HEALTH AND WELLBEING BOARD - PERFORMANCE DASHBOARD

Health and Wellbeing Strategy 2014-19: Quarter 2 position (September 2014)



| Ref | Outcome Measure (Source) | Senior Lead (Agency) | Baseline (Year) | Outturn (13/14) | Latest Outturn (Date) | Target (Year) | RAG | DoT | Exception Commentary |
|------------|---|--|--------------------|-----------------------|-----------------------------|-------------------|--------------|----------|---|
| HEAI | TH AND WELLBEING STRATEGY | | | | | | | | |
| H&WBS 1 | Potential years of life lost (PYLL) from conditions considered amenable to healthcare - rate per 100,000 pop (NHSOF) | L. Smith (CCG) | 2553 (12/13) | 2445.3 (13/14) | 2445.3 (13/14) | 2443 (14/15) | \checkmark | Î | • Qrt 2 performance and direction of travel is in line with target for 2014/15 representing a positive position. |
| S | Health related quality of life for | L. Smith | 66.3 | 75.2 | 75.2 | 67.66 | | \frown | Qrt 2 performance in excess of |
| H&WBS 2 | people with long-term conditions (EQ5D tool - GP Patient Survey) | (CCG) | (13/14) | (July 13- Sept 14) | (July 13- Sept 14) | (14/15) | \checkmark | 1 | yearend target representing a positive position. |
| H&WBS 3 | Total avoidable emergency admissions – rate per 100,000 pop <i>(NHSOF)</i> | L. Smith / K. Kelly (CCG/ BHNFT) | 2944 (12/13) | 2840 (13/14) | 2840 (13/14) | 3050.6 (14/15) | ~ | Î | • 13/14 outturn saw a reduction of 3.5%. The 14/15 target is as included in the CCG Commissioning Plan but this was based on an estimated outturn and will therefore be reviewed and revised as part of the 14/15 planning round to reflect the ongoing ambition to reduce emergency admissions. |
| H&WBS 4 | Patient experience of inpatient care at the hospital (proportion of patients reporting poor experience) (NHSOF) | L. Smith / H. McNair (CCG/ BHNFT) | 109.7 (12/13) | Awaiting data | 109.7 (12/13) | 109.7 (14/15) | n/a | n/a | This indicator is from a national survey and the performance from 13/14 has not yet been published. Performance is good compared to other areas and therefore the ambition is to maintain the level of performance. The measure is not a rate and is calculated from answers to a range of questions. |
| H&WBS 5 | People with mental and physical health conditions having a positive experience of care outside hospital, in general practice and the community (NHSOF) | L. Smith (CCG) | 5.3 (13/14) | 5.3 (13/14) | 5.3 (13/14) | 5.2 (14/15) | n/a | n/a | This indicator is from a national survey and is included in the CCG Outcome Ambitions. Baseline was set in 13/14 and will be assessed against 14/15 data. |

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| H&WBS 6 | Hospital deaths attributable to problems in care <i>(tbc)</i> | L. Smith / Medical Director (CCG / BHNFT) | tbc | tbc | tbc | tbd | n/a | n/a | • This was identified in the H&WBS, the Hospital are currently confirming specifics to enable reporting to occur and performance to be assessed. Baseline to be confirmed in 2014/15. |
| H&WBS 7 | Proportion of people using social care who receive self directed support and direct payments (national definition) (ASCOF) | M. Farran (BMBC) | 86.9% - SDS (12/13) 20.1% - DP (12/13) | 85.6% - SDS (13/14) 22.4% - DP (13/14) | 85% - SDS (Qrt2) 26% -DP (Qtr2) | 85% - SDS (14/15) Under review | ✓✓ | | SDS / PB is the default offer for all eligible Adult Social Care service users. An action plan has been completed to increase the uptake of direct payments and new performance trajectories have been set. |
| H&WBS 8 | Smoking status at time of delivery (PHOF) | Director of Public Health | 21.9 (12/13) | 21.9 (12/13) | 23.0 (13/14) | 20.9 (14/15) | × | | Additional resources have been put in place to increase the number of pregnant women to stop smoking. Figures indicate that the additional resource is now having an impact on the number of successful quitters. |
| H&WBS 9 | Excess weight in 4-5 year olds (PHOF) | Director of Public Health | 23.1 (12/13) | 23.1 (12/13) | 23.1 (12/13) | 21.1 (14/15) | n/a | n/a | Figures for 2013/14 will be published by The Health and Social Care Information Centre in Dec 2014. Baseline data 12/13. |
| H&WBS 10 | Excess weight in 10-11 year olds (PHOF) | Director of Public Health | 35.3 (12/13) | 35.3 (12/13) | 35.3 (12/13) | 33.3 (14/15) | n/a | n/a | Figures for 2013/14 will be published by The Health and Social Care Information Centre in Dec 2014. Baseline data 12/13. |
| H&WBS 11 | Obesity prevalence in 4-5 year olds (PHOF) | Director of Public Health | 9.6 (12/13) | 9.6 (12/13) | 9.6 (12/13) | 7.6 (14/15) | n/a | n/a | Figures for 2013/14 will be published by The Health and Social Care Information Centre in Dec 2014. Baseline data 12/13. |
| H&WBS 12 | Obesity prevalence in 10-11 year olds (PHOF) | Director of Public Health | 21.7 (12/13) | 21.7 (12/13) | 21.7 (12/13) | 19.7 (14/15) | n/a | n/a | Figures for 2013/14 will be published by The Health and Social Care Information Centre in Dec 2014. Baseline data 12/13. |
| H&WBS 13 | Alcohol specific hospital admissions – under 18s (Local Alcohol Profile for England) | Director of Public Health | 87.8 (08/09- 10/11) | 72.4 (09/10- 11/12) | 60.7 (10/11- 12/13) | 86.9 (14/15) | \checkmark | Î | Significant lag on data. Positive work engineered to identify and respond appropriately to young people admitted to hospital and tailor services in response to need. |

