



## People in Dorset are **SAFE**

Outcome Sponsor - Sara Tough



## People in Dorset are **HEALTHY**

Outcome Sponsor - David Phillips



## People in Dorset are **INDEPENDENT**

Outcome Sponsor – Helen Coombes



## Dorset's economy is **PROSPEROUS**

Outcome Sponsor – Mike Harries



Outcomes Focused Monitoring Report - October 2017

The following pages have been provided to summarise the current position against each outcome indicator and performance measure. This will help the council to identify and focus upon potential areas for further scrutiny. All risks are drawn from the [Corporate Risk Register](#) and mapped against specific population indicators where relevant. Any further corporate risks that relate to the 'Safe' outcome are also included to provide a full overview. Please note that information relating to outcomes and shared accountability can be found on the [Dorset Outcomes Tracker](#).

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<p><b>Population Indicator</b> – relates to ALL people in a given population</p> <p style="text-align: center;"><b>Accountability</b> - Partners and stakeholders working together</p> <p style="text-align: center;">Determining the <b>ENDS</b> <i>(Or where we want to be)</i></p>	<p><b>Performance Measure</b> – relates to people in receipt of a service or intervention</p> <p style="text-align: center;"><b>Accountability</b> - Service providers (and commissioners)</p> <p style="text-align: center;">Delivering the <b>MEANS</b> <i>(Or how we get there)</i></p>

Legend		
Corporate Risks	<b>HIGH</b>	High level risk in the Corporate Risk Register and <b>outside of the Council's Risk Appetite</b>
	<b>MEDIUM</b>	Medium level risk in the Corporate Risk Register
	<b>LOW</b>	Low level risk in the Corporate Risk Register
Trend	<b>IMPROVING</b>	Performance trend line has improved since previous data submission
	<b>UNCHANGED</b>	Performance trendline remains unchanged since previous data submission
	<b>WORSENING</b>	Performance trendline is worse than the previous data submission



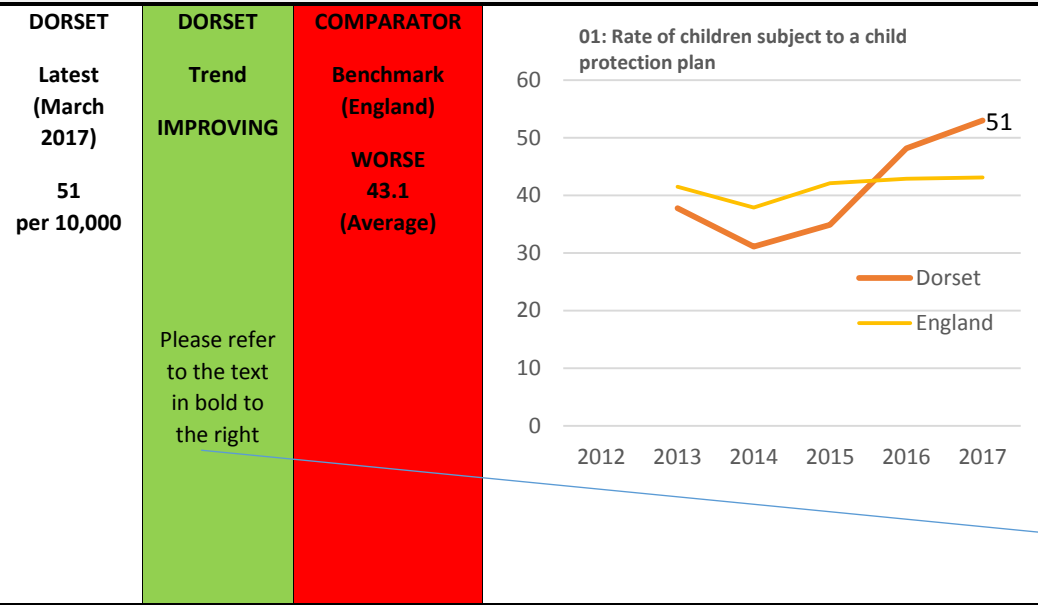
# People in Dorset are SAFE

Outcome Sponsor - Sara Tough



Corporate Risks that feature within SAFE but are not assigned to a specific POPULATION INDICATOR		
(All risks are drawn from the <a href="#">Corporate Risk Register</a> )		
04a – Health and Safety risks associated with occupation of premises	<b>HIGH</b>	IMPROVING
04l – Serious injury or death of staff, contractors and the public	<b>MEDIUM</b>	UNCHANGED
04o – Limited supervision results in an injury to a service user / Dorset Travel driver	<b>MEDIUM</b>	WORSENING
05b – Response to a major event that could impact on the community, the environment and or/ the council	<b>MEDIUM</b>	IMPROVED
04b – Serious injury or death of a Children’s Services employee, including assault	<b>LOW</b>	UNCHANGED
04d – Injury or death of a service user, third party or employee	<b>LOW</b>	UNCHANGED
06d – Failure to fulfil our statutory ‘Prevent’ duty to combat radicalisation	<b>LOW</b>	IMPROVING

**SAFE: 01 Rate of children subject to a child protection plan** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Claire Shiels)



Corporate Risk	Score	Trend
02a - Failure to consider the impacts that vulnerable adults have on children and families	MEDIUM	UNCHANGED
02b - Unsuitable housing results in an increased risk to vulnerable children and adults	MEDIUM	UNCHANGED
11c - Inefficient commissioning processes and monitoring of contracts to support delivery of Directorate and Children & Young People Priorities (including partnerships and voluntary & community sector delivery)	LOW	IMPROVING
14b - Inability to attract and retain suitably qualified specialist safeguarding staff within Children's Services	HIGH	UNCHANGED

**Story behind the baseline**

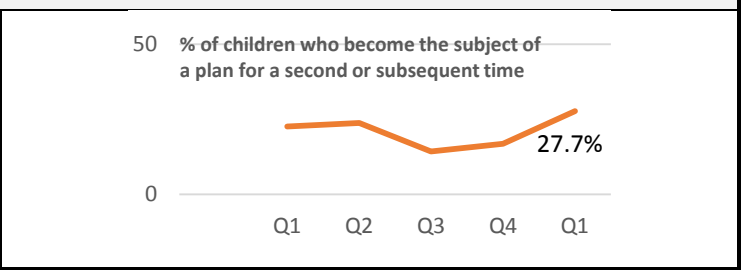
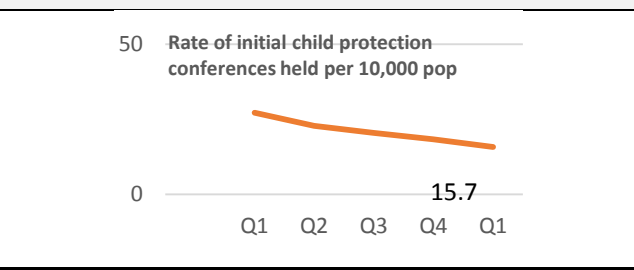
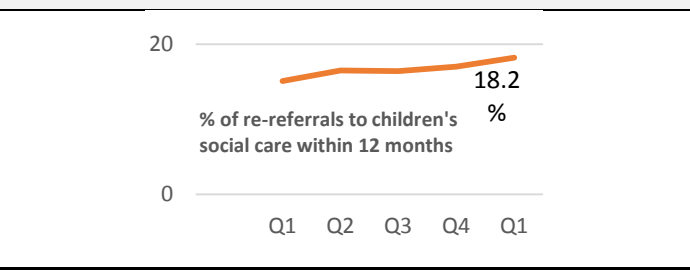
**Story behind the baseline:** When there is a continuing risk of harm to a child or young person, groups of professionals work together with the family to put a plan in place to try to reduce the risk of harm and keep the child or young person safe. Although the County Council has a statutory duty to investigate, assess and provide a plan to support families to keep their children safe from harm, it is not their sole responsibility.

The rate of children subject to a plan in Dorset increased between 2013 and 2017 **but is now reducing and was 45.4 per 10,000 at end of June 2017**. Plans are most commonly put in to place due to abuse or neglect. The impact of this abuse and neglect can be long lasting and contribute to poor mental health. If the plan to reduce the risk of harm does not work then the child may become looked after by the local authority. The rate of initial child protection conferences has reduced suggesting a slowing down of entry into the child protection system.

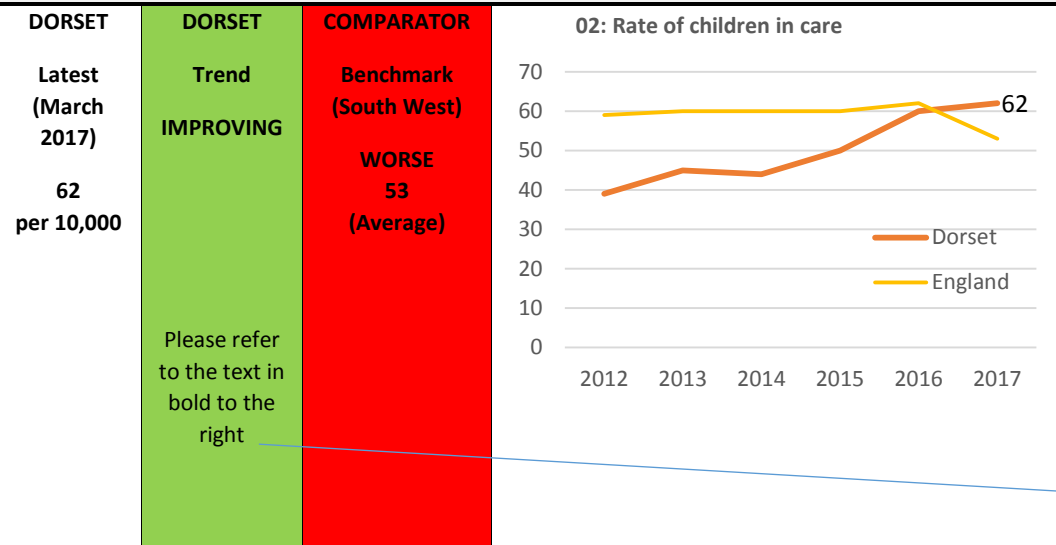
The latest data on child protection can be found on the [children's services performance and statistics page](#).

**Partners with a significant role to play:** Any professional working with a child, young person or family should be able to identify possible signs of abuse and neglect and work together to safeguard children. Key professionals in the police, the health service (including GPs and A&E), health visitors, schools and early years settings, adults services (including mental health services and substance use treatment providers), youth services, criminal justice agencies need to share intelligence and work together to safeguard children and young people. Domestic abuse features in over 95% of all child protection plans in Dorset. Also common are poor parental mental health and or parental substance misuse. Whole family support and good multi-agency working are therefore important in reducing the rate of children experiencing significant harm.

**Dorset County Council Performance Measures**



**SAFE: 02 Rate of children in care** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Claire Shiels)



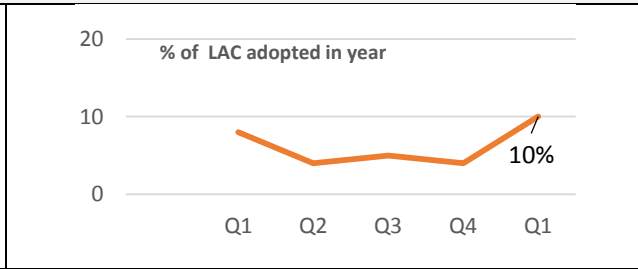
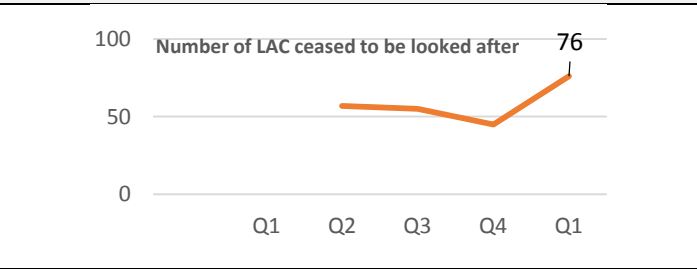
Corporate Risk	Score	Trend
01d – A lack of sufficiency (placements/ residential/ foster care) impacts negatively on the demands led budget for children in care	<b>HIGH</b>	UNCHANGED
02c - Failure to keep children safe that are known to, or in the care of, DCC	<b>MEDIUM</b>	IMPROVING

**Story behind the baseline**

**Story behind the baseline:** Children come into care when parents are unable to care for them adequately or because they are at risk of significant harm. We have a statutory duty to provide a safe, alternative “family” home. They may be living with foster parents; at home under the supervision of children’s services; in residential children’s homes or other residential settings like schools or secure units. A child will stop being ‘looked after’ when they are adopted, returned home or turn 18, although the local authority will continue to support children leaving care until they reach 21. The rate of children in care increased in Dorset between 2012 and 2016, plateauing in 2017 and **provisional data for Q1 2017/18 shows a reduction to 60 per 10,000 which is in line with the national rates.** The number of children who are no longer looked after is increasing and adoption rates are also increasing. The decision about whether a child should enter care is an important one as outcomes for children in care can be poorer than those of their peers. As a result of their early experiences they are more likely to have poor mental health. They are less likely to achieve at GCSEs, are more likely to not be in education, employment or training; are more likely to be involved with the criminal justice system and to be in unsuitable accommodation later in life. The impact of childhood trauma or abuse can last into adulthood. The latest data can be found on the [children’s services performance and statistics page](#).

