

**TITLE OF REPORT: Performance Report for the Health & Care System**

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**Purpose of the Report**

1. This paper provides an update on performance within health and social care to enable the Health and Wellbeing Board to gain an overview of the current system and to provide appropriate scrutiny.

**Background**

2. An initial Performance Report was considered by the Board on 17 July 2015. That report proposed a suite of indicators to form the basis for a Performance Management Framework for consideration by the Health and Wellbeing Board on a regular basis.
3. The report focused on metrics and did not consider other aspects such as financial performance or monitoring of action plans as these are addressed through other processes. The Health and Wellbeing Board considered the suggested indicators to be appropriate but requested a Task and Finish Group should be established to refine the set of measures and agree the frequency of reporting.

**Update**

4. Nominations for the Task and Finish Group were sought from the Council, Newcastle Gateshead Clinical Care Group, North East Commissioning Service and voluntary sector via the Voluntary Sector Health & Wellbeing Advisory Group.
5. The Task and Finish Group suggested some amendments to the suite of indicators to better monitor key issues in year. It was felt that a report should be provided to alternate meetings to enable issues to be identified early but enable trends to be visible. The next report would therefore be produced for the 15<sup>th</sup> January meeting.
6. Because of the diverse range of indicators included in the Framework, the frequency with which metrics are updated varies. The latest available data for each indicator will be reported.
7. The Task and Finish Group also agreed that agency performance leads would highlight any metrics that are worth further consideration by the Board. This could be because

they represent a cross cutting issue or have been identified as an area of significant improvement or key risk.

## **Overview of Current performance**

8. Tables providing fuller details of performance are provided as appendix 1. Indicators highlighted for this report by Task and Finish Group are:

### Public Health

9. For most of the Public Health Strategic Indicators, Gateshead is currently considered to be significantly worse than the England averages. Some improvements have been achieved. Gateshead's rate of alcohol admissions per 100,000 has reduced from 956.0 per 100,000 to 918.0 - better than the target of 924 per 100,000 that was set for 2014/15.
10. The percentage of people who are dissatisfied with life surpassed the target for 2014/15 of 7.6%. It reduced from 7.9% in 2013/14 to 6.3% in 2014/15. Gateshead is considered not to be significantly different to the England average.
11. Hospital Admissions for self-harm (per 100,000) (10-24 year olds) has increased on the previous year - going up from 491.7 per 100,000 to 626.5 per 100,000. Both the North East and England averages also increased for this period with Gateshead remaining significantly worse than the England average.
12. Indicators CHW01, CHW09a/b, CHW10a/b and CHW11a/b have not changed since the previous report. Data for these for 2014/15 year is expected between November and December 2015.

### Gateshead Better Care Fund Plan:

13. Challenging targets were set and performance is mixed so far.
14. Particular issues include permanent admissions of older people to residential or nursing care. Using the Better Care Fund definition, there were 154 permanent admissions during April to August 2015 - this represents 407.03 admissions per 100,000. During the same period last year, there were 133 permanent admissions which makes achievement of the year end target a risk.
15. Older people still at home 91 days after hospital discharge. This indicator has improved from the quarter 1 position previously reported (81.2%) but is still below the target of 87.7%.
16. Non-elective admissions – current activity pressures have been the subject of a deep dive which has been shared with the provider and will form the basis of discussions going forward. Improvements are anticipated given the impact of ambulatory care activity where revised reporting arrangements are being implemented to reflect the changes in the clinical pathway.

17. For delayed transfers of care, there was a substantial increase in delays during the period April to July 2014 which made achievement of the final target challenging. This increase largely took place at hospitals out of area (Newcastle hospitals and NTW). Further work has been implemented following this to enable close monitoring of delays in this area.
18. The locally selected Patient Experience Measure which measures the patients with a long term condition (LTC) answering 'yes definitely' to the question who have had enough support from local services or organisations has shown a reduction in the recent GP survey. Particular focus is ongoing to tackle the care for people with LTCs with both physical and mental health components, with the aim of improving the score in Gateshead.

