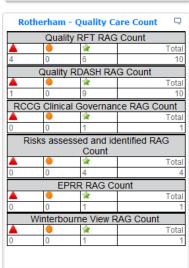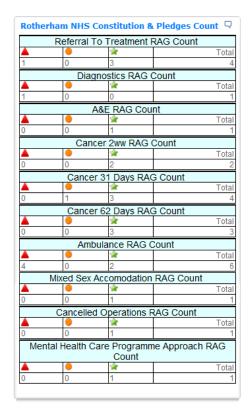# NHS Rotherham Clinical Commissioning Group: The Delivery Dashboard
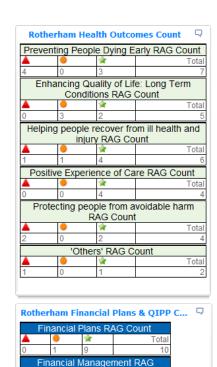
This report resembles the balanced scorecard produced by NHS England Area Team as part of its quarterly assurance process for CCGs

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	1	2	3

Rotherham - Quality Care Count

Quality RFT RAG Count

▲	●	★	Total
4	0	6	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 NHS Constitution & Pledges Count

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	1	3	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
4	0	3	7

Enhancing Quality of Life: Long Term Conditions RAG Count

▲	●	★	Total
0	3	2	5

Helping people recover from ill health and injury RAG Count

▲	●	★	Total
1	1	4	6

Positive Experience of Care RAG Count

▲	●	★	Total
0	0	4	4

Protecting people from avoidable harm RAG Count

▲	●	★	Total
2	0	2	4

'Others' RAG Count

▲	●	★	Total
1	0	1	2

Rotherham Financial Plans & QIPP C...

Financial Plans RAG Count

▲	●	★	Total
0	1	9	10

Financial Management RAG Count

▲	●	★	Total
0	0	3	3

Your life, Your health

Key Performance Indicators & Risks

The key performance issues highlighted in the report are:

Quality Premium

Improving Access to Psychological Services: People entering treatment against level of need.

Qtr 1 data is below target at 2.8% against a target of 3.5%. This equates to a shortfall of 215 patients. RDASH are currently redesigning the IAPT patient pathway to improve outcomes and performance. The key issue is the number of DNAs, which vary substantially on a GP practice to practice basis.

NHS Constitution and Pledges

Patients waiting over 6 weeks for a diagnostic test.

43 patients (1.5%) waited over 6 weeks for a diagnostic test in June 2014. 20 patients waiting for an echocardiograph at STH and 14 patients at Doncaster Royal Infirmary requiring a Non obstetric ultrasound. The shortage of Sonographers is an ongoing issue across South Yorkshire. The CCGs are looking at alternative ways to reduce the back log of patients, but nothing has been agreed.

Provisional July data shows a reduction in breaches, bringing the percentage of patients waiting over 6 weeks down to 0.9%. However the provisional YTD position is 1.3%.

Yorkshire Ambulance Service Category 'A' calls:

Rotherham's Category A Red 1 performance in July, against the 75% target was 62.2%, whereas Yorkshire & Humber currently stand at 69.1%. The Category A Red 2 performance for Rotherham in June, against the 75% target was 63.7%, whereas Yorkshire & Humber currently stand at 69.1%. A seperate report on YAS is attached.

Other Measures

Incidence of Clostridium Difficile

At the end of July there were 7 cases of C.Difficile against a target of 6 cases. This takes the latest YTD performance to 31 cases against a target of 25. 4 were community acquired and 2 were RFT, with 1 case at BHNFT. The annual target is 66 cases.

Cancer - % Patients seen within 2wks referred urgently by a GP

92.2% of patients were seen in June, against a national standard of 93%. All breaches (47 in total) were due to patient choice. YTD is meeting national standards at 93.1%.

On a quarterly basis data is revalidated which picks up any validation errors – Q1 position is 93.1%.