**Partners with a significant role to play:** The following partners will be critical to delivery: Dorset Clinical Commissioning Group (CCG), Dorset Healthcare University Foundation Trust (providers of CAMHs, community mental health services, health visiting), Dorset County Hospital, Poole Hospital, The Royal Bournemouth and Christchurch Hospital, Schools and colleges, GP practices, Voluntary and Community Sector providers, Pan-Dorset Youth Offending Service and Residential children’s homes/foster carers; schools and education settings, adult services, police, probation services.

**Dorset County Council Performance Measures**



**SAFE: 03 Number of children being admitted to hospital due to injury (aged 0 to 14 years)** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer David Lemon)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>	<p>10: Rate of hospital admission due to injury (aged 0 to 14 years)</p> <table border="1"> <caption>Data for Rate of hospital admission due to injury (aged 0 to 14 years)</caption> <thead> <tr> <th>Year</th> <th>Dorset</th> <th>Benchmark (if available)</th> </tr> </thead> <tbody> <tr> <td>2011</td> <td>~115</td> <td>~110</td> </tr> <tr> <td>2012</td> <td>~145</td> <td>~115</td> </tr> <tr> <td>2013</td> <td>~115</td> <td>~105</td> </tr> <tr> <td>2014</td> <td>~120</td> <td>~110</td> </tr> <tr> <td>2015</td> <td>~115</td> <td>~105</td> </tr> <tr> <td>2016</td> <td>~115</td> <td>~105</td> </tr> </tbody> </table>	Year	Dorset	Benchmark (if available)	2011	~115	~110	2012	~145	~115	2013	~115	~105	2014	~120	~110	2015	~115	~105	2016	~115	~105
Year	Dorset	Benchmark (if available)																						
2011	~115	~110																						
2012	~145	~115																						
2013	~115	~105																						
2014	~120	~110																						
2015	~115	~105																						
2016	~115	~105																						
<b>Latest (2015-16)</b>	<b>Trend</b>	<b>Benchmark (England)</b>																						
<b>115.3</b>	<b>IMPROVING</b>	<b>WORSE</b> 104.2 (2015-16)																						

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Story behind the baseline**

**Story behind the baseline:** Injuries are a leading cause of hospitalisation and represent a major cause of premature mortality for children and young people.

They are also a source of long-term health issues, including mental health related to experiences. However, some of these cases may only represent admissions for observation due to observed symptoms following an external cause event.

There may be also be differences in admission thresholds between areas, as well as variation between hospitals in the way injury admissions are coded. Additionally, whilst the injury rate has been consistently higher than the England average since around 2012, this may be in part related to the rural nature of the area. For example, Somerset, an arear similar to Dorset, shows a comparable pattern in admissions.

**Partners with a significant role to play:** Health and social care, and education services, as well as the voluntary sector all key partners in this at both strategic and operational levels.

**Dorset County Council Performance Measures**





**SAFE: 04 The rate of children who are persistent absentees from school** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Claire Shiels)

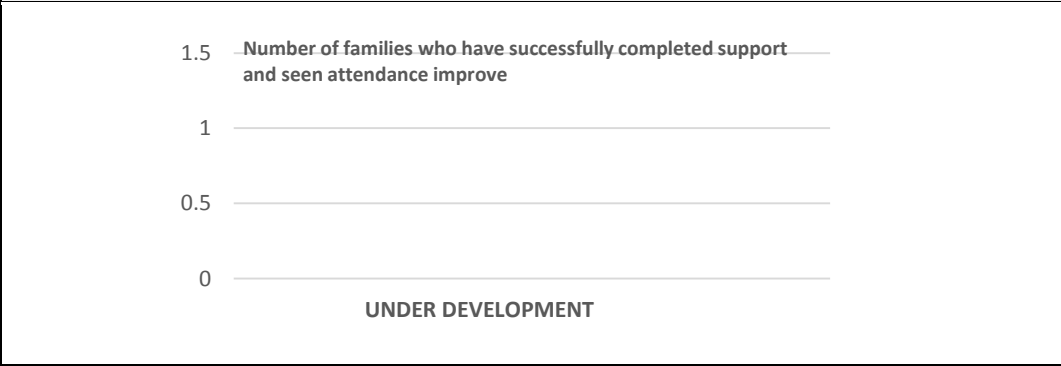
<b>DORSET</b>  <b>Latest (2016)</b>  <b>11%</b>	<b>DORSET</b>  NEW INDICATOR INTRODUCED 2016  No Trend	<b>COMPARATOR</b>  Benchmark (South West)  <b>SIMILAR 10.7% (Average)</b>	<p>03: Rate of children who are persistent absentees from school</p>	<b>Corporate Risk</b>	<b>Score</b>	<b>Trend</b>
				No associated current corporate risk(s)		

**Partners with a significant role to play:** Schools, school governors, parents, alternative education providers, voluntary and community sector, youth providers, early year’s settings, children’s centres, health visitors, police, youth offending service.

**Story behind the baseline:** In 2016, the definition of persistent absence changed. Up until 2015, persistent absentees were defined as those who have an overall absence rate of 15% of school sessions. From 2016 this definition has changed to include those who have an overall absence rate of 10%. This means that data for 2016 is not comparable. Persistent absence is a serious problem for pupils. Much of the work children miss when they are off school is never made up, leaving these pupils at a considerable disadvantage for the remainder of their school career. Children who are missing from school are more vulnerable to exploitation.

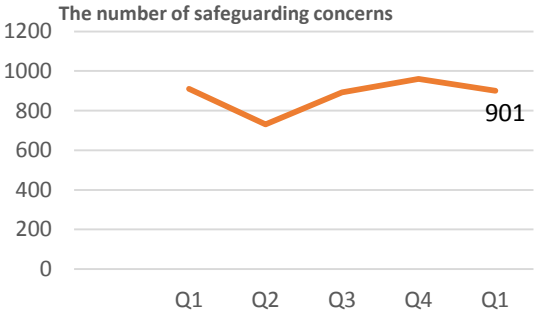
Overall absence rates have been declining nationally and locally. Persistent absence is considerably more common in secondary school age pupils than in primary school. Although there are numerous reasons for non-attendance, those that truant are of particular concern. These children may have become disillusioned by school and by the time they have reached their mid-teens it becomes more difficult for parents and schools to improve attendance. Patterns of attendance are usually established earlier in the school career and those with the worst attendance tend to be from families that do not value education or where parents often missed school themselves. If poor school attendance is addressed in the early years it is more likely to have a lasting impact. Children with low attendance in the early years (prior to mandatory reporting) are more likely to be from the poorest backgrounds.

**Dorset County Council Performance Measures**



**SAFE: 05 The number of adult safeguarding concerns (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Sally Wernick)**

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
<b>Latest (Q1 2017-18)</b>	<b>Trend</b>	No comparable data provided by lead officer
<b>901</b>	<b>IMPROVING</b>	
<b>2016-17</b>		
<b>3,553</b>		



Corporate Risk	Score	Trend
03e - Failure to meet primary statutory and legal care duties - Adult Safeguarding	MEDIUM	UNCHANGED
14c - Recruitment, development and retention of a suitably qualified workforce (internal and external) in key areas of the Adult & Community Services Directorate	MEDIUM	UNCHANGED

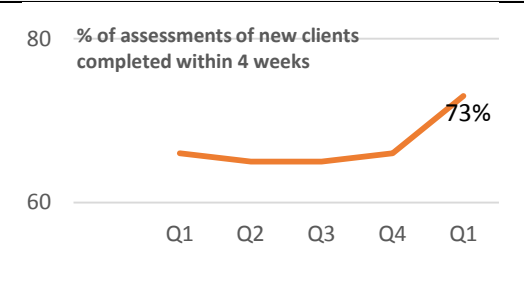
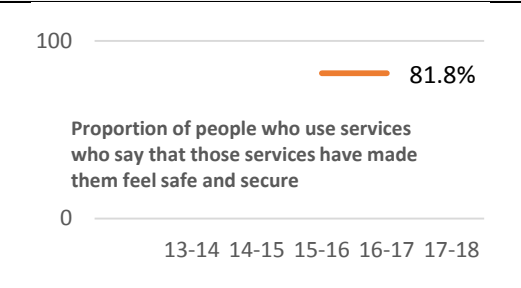
**Story behind the baseline**

**Story behind the baseline:** The longer term (2+ year) trend is an increase in the number of safeguarding concerns however, the numbers dropped from Q4 2016-17 to Q1 2017-18. Generally the trends remain consistent in terms of quarterly patterns.

The vast majority of concerns are managed through the provision of information and advice or require no further action with only 9% leading to a Section 42 enquiry.

**Partners with a significant role to play:** Local Safeguarding Teams, Children’s Social services, Prison service, Youth Offending service, Courts, Probation, Immigration, Community Rehabilitation, Fire and Rescue, Charities, Educational establishments and workplaces, Day centres, Housing, Ambulance service, Care Quality Commission, social workers, mental health staff, Police, primary and secondary health staff, domiciliary staff, residential care staff.

**Dorset County Council Performance Measures**



**SAFE: 06 Rates of crime, antisocial behaviour and domestic abuse in Dorset** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Andy Frost)

<p><b>DORSET</b></p> <p><b>Total Crime</b></p> <p><b>Latest (Q1 2017-18)</b></p> <p><b>5,460</b></p>	<p><b>DORSET</b></p> <p><b>Trend</b></p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>No comparable data provided by lead officer</p>	<p style="text-align: center;">Dorset 3 Year Trend - Total Crime</p> <table border="1" style="display: none;"> <caption>Dorset 3 Year Trend - Total Crime</caption> <thead> <tr> <th>Year</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> </tr> </thead> <tbody> <tr> <td>2014/15</td> <td>3500</td> <td>4000</td> <td>3500</td> <td>3500</td> </tr> <tr> <td>2015/16</td> <td>4000</td> <td>4500</td> <td>4000</td> <td>4000</td> </tr> <tr> <td>2016/17</td> <td>4500</td> <td>5000</td> <td>4500</td> <td>4500</td> </tr> </tbody> </table>	Year	Q1	Q2	Q3	Q4	2014/15	3500	4000	3500	3500	2015/16	4000	4500	4000	4000	2016/17	4500	5000	4500	4500	<p><b>Story behind the baseline:</b> TOTAL CRIME - 5,460 crimes for the quarter equating to 12.9 per 1,000 population (national rate for total crime is 28.8 per 1,000 population).</p> <p>The longer term (3 year) trend is an increase in total crime both in Dorset and nationally. Although this is in part due to changes in Police recording standards, it is generally understood that crime is, in fact, increasing in certain categories. Partners including Dorset Police and the local authorities are exploring the increases through their partnership groups (including the Dorset Community Safety Partnership) with the aim of putting interventions and solutions in place.</p>
Year	Q1	Q2	Q3	Q4																				
2014/15	3500	4000	3500	3500																				
2015/16	4000	4500	4000	4000																				
2016/17	4500	5000	4500	4500																				
<p><b>DORSET</b></p> <p><b>Total Anti-Social Behaviour</b></p> <p><b>Latest (Q1 2017-18)</b></p> <p><b>3,240</b></p>	<p><b>DORSET</b></p> <p><b>Trend</b></p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>No comparable data provided by lead officer</p>	<p style="text-align: center;">Dorset 3 Year Trend - Total Anti Social Behaviour</p> <table border="1" style="display: none;"> <caption>Dorset 3 Year Trend - Total Anti Social Behaviour</caption> <thead> <tr> <th>Year</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> </tr> </thead> <tbody> <tr> <td>2014/15</td> <td>2800</td> <td>3200</td> <td>2500</td> <td>2500</td> </tr> <tr> <td>2015/16</td> <td>2500</td> <td>2500</td> <td>2200</td> <td>2500</td> </tr> <tr> <td>2016/17</td> <td>3000</td> <td>3000</td> <td>2500</td> <td>2500</td> </tr> </tbody> </table>	Year	Q1	Q2	Q3	Q4	2014/15	2800	3200	2500	2500	2015/16	2500	2500	2200	2500	2016/17	3000	3000	2500	2500	<p><b>Story behind the baseline:</b> ANTI SOCIAL BEHAVIOUR - 3,240 incidents in Q1 equating to 7.7 per 1,000 population (national rate is 8.1 per 1,000 population).</p> <p>Following many years of reductions, ASB incidents increased over 2016-17. That trend has continued in the first quarter of 2017-18. The County Council and it's partners through the Dorset Community Safety Partnership are exploring issues around the increases and putting measures in place. These include developing a common policy for dealing with long running neighbour disputes and ensuring the use of Multi-agency Risk Management Meetings (MARMMs) for those victims and perpetrators that do not meet the thresholds for statutory service intervention.</p>
Year	Q1	Q2	Q3	Q4																				
2014/15	2800	3200	2500	2500																				
2015/16	2500	2500	2200	2500																				
2016/17	3000	3000	2500	2500																				
<p><b>DORSET</b></p> <p><b>Domestic Abuse Incidents</b></p> <p><b>Latest (Q1 2017-18)</b></p> <p><b>584</b></p>	<p><b>DORSET</b></p> <p><b>Trend</b></p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>No comparable data provided by lead officer</p>	<p style="text-align: center;">Dorset 3 Year Trend - Domestic Abuse Incidents</p> <table border="1" style="display: none;"> <caption>Dorset 3 Year Trend - Domestic Abuse Incidents</caption> <thead> <tr> <th>Year</th> <th>Q1</th> <th>Q2</th> <th>Q3</th> <th>Q4</th> </tr> </thead> <tbody> <tr> <td>2014/15</td> <td>900</td> <td>1000</td> <td>900</td> <td>900</td> </tr> <tr> <td>2015/16</td> <td>700</td> <td>600</td> <td>500</td> <td>500</td> </tr> <tr> <td>2016/17</td> <td>500</td> <td>500</td> <td>500</td> <td>500</td> </tr> </tbody> </table>	Year	Q1	Q2	Q3	Q4	2014/15	900	1000	900	900	2015/16	700	600	500	500	2016/17	500	500	500	500	<p><b>Story behind the baseline:</b> DOMESTIC ABUSE INCIDENTS - 584 incidents in Q1 (no national comparison available).</p> <p>The longer term trend has been a reduction in the number of domestic abuse incidents however the number of incidents began to increase in 2016-17 and this trend has continued in the first quarter of 2017-18. Although an increase in the number of incidents could be seen as positive, due to known under-reporting of domestic abuse, the County Council and its partners are undertaking work to understand the nature of the increases and reasons for it. The County Council delivers against domestic abuse issues through the pan-Dorset Domestic Abuse and Sexual Violence Strategic Group and has recently agreed to co-ordinate a pan-Dorset Domestic Abuse Operational Group.</p>
Year	Q1	Q2	Q3	Q4																				
2014/15	900	1000	900	900																				
2015/16	700	600	500	500																				
2016/17	500	500	500	500																				

