

	Measures in Technical Definition	Indicator & Description	Responsible for Inputting into Scorecard	Data Source	Frequency	Threshold	Provider / CCG	2013/14 Outturn	2014/15 Outturn	Jan-15	Feb-15	Mar-15	Sparkline	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Year to Date Sum or Median Average		
Quality & Local Premiums																												
Quality & Local Premiums	QP1	Urgent & Emergency Care	Achieving a reduction in avoidable emergency admissions.	HIA	Unify	Quarterly	15% of QP	B&A CCG	1,583		556				534		475									1009		
	QP3	Urgent & Emergency Care	An increase in level of discharges at weekend and bank holidays*	HIA	HSCIC	Quarterly	15% of QP	B&A CCG	20.11%						18.98%		17.41%										18.98%	
	QP6	Mental Health Measure	Reduction in the number of people with severe mental illness who are smokers	HIA		Quarterly	15% of QP	B&A CCG							Awaiting Q2 data													
	QP7	Mental Health Measure	Increase in the proportion of adults with secondary mental health conditions who are in paid employment.	HIA	HSCIC mhlds reports	Quarterly	15% of QP	B&A CCG	21.30%						18.20%		available end of Sept15										18.20%	
	L1		C3.13 Hip fracture: multifactorial risk assessment	HIA	HSCIC	Quarterly	10% of QP	B&A CCG	98.70% (2013)						In year data available December 2015													
	L2		C2.3 People with COPD and Medical Research Council (MRC) Dyspnoea Scale ≥ 3 referred to a pulmonary rehabilitation programme.	HIA	QOF data	Yearly	10% of QP	B&A CCG	98.01% (2013/14)						Latest QOF data available 2013/14													
	QP1	Urgent and Emergency Care	Reducing NHS-responsible delayed transfer of care	HIA		Quarterly	30% of QP	Slough CCG	1,998						183	157	170	193	93	159								955
	QP2	Mental Health Measure	Increase in the proportion of adults with secondary mental health conditions who are in paid employment.	HIA	HSCIC mhlds reports	Quarterly	30% of QP	Slough CCG	9.40%						11.60%		available end of Sept15											11.60%
	L1		C2.4 People with diabetes who have received all eight care process.	HIA	NDA	Quarterly	10% of QP	Slough CCG	76.37% (2012/13)						Expected date for next publication : Sept 2015													
	L2		C2.13 Estimated diagnosis for people with dementia	HIA	Primary Care Tool	Quarterly	10% of QP	Slough CCG	-	58.69%	57.49%	58.05%	58.69%		Methodology change in 2015/16 - data available up to Mar 2015			No Data	59%	61%								
	QP2	Urgent and Emergency Care	Reducing NHS-responsible delayed transfer of care	HIA	DTOC	Quarterly	30% of QP	WAM CCG																				
	QP7	Mental Health Measure	Increase in the proportion of adults with secondary mental health conditions who are in paid employment.	HIA	HSCIC mhlds reports	Quarterly	30% of QP	WAM CCG	13.80%						14.40%		available end of Sept15											14.40%
	L1		Increase in the number of newly identified carers (as described under the terms of the 2015 Care Act) who are flagged on the GP registers in WAMCCG	HIA	Local collection	Quarterly	10% of QP	WAM CCG							Realigning data collection methodology													
	L2		%Percentage of diabetic patients with all eight care process recorded	HIA	NDA	Quarterly	10% of QP	WAM CCG	61.41% (2012/13)						Expected data for next publication: Sept 2015													
Outcome Measures																												
Ambition Outcome Measures (from 2014/15)	E.A.1	Rate per 100,000 pr potential years of life lost (PYLL) prematurely from causes considered amenable to healthcare - a rate generated by number of amenable deaths divided by the population of the area: [adults, children and young people]	HIA	IC Indicator Portal	Annual	1,431	B&A CCG	1,718	2,712					Expected date for next publication: Nov-15 Usual publication date (Feb-16 (Deprivation breakdown))														
						2,198	Slough CCG	2,592	4,523					Expected date for next publication: Nov-15 Usual publication date (Feb-16 (Deprivation breakdown))														
						1,588	WAM CCG	1,789	3,216					Expected data for next publication: Nov-15 Usual publication date (Feb-16 (Deprivation breakdown))														
	E.A.2	Improving the health-related quality of life for people with long-term conditions?	HIA	GP Survey	Bi-Annual	78.00%	B&A CCG	51.58%	59.59%	64.37%					Latest released published data for July 2015 [covering periods Jul-Sept 2014 and Jan-Mar 2015]													
						72.60%	Slough CCG	50.05%	57.03%	57.40%					Latest released published data for July 2015 [covering periods Jul-Sept 2014 and Jan-Mar 2015]													
						77.70%	WAM CCG	49.39%	61.21%	64.30%					Latest released published data for July 2015 [covering periods Jul-Sept 2014 and Jan-Mar 2015]													
