

# INTEGRATED HEALTH & WELLBEING SYSTEM PERFORMANCE SCORECARD

**NOVEMBER 2016** 



Northern, Eastern and Western Devon Clinical Commissioning Group



## 1. INTRODUCTION

Public Sector organisations across the country are facing unprecedented challenges and pressures due to changes in demography, increasing complexity of need and the requirement to deliver better services with less public resource. Plymouth and Devon also face a particular financial challenge because of the local demography, the historic pattern of provision and pockets of deprivation and entrenched health inequalities.

On the 1<sup>st</sup> April 2015 Plymouth City Council (PCC) and the Northern, Eastern and Western Devon Clinical Commissioning Group (CCG) pooled their wellbeing, health and social care budgets and formed an integrated commissioning function. Four Integrated Commissioning Strategies were developed to drive activity across the wellbeing health and social care system.

The primary driver of this is to streamline service delivery and provision with the aim of improving outcomes both for individuals and value for money. Integrated commissioning must deliver integrated wellbeing.

The four strategies describe the current picture and the integrated commissioning response across the health and wellbeing 'system' in Plymouth, specifically covering

- Wellbeing
- Children and young people
- Community
- Enhanced and specialist

To monitor progress of the Integrated Commissioning activity an Integrated System Performance Scorecard has been developed. The scorecard will be updated on a quarterly basis and will capture and understand the impact of integration across the system, and inform future commissioning decisions.

#### 2. COLOUR SCHEME – BENCHMARK COLUMN

For indicators taken from either the Public Health Outcomes Framework or the Children and Young People's Health Benchmarking Tool:

- Indicators highlighted green show where Plymouth is significantly better than the England average.
- Indicators highlighted amber show where Plymouth is not significantly different to the England average.
- Indicators highlighted red show where Plymouth is significantly worse than the England average.
- Indicators highlighted white show where no significance test was performed, or where no local data or no national data were available.

#### For the rest of the indicators:

- Indicators highlighted green show where Plymouth 15% better than England's average.
- Indicators highlighted amber show where Plymouth within 15% of England's average.
- Indicators highlighted red show where Plymouth 15% worse than England's average.
- Indicators highlighted white or N/A show where no local data or no national data were available.

# 3. TREND GRAPHS

Each indicator is accompanied by a trend graph showing where possible the latest six values. Caution is required when interpreting the graphs as there is no Y axis displayed and as such the significance or flow of the change is difficult to interpret.

# 4. COLOUR SCHEME - TREND COLUMN (RAG)

- Indicators highlighted dark green show where there the latest 3 values are improving.
- Indicators highlighted green show where there the latest 1 or 2 values are improving.
- Indicators highlighted amber show where the latest value is between plus and minus 2.5% of the previous value.
- Indicators highlighted red show where there the latest 1 or 2 values are deteriorating.
- Indicators highlighted dark red show where there the latest 3 values are deteriorating.
- Indicators not highlighted have no trend data

## 5. PERFORMANCE BY EXCEPTION

#### **WELLBEING**

#### Estimated diagnosis rates for dementia - Increasing trend

Following a dip in quarter one there has in quarter two been an increase in the dementia diagnosis rate to 59.7%. This is mainly driven by a reduction in the number of people waiting to have their diagnosis confirmed in Livewell SW. There are a number of improvement plans in place to continue the improvement but reaching the national target of 66.7% is likely to prove challenging.

#### Number of carers receiving a statutory Carers Assessment – Increasing trend

We continue to deliver more adult carer's assessments, by the end of quarter two this year 564 assessments have been completed by either Livewell SW or the Plymouth Guild Carer's hub. We are in the fieldwork period of the 2016 adult carer's survey and have achieved the desired response rate. As at the 10<sup>th</sup> November the response rate is in excess of 40%.

## **CHILDREN AND YOUNG PEOPLE**

## First time entrants to the youth justice system - Reducing trend

Plymouths rate of first time entrants to the youth justice system has decreased over the last 5 years from a rate of 1171 per 100,000 10-17 year olds in 2010 to 431 in 2015; this has led to a decrease of the gap between Plymouth and England.

#### Breastfeeding prevalence at 6-8 weeks after birth – Increasing trend

Breastfeeding prevalence has seen an increase in the last couple of years (in 2010/11 it was 35% and in 2014/15 it is 38.2%), it has decreased for 2015/16 but due to a change in data collection method it is hard to identify if this is a decrease in prevalence or just down to the change in data collection.