#### Newcastle Gateshead CCG Strategic Indicators

19. "Everyone Counts Planning for Patients 2014/15 to 2018/19" sets out the outcomes which NHS England wants to deliver for its patients.
20. These outcomes have been translated into the 7 specific measureable Outcome Ambitions (OA) by NHSE, as detailed in appendix 1 and a defined set of national indicators used to track progress against these outcomes are mapped against each ambition.
21. Progress against the national indicators is detailed in appendix 1. Key areas which are currently off track and the associated mitigating actions are as follows:
  - Securing additional years of life for the people of England with treatable mental and physical health conditions (OA1) - The priority diseases areas to close the life expectancy gap in Gateshead include Cancer, CVD, Gastrointestinal mortality and Respiratory conditions. The CCG continue to work with Public Health and the LA to embed early identification and intervention with a specific focus on those at increased risk including Health checks programmes, cancer profiles for practices and targeting work, case finding atrial fibrillation and the practice engagement plan (PEP) programmes for disease prevalence, as well as a review of the diagnostic pathways.
  - Particular focus is ongoing to tackle the care for people with LTCs with both physical and mental health components, with the aim of improving the score from the GP patient survey in this area which showed a decrease in 2013/14 (OA 2).
  - Work continues in reducing the time people spend in hospital avoidably (OA 3) by further implementation of the Better Care Fund (BCF) programmes of work which include 11 BCF schemes.
  - OA 4 is linked to the BCF work programme and national metric to support older people to live independently (see BCF section).
  - On-going work pathway redesign to encourage care closer to home and promote a positive experience with care provision by our providers of community services and General Practice continues to improve OA 6
  - The Healthcare Acquired Infection Partnership across Newcastle, Gateshead and Northumberland continues to closely monitor trends and to develop action plans in conjunction with commissioner and provider organisations which links to OA7.

### Newcastle Gateshead CCG Quality Premium 2015/16

22. The quality premium (QP) is intended to reward CCGs for improvements in the quality of the services that they commission and for associated improvements in health outcomes and reductions in inequalities in access and in health outcomes.
23. The 2015/16 quality premium will be based on a set of measures that cover a combination of national and local priorities as detailed in appendix 1. Areas which are currently at risk are as follows:
- Reducing potential years of life lost through causes considered amendable to healthcare – also OA1 as detailed above
  - Reduction in the number of people with severe mental illness who are currently smokers. This is embedded within the CCG practice engagement plan (PEP)
  - Improved antibiotic prescribing in primary and secondary care – work is ongoing with practices with Medicines Optimisation through the Prescribing Incentive Scheme.
  - Delivery of the Quality Premium indicators is linked to achievement of key NHS constitution standards. A summary of performance against a number of the key constitution standards is outlined below.

### NHS Constitution

24. The NHS constitution establishes the principles and values of the NHS and sets out the rights for patients and the public including the rights patients have to access services.
- Key constitution indicators have been outlined in appendix 1 and the key current risk is waiting times for diagnostic tests at Gateshead Health NHS FT, with recent pressures in echocardiography and non-obstetric ultrasound. A recovery plan is currently in place with the FT, and the CCG have assurance the waits will be back within the 6 weeks required standard by the end of October 2015.

### Children's Strategic Outcome Indicators

25. Performance overall is positive with this year's figures demonstrating continued improvement in F02 Children achieving a good level of development at age 5. The educational attainment of children in Gateshead remains strong although to be noted that the data provided in this report is provisional only.
26. The rate of referrals into children's social care fell during 2014/15 in line with the regional picture; however the current figures show an overall increase over the past 12 months to August 2015. The number of children subject to child protection plans has decreased during the period April to August 2015 and we continue to perform well in relation to children becoming subject to a child protection plan for a second or subsequent time. While there will always be changes in circumstances that make it appropriate for a child to become subject to a CP plan for a second or subsequent time a low rate is an indication that CP plans are effective at providing support to families so that once ended they result in a safe stable situation for the child.
27. Since April there has been a marked increase in the number of children becoming looked after, up by 8% on the end of year position. However, the proportion of Looked After Children living continuously in the same placement continues to improve (83.3%) and is well above the England average (67%).

### Adult Social Care Outcome Indicators

28. Please also see the Better Care Fund section.
29. Performance is variable. Whilst targets for service users and carers receiving self-directed support have been met, the proportion of service users receiving direct payments has improved but missed the target slightly. Gateshead remains below national and regional averages for direct payments.
30. Targets were achieved for the number of adults with learning disabilities in paid employment and also for those adults with learning disabilities living in their own home or with family. However, the proportion of adults with secondary mental health services in paid employment and living independently has not met target and remains below national and regional averages. Work has been initiated to share information between Gateshead Council and NTW Mental Health Trust which should enable a more joined up approach in this area.

### **Recommendations**

31. The Health and Wellbeing Board is asked to consider current performance and comment on any amendments required for future reports.