	E.A.4	Composite avoidable emergency admissions -Reducing the amount of time people spend avoidably in hospital through better and more integrated care in the community outside of hospital (QP)	HIA	SUS	Quarterly	1,628	B&A CCG	1,583 (Plan)	2,130 (Actual)	396					407		407				407							814
						2,464	Slough CCG	2,216 (Plan)	3,723 (Actual)	554					616		616				616							1232
						1,632	WAM CCG	1,560 (Plan)	2,785 (Actual)	390					408		408				408							816
									771						653		603				q3							1256
	E.A.5	Increasing the proportion of people having a positive experience of hospital care	HIA		Annual	110	B&A CCG																					
						159.7	Slough CCG																					
						159.7	WAM CCG																					
	E.A.6	Increasing the number of people with mental and physical health conditions having a positive experience of care outside hospital, in general practice and in the community	HIA		Annual		B&A CCG																					
						Slough CCG																						
						WAM CCG																						
E.A.7	The proportion of people reporting poor experience of General Practice and Out-of-Hours Services	HIA	GP Survey	Bi-Annual	8.27%	B&A CCG	methodology change from reporting 'good' to	7.05%	9.85%					Latest released published data for July 2015 [covering periods Jul-Sept 2014 and Jan-Mar 2015]														
					14.34%	Slough CCG		12.23%	12.08%					Latest released published data for July 2015 [covering periods Jul-Sept 2014 and Jan-Mar 2015]														
					9.37%	WAM CCG		8.08%	8.09%					Latest released published data for July 2015 [covering periods Jul-Sept 2014 and Jan-Mar 2015]														
E.A.8	Hospital deaths attributable to problems in care	HIA		Annual										Nationally Indicator in Development [Available from Autumn 2015]														
E.A.10	One Year Survival from all Cancers	HIA	IC Indicator Portal	Annual		B&A CCG	67.22 (2011)							Data Released June 2014 [2011: Diagnosis 1/1 to 31/12/2011 Followed up until 31/12/2012] still awaiting data - last checked July 2015														
						Slough CCG	65.59 (2011)							Data Released June 2014 [2011: Diagnosis 1/1 to 31/12/2011 Followed up until 31/12/2012] still awaiting data - last checked July 2016														
						WAM CCG	66.7 (2011)							Data Released June 2014 [2011: Diagnosis 1/1 to 31/12/2011 Followed up until 31/12/2012] still awaiting data - last checked July 2017														
		Average monthly emergency admissions due to falls				0.0097	B&A CCG																					
		Percentage of diabetic patients with all eight process recorded				0.7999	Slough CCG																					
		Average monthly emergency admissions due to falls				0.0088	WAM CCG																					

Measures in Technical Definition	Indicator & Description	Responsible for Inputting into Scorecard	Data Source	Frequency	Threshold	Provider / CCG	2013/14 Outturn	2014/15 Outturn	Jan-15	Feb-15	Mar-15	Sparkline	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Year to Date Sum or Median Average								
Infection Control																																	
E.A.S.4	MRSA	Number of MRSA Bacteraemia	HIA	Unify for CCG and Trust by CCG	Monthly	0	RBFT	0	1	0	0	0		0	1	0	0	0	0	0	0	0	0	0	0	1							
						0	FHFT	-	-	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1				
						0	FPH (Trust Level)	4	2	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
						0	HWPB (Trust Level)	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1		
						0	ASPH	2	1	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
						0	BHFT	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
						0	B&A CCG	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
						0	Slough CCG	2	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
						0	WAM CCG	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
						E.A.S.5	CDIFF	Number of Clostridium Difficile	HIA	Unify for CCG and Trust by CCG	Monthly	27	RBFT	40	29	2	0	3		3	3	3	1	5	4	3						22	
31	FHFT	-	-																												29		
11	FPH (Trust Level)			10	0							0	1																				11
20	HWPB (Trust Level)	31	26	3	2							1																					19
17	ASPH	10	18	3	2							2																					8
2	BHFT East	0	0	0	0							0																					0
4	BHFT West	5	0	0	0							0																					0
25	B&A CCG	28	13	0	0							1																					13
24	Slough CCG	23	24	3	0							0																					13
22	WAM CCG	19	38	5	1							1																					13
NHS Constitution Standards																																	