Public Health are currently working with commissioned services to enhance our community offer with a focus on developing voluntary and peer (mother to mother) support to families residing in our most deprived neighbourhoods.

#### Children Social Care Re-referrals – Reducing trend

Repeat referrals are relatively stable at 33.5% within quarter two, and remain on a reducing trend since the end of last year. It is anticipated that the early intervention and step down processes being embedded will contribute to an improvement in the number of re-referrals in the early part of 2017.

# Number of children subject to a Child Protection plan - Increasing trend

The overall number of child protection plans Increased in October by 8 to 379. This is comparable with the same period in the previous year. The percentage of children on multiple plans has improved slightly and stands at 29.1% at the end of October. Multiagency partnership work for the Plymouth Safeguarding Children's Board has been completed and service managers will use the key messages within this document to inform next steps.

#### Number of looked after children – Decreasing trend

Children in care decreased to 406 at the end of quarter two, which is in line with the statistical family group (based on 2014/15 but above the England benchmark). Over the longer term regional and national evidence is showing that children in care numbers are increasing.

#### **COMMUNITY**

#### Successful completion of drug treatment – Increasing trend

The percentage of non-opiate drug users that left treatment successfully and do not re-present to treatment 6 months later for Plymouth is 38.5% which is not significantly different than the England average.

## **Delayed Transfers of Care – Reducing trend**

Nationally, since August 2010, the number of delayed transfers of care has been increasing. Locally the trend is an improving one for delays attributable to Adult Social Care, improvement that continued through quarter two – the rate of delays reducing from 8.8 per 100,000 population at the end of quarter one to 6.6 per 100,000 population at the end of quarter two. A comprehensive action plan is in place and is overseen by the Urgent Care Partnership. Key initiatives includes establishment of an Integrated Hospital Discharge Team and scaling up of Discharged to Assess.

## Preventing Homelessness - Increasing trend

Levels of homelessness (as well as demand for specialist casework interventions to prevent homelessness) have continued to rise steadily – the first two quarters of this year again saw statutory homeless approaches rise 18% compared to last year's quarterly average.

In quarter two 299 households were prevented from becoming homeless, an improvement from 213 in quarter one. Increased homelessness prevention over the last few years had seen Plymouth move above the regional and national averages, but sustaining this high performance has proved challenging. A number of actions have been taken to combat this, including changes to culture and practice within the PCC Housing casework team.

## Reporting Domestic Abuse – Reducing trend

The level of all Domestic Abuse incidents being reported has decreased over the last couple of years, a reduction linked to changes in recording processes within Devon and Cornwall Police. The number of reports resulting in a recorded crime has increased and partnership work continues to raise awareness of service for victims.

#### **ENHANCED AND SPECIALISED**

# Referral to treatment waiting times - Reducing trend

Performance against the 18-week referral to treatment waiting has decreased in the first part of 2016/17. However, local data is showing that performance in October has started to improve. This trend is expected to continue as a result of a comprehensive action plan that is in place overseen by the Western Delivery Group. Key measures centre on reducing demand and increasing system wide capacity. The number of referrals into Plymouth Hospital NHS Trust has decreased compared to last year and the overall level of capacity across the whole Western Locality has started to increase in key areas. Capacity will continue to increase until Q4 2016/17 when it will be back to the required level.

## CQC providers with a CQC rating of good or outstanding – Increasing trend

At the end of quarter two 84% of active providers of Adult Social Care have been rated as good or outstanding by the Care Quality Commission, this maintains the previous quarter's performance and is better than the England average. At the end of quarter two there were no providers rated as inadequate.

