



Bolton's Health and Wellbeing Strategy

Performance Management Framework

**Monitoring the indicators of the Health and Wellbeing
Strategy for presentation to the Health and Wellbeing
Board**

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Bolton's Health and Wellbeing Strategy

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This performance report includes a summary profile of the indicators in the Health & Wellbeing Strategy, to be presented at Bolton's Health & Wellbeing Board, as well as more detail regarding the Overarching Outcomes of the Strategy, and tables illustrating direction of travel and commentary for all indicators.

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Bolton's Health and Wellbeing Strategy

Performance Management Framework

What is Performance Management?

The NHS Institute for Innovation and Improvement states that in general performance management is about establishing a formal, regular, rigorous system of data collection and usage to indicate trends and measure the performance of services. Performance management enables organisations to articulate their business strategy, align their business to that strategy, identify their key performance indicators (KPIs) and track progress, delivering the information to decision-makers.

Key principles of Bolton's Health and Wellbeing Strategy:

- Keep a firm focus on achieving positive health outcomes for all across the life-course
- Address inequalities
- Focus on prevention and reducing demand for services
- Develop, redesign and integrate services around the needs of people
- Ensure we use the resources available efficiently to secure better outcomes
- Promote the corporate citizen role of the health and social care system

What is the structure of this Performance Management Framework?

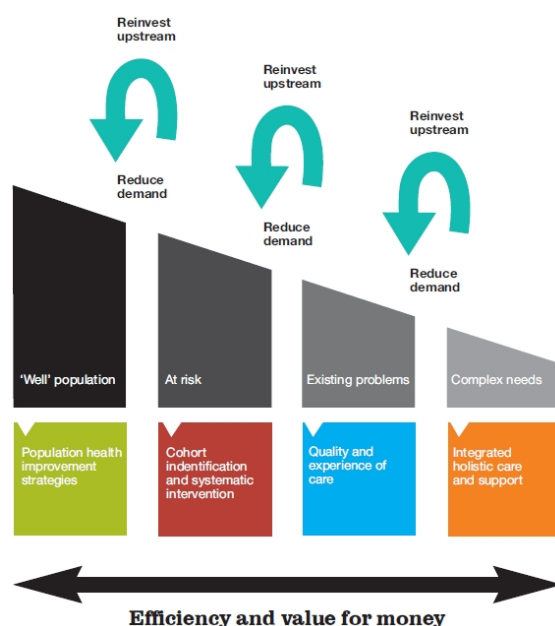
Performance Management should be strongly aligned to strategic principles and goals. Bolton's Health and Wellbeing Strategy is designed across key themes, with clear outcomes and identified responsible individuals/teams. The purpose of this framework is to monitor progress towards achievement of those goals through formal, regular, and rigorous data collection. In consequence, this framework is structured according to the lifecourse approach taken in the Health and Wellbeing Strategy:

- Starting Well
- Developing Well
- Living Well
- Working Well
- Ageing Well
- End of Life

Within each area of the lifecourse outcomes follow four key themes: Helping People Stay Well, Identifying and Dealing with Problems Early, Taking Good Care of Those with Existing Needs, and Keeping Vulnerable People Safe and Well.

How often is the Performance Management Framework updated?

This framework is updated as and when new outcome data is available. National and local data is released and analysed at different points during the year but this framework is published on the Bolton's Health Matter's website and the download will always include the most up to date available. Update releases for individual outcomes are given in the framework.



Bolton's Health and Wellbeing Strategy

Performance Management Framework

Performance update headlines this quarter

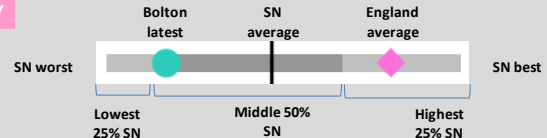
Right of the black line indicates we are performing better than our SN. This is true especially for breastfeeding at 6-8 weeks (a notable recent improvement), adults with LD and MI in settled accommodation, injuries due to falls, and emergency readmissions for older people. Also looking increasingly promising are teenage conceptions, child alcohol admissions, and infant mortality which are continuing to improve relative to our SN. Of concern: SII, tooth decay, suicide, stroke admissions in the elderly, LAC GCSE results, and the local employment rate for people with learning disabilities, which is struggling compared to the comparative rates for those with LTC and those with MI, the latter updated this quarter.

