

Quality Assurance Framework
Appendix 2
With You For You Performance Report

Measure	Data type	Frequency
New WYFY in reporting period	Number	Monthly
WYFY completed in 21 days (initial service delivery)	Percentage of New WYFY	Monthly
New WYFY in reporting period by client category	Number	Monthly
WYFY - not right first time (linked to reporting period)	Percentage & Number	Monthly
Number of practitioners involved with each WYFY	Table format	Monthly
Number of linked WYFY requests	Table format	Monthly
Customer Feedback Statistics:		Monthly
Customers Feeling Safe	Percentage	
Customer/Carer satisfied with involvement in design of Plan	Percentage	
Customer satisfied with opportunity for social interaction	Percentage	
Reviews:		Monthly
Total	Number	
On time	Percentage	
Late	Percentage	
Not done	Percentage	
Unmet need:	Table	Quarterly
No needs met on Plan		
Unmet need by Service		
Partial Unmet Need		
Inappropriate placements by location		
Emergency admissions to residential care		
Emergency admissions to hospital (>65 years old)		
Residential Care (by service)		Monthly
Delayed Discharges		Monthly
Failed Hospital Discharges		Monthly
Failed Residential Discharges		Monthly
Supervision statistics:		Quarterly
Number due		
Number complete		