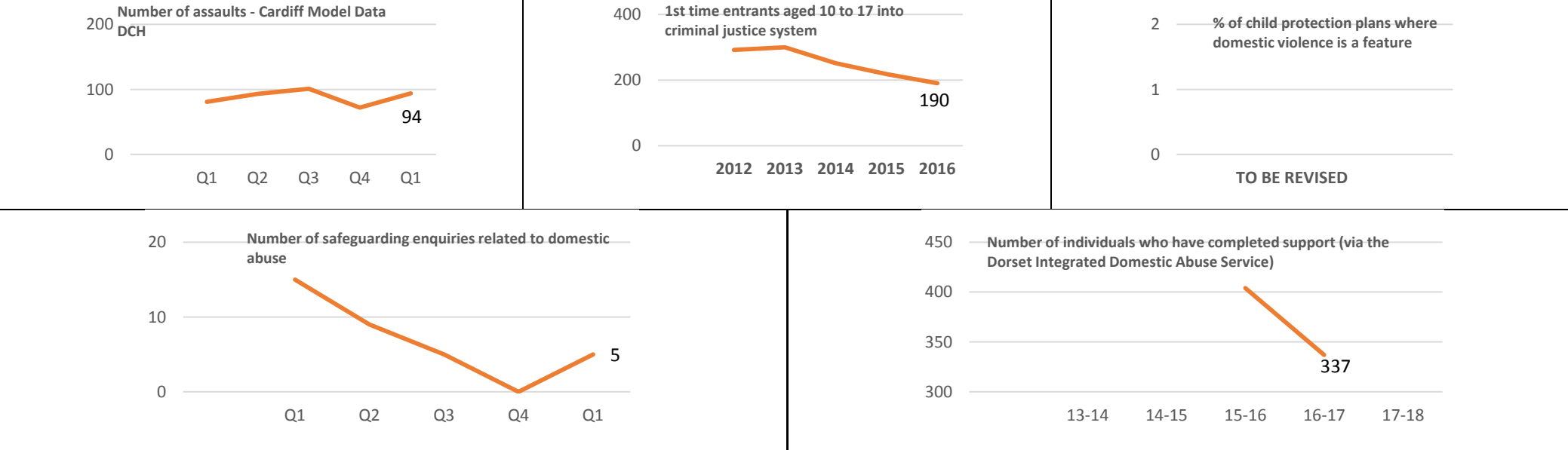
**Partners with a significant role to play:** The County Council is one of a number of organisations with a statutory responsibility to work in partnership to tackle crime in their area. Those partners include: Dorset Police, the Dorset district and borough councils, Dorset Clinical Commissioning Group, Dorset & Wiltshire Fire Authority, The National Probation Service and The Dorset, Devon and Cornwall Community Rehabilitation Company. A number of other partners including the Youth Offending Service, Public Health Dorset and Dorset Fire & Rescue Service also contribute to this work on a wider scale at a pan-Dorset level.

**SAFE: 06 Rates of crime, antisocial behaviour and domestic abuse in Dorset** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Andy Frost) **(CONT'D)**

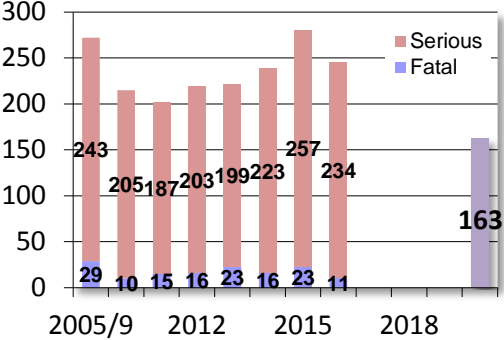
<p><b>DORSET</b></p> <p><b>Domestic Abuse Crimes</b></p> <p><b>Latest (Q1 2017-18)</b></p> <p><b>483</b></p>	<p><b>DORSET</b></p> <p><b>Trend</b></p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>No comparable data provided by lead officer</p>	<p>Dorset 3 Year Trend - Domestic Abuse Crimes</p>	<p><b>Story behind the baseline:</b> DOMESTIC ABUSE CRIMES – 483 crimes in Q1 (no national comparison available).</p> <p>The longer term trend is an increase in the number of domestic abuse crimes. Although an increase could be seen as positive due to known under-reporting of domestic abuse, the County Council and its partners are undertaking work to understand the nature of the increases and reasons for it. The County Council delivers against domestic abuse issues through the pan-Dorset Domestic Abuse and Sexual Violence Strategic Group and has recently agreed to co-ordinate a pan-Dorset Domestic Abuse Operational Group.</p>
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**Partners with a significant role to play:** The County Council is one of a number of organisations with a statutory responsibility to work in partnership to tackle crime. Those partners include: Dorset Police, the Dorset district and borough councils, Dorset Clinical Commissioning Group, Dorset & Wiltshire Fire Authority, The National Probation Service and The Dorset, Devon and Cornwall Community Rehabilitation Company. A number of other partners including the Youth Offending Service, Public Health Dorset and Dorset Fire & Rescue Service also contribute to this work.

**Dorset County Council Performance Measures**



**SAFE: 07 Number of people killed or seriously injured on Dorset roads** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Michael Potter)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>	<p>All KSI Casualties Target - 40% reduction against the 2005-09 average by 2020</p> 
<p>Latest (QTR 2 2016)</p> <p>245</p>	<p>Trend</p> <p><b>IMPROVING</b></p>	<p>No comparable data provided by lead officer)</p>	

Corporate Risk	Score	Trend
09b - Inability to maintain the highways infrastructure to an acceptable standard in the face of changing circumstances (e.g. budget reductions; climate change)	HIGH	UNCHANGED

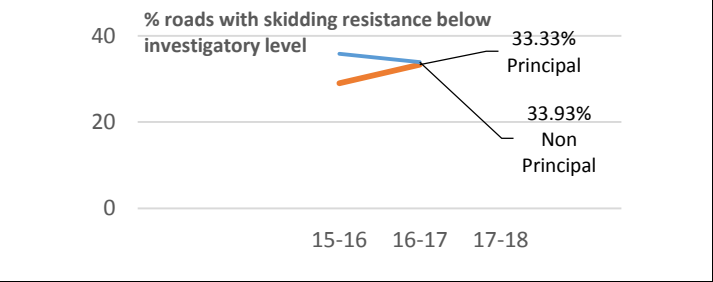
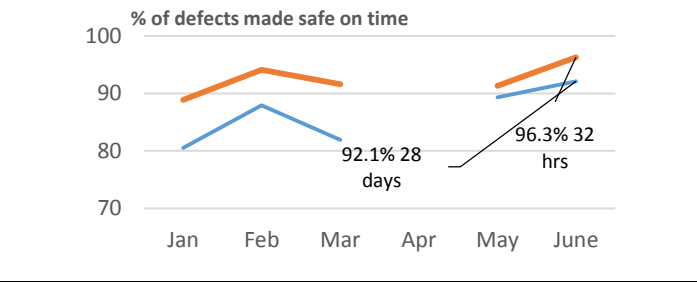
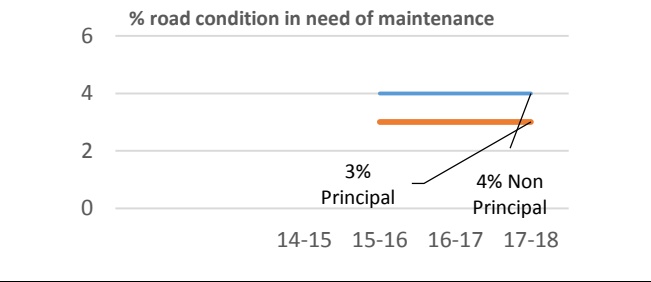
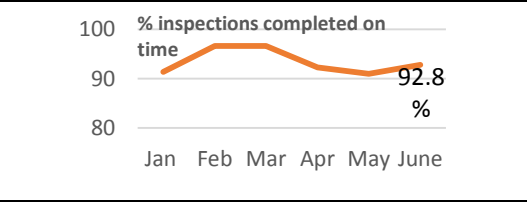
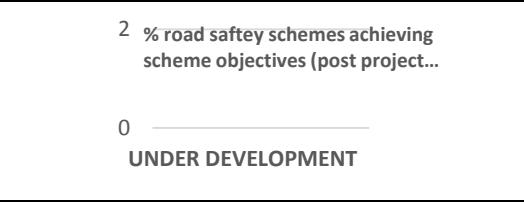
**Story behind the baseline**

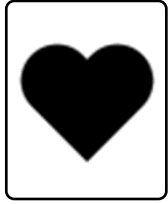
**Story behind the baseline:** The number of people killed or seriously injured in 2016 was 245, during 2015 there was a total of 280. The figure for 2016 is lower than the 2005-09 baseline figure of 271. In 2016 there were 11 fatalities and 234 serious injuries, this compares to 23 fatalities and 257 serious casualties in 2015. Despite a reduction during 2016, the number of people killed or seriously injured on Dorset's roads is still higher than in previous years. This replicates the longer term regional and national trend. It is important to consider the wide variety of factors that influence the number of road traffic casualties, many being outside the direct control of the County Council. Responsibility for improving road safety is shared with key partners including Dorset Police, Dorset & Wiltshire Fire & Rescue and the South West Ambulance Service as well as individual road users.

**Partners with a significant role to play:** Highways, Transport Planning, Trading Standards, Health & Wellbeing, Children Services, Dorset Police, Dorset & Wiltshire Fire & Rescue, South West Ambulance Service, charities, media, local communities, and (perhaps most importantly) the road users themselves.

During 2017-18 we will continue to analyse collision data to identify locations or routes that we as the highway authority could improve in order to reduce the likelihood of a road traffic casualty. During 2016 all road user groups apart from older (65yrs+) car drivers had fewer casualties than in 2015. The number of cyclists killed or seriously injured despite being lower in 2016 compared to 2015 remained higher than the 2005/9 baseline. Casualty data is provided to us monthly by Dorset Police. A more detailed overview of road traffic casualty figures can be found at [dorsetforyou.gov.uk/road-safety/engineering-statistics](http://dorsetforyou.gov.uk/road-safety/engineering-statistics).