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## Gateshead Local Authority Public Health Strategic Indicators (Compared to England Value)

Significantly better than the England Average ●

Not significantly different to the England Average ●

Significantly worse than the England Average ●

North East Average ◆

Indicator	Data Period	Count	Gateshead Value	N/E Average	England Average	England Worst	England Range	England Best
CHW01. Reduce Mortality from Causes considered preventable (per 100,000)	2011-13	1347	237.8	223.4	183.9	319.7		130.3
CHW02. Stabilise rate of Hospital Admissions, per 100,000 for Alcohol related Harm	2014/15	1798	918.0	820.0	638.0	1202.0		378.0
CHW05. Decrease the % of people who are Dissatisfied with life	2014/15	-	6.3	6.1	4.8	8.7		2.8
CHW09a. Healthy Life Expectancy at birth (Male) (Years)	2011-13	-	57.5	59.3	63.3	53.6		71.4
CHW09b. Healthy Life Expectancy at birth (Female) (Years)	2011-13	-	59.4	60.1	63.9	55.5		71.3
CHW10a. Gap in life expectancy between each LA and England as a whole (Male) (Years)	2011-13	-	-2.0	-1.4	0.0	-5.1		3.2
CHW10b. Gap in life expectancy between each LA and England as a whole (Female) (Years)	2011-13	-	-1.9	-1.4	0.0	-3.1		3.1
CHW11a. Reduce Excess weight in 4-5 and 10-11 year olds (4-5 yo) (%)	2013/14	546	25.0	24.4	22.5	29.5		15.9
CHW11b. Reduce Excess weight in 4-5 and 10-11 year olds (10-11 yo) (%)	2013/14	668	37.2	36.1	33.5	43.8		24.4
F01. Prevention of Ill Health: (% of Mothers Smoking at time of Delivery)	2014/15	344	15.1	18.0	11.4	27.2		2.1
F12. Proportion of Children in Child poverty: Reduce Child Poverty Rate (%)	2013	8195	20.5	22.20	18.0	35.5		5.9
F13. Equalities Objective: Hospital Admissions for self-harm (per 100,000) (10-24 yo)	2013/14	214	626.5	507.20	412.1	1246.6		119.1

## Gateshead Better Care Fund National Metrics

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
Permanent admissions of older people (65+) to residential and nursing care homes, per 100,000 population	Gateshead Local Authority	2015/16 Q1	407.03	407.03	817.2	817.2	Risk
Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Gateshead Local Authority	2015/16 Q1	85.3%	85.3%	88.7%	88.7%	Risk
Estimated diagnosis rate for people with dementia	NHS Gateshead CCG	Q1 2015/16	68.6%	68.6%	67.0%	67.0%	No current risk
Delayed transfers of care (delayed days) from hospital per 100,000 population (average per month) NHS and Social Care Attributed delays	Gateshead Local Authority	Q1 2015/16	198	1063	1201		No current risk
Non-Elective Admissions (average per month)	Gateshead	2015/16 Q1	6772	6772	6204	25,693	Risk
Patient Experience Measure: Patients with a LTC who have had enough support from local services or organisations answering yes definitely		Jan - Sept 14	43.0%	43.0%	46.0%	46.0%	Risk

**Newcastle Gateshead CCG Quality Premium 2015/16**

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
Potential years of life lost through causes considered amenable to healthcare and including addressing locally agreed priorities for decreased premature mortality	NHS Gateshead CCG	2014		2606.9		2151.3	<b>Risk</b>
Delayed transfers of Care - NHS attributed	NHS Newcastle Gateshead CCG	Jul-15	260	1927		Reduction compared to 2014/15	<b>No current risk</b>
Reduction of SMI patients who smoke	NHS Newcastle Gateshead CCG	Aug-15	<b>42.3%</b>	<b>42.3%</b>	42.0%	42.0%	<b>Risk</b>
Childhood Asthma - increase in the proportion of annual reviews which result in a management plan	NHS Newcastle Gateshead CCG	Aug-15		12.3%		10%	<b>No current risk</b>
Young Carers	NHS Newcastle Gateshead CCG	Aug-15		<b>151</b>		68	<b>No current risk</b>
Antibiotic prescribing in Primary and Secondary Care	NHS Newcastle Gateshead CCG	Q1 2015/16	Part A 0.28 Part B 8.44	Part A 0.28 Part B 8.44			<b>Risk</b>



