## Appendix 1

Adult Sc	ocial Care	
Ref.	Target/Data Narrative	Further explanation on indicator
ASC1	(Adult Social Care Framework 2C Part 2)  This data is sourced from NHS England and is a monthly snapshot of delays taken on the last Thursday of the month at midnight. The Total West Berkshire figure is reported on nationally.  Quarter two data is provisional. Data for September will be released in October.	This measures the impact of hospital services (acute, mental health and non-acute) and community-based care in facilitating timely and appropriate transfer from all hospitals for all adults. This indicates the ability of the whole system to ensure appropriate transfer from hospital for the entire adult population. It is an important marker of the effective joint working of local partners, and is a measure of the effectiveness of the interface between health and social care services. Minimising delayed transfers of care and enabling people to live independently at home is one of the desired outcomes of social care. This is a two-part measure that reflects both the overall number of delayed transfers of care per 100,000 population aged 18 and over (part 1 - see acute section AS2) and, as a subset, the number of these delays which are attributable to social care services and to both (health and social services) (part 2).
ASC2	(Adult Social Care Framework 2B Part 1)  Small cohort that may fluctuate quarter to quarter due to unexpected deaths, health alerts or severe weather i.e. extremely cold winter - events which are outside of our control.	The proportion of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting), who are at home or in extra care housing or an adult placement scheme setting 91 days after the date of their discharge from hospital. This measures the effectiveness of reablement services.
	In Q2, 8 clients started placements in res/nursing care rather than remaining at home.  Data based on 3 monthly reporting of hospital discharges to rehabilitation/enablement and outcome at 91 days after discharge.	
ASC3	(Service Plan Performance Indicator)	
	The data will be available for the board in January 2015.  The use of data from the previous year is not appropriate for setting a baseline due to the new statutory reporting framework (SALT). The reports to extract relevant data aligned to statutory reporting are still to be completed. Therefore there is no national data or comparator group data or England average to measure against at this point.	
ASC4	Figures are expected to increase for this indicator in Q3 due to data recording issues that are being addressed.  In previous years, the denominator included clients with electrical equipment services, respite and short term services but excluded professional support. The denominator is now based on Long Term Service clients in the year so now includes Community Mental Health Team, professional support but excludes all short term services and low level support.  The use of data from the previous year is not appropriate for setting a baseline due to the new statutory reporting	
	framework (SALT). The reports to extract relevant data aligned to statutory reporting are still to be completed. Therefore there is no national data or comparator group data or England average to measure against at this point.	

Children	Children's Social Care		
Ref.	Target/Data Narrative	Further explanation on indicator	
CSC1	Target numbers for CSC 1, 2 and 3 have been set by Children's Services and are set on the basis of the level that	Looked after child: These are children who are looked after by the authority	
CSC2	the service aspire to get the figures back to. Target numbers are what are considered as more manageable for the service. Trend data is based on the last quarter.	Child Protection Plan: A detailed inter-agency plan setting out what must be done to protect a child from further harm, to promote the child's health and development and if it is in the best interests of the child, to support the family to promote the child's welfare.	
CSC3		Section 47 Enquiry: Where there is reasonable cause to suspect that a child is suffering, or likely to suffer, significant harm, the local authority is required under s47 of the Children Act 1989 to make enquiries, to enable it to decide whether it should take any action to safeguard and promote the welfare of the child.	
CSC4	Target Numbers come from those set in Children's Services' Service Plan. Trend data is based on the last quarter.	Single Assessments: The single assessment is a new assessment document. It is gradually replacing the initial and core assessments by combining both within one document.	
CSC5 CSC6		There are ongoing recording issues in relation to Child Protection Conferences on RAISE and therefore the true performance is likely to be higher that that presented.	

## (Appendix 1 continued)

Acute	Acute Sector		
Ref.	Target/Data Narrative	Further explanation on indicator	
AS1	Data is based on provider as a whole		
AS2	(Adult Social Care Framework 2C Part 1 See ASC1)	See ASC1	
	Data is based on Provider figures for West Berkshire residents only.		
AS3	Data is based on Berkshire West as a whole.	Category A Red 1 incidents: Presenting conditions that may be immediately life threatening and the most time critical and should receive an emergency response irrespective of location in 75% of cases.	
		Category A Red 2 incidents: Presenting conditions that may be life threatening but less time critical than Red1 and receive an emergency response irrespective of location in 75% of cases.	
AS4	Data is based on Provider figures for Berkshire West.		
AS5	Data is based on Provider figures for Berkshire West.	An elective admission is one that has been arranged in advance. It is a non emergency admission, a maternity admission or a transfer from a hospital bed	
AS6	Data is based on Berkshire as a whole	NHS 111 is a new service that was introduced to mae it easier for people to access local NHS Services in England. 111 can be called when medical help is required quickly however, it's not a 999 emergency.	
AS7	Data is based on Berkshire as a whole	People phoning 111 are asked a number of questions. Whether the call is converted to a 999 call depends on the answers to these questions. This process takes account of local services available in the area.	
AS8	Data is based on each provider as a whole	The NHS friends and family test (FFT) is an opportunity for service users to provide feedback on their care and treatment received, with the aim of improving services. It was introduced in 2013 and asks patients whether they would recommend hospital wards, A&E departments and maternity services to their friends and family if they needed a similar care or treatment.	
AS9	Data is based on each provider as a whole		

<b>Primary</b>	Primary Care			
Ref.	Target/Data Narrative	Further explanation on indicator		
PC1(a)	No target can be provided because an increase or decrease in appropriate referrals is neither good or bad.	Secondary (or 'acute') care is the healthcare that people receive in hospital. It may be unplanned emergency care or surgery, or planned specialist medical care or surgery		
PC1(b)	No target can be provided because an increase or decrease in appropriate referral is neither good or bad.			
PC2				
PC3				

Community Services		
Ref.	Target/Data Narrative	Further explanation on indicator
CS1		
CS2		
CS3		