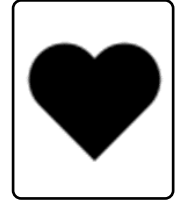
**Dorset County Council Performance Measures**





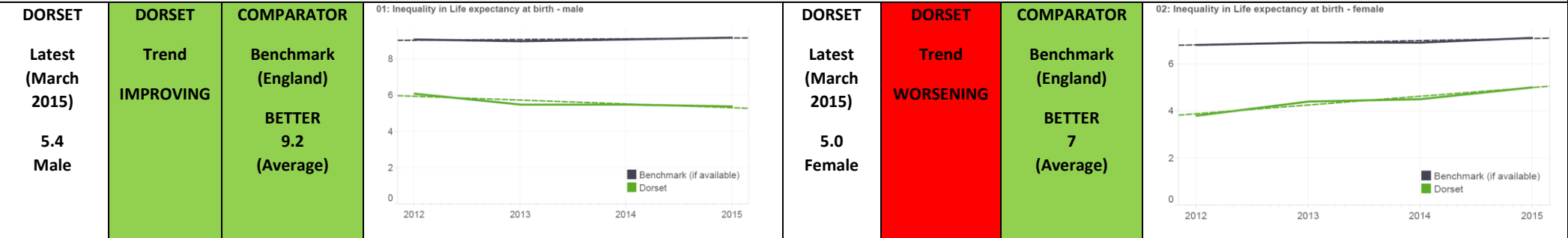
# People in Dorset are HEALTHY

Outcome Sponsor - David Phillips



Corporate Risks that feature within HEALTHY but are not assigned to a specific POPULATION INDICATOR		
(All risks are drawn from the <a href="#">Corporate Risk Register</a> )		
07f – Failure to successfully implement the Dorset Care record (cost; time; quality) with partners	<b>MEDIUM</b>	UNCHANGED
11m – Structure of commissioning team does not align to future strategy	<b>LOW</b>	UNCHANGED

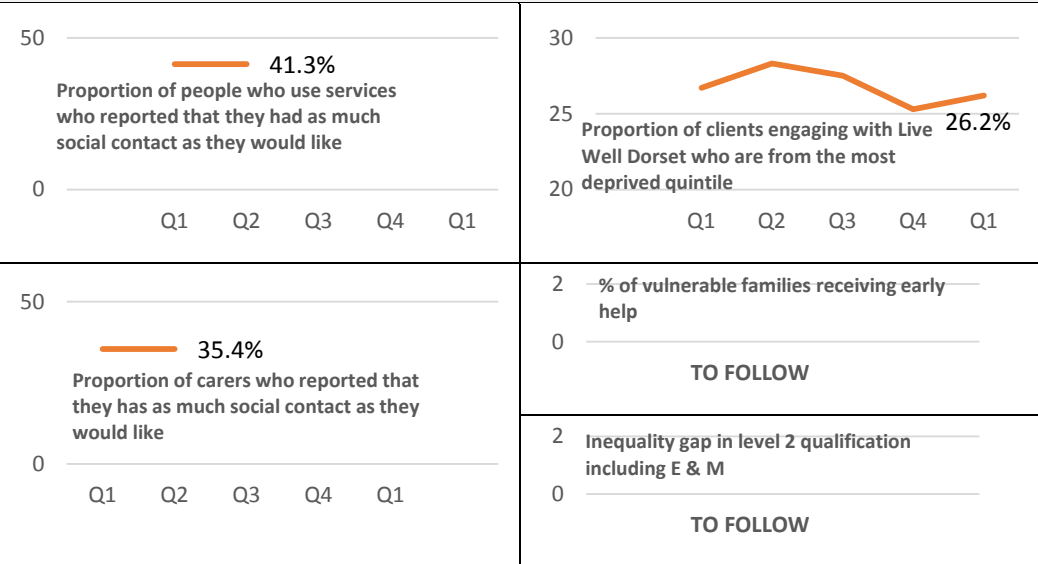
**HEALTHY: 01 – Inequality in life expectancy between population groups** (Outcome Lead Officer Jane Horne; Population Indicator Lead Officer David Lemon)



**Partners with a significant role to play:** Health & social care, and education services, as well as the voluntary sector and all key partners in this at both strategic and operational levels.

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Dorset County Council Performance Measures**



**Story behind the baseline**

This is a high-level indicator that reflects general health inequalities within Dorset. Life expectancy at birth (LE) is a measure of the average number of years a person would expect to live based on contemporary mortality rates. If the slope index of inequality (SII) were 1 then the LE would be the same in most and least deprived communities. An SII greater than 1 indicates that those in the poorer areas have a lower LE than those in the most affluent areas in Dorset. The higher the SII the greater the LE disparity. This helps to set the context within which we can assess other indicators and priorities, identifying the drivers of LE, especially in areas where it is low. The SII in Dorset is lower than the England SII for both males and females. This is probably to be expected as the England values takes data from across the country where there is a greater variation in deprivation/affluence than found within Dorset. However, there has been little change in the SII for males for around the last 8 years. Although not yet statistically significant there has been a sustained increase the inequalities for women over the last 5 years. This could be because the health of women in poorer areas has worsened, or that is has improved only for women in the most affluent areas, or a combination of both.

**What we propose to do? (Key Actions)**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li>Influence spatial and transport planning to create healthier, more sustainable communities</li> <li>Improve physical access to services which support health and wellbeing through transport planning and provision</li> </ul> | <ul style="list-style-type: none"> <li>Improve the health of the environment to support wellbeing and target improvements at areas of greatest need</li> <li>Support active, outdoor lifestyles through provision of infrastructure to encourage walking and cycling</li> <li>Improve access to the Rights of Way and footpath network for people of all ages and abilities</li> </ul> |
|---|--|

**HEALTHY: 02 - Rate of hospital admissions for alcohol-related conditions** (Outcome Lead Officer Jane Horne; Population Indicator Lead Officer Will Haydock)

<p><b>DORSET</b></p> <p>Latest (2015-16)</p> <p>690 Male</p>	<p><b>DORSET</b></p> <p>Trend</p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>Benchmark (England)</p> <p><b>BETTER</b></p> <p>827 (Average)</p>	<p>03: Admission episodes for alcohol-related conditions - male</p>	<p><b>DORSET</b></p> <p>Latest (2015-16)</p> <p>409 Female</p>	<p><b>DORSET</b></p> <p>Trend</p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>Benchmark (England)</p> <p><b>BETTER</b></p> <p>474 (Average)</p>	<p>04: Admission episodes for alcohol-related conditions - female</p>
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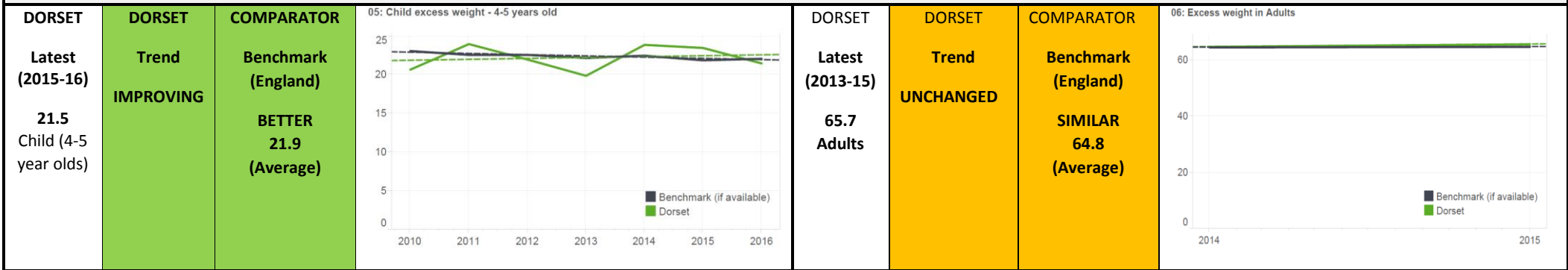
<p><b>Partners with a significant role to play:</b> Dorset Clinical Commissioning Group (CCG), Dorset Healthcare University Foundation Trust (providers of treatment services and health visiting / school nursing), Dorset County Hospital, Poole Hospital, The Royal Bournemouth and Christchurch Hospital, Schools and colleges, GP practices, Voluntary and Community Sector providers and Live-Well Dorset.</p>	<b>Corporate Risk</b>	<b>Score</b>	<b>Trend</b>
	No associated current corporate risk(s)		

<u><b>Dorset County Council Performance Measures</b></u>	<u><b>Story behind the baseline</b></u>
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<p>100 — Proportion of clients of alcohol treatment service drinking less at 3 months</p>	<p>60 — Alcohol Successful Completions (HALO data)</p>	<p>Rates of hospital admissions related to alcohol are considerably higher than 30-40 years ago, resulting from higher levels of alcohol consumption and improved data recording. Gender: Admission rates remain much higher for men than women, but the rate among women appears to be rising while the rate amongst men is largely static. This relates to the fact that average rates of drinking have risen amongst women faster than amongst men in the past 30 years. Age: Admission rates are highest amongst those aged 40-64, but this is not necessarily an indication that this group should be the target of interventions. Patterns of drinking are often established earlier in the life course, and there is evidence that enables predictions of future harm from alcohol. Deprivation: Health harm related to alcohol is not perfectly correlated with overall levels of consumption, as other mediating factors such as diet, physical activity, smoking, and pattern of consumption all play a role in how harmful consumption is likely to be. Individuals from lower socio-economic groups are disproportionately likely to suffer harm from alcohol, despite average lower rates of consumption than other socio-economic groups. There is a pan-Dorset strategy for alcohol and drugs (2016-2020) that covers three themes: prevention, treatment and safety – all of which should reduce the harm related to alcohol experienced by Dorset residents.</p>
<p>2 — % of young people successfully completing substance use treatment</p> <p style="text-align: center; color: red;">TO FOLLOW</p>		



**HEALTHY: 03 Child and adult excess weight** (Outcome Lead Officer Jane Horne; Population Indicator Lead Officer David Lemon)



**Story behind the baseline:** Since the 1990's, rates of excess weight (overweight and obesity) have risen across England, so much so that England now has one of the highest rates of obesity in Europe. In Dorset, levels of excess weight are now 23.5% for children ages 4-5, 27.3% for children aged 10-11. Whilst some data suggests that the year on year increase in excess weight seen in the population may be plateauing, the absolute figures for overweight and obesity remain too high. Rates of excess weight are often higher in more deprived communities, and amongst ethnic minority groups. Children with parents who are overweight or obese are also more likely to be so themselves. Obese children are also more likely to suffer stigmatisation as a result of their obesity. The resulting NHS costs attributable to overweight and obesity are projected to reach £9.7 billion by 2050, with wider costs to society estimated to reach £49.9 billion per year (Foresight 2007). There is also a growing burden on local public sector resources, particularly in social care. It is widely acknowledged that obesity is a complex multi-faceted disorder, which requires an integrated approach to tackle.

**Story behind the baseline:** Since the 1990's, rates of excess weight (overweight and obesity) have risen across England, so much so that England now has one of the highest rates of obesity in Europe. In Dorset, income social deprivation and ethnicity all influence obesity. Rates of excess weight are often higher in more deprived communities, and amongst ethnic minority groups. Obesity is associated with a range of health problems. Physically, there are links between obesity and type 2 diabetes, cardiovascular disease and a number of cancers. Excess weight in pregnancy can have serious consequences such as an increased risk of miscarriage, stillbirth and gestational diabetes. There can also be significant mental ill health brought about as a result of obesity. There is also a gaining burden on local public sector resources, for example, the cost of caring for more house-bound individuals suffering from ill health as a consequence of obesity or special equipment being needed in school rooms and gyms. These factors combine to make the prevention of obesity a major public health challenge.

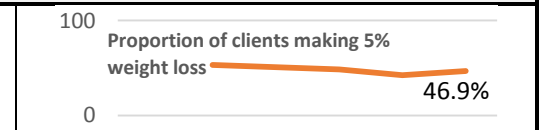
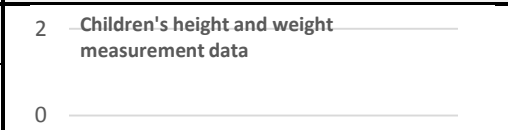
**Partners with a significant role to play:** Schools – academies and local authority run, Children's centres, Dorset County Council services including transport and education, District Council services including planning, leisure and environmental health, Dorset CCG and GPs, Acute hospital trusts, Community hospitals across Dorset, Active Dorset / Sport England and Dorset Community Action.

Corporate Risk	Score	Trend
No associated current risk(s)		

**Dorset County Council Performance Measures**

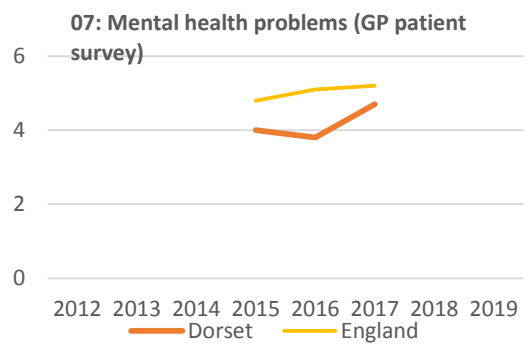
**What we propose to do? (Key Actions)**

- Promote active travel opportunities
- Develop and market programmes and events which encourage active lifestyles



**HEALTHY: 04 Prevalence of mental health conditions** (Outcome Lead Officer Jane Horne; Population Indicator Lead Officer David Lemon)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
Latest (2015-16)	Trend	Benchmark (England)
4.7%	<b>WORSENING</b>	BETTER 5.2% (Average)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

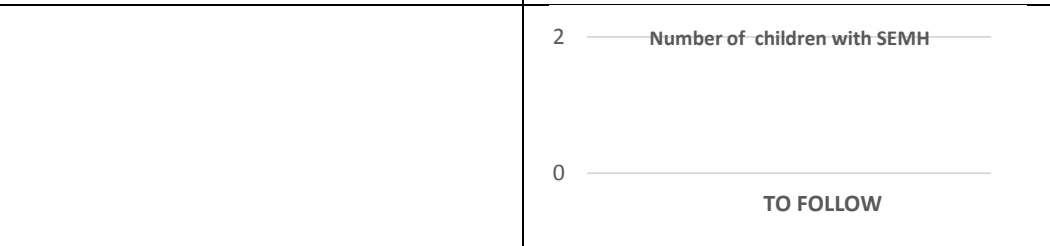
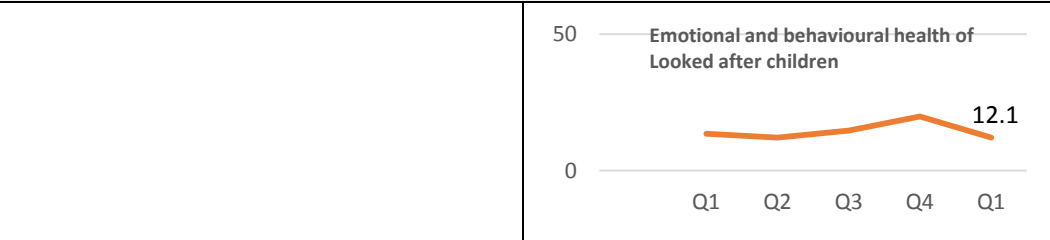
**Story behind the baseline**

Knowledge of how many people state that they have a long-term mental health problem contributes to building up the local picture of prevalence. It may also highlight gaps between diagnosed and undiagnosed prevalence in a local area. The data is taken from the question in the GP Patient Survey "Which, if any, of the following medical conditions do you have?" who answered "Long-term mental health problem". Because there have historically been issues recording mental health conditions, any increasing trends may not necessarily indicate a decrease in population mental health, but rather improved recording.

