

NHS Rotherham Clinical Commissioning Group: The Delivery Dashboard

This report resembles the balanced scorecard produced by NHS England Area Team as part of its quarterly assurance process for CCGs

In addition to this report, the Operational Executive will be monitoring the full set of metrics contained in the various NHS related Outcomes Frameworks, and if there are any issues of concern they will be escalated to the Governing Body.

RCCG Quality Premiums Count

National Priorities RAG Summary			
▲	●	★	Total
2	2	14	18

Local Priorities RAG Summary			
▲	●	★	Total
0	0	3	3

Rotherham NHS Constitution & Pledges Co...

Referral To Treatment RAG Count			
▲	●	★	Total
1	0	3	4

Diagnostics RAG Count			
▲	●	★	Total
1	0	0	1

A&E RAG Count			
▲	●	★	Total
0	0	1	1

Cancer 2ww RAG Count			
▲	●	★	Total
0	0	2	2

Cancer 31 Days RAG Count			
▲	●	★	Total
0	0	4	4

Cancer 62 Days RAG Count			
▲	●	★	Total
0	0	3	3

Ambulance RAG Count			
▲	●	★	Total
4	0	2	6

Mixed Sex Accomodation RAG Count			
▲	●	★	Total
0	0	1	1

Cancelled Operations RAG Count			
▲	●	★	Total
0	0	1	1

Mental Health Care Programme Approach RAG Count			
▲	●	★	Total
0	0	1	1

Rotherham Health Outcomes Count

Preventing People Dying Early RAG Count			
▲	●	★	Total
3	1	3	7

Enhancing Quality of Life: Long Term Conditions RAG Count			
▲	●	★	Total
0	1	4	5

Helping people recover from ill health and injury RAG Count			
▲	●	★	Total
1	1	4	6

Positive Experience of Care RAG Count			
▲	●	★	Total
0	1	3	4

Protecting people from avoidable harm RAG Count			
▲	●	★	Total
1	0	3	4

'Others' RAG Count			
▲	●	★	Total
1	0	1	2

Rotherham - Quality Care Count

Quality RFT RAG Count			
▲	●	★	Total
3	0	7	10

Quality RDASH RAG Count			
▲	●	★	Total
1	0	9	10

RCCG Clinical Governance RAG Count			
▲	●	★	Total
0	0	1	1

Risks assessed and identified RAG Count			
▲	●	★	Total
0	0	4	4

EPRR RAG Count			
▲	●	★	Total
0	0	1	1

Winterbourne View RAG Count			
▲	●	★	Total
0	0	1	1

Rotherham Financial Plans & QIPP ...

Financial Plans RAG Count			
▲	●	★	Total
0	4	6	10

Financial Management RAG Count			
▲	●	★	Total
0	0	3	3

Key Performance Issues

The key performance issues highlighted in the report are:

Activity

The main performance issue for Rotherham CCG is the over trading on activity for both Electives and Non Electives. Elective are 10% over plan, First Outpatient Attendances are 2% over plan, Follow Up Outpatients Attendances are 7% over plan and Non-Electives are 10% over plan

The Better Care Fund (BCF) Non-elective position, slight improvement on the July position but CCG still overperforming. This has serious implications for the CCG's financial position, the The Rotherham Foundation Trust (TRFT) position and BCF.

Quality Premium 2013/14

A report has been prepared for the Operating Executive (OE) giving the CCGs understanding of the likely position regarding the 2013/14 Quality Premium. The CCG expects to achieve 6 out of 8 of the Quality Premium indicators. The CCG has not achieved the 2013/14 C.Difficile indicator and representations have been made to NHS England for the Potential Years of Life Lost (PYLL) indicator.

Quality Premium 2014/15

Yorkshire Ambulance Service (YAS) Category 'A' calls: Yorkshire Ambulance service has seen a slight increase in performance for September. Rotherham's Category A Red 1 performance in September, against the 75% target was 63.4%, whereas Yorkshire & Humber currently stand at 69.43%. The Category A Red 2 performance for Rotherham in September, against the 75% target was 65%, whereas Yorkshire & Humber currently stand at 69.56%. The Medical Directors statement on Quality Assurance is included as part of this report.