PROFILE OF LATEST PERFORMANCE

MORE INFORMATION

For more detail, including direction of travel and movement from baseline, as well as information regarding sources, future data releases, and local ownership of indicators see full performance report on Bolton's Health Matters.

KEY

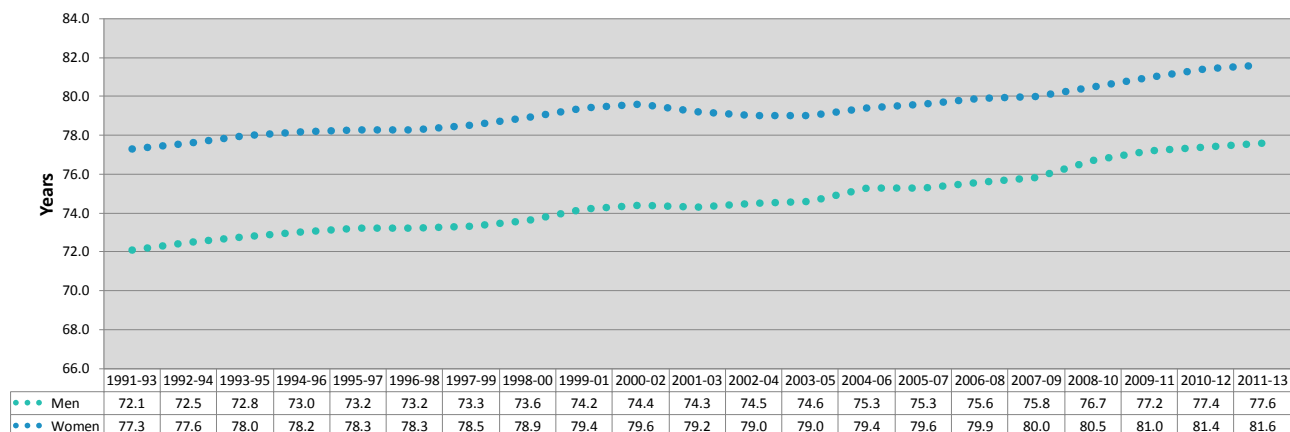


| OUTCOME | | BOLTON LATEST | SN AVERAGE | SN WORST | SN RANGE | SN BEST |
|-----------------------|---|---------------|------------|----------|----------|---------|
| OVER ARCHING OUTCOMES | LE MEN | 77.6 | 77.8 | 76.6 | | 79.2 |
| | LE WOMEN | 81.6 | 81.6 | 80.3 | | 83.2 |
| | SII MEN | 11.2 | 9.9 | 11.2 | | 7.8 |
| | SII WOMEN | 9.8 | 8.1 | 10.3 | | 6.1 |
| STARTING WELL | 2.1 Infant mortality | 4.6 | 4.8 | 6.9 | | 3.0 |
| | 2.2 Low birth weight | 7.9 | 7.8 | 10.2 | | 6.1 |
| | 2.3 Breastfeeding prevalence 6-8 weeks | 40.0 | 37.3 | 31.2 | | 46.3 |
| | 2.4 Smoking in pregnancy | 16.0 | 16.1 | 21.9 | | 9.7 |
| | 2.5 Tooth decay in children under 5 years | 1.9 | 1.4 | 2.1 | | 0.6 |
| | 2.6 Excess weight: Reception | 21.9 | 23.3 | 26.4 | | 19.4 |
| | 2.7 Attainment at Early Years Foundation Stage | 54.2 | 56.3 | 50.1 | | 62.3 |
| | 2.8 Unplanned admission rate for children: ast. dia. epi. | 318.7 | 385.2 | 545.8 | | 294.7 |
| | 2.9 Emergency admission rates for children: LRTIs | 592.4 | 559.4 | 743.7 | | 310.5 |
| | 2.10 LAC annual health assessment | 100.0 | 88.2 | 53.3 | | 100.0 |
| | 2.11 LAC up to date immunisations | 100.0 | 93.4 | 70.2 | | 100.0 |
| DEVELOPING WELL | 3.2 Completed MMR immunisation by 5th birthday | 91.8 | 92.7 | 88.0 | | 97.4 |
| | 3.3 Completed Dtap/IPV/Hib by 2nd birthday | 98.2 | 97.6 | 95.4 | | 99.1 |
| | 3.5 Excess weight: Year 6 | 34.6 | 35.8 | 40.3 | | 32.5 |
| | 3.10 Chlamydia diagnosis rate aged 15-24 (CTAD) | 2159.0 | 2254.1 | 1473.0 | | 3071.0 |
| | 3.11 Under 18 conception rate | 27.7 | 30.5 | 39.5 | | 24.3 |
| | 3.12 Under 18 alcohol specific hospital admissions | 50.6 | 53.0 | 87.3 | | 29.1 |
| | 3.13 Hospital admissions due to injury aged 0-14 | 144.8 | 141.8 | 184.3 | | 90.4 |
| | 3.14 Suicide and injury undetermined rate | 11.5 | 9.3 | 11.9 | | 5.7 |