**Newcastle Gateshead CCG Strategic Indicators- Outcome Ambitions**

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
OA1: Potential years of life lost through causes considered amenable to healthcare and including addressing locally agreed priorities for decreased premature mortality	NHS Gateshead CCG	2014		2606.9		2151.3	Risk
OA2: Improving the health related quality of life for people with one or more long term conditions. Average score (in the GP patient Survey) for people with Long Term Condition.	NHS Newcastle Gateshead CCG	Jul 14 to Mar 15		0.711		0.718	Risk
Reducing avoidable emergency admissions	NHS Gateshead CCG	Apr 2014 to Mar 2015		1888.7			
	NHS Newcastle West CCG	Apr 2014 to Mar 2015		1747.6			
	NHS Newcastle North and East CCG	Apr 2014 to Mar 2015		1579.4			
% people who access psychological therapies (IAPT)		Jun-15	2.2%	4.2%	3.8%	15.0%	No current risk
People accessing IAPT moving to recovery		Jun-15	51.1%	51.5%	50.0%	50.0%	No current risk
Estimated diagnosis rate for people with dementia	NHS Gateshead CCG	Mar-15	68.5%	67.0%	67.0%	67.0%	No current risk
Unplanned hospitalisation for chronic ambulatory care sensitive conditions		Jun-15	60.2	236.4			
Unplanned hospitalisation for asthma, diabetes and epilepsy (under 19s)		Jun-15	21.7	97.2			

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
Unplanned admissions for conditions not usually requiring hospital admission		Jun-15	167.8	685.4			
Emergency admissions for children with lower respiratory tract infections (LRTI)		Jun-15	9.9	54.7			
Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Gateshead Local Authority	2015/16 Q1	81.5%	81.5%	88.7%	88.7%	Risk
	Newcastle upon Tyne Local Authority	2015/16 Q1	78.8%	78.8%	85.5%	85.5%	Risk
OA3: Avoidable Emergency Admissions	NHS Newcastle Gateshead CCG	Jul-15	167.1	911.1	Reduction compared to 2014/15		Risk
OA4 Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Gateshead Local Authority	2015/16 Q1	81.5%	81.5%	88.7%	88.7%	Risk
OA5: Patient experience of hospital care		Mar-13		81.50 %		0.5% annual improvement from 78.7% baseline	No current risk
OA6: Patient experience of GP out-of-hours services	NHS Newcastle Gateshead CCG	Jul 14 to Mar 15	66.9	66.9	67.1	67.1	Risk

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
OA7: Health Care Associated Infections - C.Difficile	NHS Newcastle Gateshead CCG	Aug-15	17	89	60	142	Risk
	GHNT	Aug-15	1	19	10	19	Risk
	NuTH	Aug-15	10	33	35	77	Risk
MRSA NGCCG	NHS Newcastle Gateshead CCG	Jul-15	0	0	0	0	No current risk
MRSA GHFT	GHNT	Jul-15	0	0	0	0	No current risk
MRSA NUTH	NuTH	Jul-15	0	2	0	0	Risk
Improved reporting of medication related safety incidents	NHS Newcastle Gateshead CCG	Aug-15	43	197			
Care Home admissions	Gateshead	2013/14 Q4		6846.6			
Flu vaccination uptake 65 years and over		Sept 14-Jan 15	75.9%	75.9%	75.0%	75.0%	No current risk
Flu vaccination uptake under 65 years at risk groups, including pregnant women		Sept 14-Jan 15	53.9%	53.9%			

**NHS Constitution**

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
18 Week Referral to Treatment (Incomplete Pathways)	NHS Newcastle Gateshead CCG	Jul-15	94.0%	94.0%	92.0%	92.0%	No current risk
18 Week Referral to Treatment (Incomplete Pathways)	GHNT	Jul-15	93.3%	93.3%	92.0%	92.0%	No current risk
	NuTH	Jul-15	94.4%	94.4%	92.0%	92.0%	No current risk
RTT 52 weeks for treatment	NHS Newcastle Gateshead CCG	Jul-15	0	0	0	0	No current risk
>52 weeks for treatment	GHNT	Jul-15	0	0	0	0	No current risk
	NuTH	Jul-15	0	0	0	0	No current risk
A&E Under 4 Hour Waits	NHS Newcastle Gateshead CCG	Jul-15	95.3%	95.3%	95.0%	95.0%	No current risk
A&E Under 4 Hour Waits	GHNT	Jul-15	95.6%	95.6%	95.0%	95.0%	No current risk
	NuTH	Jul-15	95.1%	95.1%	95.0%	95.0%	No current risk