E.B.1	RTT Waiting Times	% of adjusted admitted pathways within 18 weeks for admitted patients whose clocks stopped during the period on an adjusted basis	HIA	Unify for CCG and Trust by CCG	Monthly	90%	B&A CCG	90.82%	89.98%	90.61%	89.51%	89.25%		89.60%	89.78%	89.98%	89.26%	88.33%	87.54%	79.38%							89.26%						
						90%	Slough CCG	87.24%	87.61%	87.87%	86.09%	73.68%		87.31%	87.61%	85.98%	86.18%	86.69%	87.32%	80.51%											86.69%		
						90%	WAM CCG	88.97%	89.46%	88.47%	87.15%	86.15%		85.69%	88.37%	90.08%	87.03%	87.35%	87.46%	85.22%												87.35%	
						90%	RBFT (Eberks CCGs)	77.51%	64.86%	65.09%	69.66%		64.74%	60.69%	62.75%	69.88%	72.30%	75.76%	65.88%														65.88%
						90%	FHFT (Eberks CCGs)	89.74%	89.74%	91.64%	90.77%		87.81%	88.80%	88.82%	87.57%	87.09%	85.98%	83.08%														87.57%
						90%	ASPH (Eberks CCGs)						76.19%	83.78%	75.00%	82.35%	82.14%	81.08%	86.96%														82.14%
						90%	RBFT (Trust Level)	No Data	69.10%	71.45%	75.41%		75.50%	78.10%	78.50%	80.60%	82.10%	83.20%	83.10%														80.60%
						90%	FPH (Trust Level)	89.00%	90.00%	90.00%	87.00%		91.90%	92.2%	90.50%	86.50%	82.60%	76.70%	73.70%														84.55%
						90%	HWPB (Trust Level)	90.88%	91.20%	88.90%	84.40%		90.20%	91.50%	92.00%	91.10%	87.90%	90.20%	86.92%														90.20%
						90%	ASPH (Trust Level)	87.58%	89.30%	89.50%	87.84%		88.55%	92.55%	92.21%	91.25%	89.21%	88.82%	No Data														90.23%
E.B.2	RTT adjusted admitted no. treatment functions/specialities not achieved	HIA	Unify for CCG Data	Monthly	0	B&A CCG	2	3	2	2	4		4	3	4	4	5	7	10							9							
					0	Slough CCG	6	5	5	4	6		4	4	4	6	5	8											8				
					0	WAM CCG	4	5	4	4	5		4	4	3	4	2	4												8			
					95%	B&A CCG	97.42%	96.01%	95.67%	93.17%	95.77%		95.46%	96.98%	97.03%	95.54%	95.73%	92.22%	90.60%												95.54%		
					95%	Slough CCG	95.73%	94.40%	94.14%	91.27%	94.56%		94.39%	95.07%	95.56%	95.45%	95.51%	94.77%	93.51%													95.07%	
					95%	WAM CCG	96.04%	94.91%	94.61%	89.77%	94.92%		95.32%	96.11%	95.48%	95.05%	95.31%	93.31%	94.16%													95.31%	
					95%	RBFT (Eberks CCGs)		92.73%	93.04%	72.96%	93.15%		96.19%	98.41%	98.21%	94.64%	96.21%	96.17%	95.74%													96.19%	
					95%	FHFT (Eberks CCGs)	N/A	95.95%	95.24%	95.26%	95.34%		94.90%	95.21%	95.51%	95.46%	95.13%	93.03%	92.29%													95.13%	
					95%	ASPH (Eberks CCGs)							93.15%	97.84%	94.38%	95.89%	93.57%	94.90%	93.88%													94.38%	
					95%	RBFT (Trust Level)	No Data	95.80%	93.31%	94.74%		96.80%	98.10%	97.70%	95.60%	96.80%	95.10%	94.30%														96.80%	
95%	FPH (Trust Level)	96.00%	95.00%	95.00%	96.00%		95.80%	96.10%	95.00%	95.10%	88.50%	82.10%	82.00%														95.00%						
95%	HWPB (Trust Level)	95.25%	95.10%	95.06%	95.06%		95.10%	95.10%	95.50%	95.30%	95.20%	94.30%	93.47%														95.10%						
95%	ASPH (Trust Level)	95.25%	95.02%	95.09%	95.48%		95.01%	96.29%	95.94%	95.12%	95.19%	95.20%	95.76%														95.20%						
E.B.3	RTT non-admitted no. treatment functions/specialities not achieved	HIA	Unify for CCG Data	Monthly	0	B&A CCG	2	8	5	5	6		2	3	3	6	5	9	9							9							
					0	Slough CCG	8	10	6	6	9		4	9	7	9	7	8											11				
					0	WAM CCG	8	9	6	9	7		2	7	7	6	6	7	9											8			
					92%	B&A CCG	92.56%	93.82%	91.97%	93.68%	94.59%		94.45%	95.03%	94.05%	94.00%	92.97%	92.66%	93.30%												94.00%		
					92%	Slough CCG	90.13%	92.17%	89.42%	90.46%	91.60%		92.52%	93.24%	93.35%	93.39%	92.19%	92.34%	92.48%													92.52%	
					92%	WAM CCG	90.70%	92.97%	90.25%	92.29%	93.22%		93.43%	93.79%	93.11%	93.19%	92.77%	92.66%	93.11%													93.11%	
					92%	RBFT (Eberks CCGs)		91.30%	83.50%	90.71%	92.03%		92.56%	92.72%	90.60%	92.03%	91.39%	90.87%	90.72%													91.39%	
					92%	FHFT (Eberks CCGs)	N/A	93.87%	93.05%	92.35%	93.25%		93.46%	94.47%	94.37%	93.82%	92.97%	92.91%	93.19%													93.46%	
					92%	ASPH (Eberks CCGs)							96.62%	96.77%	95.45%	95.96%	96.10%	95.64%	95.50%													95.96%	
					92%	RBFT (Trust Level)	No Data	89.20%	91.35%	91.92%		93.20%	93.00%	92.90%	93.80%	93.60%	92.80%	92.60%														93.00%	
92%	FPH (Trust Level)	95.00%	94.00%	94.00%	95.00%		95.40%	95.80%	94.90%	94.70%	92.40%	92.70%	93.10%														94.70%						
92%	HWPB (Trust Level)	93.43%	95.53%	91.54%	92.85%		93.20%	94.20%	94.30%	93.60%	93.10%	93.00%	92.96%														93.20%						
92%	ASPH (Trust Level)	95.60%	95.13%	95.19%	95.48%		96.15%	96.73%	96.26%	95.96%	96.03%	96.42%	96.13%														96.15%						
E.B.4	Diagnostics waits	The percentage of patients waiting 6 weeks or more for a diagnostic test [15 key diagnostic test (DM01) of less than 1%]	HIA	Unify for CCG Data	Monthly	<=1%	B&A CCG	2.98%	3.39%	6.66%	4.60%	2.47%		1.92%	3.77%	4.56%	3.81%	3.94%	3.27%	1.78%							3.29%						