# 6. WELLBEING

Source	Indicator	Measure	Most Recent Period	Benchmark England	First Value of Graph	Graph	Last Value of Graph	Trend
Sustain the impro	vement in healthy life expectancy and health inequality and reduce both all-age all-cause deaths and deaths of	e, heart disease	and respirat	ory disease				
PHOF	2.12 - Excess Weight in Adults	Percentage	2013 - 15		62.4		62.4	
PHOF	2.13i - Percentage of physically active and inactive adults - active adults	Percentage	2015		59.2		56.2	
PHOF	2.13ii - Percentage of physically active and inactive adults - inactive adults	Percentage	2015		27.6	<u> </u>	30.2	
PHOF	2.14 - Smoking Prevalence in adults - current smokers (APS)	Percentage	2015		24.1		20.6	
Commission only	from providers who have a clear and proactive approach to health improvement, prevention of ill health, wh	ole person wellbein	g and working v	vith the wide	er community	in which they operate.		
ONS	Self-reported well-being: % of people with a low satisfaction score	Percentage	2014/15		6.2		5.4	
ONS	Self-reported well-being: % of people with a low worthwhile score	Percentage	2014/15		5.5		4.2	
ONS	Self-reported well-being: % of people with a low happiness score	Percentage	2014/15		12.8		12.6	
ONS	Self-reported well-being: % of people with a high anxiety score	Percentage	2014/15		22.7		19.5	
ASCOF	Social Isolation: percentage of adult social care users who have as much social contact as they would like	Percentage	2015/16		43.8		47.0	
ASCOF	Social Isolation: percentage of adult carers who have as much social contact as they would like	Percentage	2013/14		33.2		33.2	N/A
Care Act Metric (Local)	Total number of people for whom an advocate is arranged	Count						
Local - Carefirst	Number of carers receiving a statutory Carers Assessment	Count	2016/17 - Q2	N/A	71.0		293.0	
Local - Safer Plymouth	Percentage of people who feel safe after dark	Percentage	2014	N/A	59.5		62.3	
Local - Safer Plymouth	Percentage of people who feel safe during the day	Percentage	2014	N/A	89.3		88.3	
Local - Housing Options	Total Category I hazards removed CATI	Number	2016/17 - Q2	N/A	89.0		43.0	
ASCOF	The proportion of people who use services and carers who find it easy to find information about support - Client element	Percentage	2015/16		80.8		75.0	
ASCOF	The proportion of people who use services and carers who find it easy to find information about support - Carer element	Percentage	2014/15		58.3		43.2	

Source	Indicator	Measure	Most Recent Period	Benchmark England	First Value of Graph	Graph	Last Value of Graph	Trend
	overnent and the prevention of ill health at the core of our planned care system; demonstrably reducing the	demand for urgent	and complex in	terventions a	and yielding in	nprovements in health	and the behavio	ural
PHOF	ealth in Plymouth	D 1 000	2014					
PHOF	2.04 - Under 18 conceptions	Rate per 1,000	2014		46.0		29.6	
PHOF	3.02 - Chlamydia detection rate (15-24 year olds)	Rate per 100,000 population	2015		2,490.7		2,529.0	
PHOF	3.04 - HIV late diagnosis	Percentage	2013 - 15		43.4	<b>\</b>	33.3	
CCGOF	CCGOF Referral to Treatment waiting times (patients waiting over 18 weeks on incomplete pathway (%) (PHNT)	Percentage	Aug-16	N/A	85.0		83.5	
CCGOF	CCGOF Total health gain as assessed by patients for elective procedures - Hip replacement Primary	EQ-5D <sup>™</sup> index	2015/16		0.42		0.41	
CCGOF	CCGOF Total health gain as assessed by patients for elective procedures - Knee replacements - primary	EQ-5D <sup>™</sup> index	2015/16		0.32		0.33	
CCGOF	CCGOF Total health gain as assessed by patients for elective procedures - Varicose veins	EQ-5D <sup>™</sup> index	2015/16		0.04		0.07	
CCGOF	CCGOF Incidence of healthcare associated infection (HCAI) - MRSA	Count	2015/16	N/A	4		2	
CCGOF	CCGOF Incidence of healthcare associated infection (HCAI) - C-Difficile	Count	2015/16	N/A	32	/~/	42	
CCGOF	CCGOF Incidence of healthcare associated infection (HCAI) - Cat 2,3 & 4 new pressure ulcers	Count	2015/16	N/A	174		51	
www.primarycare.nhs.u k	NHSOF Estimated diagnosis rates for Dementia (Percentage)	Percentage	Sep-16	N/A	59.0		59.7	
CCGOF	In hospital Falls with harm	Percentage	Sep-16	N/A	0.0		0.1	

