

**15 July 2016**

**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 and a reporting schedule was agreed with a second report produced for the meeting on 23 October 2015.

**Update**

4. 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 is reported.
5. Agency performance leads have highlighted 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**

6. Tables providing fuller details of performance are provided as appendix 1. Indicators highlighted for this report are:

## Public Health

7. For most of the Public Health Strategic Indicators, Gateshead is currently considered to be significantly worse than the England averages. However, some improvements have been achieved.
8. The definition for LW4 Reduce Excess weight in 4-5 year and 10-11 olds has been revised, using residential postcodes rather than school attended. This has still resulted in the required target being surpassed for 2014/15 of 24%. It reduced from 24.4% in 2013/14 to 23.1% on 2014/15. Gateshead is now considered to not be significantly different to the England average of 21.9%. The change in definition did not have any impact on 10-11 year olds and has not changed since the previous report.
9. Gateshead's rate of alcohol admissions per 100,000 for 14/15 has been revised since the previous report. Based on the final data Gateshead's rate of alcohol admissions per 100,000 has reduced from 956.0 per 100,000 in 13/14 to 927 per 100,000 in 14/15. However, as a result of the revision this has now missed the required target of 924 per 100,000 that was set for 14/15. Gateshead is considered significantly worse than both the current England average of 641 per 100,000 and the North East average of 830 per 100,000.
10. Healthy Life Expectancy at Birth for males has increased from 57.5 years to 58.4 years for 2014/15. Despite this increase Gateshead missed the target of 60.3 years. Gateshead is currently significantly worse than the England rate of 64.0 years but is considered similar to the North East figure of 59.8 years. Healthy life expectancy for females remains the same at 59.4 years with Gateshead significantly worse than the England average of 64.0 years but is considered similar to the North East average of 59.8 years.
11. Indicator LW15 Gap in employment rate for those with a learning disability is 64.4% for 2014/15, slightly higher than the North East gap of 64.0% but lower than the England gap of 66.9%. Indicator LW17 Gap in employment for those in contact with secondary mental health services is 68.5% for 2014/15, higher than the North East gap of 63.6% and the England gap of 66.1%. These are newly reported indicators.
12. LW18 Excess under 75 mortality rates in adults with serious mental health illness is also a newly reported indicator. For 2013/14 the Gateshead ratio was 408.2, this is lower than the North East ratio of 428.7 but higher than the England ratio of 351.8. Significance is not calculated for this indicator by Public Health England.
13. Indicators LL4, LW2, LW19, LW22, LW23 and PG20 have not changed since the previous report

Gateshead Better Care Fund Plan:

14. Challenging targets were set and performance is mixed for 2015/16.
15. Particular issues include permanent admissions of older people to residential or nursing care. For April 2015 to March 2016, there were 433 permanent admissions compared to a plan of 314 as reported under the BCF definition. This represents 1,126.9 admissions per 100,000. This target is challenging as there is an ageing population that faces high levels of health inequality. Of the 433 admissions, 55% were aged 85 years or more and 48% concerned patients with dementia.
16. Older people still at home 91 days after hospital discharge. Performance for 2015/16 was under plan with 85.6% against a planned 88.7%. Performance is based on those that were discharged from hospital during October to December and followed up 91 days later during January – March. The final outcome for 2015/16 however shows an improvement on 2014/15 levels.
17. Non-elective admissions – early activity pressures were the subject of a deep dive which was shared with the provider and will form the basis of discussions going forward. Improvements in Non Elective activity were experienced in the latter half of the year due to the impact of ambulatory care activity where revised reporting arrangements were implemented to reflect the changes in the clinical pathway. The final year end position was therefore broadly in line with the planned level of Non-Elective activity due to this change to reporting.
18. For delayed transfers of care, there was a substantial increase in delays during Q4 2015/16, which led to non- achievement of the final year-end target. Further work has been implemented to understand reasons for the delays and to enable close monitoring of delays in this area.
19. 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

20. "Everyone Counts Planning for Patients 2014/15 to 2018/19" sets out the outcomes which NHS England wants to deliver for its patients.
21. These outcomes have been translated into the 7 specific measurable 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.
22. 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). There has been some improvement, however, not to the required amount.
  - 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.