						<=1%	Slough CCG	1.40%	2.16%	4.25%	3.43%	1.20%		0.56%	0.77%</																		

Measures in Technical Definition	Indicator & Description	Responsible for Inputting into Scorecard	Data Source	Frequency	Threshold	Provider / CCG	2013/14	2014/15	Jan-15	Feb-15	Mar-15	Sparkline	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Year to Date						
							Outturn	Outturn																							Sum or Median Average
NHS Constitution Standards	Quality	Trust Quality Schedules	Monthly	< =1%	RBFT (Trust Level)			7.30%	0.00%	0.20%	0.10%		0.70%	0.40%	0.10%	0.20%	0.80%	1.00%	0.90%						0.59%						
				< =1%	FPH (Trust Level)		4.40%	9.80%	6.30%	1.80%		5.40%	7.10%	9.60%	8.80%	8.90%	7.30%	3.50%										7.23%			
				< =1%	HWPB (Trust Level)		2.70%	5.00%	3.50%	1.60%		0.60%	0.90%	0.10%	0.00%	0.00%	0.00%	0.03%											0.23%		
				< =1%	ASPH (Trust Level)		2.00%	8.00%	7.20%	8.60%		10.70%	13.60%	13.70%	7.90%	2.70%	0.74%	0.37%											7.10%		
	E.B.5	A&E waiting time	A&E waiting time - total time spent in the A&E Department, % less than 4 hours [standard is 95% of patients seen within 4 hours]	Monthly	HIA	NHSE Statistics & Trust Quality Schedules	95%	RBFT	92.94%	94.44%	92.60%	92.12%	92.52%		95.09%	95.40%	96.79%	95.06%	96.11%	95.30%	94.46%						95.30%				
					Quality		95%	FHFT	N/A	94.03%	90.72%	95.74%	95.11%		95.17%	95.14%	96.04%	96.63%	95.72%	93.70%	94.79%							95.17%			
					HIA		95%	FPH			92.10%	95.30%	95.10%		93.50%	95.20%	96.70%	96.40%	95.90%	93.70%	95.30%								95.30%		
					Quality		95%	HWPB			89.60%	96.40%	95.20%		97.70%	97.50%	96.80%	96.90%	95.60%	94.31%	94.31%									96.80%	
	E.B.6	2 Week Wait	Maximum two-week wait for First outpatient appointment for patients referred urgently with suspected cancer by GP	Monthly/Quarterly	HIA	Open Exeter	95%	ASPH	93.64%	89.88%	87.59%	89.34%	88.25%		89.09%	90.84%	90.58%	89.37%	88.56%	88.84%	88.32%						89.09%				
					Quality		93%	B&A CCG	95.41%	95.35%	92.76%	95.72%	94.79%		93.95%			94.20%	94.37%										94.20%		
					HIA		93%	Slough CCG	96.19%	95.17%	92.31%	95.69%	95.89%		94.10%			94.11%	96.85%												94.11%
					Quality		93%	WAM CCG	95.87%	94.48%	94.50%	96.31%	95.13%		95.05%			94.29%	95.11%												
	E.B.7	2 Week Wait	Maximum two-week wait for First outpatient appointment for patients referred urgently with breast symptoms (where cancer was not initially suspected)	Monthly/Quarterly	HIA	Open Exeter	93%	RBFT	93.30%		93.0%			88.39%			71.15%										76.91%				
					Quality		93%	HWPB	96.00%		96.6%			94.24%			94.77%	95.64%											94.77%		
					HIA		93%	FHFT	95.25%		96.2%			96.17%			94.29%	94.74%												94.74%	
					Quality		93%	ASPH	96.75%		95.6%			93.87%			93.74%	97.29%													93.87%
	E.B.8	31 Day Wait	Maximum 31-day wait for Diagnosis to first definitive treatment for all cancers	Monthly/Quarterly	HIA	Open Exeter	93%	B&A CCG	96.84%	97.05%	94.29%	100.00%	100.00%		95.35%			97.00%									97.00%				
					Quality		93%	Slough CCG	95.64%	98.76%	100.00%	100.00%	100.00%		97.27%			96.06%	100.00%											97.27%	
					HIA		93%	WAM CCG	97.97%	98.80%	100.00%	100.00%	100.00%		97.12%			95.00%	97.83%												97.12%
					Quality		93%	RBFT	93.85%		93.3%			80.87%			71.69%				92.70%										80.87%
	E.B.9	31 Day Wait	Maximum 31-day wait for Subsequent treatment where that treatment is Surgery	Monthly/Quarterly	HIA	Open Exeter	93%	HWPB	97.40%		96.2%			96.76%			95.51%										96.76%				
					Quality		93%	FHFT	97.25%		96.6%			98.14%			93.15%			96.91%									96.91%		
					HIA		93%	ASPH	97.40%		97.5%			94.74%			95.45%			95.80%										95.45%	
					Quality		96%	B&A CCG	98.62%	98.94%	100.00%	100.00%	100.00%		98.46%			99.24%	100.00%												99.24%
	E.B.10	31 Day Wait	Maximum 31-day wait for Subsequent treatment where that treatment is Anti-Cancer Drug Regime	Monthly/Quarterly	HIA	Open Exeter	96%	Slough CCG	97.71%	96.68%	100.00%	100.00%	100.00%		99.04%			99.06%										99.06%			
					Quality		96%	WAM CCG	99.02%	97.05%	100.00%	100.00%	100.00%		100.00%			98.77%	97.96%											98.77%	
					HIA		96%	RBFT	98.5%		%			97.05%			97.35%			95.58%										97.05%	
					Quality		96%	HWPB	98.8%		98.0%			99.49%			99.49%			100.00%											99.49%
	E.B.11	31 Day Wait	Maximum 31-day wait for Subsequent treatment where that treatment is a course of Radiotherapy	Monthly/Quarterly	HIA	Open Exeter	96%	FHFT	98.9%		98.6%			99.42%			99.00%										99.04%				
					Quality		96%	ASPH	99.8%		97.6%			97.43%			99.02%	98.99%											98.99%		
					HIA		94%	B&A CCG	98.32%	98.56%	100.00%	100.00%	100.00%		100.00%			94.29%	100.00%											100.00%	