Cancer - % Patients seen within 31 days from referral to treatment (Surgery)

87.5% of patients were seen in June (21/24 patients), against a national standard of 94%. Breaches we due to, inadequate elective capacity (46 days delayed), patient delay in planning (35 days delayed), Administrative delay compounded by elective cancellation (Consultant illness) (77 days delayed). YTD is not meeting national standards at 93.3%.

Q1 position is 92.9%.

Better Care Fund

The Better Care Fund (BCF) data has begun monitoring for 2014-15. For some metrics data will not be published until later in the year, however where possible, local data shall be used to monitor the progress of these indicators. This will include provisional data, which will be highlighted.

Quarter 4 2013/14 has been shown to indicate the direction of travel from last year's outurn, where available.

Avoidable Emergency Admissions

Provisional May data shows that for Rotherham CCG there were 6 avoidable admissions below plan. This indicates that the direction of travel in 2013/14 is in line to meet the first payment target in September 2014.

Emergency Readmissions with 30 days of discharge from hospital

Provisional June data highlights readmissions to be off trajectory at 13.3% being readmitted against a monthly plan of 10.4%. The numbers show the readmissions within 30 days are as planned for June, however the total Finished Continuous Inpatient Spells is lower than expected. This is information is based on Secondary Uses Service (SUS) data which has not been finalised and is expected to change once validated.

Quality Premiums

Rotherham CCG National Priorities							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Infomation
Potential Years of Life Lost (PYLL) from causes considered amendable to healthcare - (CCG)	-3.20	-5.57	⭐	-5.57	⭐	2012	Target based on England average
Potential Years of Life Lost (PYLL) Age 20+ - FEMALES (CCG)	-3.20	-3.61	⭐	-3.61	⭐	2012	Target based on England average
Potential Years of Life Lost (PYLL) Age 20+ - MALE (CCG)	-3.20	-7.30	⭐	-7.30	⭐	2012	Target based on England average
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	323.60	324.00	🟠	324.00	🟠	Qtr 3 2013/14	Target based on 2012/13 RCCG outturn
Unplanned hospitalisation for chronic ambulatory care sensitive conditions	1,041.80	953.40	⭐	953.40	⭐	Qtr 3 2013/14	Target based on 2012/13 RCCG outturn
Emergency admissions for acute conditions that should not usually require hospital admission	1,490.20	1,534.60	🟠	1,534.60	🟠	Qtr 3 2013/14	Target based on 2012/13 RCCG outturn
Emergency admissions for children with Lower Respiratory Tract Infections (LRTI)	576.40	478.10	⭐	478.10	⭐	Qtr 3 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 %	93.52 %	⭐	93.94 %	⭐	July 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 %	98.35 %	⭐	97.86 %	⭐	July 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 %	95.16 %	⭐	95.10 %	⭐	July 2014	Target has been met every month in 2014/15
Friends & Family Test (FFT): Pt experience hospital care improvement in average Scores (Combined)	37.17	69.80	⭐	69.80	⭐	Qtr 4 2013/14	Target based on Qtr 1 2013/14 average
Friends & Family Test: Are providers meeting 15% response rate	15.00 %	23.76 %	⭐	23.97 %	⭐	June 2014	YTD position shows an average over the year
% 4 hour A&E waiting times - seen within 4 hours (CCG)	95.00 %	95.42 %	⭐	91.89 %	🟠	W/e 10th August 2014	
Cancer - % Patients referred with breast symptoms seen within 2 wks of referral	93.00 %	93.14 %	⭐	95.77 %	⭐	June 2014	
CatA (Red 1) 8 min response time (Yorkshire Ambulance Service - YAS)	75.00 %	69.43 %	🔺	69.14 %	🔺	June 2014	
Patient safety incidents reported (TRFT)	7.90	8.31	⭐	8.31	⭐	Septem... 2013	
Improved Access to Psychological Services-IAPT: People entering treatment against level of need	3.50 %	2.76 %	🔺	2.76 %	🔺	Qtr 1 2014/15	Quarterly target is 3.75%
Rotherham CCG Local Priorities							
Indicator	Target	Actual YTD	RAG YTD	Actual Period	RAG Period	Period Date	Further Infomation
Alcohol related admissions to hospital per 100,000 population (standardised)	2,348	2,130	⭐	2,130	⭐	Final 2012/13 data	