| | 3.17 Children admissions aged 10-24: Self-harm | 531.7 | 504.8 | 784.1 | | 268.1 |
| | 3.18 GCSE attainment for LAC (5+ A*-C) | 15.0 | 22.2 | 15.0 | | 30.0 |
| | 3.19 Children in poverty | 21.6 | 22.5 | 27.6 | | 16.4 |
| LIVING WELL | 4.8 NHS Health Check uptake | 89.0 | 56.2 | 34.4 | | 89.0 |
| | 4.9 Prevalence of recorded diabetes | 7.7 | 7.1 | 6.0 | | 8.6 |
| | 4.11 Patients with LTC supported to manage conditions | 65.4 | 64.1 | 59.4 | | 69.4 |
| | 4.12 Emergency readmissions within 30 days of discharge | 11.3 | 12.3 | 13.6 | | 10.9 |
| | 4.14 Mortality causes considered amenable to healthcare | 130.9 | 134.7 | 173.9 | | 108.8 |
| | 4.15 Delayed transfers of care | 6.6 | 7.4 | 16.7 | | 3.3 |
| | 4.18 Adults with MI in settled accommodation | 87.7 | 60.3 | 36.3 | | 87.7 |
| | 4.19 Adults with LD in settled accommodation | 94.5 | 84.2 | 74.8 | | 94.5 |
| | 4.20 Successful drug treatments | 3.6 | 5.6 | 2.5 | | 10.9 |
| | 4.21 Households in temporary accommodation | 0.4 | 0.3 | 0.6 | | 0.1 |
| WORKING WELL | 5.4 Employment of people with LTC | 60.5 | 54.2 | 44.4 | | 63.2 |
| | 5.5 Employment of people with LD | 1.4 | 5.5 | 0.9 | | 9.4 |
| | 5.6 Employment of people with MI | 30.6 | 32.7 | 15.8 | | 49.4 |
| AGEING WELL | 6.1 Injuries due to falls - over 65s | 1617.0 | 2325.3 | 3316.0 | | 1577.0 |
| | 6.2 Excess winter deaths | 18.3 | 16.9 | 22.3 | | 7.4 |
| | 6.3 Flu vaccinations - over 65s | 74.1 | 74.1 | 69.3 | | 78.5 |
| | 6.4 Permanent admissions to residential/nursing homes (65+) | 834.4 | 729.6 | 907.8 | | 455.5 |
| | 6.5 Reported vs. expected Dementia Registers | 68.5 | 51.5 | 24.4 | | 75.5 |
| | 6.6 Satisfaction of social services users with care/support (65+) | 67.6 | 63.0 | 52.5 | | 71.1 |
| | 6.9 Older people at home 91 days after discharge | 78.5 | 83.5 | 75.4 | | 92.5 |
| | 6.10 Rate of stroke admissions (65+) | 1002.7 | 774.0 | 1003.0 | | 598.3 |
| | 6.11 Services make those using them feel safe and secure (65+) | 75.5 | 78.3 | 61.3 | | 90.9 |
| | 6.12 Emergency readmissions <28 days (75+) | 13.5 | 16.3 | 18.6 | | 13.5 |