					Quality		94%	Slough CCG	97.44%	97.14%	100.00%	100.00%	100.00%		100.00%			100.00%	100.00%												100.00%
	E.B.12	62 Day Wait	Maximum two month (62-day) wait from Urgent GP referral to first definitive treatment for cancer	Monthly/Quarterly	HIA	Open Exeter	94%	WAM CCG	97.64%	97.01%	100.00%	100.00%	92.31%		100.00%			97.96%									100.00%				
					Quality		94%	RBFT	96.7%		95.5%			98.39%			94.44%			87.88%									94.44%		
					HIA		94%	HWPB	95.9%		94.4%			100.00%			100.00%			100.00%										100.00%	
					Quality		94%	FHFT	100.0%		100.0%			No Data			100.00%			100.00%											100.00%
	E.B.13	62 Day Wait	Maximum two month (62-day) wait from Referral from an NHS screening service to first definitive treatment for all cancers	Monthly/Quarterly	HIA	Open Exeter	94%	ASPH	100.0%		100.0%			97.44%			No Data										97.44%				
					Quality		98%	B&A CCG	100.00%	99.13%	91.67%	100.00%	100.00%		100.00%			100.00%	100.00%											100.00%	
					HIA		98%	Slough CCG	100.00%	100.00%	100.00%	100.00%	100.00%		100.00%			100.00%	100.00%												100.00%
					Quality		98%	WAM CCG	100.00%	100.00%	100.00%	100.00%	100.00%		100.00%			100.00%	100.00%												100.00%
	E.B.14	62 Day Wait	Maximum two month (62-day) wait for First definitive treatment following a consultant's decision to upgrade the priority of the patient (all cancers) - no operational standard set	Monthly/Quarterly	HIA	Open Exeter	98%	RBFT	99.5%		99.5%			100.00%			100.00%										100.00%				
					Quality		98%	HWPB	100.0%		100.0%			100.00%			100.00%			100.00%									100.00%		
					HIA		98%	FHFT	100.0%		100.0%			No Data			100.00%			100.00%										100.00%	
					Quality		98%	ASPH	100.0%		100.0%			100.00%			100.00%			100.00%											100.00%
	E.B.15	62 Day Wait	Maximum two month (62-day) wait from Urgent GP referral to first definitive treatment for cancer	Monthly/Quarterly	HIA	Open Exeter	94%	B&A CCG	87.50%	82.59%	83.33%	94.44%	88.24%		81.97%			88.10%									86.36%				
					Quality		85%	Slough CCG	83.13%	78.49%	85.71%	75.00%	92.86%		92.86%			89.13%	93.75%										92.86%		
					HIA		85%	WAM CCG	82.19%	80.00%	77.78%	80.95%	73.91%		96.12%			97.41%	85.71%											96.12%	
					Quality		85%	RBFT	85.9%	78.6%		79.2%			79.16%			76.13%			73.14%										76.13%
	E.B.16	62 Day Wait	Maximum two month (62-day) wait from Referral from an NHS screening service to first definitive treatment for all cancers	Monthly/Quarterly	HIA	Open Exeter	85%	HWPB						91.88%			88.21%										88.21%				
					Quality		85%	FHFT	89.6%	87.9%		88.0%			84.41%			88.26%			86.21%								86.21%		
					HIA		85%	ASPH	89.8%	78.4%		77.9%			87.58%			82.34%			88.18%									87.58%	
					Quality		90%	B&A CCG	91.7%	90.00%	85.71%	66.67%	100.00%		100.00%			100.00%	100.00%			100.00%								100.00%	
	E.B.17	62 Day Wait	Maximum two month (62-day) wait for First definitive treatment following a consultant's decision to upgrade the priority of the patient (all cancers) - no operational standard set	Monthly/Quarterly	HIA	Open Exeter	90%	Slough CCG	91.7%	76.92%	No Data	No Data	100.00%		100.00%			100.00%									100.00%				
					Quality		90%	WAM CCG	93.0%	84.78%	50.00%	100.00%	100.00%		100.00%			100.00%	100.00%										100.00%		
					HIA		90%	RBFT	91.9%		88.4%			84.62%			93.81%														

	Measures in Technical Definition	Indicator & Description	Responsible for Inputting into Scorecard	Data Source	Frequency	Threshold	Provider / CCG	2013/14 Outturn	2014/15 Outturn	Jan-15	Feb-15	Mar-15	Sparkline	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Year to Date Sum or Median Average			
Direct Commissioning - Primary Care Measures																													
Direct Commissioning	E.D.1	Medical - Patient satisfaction: Satisfaction with the quality of consultation at the GP Practice	HIA	Primary Care	Bi-Annual	411	B&A CCG	403 (Jul-Sep13 and Jan-Mar14)	403 (Jan-Mar14 and Jul-Sep14)	397 (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
						398	Slough CCG	372 (Jul-Sep13 and Jan-Mar14)	372 (Jan-Mar14 and Jul-Sep14)	372 (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
						411	WAM CCG	404 (Jul-Sep13 and Jan-Mar14)	404 (Jan-Mar14 and Jul-Sep14)	403 (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
	E.D.2	Medical - Patient satisfaction: Satisfaction with the overall care received at the Surgery.	HIA	Primary Care	Bi-Annual	89.90%	B&A CCG	84.55% (Jul-Sep13 and Jan-Mar14)	83.56% (Jan-Mar14 and Jul-Sep14)	80.65% (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
