable lead professionals							Expected			Measure not developed nationally
		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			Measure not developed nationally
		Actual									
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	Expected 17,000	A		
OCC		Actual 15,723		Actual 15,843		Actual 16,039		Actual 16,265			
7.4	At least 880 carers breaks jointly funded and accessed via GPs (currently 880 at Apr 2014)	Expected 220	G	Expected 440	G	Expected 660	G	Expected 880	G		

OCC		Actual 459		Actual 747		Actual 880		Actual 1,027			
-----	--	----------------------	--	----------------------	--	----------------------	--	------------------------	--	--	--

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
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%	R	Expected 60%	A	Expected 60%	A	Expected 60%			Indicator was previously separated into 60-69 and 70-74 age groups, however from Q2 these are no longer reported separately. Q3 data updated
NHS England		Actual 57.3%		Actual 57.0%		Actual nya					
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. No CCG locality should record less than 15% and all should aspire to 20%	Expected 3.75%	G	Expected 7.5%	G	Expected 11.25%	G	Expected 15%	G	Q4 - All CCG localities achieved the 15% target. Only Oxford City (17.9%) did not achieve the aspired 20% (It must be noted that Oxford City performance increased from 13.4% in 2013/14 to 17.9% in 2014/15).	
OCC		Actual 5.4%		Actual 11.6%		Actual 16.9%		Actual 21.2%			
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%	R	Expected 58%	R	Expected 66%	R	Q4 - No CCG locality achieved the 66% target. 4 of the 6 achieved	The rate of 53.3% for the year means that Oxfordshire ranks above the averages across

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
OCC	50% with all aspiring to 66% (Baseline 46% Apr 2014)	Actual 41.5%		Actual 43.1%		Actual 48.3%		Actual 53.3%		the 50% aim. (North East, North, West, South West). Oxford City (48.4%) and South East (48.8%) did not. Additionally, all localities improved on their previous year's uptake %).	Thames Valley (48.9%), South of England (47.7%) and Nationally (48.8%).
8.4	At least 3800 people will quit smoking for at least 4 weeks (Baseline 3622 in 13/14) Baseline women smoking in pregnancy (%) – 9% (Q4 1314)	Expected 868		Expected 1672		Expected 2574		Expected 3800			Women smoking in pregnancy – 8%
OCC		Actual 626	R	Actual 1133	R	Actual 1633	R	Actual 1955	R		
8.5	8.6% of opiate users successfully leaving treatment by the end of 14/15 (baseline 6.5% 2013/14)	Expected 7.0%		Expected 7.5%		Expected 8.0%		Expected 8.6%			The number of non- opiates users successfully completing treatment is below the set target. Through the introduction of the Public Health Outcome Framework the performance measure has changed from counting drug users safely
OCC		Actual 7.1%	G	Actual 6.9%	R	Actual 7.2%	R	Actual 6.7%	R		
8.6	38.2% of non-opiate users successfully leaving treatment by the end of 14/15 (baseline	Expected 21.2%	R	Expected 26.9%	R	Expected 32.6%	R	Expected 38.2%	R		

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
OCC	15.5% 2013/14)	Actual 14.5%		Actual 17.7%		Actual 17.7%		Actual 20.2%			supported in services to counting those who successfully complete treatment. Current performance is being addressed with a comprehensive recovery plan with Public Health England support to develop and implement system wide action plans. In addition, a new Integrated Drug and Alcohol Treatment Service has been commissioned and commenced delivery on 1 April 2015.
Priority 9: Preventing chronic disease through tackling obesity											
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 2013)			Expected 14.9% or less	R					Oxford City – 21% Is the only locality above 19%. South Oxfordshire has the lowest obesity level – 15.2%	
OCC				Actual 16.9%							
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%	R	Report from the Active People Survey 2014-15	

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
District council	22.2% against 28.5% nationally, 2013-14 Active People Survey)							Actual 23%			
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 of less than 50%	Expected 63%		Expected 63%		Expected 63%		Expected 63%			
NHS England & CCG		Actual 60.3%	A	Actual 60.5%	A	Actual 59.7%	A	Actual 60.4%	A		

No	Indicator	Q1 Apr-Jun	RAG	Q2 Jul-Sept	RAG	Q3 Oct-Dec	RAG	Q4 Jan-Mar	RAG	Locality spread	Notes
Priority 10: Tackling the broader determinants of health through better housing and preventing homelessness											
10.1	The number of households in temporary accommodation as at 31 March 2015 should be no greater than the level reported in March 2014 (baseline 197 households in Oxfordshire)							Expected 197 or less	G	56% (107) are in Oxford City 18% (34) in Cherwell 11% (21) in South 9% (18) in Vale 6% (12) in West Oxon.	
								Actual 192			
10.2	At least 75% of people receiving housing related support will depart services to take up independent living (baseline 83.9% in 13/14)	Expected 75%	G	Expected 75%	G	Expected 75%	G	Expected 75%	G	The majority of people receive a service from a county wide service which means it isn't possible to accurately provide data on a locality basis	Data has been revised due to the removal of domestic violence cases. Overall figure for the year – 87%
		Actual 87%		Actual 86%		Actual 87%		Actual 88%			
10.3	At least 80% of households presenting at risk of being homeless and known to District Housing services or District funded advice agencies will be prevented from becoming homeless (baseline 81% in 2013- 2014 when there were 2837 households known to services)	Expected 80%	G	Expected 80%	G	Expected 80%	G	Expected 80%	G	Varies from 59% in West Oxfordshire to 89% in Oxford City.	
		Actual 82%		Actual 86%		Actual 84%		Actual 86%			
10.4	Establish a baseline of the number of households in Oxfordshire who have received significant increases in the						G	Target 550	G		Total for the year = 1,468 against a target of 550

No	Indicator	Q1 Apr-Jun	RAG	Q2 Jul-Sept	RAG	Q3 Oct-Dec	RAG	Q4 Jan-Mar	RAG	Locality spread	Notes
Affordable Warmth Network	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 (Q1&Q2)		Actual 328		Actual 428			
10.5	Ensure that the number of people estimated to be sleeping rough in Oxfordshire does not exceed the baseline figure of 74 in 2013-14							Target < 74			
District Councils								Actual 68	G		

No	Indicator	Q1 Apr-Jun	RAG	Q2 Jul-Sept	RAG	Q3 Oct-Dec	RAG	Q4 Jan-Mar	RAG	Locality spread	Notes
Priority 11: Preventing infectious disease through immunisation											
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%	G	Expected 95%	A	Expected 95%	A	Expected 95%	G	Oxford City falls below the 94% target (93.8%). Highest performing locality – North East – 98.1%	
NHS England		Actual 95.2%		Actual 94.6%		Actual 92.5%		Actual 95.0%			
11.2	At least 95% children receive dose 2 of MMR vaccination by age 5 (currently 93.7%) and no CCG locality should perform below 94%	Expected 95%	R	Expected 95%	R	Expected 95%	A	Expected 95%	A	At Q4 North Oxfordshire = 91.7%, Oxford City = 92.1%, South West = 93.3% Others 3 are at or over 94%	
NHS England		Actual 92.6%		Actual 91.9		Actual 95.2%		Actual 92.1%			
11.3	At least 60% of people aged under 65 in “risk groups” receive flu vaccination (baseline 55% 13/14)							Expected 55%			
NHS England							Actual				
11.4	At least 90% of young women will receive both doses of HPV vaccination. (baseline to be confirmed)							Expected Over 90%			6 month delay in data being reported
NHS England							Actual				