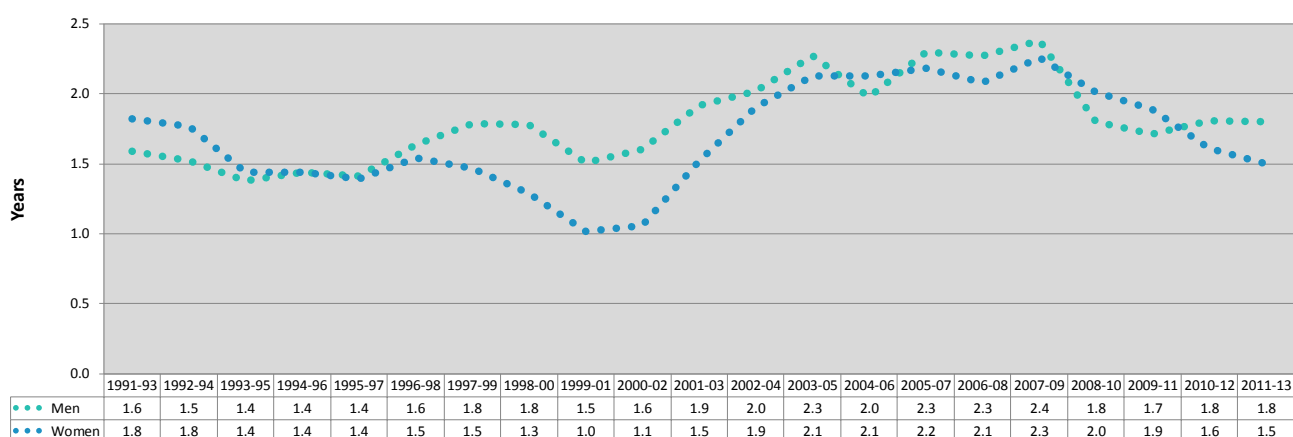
OVERARCHING OUTCOMES

These outcomes are the broad, overarching outcomes the Strategy aims to address.

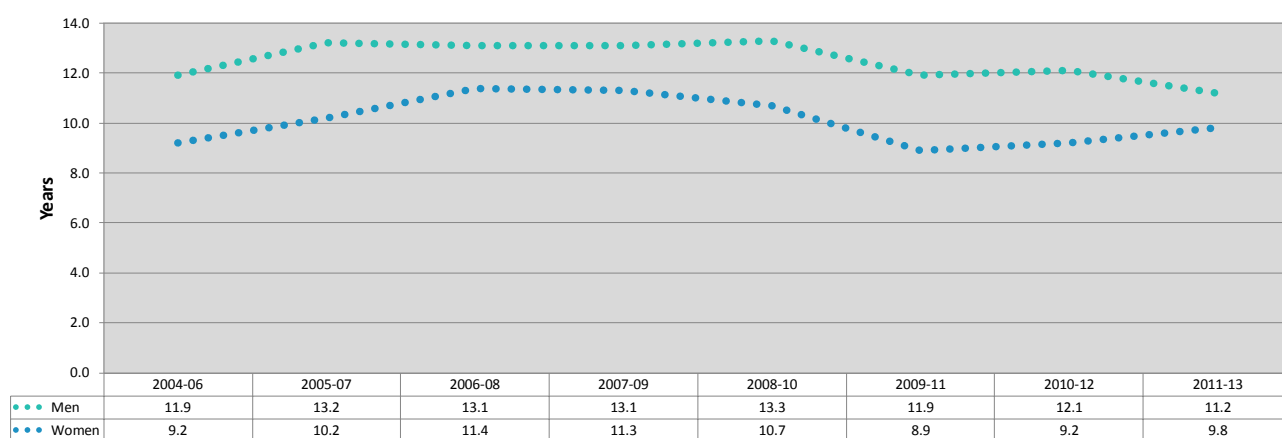
1.1 1.2 Life Expectancy at Birth in Bolton