						83.12%	Slough CCG	71.39% (Jul-Sep13 and Jan-Mar14)	69.81% (Jan-Mar14 and Jul-Sep14)	70.78% (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
						83.12%	WAM CCG	81.61% (Jul-Sep13 and Jan-Mar14)	82.82% (Jan-Mar14 and Jul-Sep14)	82.51% (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
	E.D.3	Medical - Patient Satisfaction: Satisfaction with accessing Primary Care.	HIA	Primary Care	Bi-Annual	73.55%	B&A CCG	69.33% (Jul-Sep13 and Jan-Mar14)	72.06% (Jan-Mar14 and Jul-Sep14)	68.55% (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
						70.35%	Slough CCG	56.06% (Jul-Sep13 and Jan-Mar14)	55.18% (Jan-Mar14 and Jul-Sep14)	54.61% (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
						70.35%	WAM CCG	67.43% (Jul-Sep13 and Jan-Mar14)	68.53% (Jan-Mar14 and Jul-Sep14)	69.22% (Jul-Sep14 and Jan-Mar15)		July 2015 publication is latest aggregated data covering period Jul-Sep14 and Jan-Mar15																	
Mental Health Measures																													
E.A.3	IAPT Access: The proportion of people with depression / anxiety (as per national public health data) that have entered psychological therapies.	HIA	BHFT Quality Schedule	Quarterly (Cumulative)	15%	B&A CCG	-	14.70%	4.10%		3.99%															q3	q4	7.90%	
					15%	Slough CCG	-	13.45%	4.05%		3.81%															q3	q4	7.72%	
E.A.S.1	Dementia Diagnosis rate: Diagnosis rate for people with dementia, expressed as a percentage of the estimated prevalence (as per the NHS England Dementia Prevalence Calculator v3, 2013)	HIA	Primary Care Tool	Monthly	67%	B&A CCG	-	66.17%	58.59%	64.35%	66.17%	Methodology changes for 201516, 1st data collection July 2015 publication															q3	q4	7.89%
					67%	Slough CCG	-	58.69%	57.49%	58.05%	58.69%	69.00%															q3	q4	
					67%	WAM CCG	-	56.01%	54.85%	55.01%	56.01%	61.30%															q3	q4	
E.A.S.2	IAPT recovery rate: The recovery rate is measured using the Patient Health Questionnaire which measures the level of depression / anxiety in a person. Recovery rate measures the proportion of people that were above the clinical cut-off before treatment but below following treatment.	HIA	MHDS	Quarterly	50%	B&A CCG	-	56.90%	49.70%		54.17%															q3	q4	54.17%	
					50%	Slough CCG	-	51.00%	50.30%		52.10%															q3	q4	81.53%	
					50%	WAM CCG	-	53.20%	54.30%		50.90%															q3	q4	50.90%	
E.B.S.3	Mental Health Measure - Care Programme Approach The proportion of people under adult mental illness specialties on CPA who were followed up within 7 days of discharge from psychiatric in-patient care during the period [Achieving at least 95%	HIA	MHDS	Quarterly	95%	B&A CCG	99.20%	75.00%	0.00%		100.00%															q3	q4	100.00%	
					95%	Slough CCG	96.98%	97.41%	98.00%		100.00%															q3	q4	96.67%	
					95%	WAM CCG	99.46%	99.52%	100.00%		100.00%															q3	q4	100.00%	
E.H.1_A1	The proportion of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number of people who finish a course of treatment in the reporting period.	HIA	MHDS	Quarterly	75%	B&A CCG	-	-	-		99.00%															q3	q4	99.00%	
					75%	Slough CCG	-	-	-		96.00%															q3	q4	96.00%	
					75%	WAM CCG	-	-	-		99.00%															q3	q4	99.00%	
E.H.1_B1	The proportion of people that wait 6 weeks or less from referral to entering a course of IAPT treatment against the number of people who enter treatment in the reporting period.	HIA	MHDS	Quarterly		B&A CCG			-		q1															q3	q4		
						Slough CCG			-		q1															q3	q4		
						WAM CCG			-		q1															q3	q4		
E.H.2_A2	The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment against the number of people who finish a course of treatment in the reporting period.	HIA	MHDS	Quarterly	95%	B&A CCG	-	-	-		100.00%															q3	q4	100.00%	
					95%	Slough CCG	-	-	-		100.00%															q3	q4	100.00%	
					95%	WAM CCG	-	-	-		100.00%															q3	q4	100.00%	
E.H.2_B2	The proportion of people that wait 18 weeks or less from referral to entering a course of IAPT treatment against the number of people who enter treatment in the reporting period.	HIA	MHDS	Quarterly		B&A CCG			-		q1															q3	q4		
						Slough CCG			-		q1															q3	q4		
						WAM CCG			-		q1															q3	q4		
E.H.3_C1	Operational Recovery Indicator, to capture the Number of ended referrals in the reporting period that received a course of treatment against the number of ended referrals in the reporting period that received a single treatment appointment.	HIA	MHDS	Quarterly		B&A CCG			-																	q3	q4		
						Slough CCG			-																	q3	q4		
						WAM CCG			-																	q3	q4		