Patient safety incidents reported per 100 admissions: Latest data shows there has been a reduction in the rate of incident reporting for TRFT. It reported 8.31 incidents in September 2013, and in March 2014 this reduced to 6.98. The target for 2014/15 is 10.85 incidents reported per 100 admissions.

Other Measures

Friends and Family Test. A&E and Inpatient: The calculation of this measure has changed, and the data is not being reported as a score but a percentage of the patients that would recommend the trust to their Friends and Family.

Incidence of Clostridium Difficile: At the end of September there were 2 cases of C.Difficile against a target of 5 cases. This takes the latest YTD performance to 37 cases against a target of 36. The annual target is 66 cases.

Cancer: % patients referred with breast symptoms seen within 2 weeks of referral:

For the month of August 2014, 81 out of 88 patients were seen within 2 weeks. This amounts to 92.05% against the target of 93%, but year to date this is on target at 93.93%. The 7 patients that breached were due to patient choice.

Cancer: % patients seen within 31 days for subsequent treatment - Radiotherapy: The small numbers involved drop the August position below target at 90.91% against the target of 94%, but year to date this is being achieved at 99.27%. The 1 breach was due to outpatient capacity being inadequate at Sheffield Teaching Hospital STH.

Cancer: % patients referred seen within 62 days from GP: For the month of August 2014, 31 out of 38 patients were seen within 62 days. This amounts to 81.58% against the target of 85%, but year to date this is on target at 88.63%. The 7 breach reasons were complex pathway (3), admin delay (1), patient choice, admin delay and elective capacity inadequate (1), Inefficient pathway resulting in the Inter Trust referral being received at STH after the breach date (1), Currently being investigated (1).

Better Care Fund

Non-elective Activity: August has seen a slight reduction in the level of activity, but overall the CCG is 307 episodes over plan, 2.6%.

Delayed Transfers of care (DToC): The number of delayed transfers has increased in September. Over the last 6 months there has been an increase in DToC compared to the planned trajectory.

30 Day Readmissions: Due to data quality issues with the Secondary Uses Service (SUS) data there are no updates available for the Better Care Fund measure, Emergency Readmissions with 30 days of discharge from hospital.

Rotherham CCG Priorities 2014/15

Quality Premium: Rotherham CCG National Priorities							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Peri...	Period Date	Further Information
Potential Years of Life Lost (PYLL) from causes considered amendable to healthcare, per 100,000	2,474.00	2,490.20	●	2,490.20	●	2013	Target based on 2014/15 planned trajectory
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	323.60	305.80	★	305.80	★	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Unplanned hospitalisation for chronic ambulatory care sensitive conditions	1,041.80	936.90	★	936.90	★	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Emergency admissions for acute conditions that should not usually require hospital admission	1,490.20	1,495.00	●	1,495.00	●	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Emergency admissions for children with Lower Respiratory Tract Infections (LRTI)	576.40	480.80	★	480.80	★	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
% Admitted patients to start treatment within a maximum of 18 weeks from referral (Commissioner)	90.00 %	93.14 %	★	92.82 %	★	September 2014	Target has been met every month in 2014/15
% Non-admitted patients to start treatment within a maximum of 18 weeks from referral (Commissioner)	95.00 %	98.38 %	★	98.23 %	★	September 2014	Target has been met every month in 2014/15
% Patients on incomplete non-emergency pathways waiting no more than 18 weeks (Commissioner)	92.00 %	95.18 %	★	95.43 %	★	September 2014	Target has been met every month in 2014/15
Friends & Family Test (FFT): Pt experience hospital care improvement in average Scores (Combined)	50.00	64.69	★	64.69	★	Qtr 1 2014/15	Target based on standard set by NHSE
Friends & Family Test: Are providers meeting 15% response rate	15.00 %	23.19 %	★	24.15 %	★	August 2014	YTD position shows an average over the year
% 4 hour A&E waiting times - seen within 4 hours (CCG)	95.00 %	95.15 %	★	95.28 %	★	W/e 12th October 2014	
Cancer - % Patients seen within 2wks referred urgently by a GP	93.00 %	93.89 %	★	94.24 %	★	August 2014	
CatA (Red 1) 8 min response time (Yorkshire Ambulance Service - YAS)	75.00 %	69.45 %	▲	69.43 %	▲	September 2014	
Patient safety incidents reported per 100 admissions (TRFT)	8.31	6.98	▲	6.98	▲	March 2014	2013/14 target based on previous 6 month actual. 2014/15 target is 10.85%
Improved Access to Psychological Services-IAPT: People entering treatment against level of need	3.50 %	2.76 %	▲	2.76 %	▲	Qtr 1 2014/15	
Quality Premium: Rotherham CCG Local Priorities							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Peri...	Period Date	Further Information
Alcohol related admissions to hospital per 100,000 population (standardised)	2,348	2,226	★	2,226	★	2013/14	Provisional Data