### Gateshead CCG Quality Premium 2014/15

23. 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.
24. The 2015/16 quality premium is 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
  - 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

25. 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 risks at the end of 2015/16 were as follows:

- A&E 4 hour waiting times at both Newcastle Hospitals and Gateshead Health were not achieved for 2015/16 due to pressures experienced in quarters 3 and 4. Gateshead Health performance has shown significant improvements into 2016/17 and the FT continues to implement recovery actions around flow and accelerated discharge.
- NEAS Cat A red 1 response times were not achieved for 2015/16 with 68% achievement at year end compared to the required standard of 75%. A recovery action plan is in place for 2016/17.
- Diagnostics has been a national pressure and through 2015/16 we have experienced pressures at both NUTH and Gateshead Health. Gateshead Health has since recovered from November 2015, however pressures at NUTH in MRI and sleep studies have put CCG performance at risk. Recovery actions at NUTH are expected to show improvements by Q2 2016/17.

### Children's Strategic Outcome Indicators

26. Children in Gateshead are achieving well academically. Performance against the strategic indicators remains strong with a significant improvement in children achieving a good level of development at age 5, continuing the improving trend over the last 3 years. Gateshead Primary Schools have continued to perform strongly, attainment at key stage 2 in the reading test, writing teacher assessment and mathematics test, the percentage of children attaining Level 4 and above was 82%, a 2% increase from the previous year of 80%. Although educational attainment at secondary level showed a slight decrease of 0.4% this year (academic year 2014/15) Gateshead has been consistently higher than the national average (in terms of 5+ A\* to C with English and maths) over recent years. This has continued again this year, however, the gap has closed slightly. This is mainly due to the maths results being disappointing. Gateshead's results are also above the north east average.
27. Overall performance for children's social care remains strong although we witnessed increasing demand for services. Numbers of children subject to a child protection plan or children who are looked after increased during 2015/16. At the end of the year there were 273 children subject to a child protection plan. The rate per 10K is also higher than the same period at the previous year end and remains higher than the national average (42.9) and the regional average (59.5), (CIN census 2014/15).
28. We also experienced a slight increase in the number of children who became looked after, at a rate of 85.8 per 10,000. This year's figure is above the regional average of 82 children per 10,000 and it is also higher than the national average of 60 per 10,000 which has remained relatively stable since 2013. However qualitative indicators such as the children subject to a plan for a second or subsequent time and the percentage of looked after children remaining in the same placement continue to show good performance. At 11.8%, children subject to a child protection plan for a second or subsequent time is below the national, regional and statistical neighbour average, which suggests robust practice in Gateshead and appropriate levels of support being offered for children who require child protection.

### Adult Social Care Outcome Indicators

29. Please also see the Better Care Fund section.
30. Performance is variable. Targets for service users receiving self- directed support and service users and carers using direct payments have been met. The proportion of carers receiving self-directed support has improved but missed the target slightly. Clients in receipt of Direct Payments have improved on 2014/15 performance of 19.1% to 21.1% for 2015/16 (the 2014/15 North East average was 24.1% and the England average was 26.3%). 17.2% of carers received direct payments, significantly below the 2014/15 North East and England averages for this indicator (48.1% and 66.9% respectively).
31. The target was achieved for the number of adults with learning disabilities in paid employment with a significant improvement on 2014/15 performance of 7.7% to 10.3% in 2015/16. However, the target for adults with learning disabilities living in their own home which was 76.5% has not been achieved with performance of 75.1% being reached. This is an improvement compared to 2014/15 outturn of 73.0%.
32. The target for the proportion of adults with secondary mental health services living independently has been not met 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**