Source: Mental Health JSNA profile <https://fingertips.phe.org.uk/profile-group/mental-health/profile/mh-jsna>

**Partners with a significant role to play:** Dorset Clinical Commissioning Group (CCG), Dorset Healthcare University Foundation Trust (providers of treatment services and health visiting / school nursing), Dorset County Hospital, Poole Hospital, The Royal Bournemouth and Christchurch Hospital, Schools and colleges, GP practices, Voluntary and Community Sector providers and Live-Well Dorset.

**Dorset County Council Performance Measures**



**What we propose to do? (Key Actions)**

- Ensure skills agenda and employment initiatives reflect mental health issues (for example, mindful employers)
- Provide welfare benefits advice to help people better manage their financial affairs
- Promote mental health benefits of access to nature and greenspace
- Promote increased levels of volunteering
- Continue to develop libraries as safe and neutral places welcoming all, through a range of community based activities and services
- Target the greenspace service offer at areas and groups who stand to benefit most

**HEALTHY: 05 Under 75 mortality rate from cardiovascular diseases (Outcome Lead Officer Jane Horne; Population Indicator Lead Officer David Lemon)**

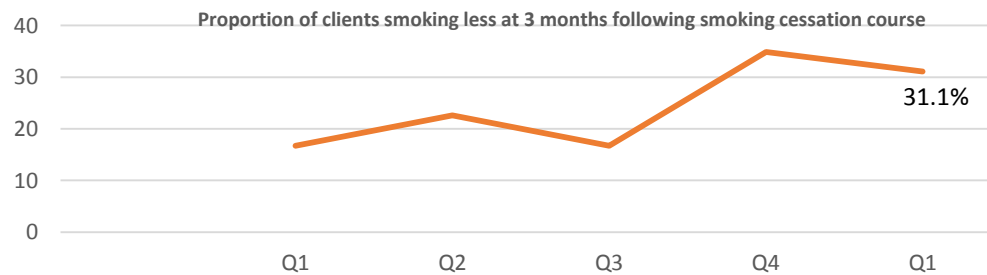
<p><b>DORSET</b></p> <p>Latest (2013-15)</p> <p>55.1 Male</p>	<p><b>DORSET</b></p> <p>Trend</p> <p><b>WORSENING</b></p>	<p><b>COMPARATOR</b></p> <p>Benchmark (England)</p> <p><b>BETTER</b></p> <p>76.7 (Average)</p>	<p>08: Under 75 mortality rate from cardiovascular diseases considered preventable - male</p>	<p><b>DORSET</b></p> <p>Latest (2013-15)</p> <p>14 Female</p>	<p><b>DORSET</b></p> <p>Trend</p> <p><b>IMPROVING</b></p>	<p><b>COMPARATOR</b></p> <p>Benchmark (England)</p> <p><b>BETTER</b></p> <p>26.5 (Average)</p>	<p>09: Under 75 mortality rate from cardiovascular diseases considered preventable - Female</p>
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**Story behind the baseline:** Whilst rates of premature mortality from CVD nationally have been falling significantly over the last five decades, this remains the second biggest cause of death nationally after cancer. The decline in deaths has flattened out in more recent years. The dramatic reductions in deaths are due to reductions in smoking, better management of cholesterol and hypertension, and improved treatments following a heart attack or stroke. The improvements seen in these factors, are somewhat offset however by the increase in obesity and diabetes, and reductions in physical activity. The rates in Dorset overall are significantly lower than the England average, but there is a significant difference in rates between district areas with rates in Weymouth and Portland being similar to the England average. These figures disguise a significant variation in mortality within districts, with rates from GP practices in the most deprived communities being 3-4 times that in the least deprived communities.

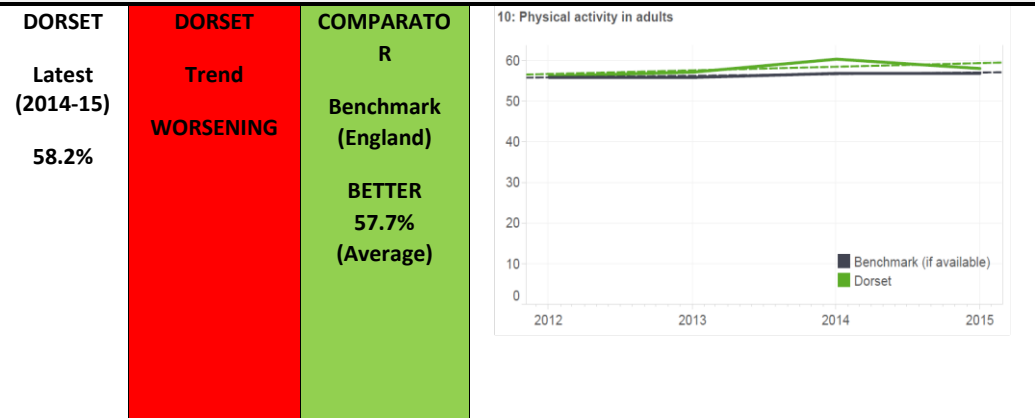
**Partners with a significant role to play:** In order to influence the factors identified as contributory to premature deaths from diabetes and CVD we have identified a wide range of key partners and stakeholders we need to work with including Dorset CCG, Dorset County Hospital, Poole Hospital, Royal Bournemouth Hospital, GP practices, Smoking cessation services, Live-Well Dorset, Schools and colleges, Voluntary sector, Local planning authorities and Employers.

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Dorset County Council Performance Measures**



**HEALTHY: 06 Levels of physical activity in adults** (Outcome Lead Officer Jane Horne; Population Indicator Lead Officer David Lemon)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

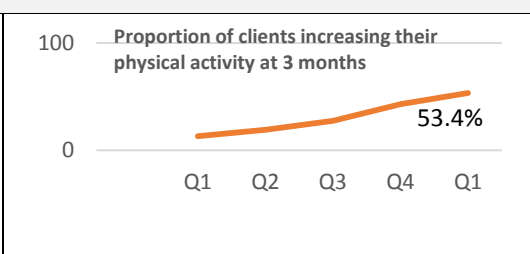
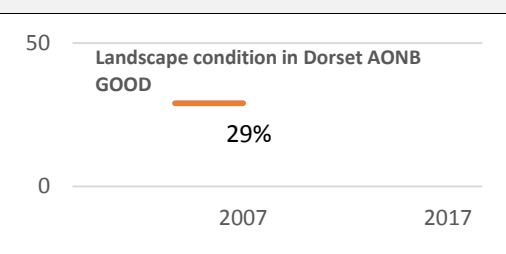
**Story behind the baseline**

In May 2016 Sport England published 'Sport England: Towards an Active Nation Strategy 2016-2021'. Notable parts of this include physical activity, focussing more money and resources in tackling inactivity and investing in children and young people from the age of five outside the school curriculum.

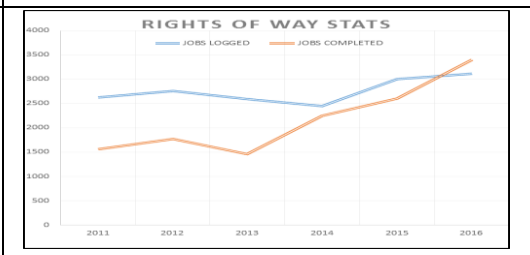
**Partners with a significant role to play:** Partners with a significant role to play: Dorset Clinical Commissioning Group (CCG), Dorset Healthcare University Foundation Trust (health visiting/school nursing), Schools and colleges, GP practices, Voluntary and Community Sector providers and Live-Well Dorset.

Active Dorset has tendered for a Sport and Leisure facilities Assessment and Strategy covering the six Dorset district councils. The County Council has supported this as it will provide a useful analysis at both district and county level.

**Dorset County Council Performance Measures**



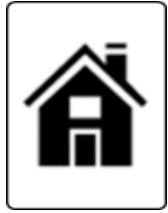
2 % of Right of Way network in good condition  
**UNDER DEVELOPMENT**



Interim Rights of Way measure (2016 Jobs Logged = 3111; Jobs Completed = 3400)

The Health and Wellbeing Strategy has been drafted which include priorities on reducing inequalities, promoting healthy lifestyles and preventing ill health. It refers to active travel and promoting exercise. Work has been undertaken by Dorset County Council on how physical activity relates to the life course. Increasing physical activity could have a strong beneficial impact on the majority of the population whether young or old and could make a significant impact on health outcomes from cardiovascular disease, diabetes, many musculoskeletal conditions as well as improved mental wellbeing.

We are seeking to bring together at a strategic level the organisations and officers who can help shape the approach and focus that Dorset will look to embed in our services and will form the basis for this area of work within the Sustainability and Transformation Plan (STP).



# People in Dorset are INDEPENDENT



Outcome Sponsor – Helen Coombes

<b>Corporate Risks that feature within INDEPENDENT but are not assigned to a specific POPULATION INDICATOR</b> (All risks are drawn from the <a href="#">Corporate Risk Register</a> )		
01c Failure to ensure that learning disability services are sustainable and cost-effective	<b>HIGH</b>	UNCHANGED
02e Failure to meet statutory and performance outcomes for young people in transition	<b>HIGH</b>	UNCHANGED
01k Negative financial impact as we reshape our services to ensure they are care act compliant	<b>MEDIUM</b>	UNCHANGED
07c Failure of the Early Help partnership	<b>MEDIUM</b>	UNCHANGED
07h Lack of momentum in agreeing the joint funding protocol with the CCG	<b>MEDIUM</b>	NEW
CS07 Increase in adverse judgements in relation to SEN decisions	<b>LOW</b>	UNCHANGED
CS08 Increase in adverse judgements re provision for children out of schools	<b>LOW</b>	UNCHANGED

**INDEPENDENT: 01 % of children 'ready to start school' by being at the expected level at Early Years** (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shiels)

DORSET	DORSET	COMPARATOR	02: Percentage of children achieving expected level at Early Years Foundation Stage
Latest (2016)	Trend <b>IMPROVING</b>	Benchmark (South West)  <b>BETTER</b> 69.5% (Average)	
70.1%			

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

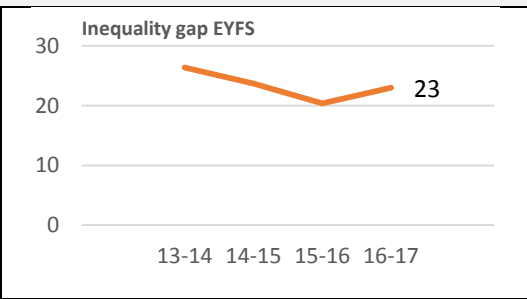
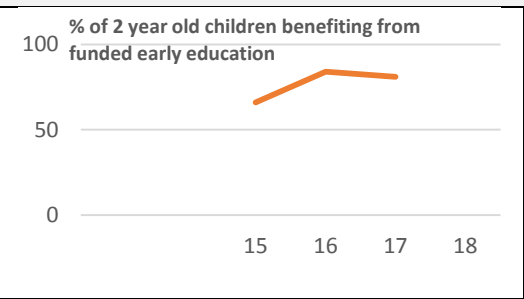
**Story behind the baseline**

This indicator helps us to understand school readiness and is made up of the building blocks for child development. School readiness starts at birth with the support of parents and carers, when young children acquire the social and emotional skills, knowledge and attitudes necessary for success in school and life.

**Partners with a significant role to play:** Parents/Carers; early years providers, children’s centres, schools, health visitors, Job Centre Plus/Department for Work and Pensions, adult training providers, libraries, leisure providers (including parks and play areas), planning departments and housing developers. There is strong evidence that investment in the early years, including targeted parenting programmes, has a significant return on investment.

Children who don’t achieve a good level of development at age five can struggle with social skills, reading, maths and physical skills. Although performance overall is good and improving, children from the poorest households do less well at this stage, as do children with special educational needs. Girls tend to better than boys and Gypsy/Roma/Traveller families do less well than white British children. Those that don’t reach a good level of development are already behind their peers so start school life with more ground to catch up and inequalities can continue throughout school life. School readiness at age five has a strong impact on future educational attainment and life chances. Good quality universal health care and childcare for pre-school children promotes school readiness. Parents and carers can provide a range of experiences and positive reinforcement through good communication, story-telling, and opportunities for play.