1.3 1.4 Life Expectancy Gap Between Bolton and England



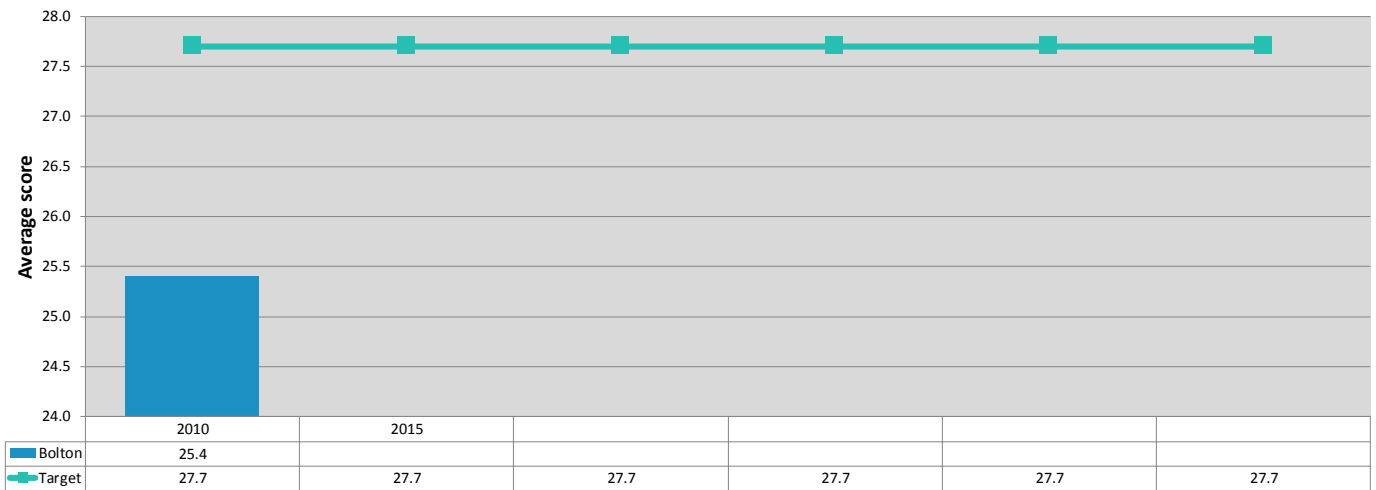
1.5 1.6 Life Expectancy: Slope Index of Inequality (Internal gap in Life Expectancy Between Most and Least Deprived)



Life Expectancy for both sexes continues to increase year on year in Bolton. However, there persists a significant gap between life expectancy in Bolton and England; the gap narrowed to just 1.5 years for men and 1.0 year for women around the turn of the millennium, but since then the gap has tended to widen - but the last three years show promising reductions. The internal gap between the most and least deprived parts of our population has significant and after a reduction in 2009-11 the gap has stabilised and currently stands at 11.2 years for Bolton men and 9.8 years for Bolton women.

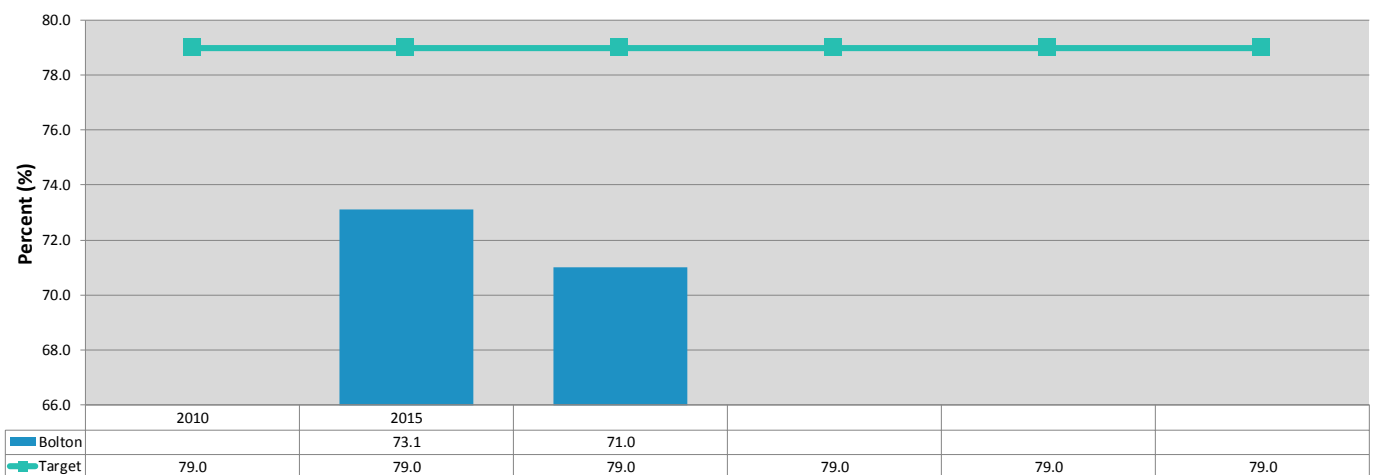
OVERARCHING OUTCOMES

1.7 Mean Wellbeing Score in Bolton (WEMWBS)



The local wellbeing score was included in the Bolton Health & Wellbeing Survey for the first time in 2010 and so we only have data for one point in time at present. The measure will be included in the 2014 survey due in the autumn.