Rotherham NHS Constitution & Pledges 2014/15

Referral to Treatment waiting times for non-urgent consultant-led treatment						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
% Admitted patients to start treatment within a maximum of 18 weeks from referral (Commissioner)	90.00 %	93.14 %	★	92.82 %	★	September 2014
% Non-admitted patients to start treatment within a maximum of 18 weeks from referral (Commissioner)	95.00 %	98.38 %	★	98.23 %	★	September 2014
% Patients on incomplete non-emergency pathways waiting no more than 18 weeks (Commissioner)	92.00 %	95.18 %	★	95.43 %	★	September 2014
Number of 52 week Referral to Treatment Pathways Incomplete (Commissioner)	0	2	▲	0	★	September 2014
Diagnostic test waiting times						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
% Patients waiting for diagnostic test waiting > than 6 wks from referral (Commissioner)	1.00 %	1.32 %	▲	0.67 %	★	September 2014
A&E Waits						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
% 4 hour A&E waiting times - seen within 4 hours (Type 1 Rotherham Foundation Trust - RFT)	95.00 %	95.34 %	★	95.39 %	★	W/e 12th October 2014
Cancer Waits - 2wk wait						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
Cancer - % Patients referred with breast symptoms seen within 2 wks of referral	93.00 %	93.93 %	★	92.05 %	●	August 2014
Cancer - % Patients seen within 2wks referred urgently by a GP	93.00 %	93.89 %	★	94.24 %	★	August 2014
Cancer Waits - 31 days						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
Cancer - % Patients seen within 31 days for subsequent treatment (Surgery)	94.00 %	94.89 %	★	96.00 %	★	August 2014
Cancer - % Patients seen within 31 days for subsequent treatment (Drugs)	98.00 %	100.0...	★	100.0...	★	August 2014
Cancer - % Patients seen within 31 days for subsequent treatment (Radiotherapy)	94.00 %	99.27 %	★	90.91 %	●	August 2014
Cancer - % Patients seen within 31 days from referral to treatment	96.00 %	97.74 %	★	96.94 %	★	August 2014
62 day cancer waits						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
Cancer - % Patients seen within 62 days of referral from GP	85.00 %	88.63 %	★	81.58 %	●	August 2014
Cancer - % Patients seen from referral within 62 days (Screening Service: Breast, Bowel & Cervical)	90.00 %	96.30 %	★	100.0...	★	August 2014
Cancer - % Patients being seen within 62 days (ref. Consultant)	85.00 %	91.01 %	★	95.12 %	★	August 2014
YAS Category A Ambulance Calls						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
CatA (Red 1) 8 min response time (Yorkshire Ambulance Service - YAS)	75.00 %	69.45 %	▲	69.43 %	▲	September 2014
CatA (Red 1) 8 min response time (Rotherham)	75.00 %	63.70 %	▲	63.40 %	▲	September 2014
CatA (Red 2) 8 min response time (Yorkshire Ambulance Service - YAS)	75.00 %	69.69 %	▲	69.56 %	▲	September 2014
CatA (Red 2) 8 min response time (Rotherham)	75.00 %	64.84 %	▲	65.00 %	▲	September 2014
CatA 19min response time (Yorkshire Ambulance Service - YAS)	95.00 %	95.88 %	★	95.88 %	★	September 2014
CatA 19min response (Rotherham)	95.00 %	96.28 %	★	96.46 %	★	September 2014
Mixed sex Accomodation Breaches						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
Number of mixed sex accomodation breaches (Commissioner)	0	0	★	0	★	September 2014
Cancelled Operation						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
Cancelled operations rebooked within 28 days	0	0	★	0	★	Qtr 1 2014/15
Mental Health (CPA)						
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date
Proportion of people on Care Programme Approach (CPA) who were followed up within 7 days of discharge	95.00 %	96.00 %	★	96.15 %	★	September 2014

