Read the definitions in the Everyone Counts: Planning for Patients 2014/15 - 2018/19 Technical Definitions for CCGs and Area Teams before completing the template Read the Quality Premium Guidance before completing the template

## 3. Quality Premium Measures

## E.A.1

i) Potential years life lost (PYLL) from ammenable causes in 2014/15

E.A.1	PYLL (Rate per 100,000 population)
2014/15	2237

# E.A.4

ii) What trajectory are you aiming for in the composite avoidable emergency admissions indicator in 2014/15?

E.A.4	Emergency admissions composite indicator		
Q1 2014/15	2724.9		
Q2 2014/15	2687.4		
Q3 2014/15	2679.3		
Q4 2014/15	2671.3		

## E.A.3

iii) For IAPT, what proportion of people that enter treatment against the level of need in the general population are planned in 2014/15 and 2015/16?

E.A.3	The number of people who receive psychological therapies	The number of people who have depression and/or anxiety disorders (local estimate based on National Adult Psychiatric Morbidity Survey 2000)	Proportion	
Q1 2014/15	1844	49165	3.8%	
Q2 2014/15	1844	49165	3.8%	
Q3 2014/15 1844	1844	49165	3.8%	
Q4 2014/15	1844	49165	3.8%	
2015/16	7376	49165	15.0%	

#### E.A.6

iv) Do you plan meet the nationally set objective for the Friends and Family Test in 2014-15 and 2015/16? Yes/No



If No, please provide commentary (max 4000 characters

E.A.9

v) Have you agreed (in conjunction with your Health and Wellbeing



Please provide commentary, explaining the specified level of increase and if you do not plan to meet this, why? (max 4000 characters)

The CCG will be agreeing the level of reporting at the health and wellbeing board on 12th March

a specified increased level of reporting of medication errors from specified local providers between Q4,2013/14 and Q4, 2014/15? Yes/No

vi) Where there are requirements for Quality Premium measures and/or planned levels of improvement to be agreed with the relevant Health and Wellbeing Board and NHS England area team, do you have their agreement to each of these? Yes/No



If No, please provide commentary (max 4000 characters)

Those measures within the quality premium which require planned levels of improvement will be discussed in the health and well being board in March. Those that require agreement with NHS England will be discussed within the forthcoming weeks.