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

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## Appendix 1

### 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
LL4. Decrease the Percentage of People who are Dissatisfied with Life (%)	2014/15	-	6.3	6.1	4.8	8.7		2.8
LW2. Prevention of ill Health: Prenatal Outcomes (% of mothers smoking at time of delivery)	2014/15	344	15.1	18.0	11.4	27.2		2.1
LW4. Reduce Excess Weight in 4-5 and 10-11 year olds (4-5 yo) (%)	2014/15	455	23.1	23.7	21.9	27.4		14.9
LW4. Reduce Excess Weight in 4-5 and 10-11 year olds (10-11 yo) (%)	2014/15	629	34.0	35.9	33.2	43.2		21.5
LW13. Stabilise the Rate of Hospital Admissions, per 100,000 for Alcohol Related Harm	2014/15	1820	927	830	641	1223		379
LW15. Gap in employment rate between those with a learning disability and overall employment rate (% point)	2014/15	-	64.4	64.0	66.9	79.8		44.0
LW16. Equalities Objective - Hospital Admissions for self-harm, rate per 100,000 (10-24 yo)	2014/15	179	531.3	477.7	398.8	1388.4		105.2
LW17. Gap in employment rate for those in contact with secondary mental health services and overall employment rate (% point)	2014/15	-	68.5	63.6	66.1	77.5		54.2
LW18. Excess U75 mortality rate in adults with serious mental illness (Indirectly Standardised Ratio)	2013/14	-	408.2	428.7	351.8	587.7		135.4
LW19. Reduce Mortality From Causes Considered Preventable (Rate per 100,000)	2012-14	1334	234.1	224.9	182.7	317.5		128.6
LW20. Healthy Life Expectancy at Birth (Male) (Years)	2012-14	-	58.4	59.7	63.4	55.0		70.5
LW21. Healthy Life Expectancy at Birth (Female) (Years)	2012-14	-	59.4	59.8	64.0	54.4		72.2
LW22. Gap in Life Expectancy at Birth Between each Local Authority and England (Male) (Years)	2012-14	-	-1.7	-1.5	0.0	-4.8		3.8
LW23. Gap in Life Expectancy at Birth Between each Local Authority and England (Female) (Years)	2012-14	-	-2.0	-1.5	0.0	-3.4		3.5



PG20. Reduce the % of children in low income families (formerly children in poverty)	2013	8195	20.5	22.2	18.0	35.5		5.9
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### 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	April – Mar 2015/16	1144.4	1144.4	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	April – Mar 2015/16	85.6%	85.6%	88.7%	88.7%	Risk
Estimated diagnosis rate for people with dementia (All Ages)	Gateshead Local Authority	2015/16 Q4	69.2%	69.2%	69.0%	69.0%	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	2015/16 Q4	1554	4146	3330	3330	Risk
Non-Elective Admissions (average per month)	Gateshead Local Authority	2015/16 Q4	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	Gateshead Local Authority	Jan - Sept 14	40.0%	40.0%	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	March 2016	867	7209	Reduction compared to 2014/15	Reduction compared to 2014/15	<b>No current risk</b>
Reduction of Severe Mental Health Illness (SMI) patients who smoke	NHS Newcastle Gateshead CCG	March 2016	<b>41.1%</b>	<b>41.1%</b>	42.0%	42.0%	<b>No current risk</b>
Childhood Asthma - increase in the proportion of annual reviews which result in a management plan	NHS Newcastle Gateshead CCG	March 2016	-	65.8%	10%	10%	<b>No current risk</b>
Young Carers	NHS Newcastle Gateshead CCG	March 2016	-	<b>409</b>	68	68	<b>No current risk</b>
Antibiotic prescribing in Primary and Secondary Care	NHS Newcastle Gateshead CCG	March 2016	Part A 1.2 Part B 7.7%	Part A 1.2 Part B 7.7%	-	1.3 11.3%	<b>No current 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	2151.3	<b>Risk</b>
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	<b>Risk</b>
OA3: Reducing avoidable emergency admissions	Newcastle Gateshead CCG	March 2016	177.1	2803.8	Reduction compared to 2014/15	Reduction compared to 2014/15	<b>Risk</b>
OA4 Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services	Gateshead Local Authority	March 2016	85.6%	81.6%	88.7%	88.7%	<b>Risk</b>
OA5: Patient experience of hospital care	-	-	-	-	-	-	<b>No current risk</b>
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	<b>Risk</b>
OA7: Health Care Associated Infections - C.Difficile	NHS Newcastle Gateshead CCG	March 2016	13	199	60	142	<b>Risk</b>
% people who access psychological therapies (IAPT)	Newcastle Gateshead CCG	March-16 *provisional data	-	18.1%	3.8%	15.0%	<b>No current risk</b>
People accessing IAPT moving to recovery	Newcastle Gateshead CCG	March 2016	51.4%	47.31%	50.0%	50.0%	<b>Risk</b>
Estimated diagnosis rate for people with dementia	NHS Gateshead	Mar 2016	68.5%	67.0%	67.0%	67.0%	<b>No current</b>