E.H.3_C2	Average number of treatment sessions	HIA	MHDS	Quarterly		B&A CCG			-																	q3	q4		
						Slough CCG			-																	q3	q4		
						WAM CCG			-																	q3	q4		
E.H.3_C3	Re-focusing service provision on less severe cases	HIA	MHDS	Quarterly		B&A CCG			-																	q3	q4		
						Slough CCG			-																	q3	q4		
						WAM CCG			-																	q3	q4		
E.H.4	Early Intervention in psychosis - More than 50% of people experiencing a first episode of psychosis will be treated with a NICE approved care package within two weeks of referral.	HIA	MHDS	TBC	TBC	B&A CCG			-		Nationally Indicator in development - data available April 2016																		
						Slough CCG			-		Nationally Indicator in development - data available April 2016																		
						WAM CCG			-		Nationally Indicator in development - data available April 2016																		
E.H.5	Liaison Psychiatry - %Percentage of Acute Trusts with an effective model of liaison psychiatry for (all ages, appropriate to the size, acuity and specialty of the hospital)	HIA	MHDS	TBC	TBC	B&A CCG			-		Nationally Indicator in development - no date available as yet																		
						Slough CCG			-		Nationally Indicator in development - no date available as yet																		
						WAM CCG			-		Nationally Indicator in development - no date available as yet																		

Measures in Technical Definition	Indicator & Description	Responsible for Inputting into Scorecard	Data Source	Frequency	Threshold	Provider / CCG	2013/14 Outturn	2014/15 Outturn	Jan-15	Feb-15	Mar-15	Sparkline	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Year to Date Sum or Median Average				
NEW Transforming Care																													
Transforming Care	E.K.1	Total number of patients in in-patient beds for mental and/or behavioural healthcare who have either learning disabilities and/or autistic spectrum disorder (including Asperger's Syndrome)	HIA	CCG	Quarterly		B&A CCG						2			2				q3			q4						
							Slough CCG						3				3							q3			q4		
							WAM CCG						5				5								q3			q4	
	E.K.2	Number of admission to in-patient beds for mental and/or behavioural healthcare who have either learning disabilities and/or autistic spectrum disorder Asperger's Syndrome)	HIA	CCG	Quarterly		B&A CCG							1			0				q3			q4					
							Slough CCG						1				1							q3			q4		
							WAM CCG						2				2								q3			q4	
	E.K.3	Number of patients discharged to community settings	HIA	CCG	Quarterly		B&A CCG							0			2				q3			q4					
							Slough CCG						1				0							q3			q4		
							WAM CCG						1				0								q3			q4	
	E.K.4	Patients without a care co-ordinator	HIA	CCG	Quarterly		B&A CCG							0			0				q3			q4					
							Slough CCG						0				0							q3			q4		
							WAM CCG						0				0								q3			q4	
	E.K.5	Patients not on the register	HIA	CCG	Quarterly		B&A CCG							0			0				q3			q4					
							Slough CCG						0				0								q3			q4	
							WAM CCG						0				0									q3			q4
	E.K.6	Patients without a review in the last 26 weeks	HIA	CCG	Quarterly		B&A CCG							0			0				q3			q4					
							Slough CCG						0				0								q3			q4	
							WAM CCG						0				0									q3			q4

QUALITY : NHS Outcomes Framework Measures 2015/16

Domain 2: Enhancing quality of life for people with long term conditions	Care Programme Approach (CPAs) should have a record of the Care Coordinator who is responsible for their care	Quality	Trust Quality Schedules	Monthly	95%	BHFT	-	100.0%	100.0%	100.0%	100.0%		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%						100.0%					
						CPA Review % of those on CPA reviewed within 1 month of review date	Monthly	95%	BHFT	-	98.8%	99.0%	96.0%	98.6%		98.4%	98.1%	97.9%	98.8%	98.9%	99.0%	98.9%						98.8%		
						Assessment of Risk % of all patients on CPA to have a documented risk assessment	Monthly	85% by Q2 90% by Q4	BHFT	-	90.0%	91.0%	91.0%	91.9%		91.9%	91.3%	92.2%	90.7%	90.5%	89.1%	92.3							91.3%	
						Crisis Contingency Plan % of all patients on CPA to have a crisis contingency plan	Monthly	90%	BHFT	-	88.5%	89.0%	91.0%	92.4%		90.5%	89.9%	88.8%	95.4%	96.3%	94.8%	94.3							94.8%	
3 - Helping people to recover from episodes of ill health following injury	Stroke	Quality	Trust Quality Schedules	Monthly	80%	RBFT	91.0%	87.4%	93.3%	86.0%	0.0%		90.2%	92.7%	83.1%	92.2%	93.2%	77.2%	74.0%						90.2%					
						HWPH	73.5%	65.5%	52.0%	40.0%	0.0%		69.0%	67.0%	47.0%	70.0%	68.0%	62.0%	88.0%							68.0%				
						FPH	91.0%	91.0%	-	-	-		No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						#NUM!	