# 7. CHILDREN AND YOUNG PEOPLE

Source	Indicator	Measure	Most Recent Period	Benchmark England	First Value of Graph	Graph	Last Value of Graph	Trend	
Raise aspirations:	Raise aspirations: ensure that all children and young people are provided with opportunities that inspire them to learn and develop skills for future employment								
Local - PCC	Overall School attendance( absence sessions against the total available attendance sessions, includes authorised and unauthorised absence)	Percentage	2014/15	N/A	6.0		4.5		
PHOF	1.04 - First time entrants to the youth justice system	Rate per 100,000	2015		1,171.3		431.0		
PHOF	1.05 - 16-18 year olds not in education employment or training	Percentage	2015		8.4		5.6		
Deliver Preventio	n and Early Help: intervene early to meet the needs of children, young people and their families who are 'vul	nerable' to poor life	e outcomes						
PHE C&YP	Child mortality rate (1-17 years)	Rate per 100,000	2012 - 14		11.6		6.2		
PHOF	1.01i - Children in low income families (all dependent children under 20)	Percentage	2013		21.3		19.4		
PHOF	4.01 - Infant mortality	Rate per 1,000	2013 - 15		5.0		4.5		
PHOF	2.02ii - Breastfeeding - Breastfeeding prevalence at 6-8 weeks after birth*	Percentage	2015/16		35.0	<b>√</b>	36.7		
PHOF	1.02i - School Readiness: The percentage of children achieving a good level of development at the end of reception	Percentage	2014/15		57.3		62.6		
PHOF	2.06i - Child excess weight in 4-5 and 10-11 year olds - 4-5 year olds	Percentage	2014/15		22.8	<b>/</b>	24.6		
PHE C&YP	A&E attendances (0-4 years)	Rate per 1,000	2014/15		338.9		450.4		
Keep our Children	n and Young People Safe: ensure effective safeguarding and provide excellent services for children in care								
Local - PCC	Referrals carried out within 12 months of a previous referral (Re-referrals)	Percentage	2016/17 Q2		34.7		33.5		
Local - PCC	Reduction in the number of children with a "Child in Need" Status ( As at 31st March)	Count	2015/16	N/A	1,776	_/~/	2,118		
PHE C&YP	Hospital admissions as a result of self-harm (10-24 years)	Rate per 100,000	2014/15		425.5	<u> </u>	473.6		
PHE C&YP	Hospital admissions due to alcohol specific conditions	Rate per 100,000	2012/13 - 14/15		92.5		53.9		
PHE C&YP	Hospital admissions due to substance misuse (15-24 years)	Rate per 100,000	2012/13 - 14/15		49.7		80.5		
PHE C&YP	Hospital admissions for mental health conditions	Rate per 100,000	2014/15		140.7		100.6		
Local - PCC	Number of children subject to a Child Protection plan	Count	2016/17 Q2		439		371		
Local - PCC	Number of looked after children	Count	2016/17 Q2		380		406		
Local - PCC	Number of Children in Care - Residential	Count	2016/17 Q2	N/A	22.0		27.0		
PHOF	2.08i - Average difficulties score for all looked after children aged 5-16 who have been in care for at least 12 months on 31st March	Percentage	2014/15		16.1		15.7		