Rotherham Health Outcomes 2014/15

Preventing people from dying prematurely							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Information
Potential Years of Life Lost (PYLL) from causes considered amendable to healthcare, per 100,000	2,474.00	2,490.20	●	2,490.20	●	2013	Target based on 2014/15 planned trajectory
Under 75 mortality rate from cardiovascular disease (CCG)	64.90	70.80	▲	70.80	▲	2013	Target based on England average
Under 75 mortality rate from respiratory disease (CCG)	28.10	39.10	▲	39.10	▲	2013	Target based on England average
Under 75 mortality rate from liver disease (CCG)	15.50	14.90	★	14.90	★	2013	Target based on England average
Under 75 mortality rate from cancer (CCG)	122.10	141.60	▲	141.60	▲	2013	Target based on England average
Enhancing quality of life for people with long term conditions							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Information
Health-related quality of life for people with long-term conditions	73.10	70.20	●	70.20	●	2012/13	Target based on England average
Proportion of people feeling supported to manage their condition	67.85 %	68.26 %	★	68.26 %	★	March 2014 (6 Monthly)	Target based on England average
Unplanned hospitalisation for chronic ambulatory care sensitive conditions	1,041.80	936.90	★	936.90	★	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	323.60	305.80	★	305.80	★	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Diagnosis rate for people with dementia, expressed as a percentage of the estimated prevalence	65.00 %	66.39 %	★	66.39 %	★	2013/14	
Helping people to recover from episodes of ill health or following injury							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Information
Emergency admissions for acute conditions that should not usually require hospital admission	1,490.20	1,495.00	●	1,495.00	●	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Emergency readmissions within 30 days of discharge from hospital	12.40	13.50	▲	13.50	▲	2011/12	Target based on England average
Emergency admissions for children with Lower Respiratory Tract Infections (LRTI)	576.40	480.80	★	480.80	★	Qtr 4 2013/14	Target based on 2012/13 RCCG outturn
Total health gain assessed by patients - Groin Hernia	0.09	0.10	★	0.10	★	2013/14 (Provisional)	PROMS
Total health gain assessed by patients - Hip replacement	0.44	0.45	★	0.45	★	2013/14 (Provisional)	PROMS
Total health gain assessed by patients - Knee replacement	0.32	0.33	★	0.33	★	2013/14 (Provisional)	PROMS
Ensuring that people have a positive experience of care							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Information
Friends & Family Test: Are providers meeting 15% response rate	15.00 %	23.19 %	★	24.15 %	★	August 2014	YTD position shows an average over the year
Friends & Family Test - % of patients recommending their hospital: A&E	87.48 %	91.68 %	★	91.68 %	★	August 2014	
Friends & Family Test - % of patients recommending their hospital: Acute Inpatient	94.01 %	95.52 %	★	95.52 %	★	August 2014	
Treating and caring for people in a safe environment and protecting them from avoidable harm							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Information
Incidence of healthcare associated infection (HCAI) - MRSA (Commissioner)	0	0	★	0	★	September 2014	
Incidence of healthcare associated infection (HCAI) - MRSA (Provider) - RFT	0	0	★	0	★	September 2014	
Incidence of healthcare associated infection (HCAI) - C.Diff (Commissioner)	36	37	▲	2	★	September 2014	
Incidence of healthcare associated infection (HCAI) - C.Diff (Provider) - RFT	14	13	★	1	★	September 2014	
Others							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Information
Improved Access to Psychological Services-IAPT: People entering treatment against level of need	3.50 %	2.76 %	▲	2.76 %	▲	Qtr 1 2014/15	
Improved Access to Psychological Services-IAPT: People who complete treatment, moving to recovery	50.01 %	55.51 %	★	55.51 %	★	Qtr 1 2014/15	