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
(65+)	CCG						risk

**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	March 2016	93.8%	93.8%	92.0%	92.0%	No current risk
RTT 52 weeks for treatment	NHS Newcastle Gateshead CCG	March 2016	0	0	0	0	No current risk
A&E Under 4 Hour Waits	NHS Newcastle Gateshead CCG	March 2016	90.7%	93.8%	95.0%	95.0%	Risk
Over 12 hour trolley waits	GHNT	March 2016	0	0	0	0	No current risk
	NuTH	March 2016	0	0	0	0	No current risk
Urgent Suspected Cancer GP Referrals seen within 2 Weeks of Referral	NHS Newcastle Gateshead CCG	March 2016	95.7%	94.6%	93.0%	93.0%	No current risk
Red Category 1 Ambulance Calls with < 8 Minute Response Time	Newcastle Gateshead CCG	March 2016	71.6%	77.5%	75%	75%	Risk
	NEAS		61.5%	68%			
< 6 weeks for the 15 diagnostics tests	NHS Newcastle Gateshead CCG	March 2016	0.65%	0.65%	1.0%	1.0%	No current Risk
	GHNT	March	0.24%	0.24%	1.0%	1.0%	No current

Indicator	CCG / Provider / LA	Latest Data Period	Month Actual	Actual to Date	Target to Date	2015/16 Target	Risk to Year End
		2016					Risk
	NuTH	March 2016	1%	1%	1.0%	1.0%	Risk

## Children's Strategic Outcome Indicators

Indicator Description	Previous Year End 2014/15	Performance end March 2016	Year End Target	Traffic Light	Trend (Compared to same period last year)
<b>F02 - Readiness for school: Children achieving a good level of development at age 5 (Early Year Foundation Stage scores) – New Definition</b>	57%	<b>63.7%</b>	59%	Met Target	↑
<b>F04 -Educational attainment primary (% pupils achieving level 4 in Reading, Writing and Maths at Key Stage 2) Increase the % of children attaining the expected standard at the end of KS2 (New - used from summer 2016)</b>	80% (academic year 2013/14)	<b>82%</b>	82%	Met Target	↑
<b>F05 -Achievement of 5 or more A*- C grades at GCSE or equivalent including English and Maths (final year 2016 with 2017 first year of the new 1-9 grade )</b>	58.5%	<b>58.1%</b>	59%	Not Met Target	↓
<b>Rate of children's services referrals per 10,000 (cumulative indicator)</b>	436.9	<b>519.7</b>	450	Not Met Target	↓
<b>F08 - Number of Children with a Child Protection Plan per 10,000</b>	64.2 per 10,000 (234 CYP)	<b>68.1 per 10,000 (273CYP)</b>	62 per 10,000	Not Met Target	↓
<b>Children who are subject to a second or subsequent child protection plan</b>	11.3%	<b>11.8%</b>	Less than 15%	Met Target	↓
<b>Number of looked after children per 10,000</b>	84.8 per 10,000 (341cyp)	<b>86 per 10,000 (344 CYP)</b>	Less than 84.9 per 10,000	Not Met Target	↓

Indicator Description	Previous Year End 2014/15	Performance end March 2016	Year End Target	Traffic Light	Trend (Compared to same period last year)
<b>F10 - % of Looked After Children living continuously in the same placement for 2 years</b>	78.8%	<b>86%</b>	78%	Met Target	↑

**Adult Social Care Strategic Outcome Indicators**

Indicator Description	Previous Year End 2014/15	Performance end March 2016	Year End Target	Traffic Light	Trend (Compared to same period last year)
<b>ASCOF 1C (part 1A) Proportion of Clients receiving self-directed support</b>	82.3%	<b>90.7%</b>	86.0%	Met Target	↑
<b>ASCOF 1C (part 1B) Carers receiving self-directed support</b>	86.3%	<b>89.7%</b>	90.0%	Not Met Target	↑
<b>ASCOF 1C (part 2A) Proportion of clients receiving direct payments</b>	19.1%	<b>21.1%</b>	20.0%	Met Target	↑
<b>ASCOF 1C (part 2B) Proportion of carers receiving direct payments</b>	12.1%	<b>17.2%</b>	16.0%	Met Target	↑
<b>ASCOF 1F Proportion of adults with secondary mental health services in paid employment</b>	3.8%	<b>4.2%</b> (April – Dec 2015)	4.0%	Met Target	↑
<b>ASCOF 1H Proportion of adults with secondary mental health services living independently</b>	38.6%	<b>33.4%</b> (April – Dec 2015)	45.0%	Not Met Target	↓

Indicator Description	Previous Year End 2014/15	Performance end March 2016	Year End Target	Traffic Light	Trend (Compared to same period last year)
CP06a (ASCOF 1E) Proportion of adults with learning disabilities in paid employment	7.7%	10.3%	8.0%	Met Target	↑
CP06b (ASCOF 1G) Proportion of adults with learning disabilities living in their own home or family	73.0%	75.1%	76.5%	Not Met Target	↑