						ASPH	76.0%	84.0%	86.0%	85.0%			57.0%	83.0%	83.0%	85.0%	79.0%	92.0%	84.0%										83.0%	
		% pts admitted to SU <4hrs	Quality	Trust Quality Schedules	Monthly	N/A	RBFT	67.4%	81.9%	80.0%	77.0%	0.0%		No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						#NUM!		
							HWPH	63.5%	71.0%	55.0%	29.0%	0.0%		58.0%	74.0%	60.0%	73.0%	61.0%	59.0%	60.0%								60.0%		
							FPH	95%	72.5%	76.7%	75.9%			78.0%	70.0%	70.0%	78.0%	73.0%	74.0%	63.0%									73.0%	
							ASPH	54.0%	53.1%	67.0%	59.0%			38.0%	51.0%	56.0%	72.0%	65.0%	81.0%	67.0%										65.0%
		% pts receiving swallow screen within 4 hours	Quality	Trust Quality Schedules	Monthly	95%	RBFT	99.0%	98.0%	98.0%	98.0%	0.0%		98.0%	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						98.0%		
							HWPH	90.5%	88.0%	88.0%	91.0%	0.0%		72.0%	78.0%	63.0%	64.0%	53.0%	63.0%	48.0%									63.0%	
							FPH	97.0%	86.2%	86.7%	86.2%			84.0%	80.0%	90.0%	87.0%	89.0%	No Data	No Data										87.0%
							ASPH	95%						No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						#NUM!
4 - Ensuring that people have a positive experience of care	Maternity	Quality	Trust Quality Schedules	Monthly	23.0%	RBFT	26.7%	26.2%	22.1%	25.9%	0.0%		30.0%	26.8%	27.8%	26.7%	31.1%	25.6%	28.0%							27.8%				
						HWPH	29.7%	28.2%	37.2%	30.3%	0.0%		30.3%	27.0%	27.0%	25.6%	22.7%	24.9%	28.5%									27.0%		
						FPH	23.0%	23.5%	24.1%	23.5%	29.0%		23.1%	24.0%	25.7%	26.6%	25.2%	25.9%	23.7%										25.2%	
						ASPH	26.2%	26.7%	26.6%	27.8%			27.5%	No Data	No Data	No Data	No Data	No Data	No Data										27.5%	
		Elective C-Section rate	Quality	Trust Quality Schedules	Monthly	N/A	RBFT							15.5%	12.8%	12.2%	13.6%	15.0%	15.2%	12.6%							13.6%			
							HWPH			14.9%	11.9%	14.2%		16.0%	11.8%	14.5%	12.1%	10.3%	11.5%	13.5%									12.1%	
							FPH							11.5%	11.0%	11.8%	14.2%	9.8%	12.9%	10.1%										11.5%
							ASPH							No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						#NUM!
		Emergency C-Section rate	Quality	Trust Quality Schedules	Monthly	N/A	RBFT							14.5%	14.1%	15.6%	13.1%	16.1%	10.4%	15.3%							14.5%			
							HWPH			22.3%	18.4%	15.2%		14.3%	15.2%	12.5%	13.5%	12.4%	13.4%	15.0%									13.5%	
							FPH							11.7%	13.0%	13.9%	12.3%	15.4%	12.9%	13.6%										13.0%
							ASPH							No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						#NUM!
	Complaints	Number of Complaints	Quality	Trust Quality Schedules	Monthly	N/A	RBFT		392	30	37	0		24	26	25	27	29	42	48							221			
							HWPH		535	36	41	0		39	29	31	32	25	38	28									222	
							FPH	382	389	40	25	37		36	29	29	49	34	33	35									245	
							ASPH		107	-	-			No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data	No Data						0
5 - Treating and caring for people in a safe environment and protecting them from avoidable harm	Elimination of "Never Events" & incremental reduction of	Quality	Trust Quality Schedules	Monthly	No Threshold	RBFT	5	4	0	0	0		0	0	0	0	0	0	0	0	1					1				
						HWPH	2	1	1	0	0		0	0	0	0	0	0	0	0	0	0	1					1		
						FPH	1	1	0	1			0	0	0	0	1	1	0	0	0	0	0	0					2	
						BHFT	0	0	0	0			0	0	0	0	0	0	0	0	0	0	0	0					0	
	Serious Falls requiring investigation (SIRI's)	Quality	Trust Quality Schedules	Monthly	No Threshold	RBFT	22	23	3	0			5	2	0	0	2	0	1	1	1	1					11			
						HWPH	6	12	4	1			1	1	1	1	0	1	1	3								9		
						FPH	17	16	1	2			1	0	2	1	0	0	1	5								5		
						BHFT (MH)	5	3	0	0			1	0	0	0	0	0	0	0	1								1	
						BHFT East	1	1	0	0			0	0	0	1	0	0	0	0	0	0	0	0					1	
						BHFT West	5	6	0	0			2	0	1	0	0	0	0	0	0	0	0	0					3	
	Pressure Sore Gd2	Quality	Trust Quality Schedules	Monthly	No Threshold	HWPH							8	7	8	3	5	3									34			
						FPH			10	6	5		15	7	5	7	2	5										41		
						BHFT East							14	15	14	28	16	13												