Rotherham - Quality Care 2014/15

Providers					
Indicator	TRFT		RDASH	Balanced Scorecard Period	
Do provider level indicators from the National Quality Dashboard show that MSA breaches are above zero	No	★	No	★	Qtr 2 2014/15
Do provider level indicators from the National Quality Dashboard show that MRSA cases are above zero?	No	★	No	★	Qtr 2 2014/15
Do provider level indicators from the National Quality Dashboard show that the provider has reported more C Difficile cases than trajectory?	Yes	▲	No	★	Qtr 2 2014/15
Does feedback from the Friends & Family test (or any other patient feedback) indicate any causes for concern?	No	★	No	★	Qtr 2 2014/15
Has Local provider been subject to enforcement action by the CQC?	No	★	No	★	Qtr 2 2014/15
Has Local provider been subject to enforcement action by the NHS TDA based on "quality" risk?	No	★	No	★	Qtr 2 2014/15
Has the provider experienced any "Never Events" during the last quarter?	No	★	No	★	Qtr 2 2014/15
Has the local provider been flagged as a "quality compliance risk" by Monitor and/or are requirements in place around breaches of provider licence conditions?	Yes	▲	No	★	Qtr 2 2014/15
Has the provider been identified as a "negative outlier" on SHMI or HSMR?	No	★	No	★	Qtr 2 2014/15
Does the provider currently have any unclosed Serious Untoward Incidents (SUIs)?	Yes	▲	Yes	▲	Qtr 2 2014/15
CCG Clinical Governance					
RCCG Clinical Governance			Actual	Balanced Scorecard Period	
Outstanding conditions of authorisation			No	★	Qtr 2 2014/15
Has RCCG self-assessed & identified any risks associated to:			Actual	Balanced Scorecard Period	
Concerns around being an active participant in its Quality Surveillance Group			No	★	Qtr 2 2014/15
Concerns around quality issues discussed by the CCG			No	★	Qtr 2 2014/15
Concerns around serious untoward incidents & never events			No	★	Qtr 2 2014/15
Concerns to identify early warnings of a failing service			No	★	Qtr 2 2014/15
Emergency Preparedness, Resilience & Response			Actual	Balanced Scorecard Period	
Emergency Event last Qtr: has CCG self-assessed/identified areas of concern on arrangements in place			No	★	Qtr 2 2014/15
Winterbourne View			Actual	Balanced Scorecard Period	
Has the CCG self-assessed & identified any risk to progress against Winterbourne View action plan?			No	★	Qtr 2 2014/15

Rotherham Financial Plans & QIPP 2014/15

Financial Plans			
Indicator	RAG	Performance Direction	Balanced Scorecard Period
Activity Trends - full year forecast	●	➔	Qtr 2 2014/15
Activity Trends - year to date	●	➔	Qtr 2 2014/15
Clear identification of risks against financial delivery and mitigations (FORECAST)	★	➔	Qtr 2 2014/15
Management of 2% Non Recurrent funds within agreed processes (FORECAST)	★	➔	Qtr 2 2014/15
Quality, Innovation, Productivity and Prevention (QIPP) - full year forecast	●	➔	Qtr 2 2014/15
Quality, Innovation, Productivity and Prevention (QIPP) - year to date delivery	●	➔	Qtr 2 2014/15
Running Costs	★	➔	Qtr 2 2014/15
Surplus: full year forecast	★	➔	Qtr 2 2014/15
Surplus: year to date performance	★	➔	Qtr 2 2014/15
Underlying Recurrent Surplus	★	➔	Qtr 2 2014/15
Financial Management			
Indicator	RAG	Performance Direction	Balanced Scorecard Period
Balance sheet indicators inc. cash management & Better Payment Practice Coce	★	➔	Qtr 2 2014/15
Financial Management of Internal/External audit of opinions & timeliness of returns (FORECAST)	★	➔	Qtr 2 2014/15
Financial plan meets the 2013 surplus planning requirement	★	➔	Qtr 2 2014/15

RMBC: Better Care Fund

The Better Care Fund provides an opportunity to improve the lives of some of the most vulnerable people in our society, giving them control, placing them at the centre of their own care and support, and, in doing so, providing them with a better service and better quality of life.

