



INTEGRATED HEALTH & WELLBEING SYSTEM PERFORMANCE SCORECARD MARCH 2018



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 1st 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

Referral to treatment - Percentage seen within 18 weeks

Plymouth Hospitals NHS Trust is not achieving the 18-week referral to treatment standard. There have been capacity issues in a number of specialties in Plymouth Hospitals NHS Trust and referral reductions haven't been a large as planned. Also an increase in demand over the winter period has led to higher cancellations. The target of 92% has not been achieved in 2017/18.

Estimated diagnosis rates for dementia

NEW Devon CCGs dementia diagnosis rate remains below the national target. The CCG has raised concerns with NHSE with the expected number of people with dementia in our population (this may affect the calculated diagnosis rate). However, the CCG is also looking to work more closely with primary care to improve the pathway.

CHILDREN AND YOUNG PEOPLE

Timeliness of Children's single assessments

Performance against timeliness for single assessments has proved challenging in 2017/18. Year to date timeliness at the end of quarter four has increased, and stands at 76% against a target of 88%. This improvement brings Plymouth closer to both the comparator (78%) and national (82%) averages. In quarter four, timeliness for new assessments was reported at circa 90%, which has helped to lift the year to date performance. This most recent performance also benchmarks well against national averages, which is an indication that performance is much improved.

COMMUNITY

Average number of households in Bed and Breakfast (B&B)

Quarter four performance saw the average number of B&B stays for the quarter reduce to 46. This is a positive reflection on the hard work that the Community Connections team has put in to manage demand, increase provision and support move on. We are continuing to look for alternative options for emergency accommodation and are working with providers to increase provision. Houselet continues to provide accommodation for families but we are still working with the provider to access more properties, give better turnaround and flexibility to help us to accommodate more families.

Supported temporary accommodation provision has increased over the last nine months from 42 to 53. We are now expecting provision to increase to 58 by July 2018. This will reduce our need for bed and breakfast accommodation for single people.

Number of households prevented from becoming homeless

Prevention of homelessness increased in quarter four with 179 households* prevented from becoming homeless; up from 175 in quarter three. Work has been undertaken with the Housing Access Team to ensure that we are maximising prevention and working with people to, where possible, keep them in their current homes whilst helping them to solve their impending homelessness. The success of this indicator impacts on the average number of households in B&B that has been previously reported on in this section.

*Provisional numbers which will likely increase.

People helped to live in their own home through the provision of Major Adaptation

By providing major adaptations through a DFG (Disabled Facilities Grant) we are helping people with disabilities to live at home. Interventions including a pilot to install stair lifts at the request of Occupational Therapists have helped to increase the number of home adaptations during quarter four, thus increasing the number of people helped to live at home. During the year the gap between activity and target had been closing and sustained performance improvement in quarter four means that by year end the 2017/18 the operational target has been exceeded.

Health and Social Care System

The Health and Social Care system remains challenged with an increase in the number of older patients who are more likely to require onward care due to the complexity of their needs. A severe winter and flu outbreak has also contributed to the winter surge that has been much greater than seen in previous years. This has had an impact on a number of performance indicators, reported on below;

Accident and Emergency 4 hour wait

Plymouth Hospitals NHS Trust is not achieving the 4hr wait in A&E target. This is linked to an increase in demand over the last year as both the number of A&E attendances and emergency admissions have increased. The recent flu outbreak has also contributed to a winter surge that has been much greater than seen in recent years. This has resulted in a high bed occupancy which has restricted flow through the A&E department. A number of schemes are in place to reduce the level of A&E attendances/ emergency admissions and to reduce the bed pressure by reducing the level of delayed transfers.

Emergency admissions aged 65+

Total emergency admissions aged 65+ have increased by around 6.0% in 17/18 compared to 16/17. The increase in emergency admissions over the last winter has been very high especially for older people. This is due to the level of respiratory admissions linked to the flu and the cold weather.