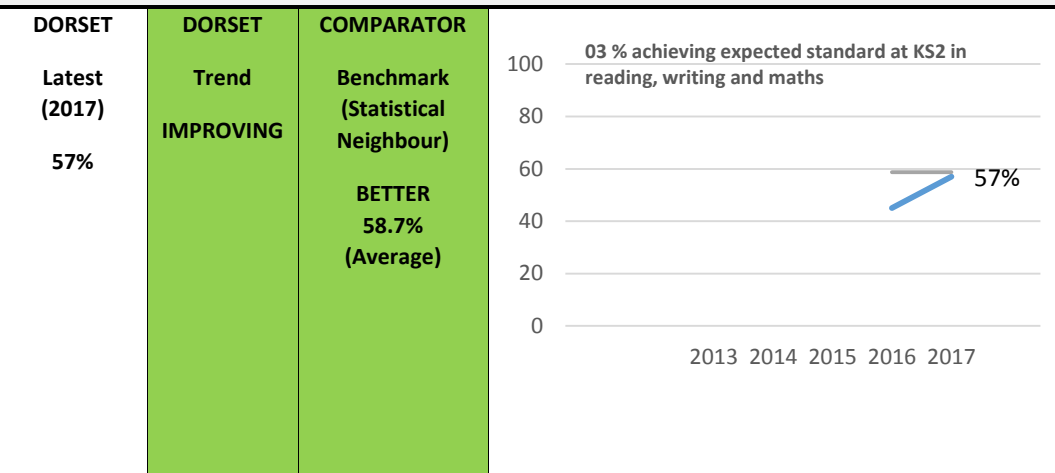
**Dorset County Council Performance Measures**



The proportion of 2 year olds benefiting from funded early education is in the highest quartile nationally and access to high quality early years education is important in closing the inequality gap.

INDEPENDENT: 02 % of children with good attendance at school (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shiels)						
DORSET	DORSET	COMPARATOR	UNDER DEVELOPMENT	Corporate Risk	Score	Trend
Latest (2015-16)	Trend	Benchmark		No associated current corporate risk(s)		
<b>Partners with a significant role to play:</b> Schools, school governors, parents/carers, alternative education providers, voluntary and community sector, youth providers, early year's settings, children's centres, health visitors, police, youth offending service.			<p><b>Story behind the baseline</b></p> <p>Good school attendance is important to ensure that children get the most important start in life. Children who miss school often fall behind and there is a strong link between good school attendance and achieving good results at GCSE. Good attendance at school is also linked to preparing for adulthood and employment opportunities later in life.</p> <p><b>Total absence from school in Dorset (across all schools) is 4.7%, similar to levels nationally and regionally.</b></p> <p>Much of the work children miss when they are off school is never made up, leaving these pupils at a considerable disadvantage for the remainder of their school career. Children who are missing from school are more vulnerable to exploitation. Although there are numerous reasons for non-attendance, those that truant are of particular concern. These children may have become disillusioned by school and by the time they have reached their mid-teens it becomes more difficult for parents and schools to improve attendance.</p> <p>Patterns of attendance are usually established earlier in the school career and those with the worst attendance tend to be from families that do not value education or where parents often missed school themselves. If poor school attendance is addressed in the early years it is more likely to have a lasting impact.</p> <p>Children with low attendance in the early years (prior to mandatory reporting) are more likely to be from the poorest backgrounds.</p>			
<u>Dorset County Council Performance Measures</u>						
<p>2</p> <p>Total SEN absence</p> <p>0</p> <p>TO FOLLOW</p>		<p>5.5</p> <p>Total secondary absence</p> <p>5</p> <p>13-14 14-15 15-16</p>				
<p>4.2</p> <p>Total primary absence</p> <p>4</p> <p>3.8</p> <p>13-14 14-15 15-16</p>		<p>10</p> <p>Looked after children overall absence</p> <p>5</p> <p>4</p> <p>0</p> <p>13-14 14-15 15-16</p>				

**INDEPENDENT: 03 % achieving expected standard at KS2 in reading, writing and maths** (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shields)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

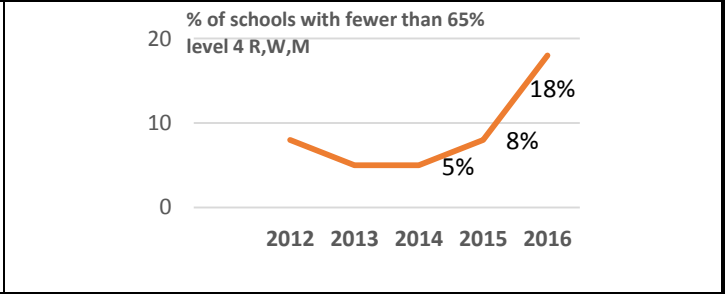
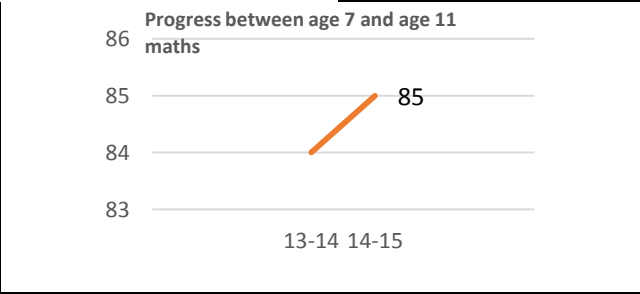
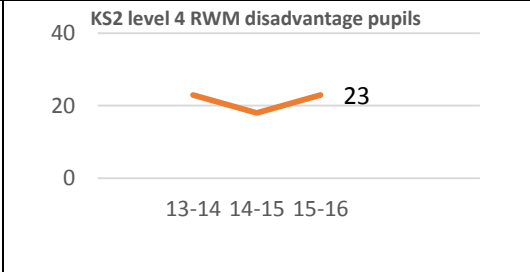
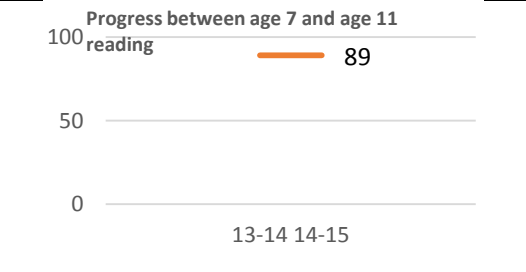
**Partners with a significant role to play:** Schools, school governors, parents/carers, voluntary and community sector, early year’s settings, children’s centres, health visitors and school nurses.

**Story behind the baseline**

Standardised Assessments are undertaken in Year 6 or Key Stage 2. For the first time in 2016 they were used to test the understanding of understanding of the national primary curriculum. Achievement at Key Stage 2 influences pupil’s attainment at GCSE as well as a range of other outcomes.

Disadvantaged pupils are less likely to achieve well at KS2.

**Dorset County Council Performance Measures**





**INDEPENDENT: 04 Percentage of 16-18 year olds not in education, employment or training (NEET)** (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Claire Shiels)

DORSET	DORSET	COMPARATOR		Corporate Risk	Score	Trend
Latest (2016)	Trend <b>IMPROVING</b>	Benchmark Benchmark (South West)  BETTER 2.9% (Average)	<p>04: Percentage of 16 - 17 year olds NEET</p> <p>4.0% 2.0% 0.0%</p> <p>Jan-Mar 2016 Jan-Mar 2017</p> <p>Dorset England</p>	<b>CS04</b> Performance targets for young people in jobs without training are not in line with national average	<b>MEDIUM</b>	UNCHANGED
2.6%				<b>Story behind the baseline</b>		

**Partners with a significant role to play:** Young people, parents, schools, FE Colleges and educational institutions, VCS sector, Family Partnership Zones, LEP and ESB, Economic Development roles in District Councils, Ansbury Guidance (Provider of Information, Advice and Guidance to Vulnerable young people).

The number and proportion of (academic age) 16 and 17 year olds who are NEET continues to remain below the England average. It is also slightly lower than the previous year.

When you look further you see that there has been a small increase in the 17 year old NEETs. High concentrations of NEET young people remain in Purbeck, Christchurch and Chesil areas of Dorset.

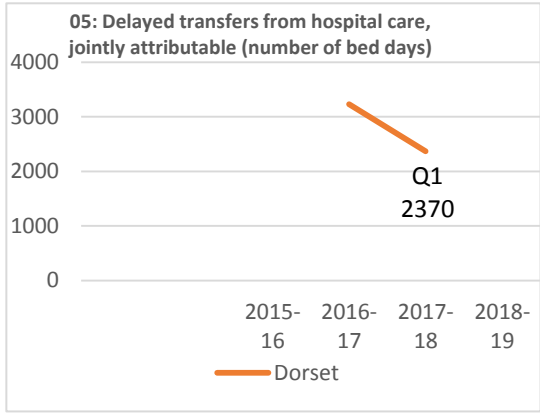
The number of young people who are NEET and seeking work is lower than England (Dorset 1.6%; England 1.9%).

The proportion of young people who are NEET and not available to the labour market due to illness, pregnancy or parenthood is low and reflects the national proportions.

<b>Dorset County Council Performance Measures</b>	
<p>% of offers of education or training made to 16/17 year olds</p> <p>100 95 90</p> <p>2012 2013 2014 2015 2016</p>	<p>% of 16/17 year olds in jobs without training</p> <p>5 0</p> <p>2014 2015 2016 2017 2018 2019</p> <p>2.70%</p>
<p>% of 16/17 year olds NEET re-engaged in EET</p> <p>0.5 0</p> <p>2014 2015 2016 2017 2018 2019</p> <p>0.4%</p>	<p>% Care Leavers that are NEET</p> <p>20 0</p> <p>2016 2016 2017 2018 2019</p> <p>14.5%</p>

**INDEPENDENT: 05 Delayed transfers from hospital care (number of bed days)** (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Harry Capron)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
<b>Latest (Q1 2017-18)</b>	<b>Trend</b>	No comparator information currently available, as indicator definition changed in April 2017
<b>2370</b>	<b>IMPROVING</b>	
(Total bed days delayed)		
Adult Social Care & jointly attributable = 2370 (Q1), Compared to Q1 2016-17 = 3232		



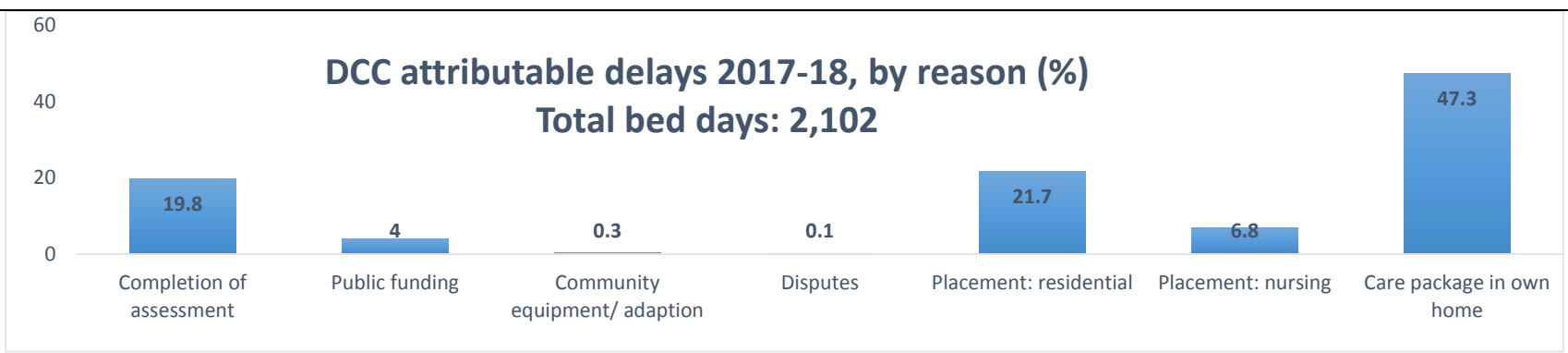
Corporate Risk	Score	Trend
01b Poor performance of the Better Care Fund	<b>HIGH</b>	UNCHANGED

**Story behind the baseline**

Throughout 2016-17 significant progress has been made in reducing the number of bed days lost. We received a letter of congratulation from Jeremy Hunt in June as we were the council with the best improvement in the number of patients experiencing Delayed Transfers of Care (DToC) across the whole of England for quarter 4 compared to last year. Moving from 8413 to 6019. He commented that this was a remarkable achievement. Also that we were a real example to others, demonstrating how to improve performance in a short space of time and ensure that patients get the care that they deserve. However, we need to ensure further reductions are achieved and the impact of Better Care Fund (BCF) schemes will support this as seen in Q1 results. It should also be noted that the way we monitor DToC has changed since April 2017 hence the change in the Population Indicator to move away from the historical ASCOF measure focused on the rate per population, to reflect the new emphasis on the number of bed days delayed. This is a key indicator as significant future funding for the Directorate via the Better Care Fund rests on how well we perform against this in the near future. The work of the High Impact Change Action plan is central to this.

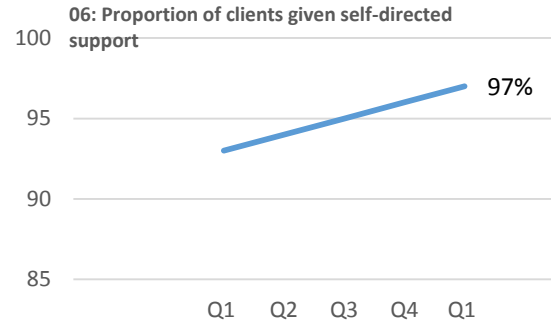
**Partners with a significant role to play:** Adult Social Care, Acute and Community Hospitals, Reablement Service, residential and domiciliary care providers, GP surgeries, Clinical Commissioning Group, Early Help services.