Below is the Dashboard to support Rotherham MBC Better Care Fund for 2014/15.

		Mar-2014	Apr-2014	May-2014	Jun-2014	Jul-2014	Aug-2014	Sep-2014	Oct-2014	Nov-2014	Dec-2014	Jan-2015	Feb-2015	Mar-2015
Non-elective FFCes (First Finished Consultant Episode)	Actual	2,346	2,425	2,435	2,342	2,510	2,253							
	Target	2,271	2,286	2,362	2,286	2,362	2,362	2,286	2,362	2,286	2,362	2,362	2,134	2,362
	Performance	●	▲	●	●	▲	★	?	—	—	—	—	—	—
	Actual (YTD)	28,296	2,425	4,860	7,202	9,712	11,965							
	Target (YTD)	26,740	2,286	4,648	6,934	9,296	11,658	13,944	16,306	18,592	20,954	23,316	25,450	27,812

		Mar-2014	Apr-2014	May-2014	Jun-2014	Jul-2014	Aug-2014	Sep-2014	Oct-2014	Nov-2014	Dec-2014	Jan-2015	Feb-2015	Mar-2015
Delayed transfers of care from hospital per 100,000 population (number of days delayed)	Actual	201.5	101.2	278.3	290.5	281.2	259.7	282.2						
	Target	124.6	124.1	123.6	122.5	122.0	122.0	121.5	120.9	120.4	119.9	119.1	118.2	117.4
	Performance	▲	★	▲	▲	▲	▲	▲	▲	—	—	—	—	—
	Baseline: Apr13-Dec13		124.6	124.6	124.6	124.6	124.6	124.6	124.6	124.6	124.6	124.6	124.6	124.6

		Mar-2014	Apr-2014	May-2014	Jun-2014	Jul-2014	Aug-2014	Sep-2014	Oct-2014	Nov-2014	Dec-2014	Jan-2015	Feb-2015	Mar-2015
Emergency readmissions within 30 days of discharge from hospital	Actual	11.20	12.58	12.54	13.30									
	Target	12.10	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20
	Performance	★	●	●	▲	?	?	?	—	—	—	—	—	—
	Baseline: Apr13-Dec13	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20	12.20

		Mar-2014	Jun-2014	Sep-2014	Dec-2014	Mar-2015
Permanent admissions of older people (aged 65+) to residential & nursing care homes, per 100,000	Actual	694.6	109.3			
	Target	736.6	162.6	162.6	162.6	162.2
	Performance	★	★	?	—	—
	Baseline: 2012/13		739.6	739.6	739.6	739.6

		Mar-2015
The proportion of older people (65+) still at home 91 days after discharge into rehabilitation	Actual	
	Target	90.00
	Performance	—
	Baseline: 2012/13	86.70

Key to Ratings:
 ★ Improving
 ● Not Improving
 ▲ Area of Concern
 ? Latest Data Not Yet Available
 — Not Available Yet

Glossary

NHS Outcomes Framework Domain One: "Preventing people from dying prematurely"

PYLL: Potential Years of Life Lost from causes considered amenable to health care and life expectancy at 75; Premature deaths that should not occur in most cases in the presence of timely and effective health care. (Adults - over 20 years old, and Children - under 20 years old). A 3.2% reduction based upon the Directly Standardised Rate required year on year. Currently Rotherham have an excess of 6000 years of life lost.

Under 75's Mortality Rates (CVD, Respiratory Disease, Liver Disease and Cancer): Under 75's deaths from major diseases per 100,000 population. Comparisons made with England averages and Improvements expected year on year.