Delayed transfers of care from hospital per 100,000 population, whole system (delayed days per day)

During quarter four the average number of delayed days per month was 2,073, which compares to 1,485 in quarter three. During March 2018 there has been an improvement in performance and we would hope that this will continue into 2018/19. Despite this improvement, the number of delays across the whole system remains high and is not achieving target. In quarter four there has been a decrease in the number of delays that are attributable to Adult Social Care. Waiting for an assessment, awaiting further NHS care and awaiting a residential home placement continue to be the most common reasons for a delay. Through the System Improvement Board, all system partners remain committed to focusing on improving performance. An improvement plan is in place, which includes the appointment of the Interim Director of Integrated Urgent Care, the development of the Acute Assessment Unit to assist in preventing unnecessary admissions to hospital, and the rolling out of a home first approach.

ENHANCED AND SPECIALIST

Percentage of CQC providers with a CQC rating of good or outstanding

At the end of quarter four the percentage of residential and nursing homes that are rated by CQC as good or outstanding has increased from 73% (end of quarter three) to 79%. Within this the percentage rated as outstanding has remained the same (3%), the number rated as good has increased from 68 (end of quarter three) to 74 at the end of quarter four. The number of homes requiring improvement decreased from 21 to 19 and number rated inadequate has fallen from four to one.

The QAIT (Quality Assurance and Improvement Team) are undertaking a specific project to target providers requiring improvement (along with those rated as Inadequate) in the form of supportive workshops over the next 12 months. If necessary these workshops will be ongoing with learning shared across the whole care home sector. The team continue to request and monitor action plans from homes that have been rated as Requires Improvement or Inadequate and provide support visits and advice and information.

6. WELLBEING

Indicator	Measure	Most Recent Period	Benchmark	First Value of Graph	Graph	Last Value of Graph	Trend
Sustain the improvement in healthy life expectancy and health inequality and reduce both all-age all-cause deaths and deaths due to cancer, stroke, heart disease and respiratory disease							
2.13i - Percentage of physically active adults - current method	Percentage	2016/17		71.2		67.6	
2.13ii - Percentage of physically inactive adults - current method	Percentage	2016/17		18.6		21.1	
2.14 - Smoking Prevalence in adults - current smokers (APS)	Percentage	2016		24.1		17.2	
Commission only from providers who have a clear and proactive approach to health improvement, prevention of ill health, whole person wellbeing and working with the wider community in which they operate.							
Self-reported well-being: % of people with a low satisfaction score	Percentage	2016/17		5.3%		3.8%	
Self-reported well-being: % of people with a low worthwhile score	Percentage	2016/17		5.1%		3.9%	
Self-reported well-being: % of people with a low happiness score	Percentage	2016/17		11.5%		9.5%	
Self-reported well-being: % of people with a high anxiety score	Percentage	2016/17		22.9%		21.7%	
Place health improvement and the prevention of ill health at the core of our planned care system; demonstrably reducing the demand for urgent and complex interventions and yielding improvements in health and the behavioural determinants of health in Plymouth							
CCGOF Referral to Treatment waiting times (patients seen within 18 weeks on incomplete pathway (%))	Percentage	Mar-18	N/A	82.2%		79.7%	
NHSOF Estimated diagnosis rates for Dementia	Percentage	Feb-18	N/A	60.3%		59.3%	
In hospital Falls with harm	Percentage	Dec-17	N/A	0.36		0.23	