NHS Constitution & Pledges

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 %	93.52 %	⭐	93.94 %	⭐	July 2014
% Non-admitted patients to start treatment within a maximum of 18 weeks from referral (Commissioner)	95.00 %	98.35 %	⭐	97.86 %	⭐	July 2014
% Patients on incomplete non-emergency pathways waiting no more than 18 weeks (Commissioner)	92.00 %	95.16 %	⭐	95.10 %	⭐	July 2014
Number of 52 week Referral to Treatment Pathways Incomplete (Commissioner)	0	1	🔺	0	⭐	July 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 %	1.37 %	🔺	0.88 %	⭐	July 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 %	95.64 %	⭐	91.66 %	🟠	W/e 10th August

Cancer Waits - 2wk wait						
Indiciator	**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 %	93.14 %	⭐	95.77 %	⭐	June 2014
Cancer - % Patients seen within 2wks referred urgently by a GP	93.00 %	93.07 %	⭐	92.24 %	🟠	June 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 %	93.33 %	🟠	87.50 %	🔺	June 2014
Cancer - % Patients seen within 31 days for subsequent treatment (Drugs)	98.00 %	100.00 %	⭐	100.00 %	⭐	June 2014
Cancer - % Patients seen within 31 days for subsequent treatment (Radiotherapy)	94.00 %	100.00 %	⭐	100.00 %	⭐	June 2014
Cancer - % Patients seen within 31 days from referral to treatment	96.00 %	98.20 %	⭐	98.20 %	⭐	June 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 %	89.93 %	⭐	93.22 %	⭐	June 2014
Cancer - % Patients seen from referral within 62 days (Screening Service: Breast, Bowel & Cervical)	90.00 %	92.31 %	⭐	100.00 %	⭐	June 2014
Cancer - % Patients being seen within 62 days (ref. Consultant)	85.00 %	93.48 %	⭐	90.91 %	⭐	June 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 %	69.43 %	🔺	69.14 %	🔺	June 2014
CatA (Red 1) 8 min response time (Rotherham)	75.00 %	63.92 %	🔺	62.15 %	🔺	July 2014
CatA (Red 2) 8 min response time (Yorkshire Ambulance Service - YAS)	75.00 %	69.81 %	🔺	69.11 %	🔺	June 2014
CatA (Red 2) 8 min response time (Rotherham)	75.00 %	64.90 %	🔺	63.65 %	🔺	July 2014
CatA 19min response time (Yorkshire Ambulance Service - YAS)	95.00 %	95.67 %	⭐	95.67 %	⭐	June 2014
CatA 19min response (Rotherham)	95.00 %	96.21 %	⭐	96.27 %	⭐	July 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	⭐	June 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 upwithin 7 days of discharge	95.00 %	95.31 %	⭐	94.44 %	🟠	June 2014

Health Outcomes

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 - (CCG)	-3.20	-5.57	⭐	-5.57	⭐	2012	Target based on England average
Potential Years of Life Lost (PYLL) Age 20+ - FEMALES (CCG)	-3.20	-3.61	⭐	-3.61	⭐	2012	Target based on England average
Potential Years of Life Lost (PYLL) Age 20+ - MALE (CCG)	-3.20	-7.30	⭐	-7.30	⭐	2012	Target based on England average
Under 75 mortality rate from cardiovascular disease (CCG)	65.47	69.62	🔺	69.62	🔺	2012	Target based on England average
Under 75 mortality rate from respiratory disease (CCG)	27.44	40.56	🔺	40.56	🔺	2012	Target based on England average
Under 75 mortality rate from liver disease (CCG)	15.40	18.68	🔺	18.68	🔺	2012	Target based on England average
Under 75 mortality rate from cancer (CCG)	123.26	143.99	🔺	143.99	🔺	2012	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	953.40	⭐	953.40	⭐	Qtr 3 2013/14	Target based on 2012/13 RCCG outturn
Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	323.60	324.00	🟠	324.00	🟠	Qtr 3 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 %	60.36 %	🟠	60.36 %	🟠	2012/13	