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| H&WBS 14 | Alcohol attributable hospital admissions – males (Local Alcohol Profile for England) | Director of Public Health | 1938.2 (10/11) | 1947.9 (11/12) | 2004.4 (12/13) | 1829.3 (14/15) | × | \bigcirc | Significant lag on data. Systems and processes being put in place to capture and report against admissions and ensure appropriate |
| H&WBS 15 | Alcohol attributable hospital admissions – females (Local Alcohol Profile for England) | Director of Public Health | 913.5 (10/11) | 939.3 (11/12) | 990.3 (12/13) | Under review | × | Ų | intervention is put in place. Project group being initiated under the DAAT to bring stakeholders together. Latest data in 12/13 does not reflect the changes/ current position locally. |
| H&WBS 16 | Loneliness and isolation in adult carers (PHOF 1.18ii) | M. Farran (BMBC) | 47.5 (12/13) | 47.5 (12/13) | 47.5 (12/13) | Under review | n/a | n/a | Baseline data established in 12/13. Assessment to be made against 13/14 data when available. |
| BETT | FER CARE FUND | | | | | | | | |
| BCF 1 | Total non-elective admissions in to hospital (general & acute), all- age, per 100,000 pop (<i>Hospital Episode Stats</i>) | L. Smith / D. Wake (CCG / BHNFT) | 31067 (13/14) | 31067 (13/14) | 7912 (Qrt 2) 16132 (YTD) | 31325 (14/15) | X | Ţ | Total Emergency Admissions has increased in 2014/15 to date against a planned backdrop of reducing these linked to the BCF. |
| BC | | | | | | | | | Actions agreed by the CCG and linked to the BCF are designed to reduce emergency admissions. |
| BCF 2 | Permanent admissions of older people (aged 65 and over) to residential and nursing care | M. Farran (BMBC) | 717 – 289 clients | 736.5 – 308 clients | 303 - 133 clients | 640.0 281 clients | K | Î | Qrt 2 performance on track, but needs to be viewed with caution, as admission profiles are not always |
| Ш | homes, per 100,000 pop (ASCOF) | | (12/13) | (13/14) | (Qrt 2) | (14/15) | | | linear throughout the year and winter months can see increased activity. |
| с | Proportion of older people (65 +) who are still at home 91 days | M. Farran (BMBC) | 82.7% | 77.2 | 84.5% | 85.0 | | Î | Activity in line with previous year, current review of IC pathways and |
| BCF | after discharge from hospital into reablement/ rehabilitation services (ASCOF) | | (12/13) | (13/14) | (Qrt 2) | (14/15) | V | | services should increase outcomes in line with performance targets. |
| BCF 4 | Delayed transfers of care (delayed days) from hospital per 100,000 pop (aged 18+) <i>(NHS England)</i> | L. Smith/ M. Farran (CCG / BMBC) | 49.16 (13/14) | Q1- 61.47 Q2- 75.09 Q3- 18.46 Q4- 42.6 (13/14) | Q1 – 51.16 Q2 – 55.08 | 48.95 (14/15) | × | J | An increase in DTOC has been seen across South Yorkshire. The target is the annual monthly average and as the baseline demonstrates the rate has been higher in the first 2 quarters. DTOC are reviewed regularly as part of operational planning. |

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| BCF 5 | The proportion of people reporting poor experience of General Practice and Out-of-Hours Services (average number of negatives response per 100 patients) (GP Patient Survey) | L. Smith (CCG) | 5.3 (2012) | 5.3 (2012) | Awaiting data | 5.2 (14/15) | n/a | n/a | This indicator is from a national GP patient survey and the performance from 13/14 has not yet been published. Baseline data established in 2012. |
| BCF 6 | Proportion of people who feel they are supported to manage their long term conditions (NHSOF) | L. Smith (CCG) | 67.7 (12/13) | 64.6 (13/14) | 64.6 (13/14) | 69.9 (14/15) | × | | The CCG have an outcome ambition to increase the proportion of people supported to manage their long term conditions for 2014/15 and initiatives within the CCG are aimed at improving the rate; particularly in relation to primary care development. The target was set based on only 2012/13 data and will therefore be reviewed as part of the 2014/15 planning round based on the latest available data. |