7. CHILDREN AND YOUNG PEOPLE

Indicator	Measure	Most Recent Period	Benchmark	First Value of Graph	Graph	Last Value of Graph	Trend
Raise aspirations: ensure that all children and young people are provided with opportunities that inspire them to learn and develop skills for future employment							
1.04 - First time entrants to the youth justice system	Rate per 100,000	2016		891.7		297.5	
Deliver Prevention and Early Help: intervene early to meet the needs of children, young people and their families who are 'vulnerable' to poor life outcomes							
4.01 - Infant mortality	Rate per 1,000	2014 - 16		5.3		2.6	
2.02ii - Breastfeeding - breastfeeding prevalence at 6-8 weeks after birth - current method*	Percentage	2016/17		36.7		40.2	
2.06i - Child excess weight in 4-5 and 10-11 year olds - 4-5 year olds	Percentage	2016/17		24.0		26.3	
A&E attendances (0-4 years)	Rate per 1,000	2016/17		332.4		488.4	
Keep our Children and Young People Safe: ensure effective safeguarding and provide excellent services for children in care							
Referrals carried out within 12 months of a previous referral (Re-referrals)	Percentage	2017/18 Q4		32.7		28.6	
Number of children subject to a Child Protection plan	Count	2017/18 Q4		343		335	
Number of Looked after children	Count	2017/18 Q4		404		419	
Number of Children in Care - Residential	Count	2017/18 Q4	N/A	27.0		38.0	
Timing of Children's Single Assessments (% completed within 45 working days)	Percentage	2017/18 Q4		94.6		76.0	

8. COMMUNITY

Indicator	Measure	Most Recent Period	Benchmark	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							
2.18 - Admission episodes for alcohol-related conditions - narrow definition	Rate per 100,000	2016/17		699.2		717.7	
2.15i - Successful completion of drug treatment - opiate users	Percentage	2016		6.0		4.4	
2.15ii - Successful completion of drug treatment - non-opiate users	Percentage	2016		26.8		34.2	
Number of households prevented from becoming homeless	Count	2017/18 - Q3	N/A	299		175	
Average number of households in B&B per month	Count	2017/18 - Q4	N/A	38.0		46.2	
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							
Proportion of people still at home 91 days after discharge from hospital into reablement/ rehabilitation services	Percentage	2017/18 - Q4	N/A	90.0		84.0	
Improving Access to Psychological Therapies Monthly Access rate	Percentage	Mar-18	N/A	1.50		1.60	
Improving Access to Psychological Therapies Recovery rate rate	Percentage	Mar-18	N/A	35.40		41.90	
A&E four hour wait	Percentage	Mar-18	N/A	87.60%		75.80%	
Emergency Admissions to hospital (over 65s)	Count	Mar-18	N/A	1,276		1,351	
Discharges at weekends and bank holidays	Percentage	Mar-18	N/A	18.00%		16.80%	
Rate of Delayed transfers of care per day, per 100,000 population	Rate per 100,000	2017/18 - Q4		25.1		32.6	
Rate of Delayed transfers of care per day, per 100,000 population, attributable to Adult Social Care	Rate per 100,000	2017/18 - Q4		13.0		11.9	

Provide person centred, flexible and enabling services for people who need on-going support to help them to live independently by: • Supporting people to manage their own health and care needs within suitable housing • Support the development of a range services that offer quality & choice in a safe environment • Further integrating health and social care							
People helped to live in their own home through the provision of Major Adaptation	Count	2017/18 - Q4	N/A	60		114	Green
Long-term support needs met by admission to residential and nursing care homes, per 100,000 population (aged 65+)	Rate per 100,000	2017/18 - Q4	Green	112.4		133.7	Red
Long-term support needs met by admission to residential and nursing care homes, per 100,000 population (aged 18-64)	Rate per 100,000	2017/18 - Q4	Green	3.1		2.4	Green
Proportion of people who use services who have control over their daily life	Percentage	2016/17	Yellow	82.5		81.0	Green
The proportion of carers who report that they have been included or consulted in discussions about the person they care for	Percentage	2015/16	Red	74.6		63.0	Red
Overall satisfaction of carers with social services	Percentage	2015/16	Red	45.0		34.0	Red

9. ENHANCED AND SPECIALIST

Indicator	Measure	Most Recent Period	Benchmark	First Value of Graph	Graph	Last Value of Graph	Trend
Create Centres of Excellence for enhanced and specialist services							
In hospital Falls with harm	Percentage	Mar-18	N/A	0.4		0.2	Green
Provide high quality, safe and effective care, preventing people from escalating to, or requiring, urgent or unplanned care							
Percentage of CQC providers with a CQC rating of good or outstanding	Percentage	2017/18 - Q4	Yellow	81.0		79.0	Green