# 8. COMMUNITY

Source	Indicator	Measure	Most Recent Period	Benchmark England	First Value of Graph	Graph	Last Value of Graph	Trend
Provide integrated services that meet the whole needs of the person by developing: • Single, integrated points of access • Integrated support services & system performance management • Integrated records								
PHOF	2.18 - Admission episodes for alcohol-related conditions - narrow definition	Rate per 100,000	2014/15		688.4		671.0	
PHOF	2.15i - Successful completion of drug treatment - opiate users	Percentage	2015		5.8		6.4	
PHOF	2.15ii - Successful completion of drug treatment - non-opiate users	Percentage	2015		23.2		38.5	
Housing	Number of households prevented from becoming homeless	Number	2016/17 - Q2	N/A	200	<b>//</b>	299	
PHOF	1.13i - Re-offending levels - percentage of offenders who re-offend	Percentage	2013		28.8		27.1	
ASCOF	The proportion of adults in contact with secondary mental health services living independently, with or without support	Percentage	2015/16		53.0		59.3	
Safer Plymouth	Number of reported domestic abuse incidents	Number	2016/17 - Q2	N/A	1,633.0		1,330.0	
Safer Plymouth	Number of reported domestic abuse crimes	Number	2016/17 - Q2	N/A	676.0		595.0	
Reduce unnecessary emergency admissions to hospital across all ages by: • Responding quickly in a crisis • Focusing on timely discharge • Providing advice and guidance, recovery and reablement								
ASCOF	Proportion of people still at home 91 days after discharge from hospital into reablement/ rehabilitation services	Percentage	2016/17 - Q2	N/A	86.0		88.0	
NHSOF	IAPT Access Rate (PCH)	Percentage	Sep-16	N/A	1.3		1.5	
NHSOF	IAPT Recovery Rate (PCH)	Percentage	Sep-16	N/A	38.8		46.0	
NHS quality premium	Discharges at weekends and bank holidays	Percentage	Aug-16	N/A	18.3		16.2	
ASCOF	Delayed transfers of care from hospital, per 100,000 population	Rate per 100,000	2016/17 - Q2		15.0		13.4	
ASCOF	Delayed transfers of care from hospital, per 100,000 population, attributable to Adult Social Care	Rate per 100,000	2016/17 - Q2		8.8		6.6	
	ntred, flexible and enabling services for people who need on-going support to help them to live independe range services that offer quality & choice in a safe environment • Further integrating health and social car	, ,	eople to manag	e their own h	ealth and car	e needs within suitable	housing • Sup	pport the
Housing	People helped to live in their own home through the provision of Major Adaptation	Number	2016/17 - QI	N/A	47		68	
ASCOF	Permanent admissions of older people (aged 65 and over) to residential and nursing care homes	Rate per 100,000	2016/17 - Q2	N/A	128.1	~/	240.5	
ASCOF	Permanent admissions of younger people (aged 18-64) to residential and nursing care homes	Rate per 100,000	2016/17 - Q2		1.8		4.9	
PHOF	1.08ii - Gap in the employment rate between those with a learning disability and the overall employment rate	Percentage Point	2014/15		65.6		66.8	
PHOF	1.08iii - Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate	Percentage Point	2014/15		62.9		67.6	
PHOF	Self-reported well-being: % of people with a low satisfaction score	Percentage	2014/15		6.2		5.4	
ASCOF	Proportion of people who use services who have control over their daily life	Percentage	2015/16		74.7		79.0	
ASCOF	The proportion of carers who report that they have been included or consulted in discussions about the person they care for	Percentage	2014/15		74.6		67.3	
Safer Plymouth	Number of Reported Sexual Offences (inc Rape)	Number	2016/17 - QI	N/A	153.0		126.0	

# 9. ENHANCED AND SPECIALIST

Source	Indicator	Measure	Most Recent Period	Benchmark England	First Value of Graph	Graph	Last Value of Graph	Trend	
Create Centres o	f Excellence for enhanced and specialist services								
CCGOF	CCGOF Incidence of healthcare associated infection (HCAI) - MRSA	Count	2015/16	N/A	4		2		
CCGOF	CCGOF Incidence of healthcare associated infection (HCAI) - C-Difficile	Count	2015/16	N/A	32	/~/	42		
CCGOF	CCGOF Incidence of healthcare associated infection (HCAI) - Cat 2,3 & 4 new pressure ulcers	Count	2015/16	N/A	174		51		
CCGOF	In hospital Falls with harm	Percentage	Sep-16	N/A	0.0		0.1		
Ensure people are	Ensure people are able to access care as close to their preferred network of support as possible								
NHSOF	Health-related quality of life for people with long-term conditions	EQ-5D <sup>™</sup>	2015/16		0.70		0.71		
EOL Profile	DiUPR, Persons, All Ages (%)	Percentage	2014		44.96		52.11		
Provide high qual	ity, safe and effective care, preventing people from escalating to, or requiring, urgent or unplanned care								
PHOF	2.24i - Injuries due to falls in people aged 65 and over	Rate per 100,000	2014/15		2,233.8		1,960.7		
CCGOF	CCGOF Referral to Treatment waiting times (patients waiting over 18 weeks on incomplete pathway (%) (PHNT)	Percentage	Aug-16	N/A	85.0		83.5		
Local - PCC	Percentage of CQC providers with a CQC rating of good or outstanding	Percentage	2016/17 - Q2		82.0		84.0		
Local - PCC	Satisfaction among Adult Social Care clients resident in Residential/ Care homes	Percentage	2015/16	N/A	77.0		81.0		