**Dorset County Council Performance Measures**



**INDEPENDENT: 06 Proportion of clients given self-directed support** (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Harry Capron)

DORSET	DORSET	COMPARATOR
Latest (Q1 2017-18)	Trend	Benchmark
97%	IMPROVING	(England)
		BETTER 86.9% (Average)



Corporate Risk	Score	Trend
03c Failure to meet primary statutory and legal care duties -Mental Capacity Act/Deprivation of Liberty Safeguards	MEDIUM	IMPROVING
03d Breach of the Deprivation of Liberty Safeguards (Community DOLs)	MEDIUM	UNCHANGED
07g Failure to develop Sustainability and Transformation Plans to achieve place based commissioning as part of the integration with health	MEDIUM	IMPROVING
11e Market failure (supply chain) with negative effect on service delivery within Adult and Community Services	LOW	UNCHANGED

**Partners with a significant role to play:** Early Help Services, Residential and Domiciliary Care Providers, Clinical Commissioning Group, Primary & Secondary Health Services, Voluntary and Community Sector, Telecare providers.

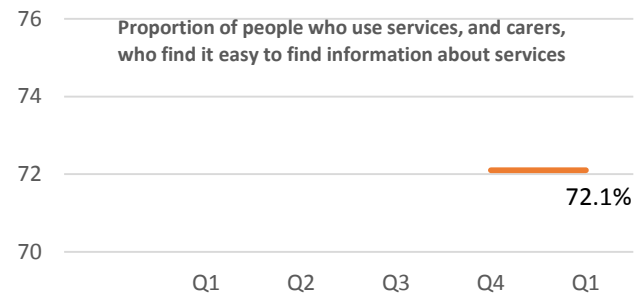
**Story behind the baseline**

Promotional work has been undertaken to keep the strong focus on personalisation. All cases are being looked at with a view to how they are to be managed in the future.

New care pathways/interventions continue to be designed by partner organisations and once established the impact of the changes on this indicator are to be assessed.

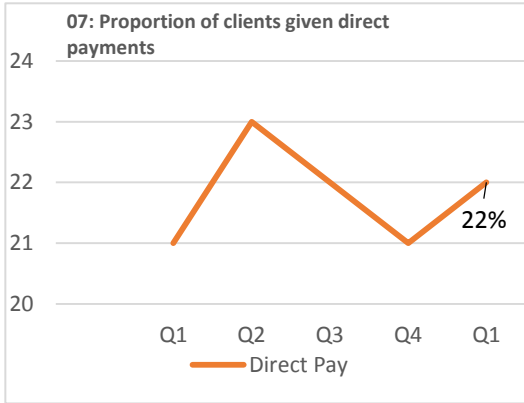
Whilst practice remains the same, the implementation of our new integrated case management system, MOSAIC, may change data reported in the future as information collection will be different.

**Dorset County Council Performance Measures**



**INDEPENDENT: 07 Proportion of clients given direct payments** (Outcome Lead Officer Sally Longman; Population Indicator Lead Officer Harry Capron)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
Latest (Q1 2017-18)	<b>Trend</b>	<b>Benchmark</b>
22%)	<b>IMPROVING</b>	(England)
		<b>BETTER</b>
		28.1%
		(Average)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Story behind the baseline**

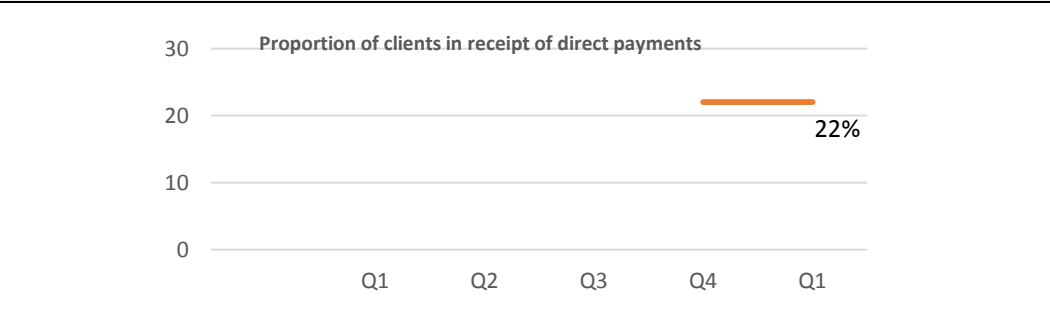
Promotional work has been undertaken to keep the strong focus on personalisation. All cases are being looked at with a view to how they are to be managed in the future.

New care pathways/interventions continue to be designed by partner organisations and once established the impact of the changes on this indicator are to be assessed. We are not expecting a significant increase in take up as the emphasis has shifted on personal budgets.

A number of people do not want direct payments as the mechanism for delivering personalisation. Instead Individual Service Funds (ISF's) are being developed as a way of promoting this.

**Partners with a significant role to play:** Early Help Services, Residential and Domiciliary Care Providers, Clinical Commissioning Group, Primary & Secondary Health Services, Voluntary and Community Sector, Telecare providers.

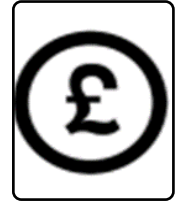
**Dorset County Council Performance Measures**





# Dorset's economy is PROSPEROUS

Outcome Sponsor – Mike Harries



Corporate Risks that feature within PROSPEROUS but are not assigned to a specific POPULATION INDICATOR		
(All risks are taken from the <a href="#">Corporate Risk Register</a> )		
17a – Lack of support for proposed structure of local government in Dorset (Central Government)	<b>HIGH</b>	UNCHANGED
09f - failure to adapt services and communities to the impacts of a changing climate	<b>MEDIUM</b>	UNCHANGED

**PROSPEROUS: 01 The productivity of Dorset's businesses** (Outcome Lead Officer Maxine Bodell; Population Indicator Lead Officer David Walsh)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>	01: Productivity rate (GVA per hour worked) 
<b>Latest (2015)</b>	<b>Trend</b>	<b>Benchmark (South West)</b>	
<b>90.9</b>	<b>IMPROVING</b>	<b>101.8 (Worse)</b>	

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

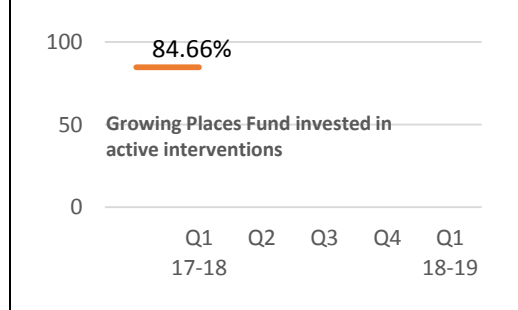
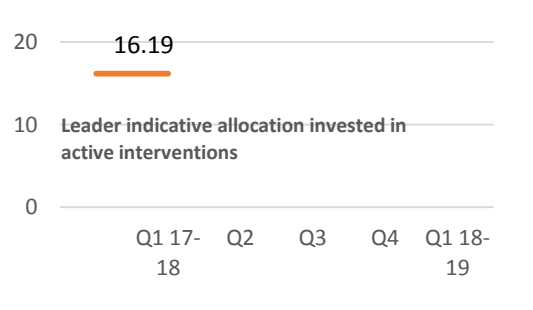
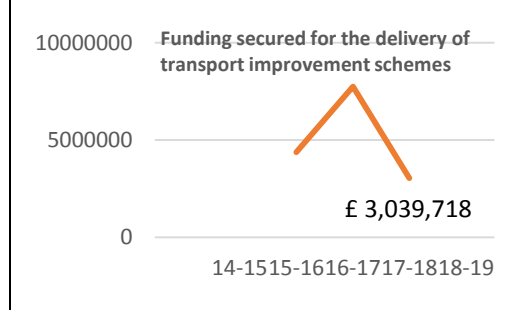
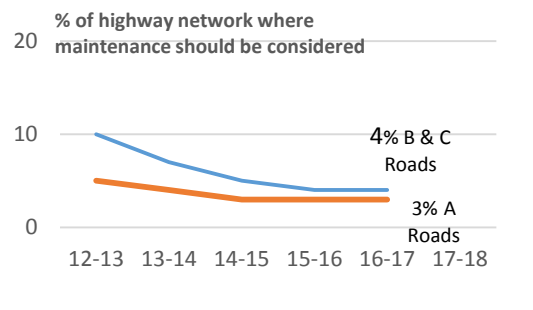
**Story behind the baseline**

In Dorset, GVA per hour worked (productivity) is below the national average and has been for some time. Dorset compares well with neighbours to the west, but less well compared with neighbours to the north and east.

This may reflect a number of factors including: the structure of industry and employment opportunities e.g. high representation of tourism related jobs, availability of appropriately skilled workers - skills shortage vacancies suggest a gap in skilled trades - an above average percentage of part time jobs, lack of dynamism and low competitiveness in the local economy, distance from and lack of significant population centres, connectivity and supply chain issues, and lifestyle choices such as above average self-employment.

**Partners with a significant role to play:** Dorset LEP, District and Borough councils, Businesses

**Dorset County Council Performance Measures**



**PROPEROUS: 02 Rate of start-ups of new business enterprises** (Outcome Lead Officer Maxine Bodell; Population Indicator Lead Officer David Walsh)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>	<p>02: Births of new enterprises per 10k population aged 16-64 years</p>
<b>Latest (2015)</b>	<b>Trend</b>	<b>Benchmark (England and Wales)</b>	
<b>81.6</b>	<b>WORSENING</b>	<b>WORSE 99.3 (Average)</b>	

Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Story behind the baseline**

In Dorset, annual growth in the number of business births per 10,000 population aged 16-64 is below the national average and has changed little in the last three years. This could reflect a number of factors such as:

- A lack of available employment land in the right location,
- A lack of choice of suitable employment premises in the right location,
- A lack of innovation/dynamism in local economy, or
- Quality of life/lifestyle issues meaning that new business owners may not wish to expand

**Partners with a significant role to play:** Dorset LEP, District and Borough councils, Businesses

**Dorset County Council Performance Measures**

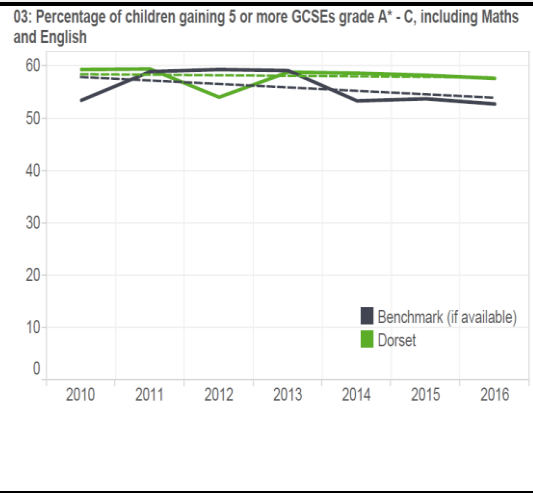
<p>1 Amount of workspace created or serviced at the Dorset Enterprise Zone</p>	<p>1 Number of new enterprises created or safeguarded at the Dorset Enterprise Zone</p>
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**Please note:**

The Dorset Enterprise Zone came into force on 1 April 2017, so data for these performance measures will accumulate over time.

**PROSPEROUS: 03 Percentage of children achieving the 'Basics' measures at Key Stage 4** (Outcome Lead Officer Patrick Myers; Population Indicator Lead Officer Doug Gilbert)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
Latest (2016)	Trend	Benchmark (England and Wales)
58%	<b>WORSENING</b>	<b>BETTER</b> 54% (Average)



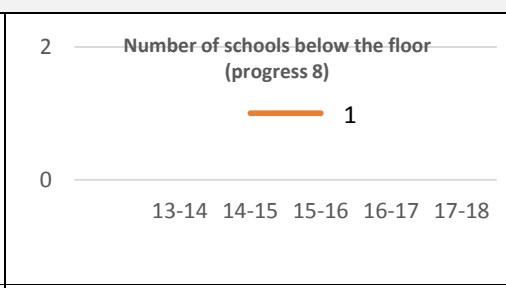
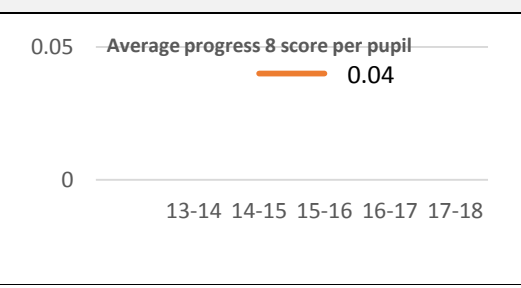
Corporate Risk	Score	Trend
09a Unable to provide sufficient school places (Basic Need)	<b>HIGH</b>	UNCHANGED
07i Deterioration in the relationships between schools and the LA arising from the Academies Bill	<b>LOW</b>	UNCHANGED

**Story behind the baseline**

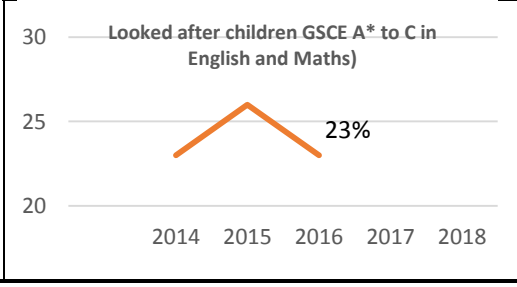
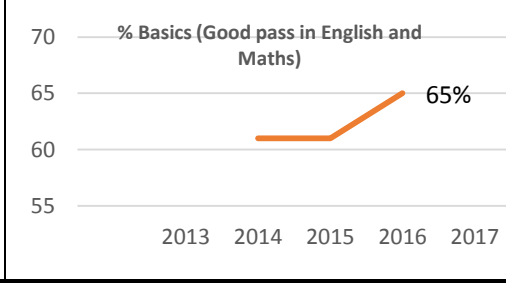
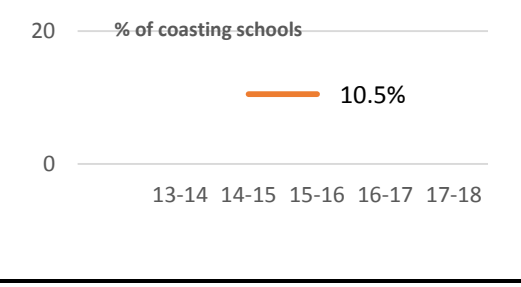
Achieving 5 good GCSEs including English and Maths allows pupils to continue in education or training and increases both employability and life chances. As a measure of school effectiveness this measure is being discontinued in favour of the new Progress8 indicator, however for school pupils it remains important. The graph reflects changes and issues in assessment over the past few years. A limit on the number of non-GCSE qualifications and restrictions on early entry in 2013-14 affected the national figures, but had a lesser impact in Dorset where early entry and take up of non-GCSEs were at lower levels.