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	1,534.60	🟠	1,534.60	🟠	Qtr 3 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	478.10	⭐	478.10	⭐	Qtr 3 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 (FFT): Pt experience hospital care improvement, average Scores- Acute Inpatient	74	75	⭐	77	⭐	June 2014	Target based on England average
Friends & Family Test (FFT): Pt experience of hospital care improvement, average Scores- A&E Services	53	58	⭐	59	⭐	June 2014	Target based on England average
Friends & Family Test: Are providers meeting 15% response rate	15.00 %	23.76 %	⭐	23.97 %	⭐	June 2014	YTD position shows an average over the year

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	⭐	July 2014	.
Incidence of healthcare associated infection (HCAI) - MRSA (Provider) - RFT	0	0	⭐	0	⭐	July 2014	
Incidence of healthcare associated infection (HCAI) - C.Diff (Commissioner)	25	31	🔺	7	🔺	July 2014	
Incidence of healthcare associated infection (HCAI) - C.Diff (Provider) - RFT	8	10	🔺	2	⭐	July 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	. Quarterly target is 3.75%
Improved Access to Psychological Services-IAPT: People who complete treatment, moving to recovery	50.04 %	55.51 %	⭐	55.51 %	⭐	Qtr 1 2014/15	

Quality Care

Providers					
Indicator	**TRFT**	**RAG**	**RDASH**	**RAG**	**Balanced Scorecard Period**
Do provider level indicators from the National Quality Dashboard show that MSA breaches are above zero	No	★	No	★	Qtr 1 2014/15
Do provider level indicators from the National Quality Dashboard show that MRSA cases are above zero?	No	★	No	★	Qtr 1 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 1 2014/15
Does feedback from the Friends & Family test (or any other patient feedback) indicate any clauses for concern?	No	★	No	★	Qtr 1 2014/15
Has Local provider been subject to enforcement action by the CQC?	No	★	No	★	Qtr 1 2014/15
Has Local provider been subject to enforcement action by the NHS TDA based on "quality" risk?	No	★	No	★	Qtr 1 2014/15
Has the provider experienced any "Never Events" during the last quarter?	Yes	▲	No	★	Qtr 1 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 1 2014/15
Has the provider been identified as a "negative outlier" on SHMI or HSMR?	No	★	No	★	Qtr 1 2014/15
Does the provider currently have any unclosed Serious Untoward Incidents (SUIs)?	Yes	▲	Yes	▲	Qtr 1 2014/15

CCG Clinical Governance			
RCCG Clinical Governance	**Actual**	**RAG**	**Balanced Scorecard Period**
Outstanding conditions of authorisation	No	★	Qtr 1 2014/15
Has RCCG self-assessed & identified any risks associated to:	**Actual**	**RAG**	**Balanced Scorecard Period**
Concerns around being an active participant in its Quality Surveillance Group	No	★	Qtr 1 2014/15
Concerns around quality issues discussed by the CCG	No	★	Qtr 1 2014/15
Concerns around serious untoward incidents & never events	No	★	Qtr 1 2014/15
Concerns to identify early warnings of a failing service	No	★	Qtr 1 2014/15
Emergency Preparedness, Resilience & Response	**Actual**	**RAG**	**Balanced Scorecard Period**
Emergency Event last Qtr: has CCG self-assessed/identified areas of concern on arrangements in place	No	★	Qtr 1 2014/15
Winterbourne View	**Actual**	**RAG**	**Balanced Scorecard Period**
Has the CCG self-assessed & identified any risk to progress against Winterbourne View action plan?	No	★	Qtr 1 2014/15