NHS Outcomes Framework Domain Two: "Enhancing quality of life for people with long term conditions"

Health related quality of life for people with long term conditions: GP Survey response to question 34 using the 5 dimensions of the EuroQuol (EQ-5D) survey instrument. Comparisons made with England averages and improvements expected.
Proportion of people feeling supported to manage their condition: GP Survey response to question 30 and 32. Comparisons made with England averages and improvements expected.

Unplanned hospitalisation for chronic ambulatory care sensitive conditions: Emergency admissions for ACS conditions per 100,000 population. Comparisons made with England averages and improvements expected.

Unplanned Hospitalisation for asthma, diabetes and epilepsy in under 19's: Emergency admissions for asthma, diabetes and epilepsy in under 19's per 100,000 population. Comparisons made with England averages and improvements expected.

NHS Outcomes Framework Domain Three: "Helping people to recover from episodes of ill health or following injury"

Emergency admissions for acute conditions that should not usually require hospital admission: Emergency admissions for conditions that usually could have been avoided through better management in primary care as a proportion of persons over 19 years. (E.g. ENT infections, Kidney/ Urinary Tract Infections, heart failure etc). Comparisons made with England averages and improvements expected.

Emergency admissions for children with lower respiratory tract infections: Emergency admissions to hospital of children with selected types of lower respiratory tract infections as a proportion of children aged up to 19 years. Comparisons made with England averages and improvements expected.

Total Health Gain assessed by patients (Groin hernia, Hip Replacement, Knee Replacement, Varicose Veins): Patient reported improvement in health status following elective procedures via the Patient Reported Outcomes Measures surveys (PROMS). Comparisons of local providers with England averages, and statistical outliers identified.

NHS Outcomes Framework Domain Four: "Ensuring people have a positive experience of care "

Family and Friends Test Implementation: Local Hospital has implemented the programme in line with the National rollout plan.
Family and Friends Test Scores: Net Promoter Scores

Rotherham Local Priorities

Alcohol related admissions to hospital per 100,000 population standardised: Rate to meet target trajectory. This measure supports the Quality Premium payments.

NHS Constitution

Cancer: % Patients seen from referral within 62 days (Screening Service): Screening Services include Breast, Bowel and Cervical.

YAS Category A Ambulance Calls Red 1: Most Urgent time critical calls eg Cardiac Arrest patients who are not breathing and don't have a pulse or life threatening trauma.

YAS Category A Ambulance Calls Red 2: Other Time Critical calls eg Serious breathing difficulties or suspected stroke with serious symptoms.

Health Outcomes

Proportion of people feeling supported to manage their conditions: GP Survey showing the average EQ-5D score for people having one or more long term conditions.

Total Health gain assessed by patients - Groin hernia, Hip replacement, Knee replacement, Varicose veins: PROMS health gain reported by patients

IAPT - The proportion of people that enter treatment against level of need in the general population: The number of people who receive psychological therapies divided into the number of people who have depression (local estimate based upon national audit)

IAPT - The proportion of people who complete treatment who are moving to recovery: Number of people who are moving onto recovery divided into the Number of people who have completed at least 2 treatment contacts

Better Care Fund

Avoidable emergency admissions: Non-Elective admission data are derived from the Monthly Activity Return (MAR) which is collected from the NHS. It is collected from providers (both NHS and IS) who provide the data broken down by Commissioner.

Delayed transfers of care from hospital per 100,000 population: Average delayed transfers of care (delayed days) per 100,000 population (attributable to either NHS, social care or both) per month.

Emergency readmissions within 30 days of discharge from hospital (all ages): Per 100,000 population standardised, for people registered with a Rotherham GP.

Permanent admissions of older people (65+) to residential care and nursing homes, per 100,000: Reducing inappropriate admissions in to residential care. Annual rate of council-supported permanent admissions of older people to residential and nursing care.

Proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services: Increase in effectiveness of these services whilst ensuring that those offered services does not decrease. Older people discharged to residential or nursing home or extra care housing for rehabilitation, with a clear intention that they will move back to own their own home.