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
Over 12 hour trolley waits	GHNT	Jul-15	0	0	0	0	No current risk
	NuTH	Jul-15	0	0	0	0	No current risk
Urgent Suspected Cancer GP Referrals seen within 2 Weeks of Referral	NHS Newcastle Gateshead CCG	Jul-15	93.6%	93.6%	93.0%	93.0%	No current risk
Red Category 1 Ambulance Calls with < 8 Minute Response Time	NHS Newcastle Gateshead CCG	Aug-15	84.7%	84.7%	75.0%	75.0%	No current risk
< 6 weeks for the 15 diagnostics tests	NHS Newcastle Gateshead CCG	Jul-15	4.6%	4.6%	1.0%	1.0%	Risk
	GHNT	Jul-15	10.6%	10.6%	1.0%	1.0%	Risk
	NuTH	Jul-15	0.8%	0.8%	1.0%	1.0%	No current risk

## Children's Strategic Outcome Indicators

Indicator Description	Year End 2013/14	Target 2014/15	Previous year end Performance 2014/15	Performance end August 2015	Target 2015-16	Traffic Light
<b>F02 - Readiness for school: Children achieving a good level of development at age 5 (Early Year Foundation Stage scores) – New Definition</b>	34%	42%	57%	63.8% (not validated)	59%	
<b>F04 -Educational attainment primary (% pupils achieving level 4 in Reading, Writing and Maths at Key Stage 2) – Slight amend on definition.</b>	80% (academic year 2012/13)	81%	80%	82% (not validated)	82%	
<b>F05 -Achievement of 5 or more A*- C grades at GCSE or equivalent including English and Maths</b>	61.70%	63%	58.50%	56.1% (not validated)	59%	
<b>Rate of children's services referrals per 10,000 (cumulative indicator)</b>	602.5	587.6	436.9	185.32	450	
<b>F08 - Number of Children with a Child Protection Plan per 10,000</b>	68.5 per 10,000 (276 CYP)	64 per 10,000	64.2 per 10,000 (234 CYP)	56.9 per 10,000 (229 CYP)	62 per 10,000	
<b>Children who are subject to a second or subsequent child protection plan</b>	10.2%	Less than 15%	11.3%	8.7%	Less than 15%	
<b>Number of looked after children per 10,000</b>	88.6 per 10,000 (358 cyp)	Less than 85 per 10,000	84.8 per 10,000 (341cyp)	92 per 10,000 (370 CYP)	Less than 84.9 per 10,000	
<b>F10 - % of Looked After Children living continuously in the same placement for 2 years</b>	75.60%	75%	78.8%	83.3%	78%	

### Adult Social Care Strategic Outcome Indicators

Indicator Description	Previous Year End 2014/15	Current Month Previous Year	Performance end August 2015	Monthly pro-rata target/ Year End target	Year End Target	Traffic Light (based on monthly target)	Trend (Compared to same period last year)
ASCOF 1C (part 1A) Proportion of Clients receiving self-directed support	82.3%	83.7%	<b>88.8%</b>	<b>86.0%</b>	86.0%	Met Target	↑
ASCOF 1C (part 1B) Carers receiving self directed support	86.3%	83.4%	<b>98.9%</b>	<b>90.0%</b>	90.0%	Met Target	↑
ASCOF 1C (part 2A) Proportion of clients receiving direct payments	19.1%	16.6%	<b>19.7%</b>	<b>20.0%</b>	20.0%	Not Met Target	↑
ASCOF 1C (part 2B) Proportion of carers receiving direct payments	12.1%	8.5%	<b>34.7%</b>	<b>16.0%</b>	16.0%	Met Target	↑
ASCOF 1F Proportion of adults with secondary mental health services in paid employment	3.8%	3.9%	<b>3.3%</b>	<b>4.0%</b>	4.0%	Not Met Target	↓

Indicator Description	Previous Year End 2014/15	Current Month Previous Year	Performance end August 2015	Monthly pro-rata target/ Year End target	Year End Target	Traffic Light (based on monthly target)	Trend (Compared to same period last year)
ASCOF 1H Proportion of adults with secondary mental health services living independently	38.6%	44.1%	31.1%	45.0%	45.0%	Not Met Target	↓
CP06a (ASCOF 1E) Proportion of adults with learning disabilities in paid employment	7.7%	3.5%	4.1%	3.6%	8.0%	Met Target	↑
CP06b (ASCOF 1G) Proportion of adults with learning disabilities living in their own home or family	73.0%	37.1%	44.0%	38.9%	76.5%	Met Target	↑