**Partners with a significant role to play:** Ofsted, DFE, Regional Schools Commissioner and Wessex School Improvement Board.

**Dorset County Council Performance Measures**



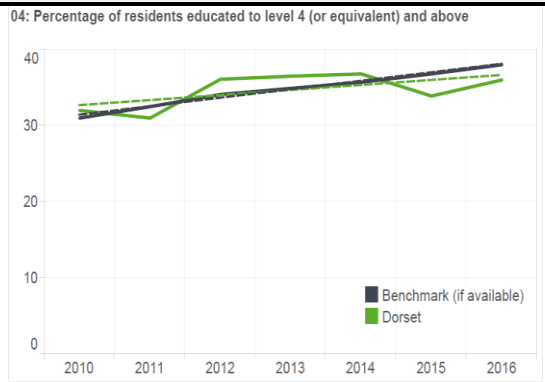
The dip in Dorset figures for 2011-12 was due to the problems surrounding the re-grading of English GCSEs, discussed widely in the media at the time. Dorset has since recovered its position and remains at a similar level to the South-West, similar local authorities and above the national average. The national decline since 2013 reflects a move towards harder GCSEs in line with the shift towards English Baccalaureate subjects (Sciences, Humanities and Languages). Performance at a local level is variable and tends to reflect overall school performance.





**PROSPEROUS: 04 Percentage of residents educated to level 4 (or equivalent) and above** (Outcome Lead Officer Maxine Bodell; Population Indicator Lead Officer Anne Gray)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
Latest (2016) 35.8%	Trend <b>IMPROVING</b>	Benchmark (South West)  <b>WORSE</b> 37.8% (Average)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Story behind the baseline**

Level 4 is equivalent to having a Higher National Certificate (HNC). In Dorset, the percentage of residents qualified to NVQ4+ is mostly above the national average but dropped below in the last year. Care: data is drawn from a household sample survey so year to year changes can reflect statistical error.

Raising skill levels in the workforce at level 4+ would help reduce skills shortage vacancies, especially for skilled trade's occupations. Higher level Apprenticeships and the continuation of learning whilst in work would help address this.

The development of higher level apprenticeships will be supported by the Apprenticeship reforms 2017, where Levy funding will enable the take up of higher level apprenticeships by employers, and the opportunity to up-skill existing staff to a higher level through the apprenticeship route.

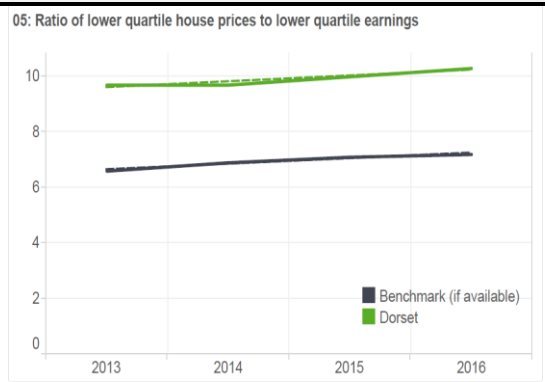
**Partners with a significant role to play:** Dorset LEP, District and Borough councils, Businesses

**Dorset County Council Performance Measures**

**UNDER DEVELOPMENT**

**PROSPEROUS: 05 Ratio of lower quartile house prices to lower quartile earnings** (Outcome Lead Officer Maxine Bodell; Population Indicator Lead Officer Maxine Bodell)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
<b>Latest (2015)</b> <b>10.3</b>	<b>Trend</b> <b>WORSENING</b>	<b>Benchmark (England)</b> <b>WORSE 7.2 (Average)</b>



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Story behind the baseline**

This is a useful measure as it helps to illustrate the housing affordability gap for people on lower incomes for whom access to affordable housing is likely to be the most acute.

It can be seen that the affordability gap between lower quartile earnings and house prices continues to worsen in Dorset and is consistently higher than the national average. In all but one district in Dorset there have been year-on-year increases in the ratio of house prices to incomes. The national average is a ratio of 7.2 while the Dorset Districts see a range of 9.0 in the 'most affordable' case to 13.5 in the worst affected district. The reasons for this are complex, but are likely to include a combination of the following factors:

- relatively lower salaries and productivity levels in the economy
- higher concentrations of certain lower paid sectors in parts of Dorset such as some services and tourism and the rural economy
- constraints on housing land supply such as international habitats
- Landscape designations and Green Belt, some 'stalled' and difficult-to-deliver housing sites with viability or infrastructure constraints, or a fall over past years in housebuilding rates and commensurate supply of affordable housing due to wider economic impacts.

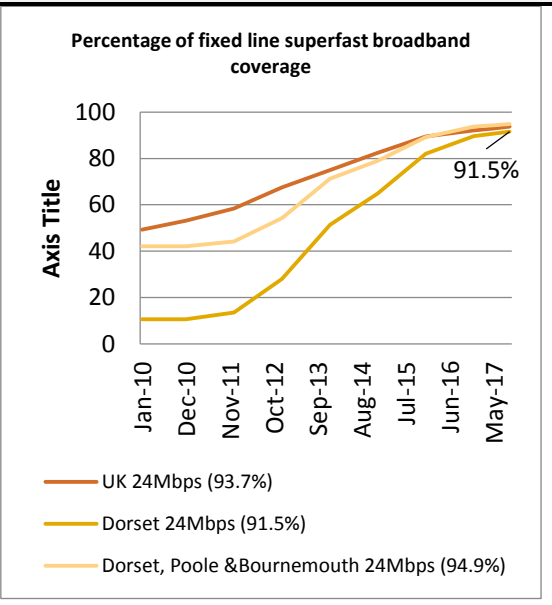
**Partners with a significant role to play:** Partners: Local planning authorities; Dorset Local Enterprise Partnership; education and skills development agencies such as local education authorities, universities, FE colleges and employers.

**Dorset County Council Performance Measures**

**UNDER DEVELOPMENT**

**PROSPEROUS: 06 Rates of coverage of superfast broadband** (Outcome Lead Officer Dugald Lockhart; Population Indicator Lead Officer Pete Bartlett)

<b>DORSET</b>	<b>DORSET</b>	<b>COMPARATOR</b>
Latest (August 2017)	Trend	Benchmark (UK)
91.5%	<b>IMPROVING</b>	SIMILAR
		92.5%
		(Average)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

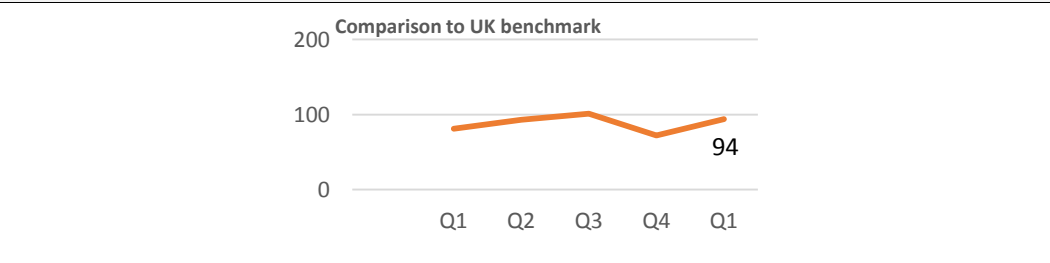
**Story behind the baseline**

Ofcom’s December 2016 report ‘Connected Nations’ summarises the national digital infrastructure position <https://www.ofcom.org.uk/research-and-data/infrastructure-research/connected-nations-2016> Detail of Dorset coverage, future plans and a postcode checker are available here: <https://www.dorsetforyou.gov.uk/superfast>

**Superfast Broadband Coverage:** National and Dorset coverage data independently sourced from <https://labs.thinkbroadband.com/local/uk> (September 2017 – updated monthly). More local programme data is also available, but this does not provide a valid national comparator. The Superfast Dorset programme is a partnership programme between all district, borough and unitary authorities across Dorset, Poole and Bournemouth. 3 contracts have been let to BT to deliver improved broadband in areas of market failure where there are no commercial plans. Take up of publically subsidised superfast broadband is 40% (September 2017), above the contractually modelled 20% target. The first contract was let to BT in July 2013 and has now completed its delivery phase, the second contract let in May 2015 is in deployment, and the third contract let in July 2017 is planned to start deployment at the end of this year. These 3 combined with private sector deployments will provide 98% coverage across the partnership area by completion. Mobile 4G coverage: Performance data on mobile digital coverage levels are not available nationally or locally. Ofcom’s postcode checker is available: <https://www.ofcom.org.uk/phones-telecoms-and-internet/advice-for-consumers/advice/ofcom-checker>

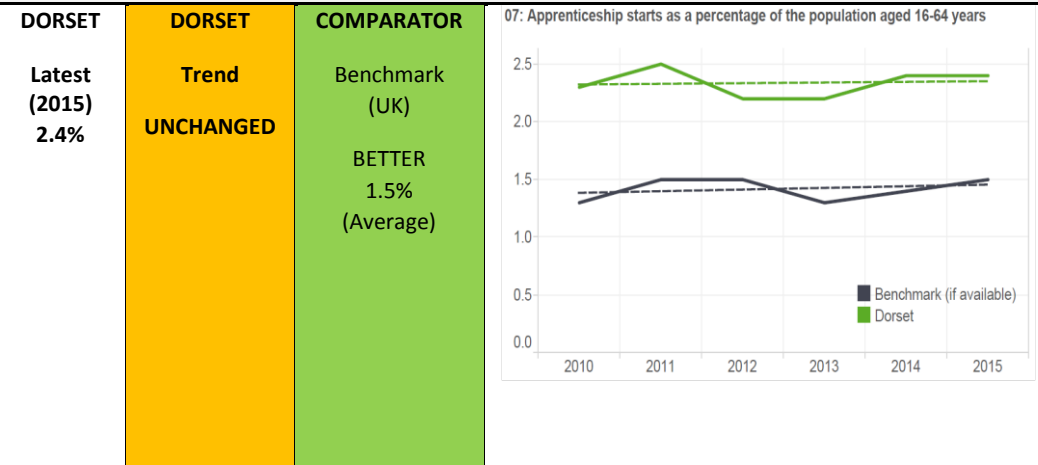
**Partners with a significant role to play:** All local authorities in the Superfast Dorset Programme, Dorset Local Enterprise Partnership, Broadband Delivery UK, part of the Department of Culture, Media and Sports, Defra; RPA; DCLG, Ofcom, Private sector fixed line and mobile network digital infrastructure providers.

**Dorset County Council Performance Measures**



**What we propose to do? (Key Actions)** Move to Ubiquitous Coverage - The Superfast Dorset programme is working to Utilise capital underspends and gain share earmarked for faster broadband, Secure capital funding from the EAFRD Rural Broadband Infrastructure scheme and Extend the [Better Broadband Subsidy Scheme](#)

**PROSPEROUS: 07** Apprenticeship starts as % of population aged 16-64 (Outcome Lead Officer Maxine Bodell; Population Indicator Lead Officer Anne Gray)



Corporate Risk	Score	Trend
No associated current corporate risk(s)		

**Story behind the baseline**

In Dorset, Apprenticeship starts of all ages expressed as a percentage of residents aged 16-64 years is above the national average. Qualifications of young people and skill levels in the workforce are seen as a driver of productivity so the availability of good quality Apprenticeships is important for Dorset. The actual number of Apprenticeship starts in Dorset seem slightly erratic.

**Partners with a significant role to play:** Dorset LEP, District and Borough councils, Businesses

They dropped by thirty over the last year, down from 5,680 to 5,650. The number of starts may be affected by:

- Employer awareness of Apprenticeships and the breadth of vocational areas on offer.
- Employers unaware of additional funding for apprenticeships in small businesses.
- Low number of apprenticeship opportunities in rural areas.
- Wider awareness of Apprenticeships as a route to employment and perception of this by schools/parents/young people as a 'second class' option;
- Quality of Apprenticeships on offer in terms of training and employment opportunities.

**Dorset County Council Performance Measures**