Financial Plans and Quality, Innovation, Productivity and Prevention (QIPP)

Financial Plans			
Indicator	RAG	Performance Direction	Balanced Scorecard Period
Activity Trends - full year forecast	⭐	➡	Qtr 1 2014/15
Activity Trends - year to date	🟠	🔻	Qtr 1 2014/15
Clear identification of risks against financial delivery and mitigations (FORECAST)	⭐	➡	Qtr 1 2014/15
Management of 2% Non Recurrent funds within agreed processes (FORECAST)	⭐	➡	Qtr 1 2014/15
Quality, Innovation, Productivity and Prevention (QIPP) - full year forecast	⭐	➡	Qtr 1 2014/15
Quality, Innovation, Productivity and Prevention (QIPP) - year to date delivery	⭐	➡	Qtr 1 2014/15
Running Costs	⭐	➡	Qtr 1 2014/15
Surplus: full year forecast	⭐	➡	Qtr 1 2014/15
Surplus: year to date performance	⭐	➡	Qtr 1 2014/15
Underlying Recurrent Surplus	⭐	➡	Qtr 1 2014/15
Financial Management			
Indicator	RAG	Performance Direction	Balanced Scorecard Period
Balance sheet indicators inc. cash management & Better Payment Practice Coce	⭐	➡	Qtr 1 2014/15
Financial Management of Internal/External audit of opinions & timeliness of returns (FORECAST)	⭐	➡	Qtr 1 2014/15
Financial plan meets the 2013 surplus planning requirement	⭐	➡	Qtr 1 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
Avoidable emergency admissions (average per month)	Actual	2,994.0	200.5	195.5										
	Target	3,115.0	217.3	197.8	188.2	205.1	195.1	190.5	225.4	216.9	238.4	238.4	219.2	230.0
	Performance	⭐	⭐	⭐	?	?	—	—	—	—	—	—	—	—
	Actual (YTD)	2,994.0	200.5	395.9										
	Target (YTD)	3,115.0	217.3	415.1	603.3	808.3	1,003.4	1,193.9	1,419.3	1,636.2	1,874.6	2,113.0	2,332.2	2,562.2
	Baseline: 2012/13		2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8	2,634.8

		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	Actual	201.5	101.2	278.3	290.5	281.2								
	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	11.96	12.54	13.30									
	Target	12.10	12.58	11.45	10.88	11.87	11.35	11.07	11.87	11.45	12.58	12.58	11.64	12.35
	Performance	⭐	⭐	🔺	🔺	?	—	—	—	—	—	—	—	—
	Baseline: 2012/13	12.10	12.10	12.10	12.10	12.10	12.10	12.10	12.10	12.10	12.10	12.10	12.10	12.10

		31/03/2015
Better Care Fund Rotherham MBC : Permanent admissions of older people (aged 65+) to residential & nursing care homes, per 100,000	Actual	
	Target	650.7
	Performance	—
	Baseline: 2012/13	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: <u>*"Preventing people from dying prematurely"*</u>

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: <u>*"Enhancing quality of life for people with long term conditions"*</u>

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: <u>*"Helping people to recover from episodes of ill health or following injury"*</u>

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's). Comparisons of local providers with England averages, and statistical outliers identified.

NHS Outcomes Framework Domain Four: <u>*"Ensuring people have a positive experience of care "*</u>

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

<u>*Rotherham Local Priorities*</u>

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

<u>*NHS Constitution*</u>

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.

<u>*Health Outcomes*</u>

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

Family and Friends Test; Improvement in average FFT Scores: Net promoter scores recorded on the FFT survey.

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

<u>*Better Care Fund*</u>

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.

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.

Avoidable emergency admissions: Composite measure of - Unplanned hospitalisation for chronic ambulatory care sensitive conditions (all ages), Unplanned hospitalisation for asthma, diabetes and epilepsy in children, Emergency admissions for acute conditions that should not usually require hospital admissions (all ages), Emergency admissions for children with lower respiratory tract infection (LRTI).

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