1.8 Good to Excellent General Health














There was a reduction in the proportion of the adult population experiencing good to excellent health in Bolton between the most recent two health surveys in 2007 and 2010. The next survey is due to occur this autumn.

STARTING WELL

'Starting well' means good health before conception, a healthy pregnancy and good preparation for becoming a parent. A positive birth and experience in the early days and weeks of life; good maternal mental health; secure attachment between parents and child; love and responsiveness of parents; and promotion of the child's physical, cognitive, language and social and emotional development in a safe environment.

INDICATORS

| Outcome | Baseline | Latest position | Direction of travel | SN average | Commentary | Latest data |
|--|----------|-----------------|---|------------|---|-------------|
| HELPING CHILDREN START WELL | | | | | | |
| 2.1 Infant mortality (PHOF 4.1) | 5.8 | 4.6 |  | 4.8 | We are maintaining the recent improvements made in this important indicator locally. | 2011-13 |
| 2.2 Low birth weight | 7.2 | 7.9 |  | 7.8 | After the recent increase the trend is back on course now. | 2013 |
| 2.3 Breastfeeding prevalence 6-8 weeks (PHOF 2.2ii) | 36.2 | 40.0 |  | 37.3 | Latest release (2013/14) shows important improvement. | 2013/14 |
| 2.4 Smoking in pregnancy (PHOF 2.3) | 18.0 | 16.0 |  | 16.1 | SATOD shows a consistently reducing trend and we remain around SN average. | 2013/14 |
| 2.5 Tooth decay in children under 5 years (PHOF 4.2) | 1.9 | 1.9 |  | 1.4 | Newly released data, no trend. Worse than SN average. | 2011/12 |
| IDENTIFYING AND DEALING WITH PROBLEMS EARLY | | | | | | |
| 2.6 Excess weight in Reception children | 24 | 21.9 |  | 23.3 | Historically Reception excess weight has reduced but latest data shows an increase | 2013/14 |
| 2.7 Attainment at Early Years Foundation Stage | 60.4 | 54.2 |  | 56.3 | The recent fall was due to change in methodology - post-Tickell Review. | 2013/14 |
| TAKING GOOD CARE OF THOSE WITH HEALTH AND SOCIAL CARE NEEDS | | | | | | |
| 2.8 Unplanned admission rates for children: asthma, diabetes, epilepsy (NHSOF 2.3ii) | 366.1 | 318.7 |  | 385.2 | In general, child admissions can be erratic but are currently relatively stable. | 2013/14 |
| 2.9 Emergency admission rates for children: LRTIs (NHSOF 3.2) | 417.2 | 592.4 |  | 559.4 | In general, child admissions can be erratic but are currently relatively stable. | 2012/13 |
| ADDRESSING THE NEEDS OF THE VULNERABLE AND COMPLEX | | | | | | |
| 2.10 LAC annual health assessment | 87.6 | 100.0 |  | 88.2 | Both trends can be erratic but the differences between points are often minimal and Bolton remains consistently above baseline and SN average, achieving 100%.. | 2014 |
| 2.11 LAC up to date immunisations | 95.4 | 100.0 |  | 93.4 | | 2014 |
| 2.12 Troubled Families outcome indicators | | | | | Indicator data not yet available. | |














DEVELOPING WELL

Many of the health problems that young people develop as they grow older are rooted in their experiences of childhood and adolescence. A sense of aspiration, achievement and security are intrinsically linked to young people's life chances and their long term wellbeing.

| INDICATORS | | | | | | |
|--|----------|-----------------|---|------------|--|-----------------|
| Outcome | Baseline | Latest position | Direction of travel | SN average | Commentary | Latest data |
| HELPING PEOPLE STAY WELL | | | | | | |
| 3.1 Uptake rates for universal health screens | | | | | Indicator data not yet available. | |
| 3.2 Completed MMR immunisation by 5th birthday (PHOF 3.3x) [2 doses] | 89.4 | 91.8 |  | 92.7 | Latest release has been positive for both MMR or Dtap/IPV/Hib and Bolton remains similar to SN average - this is currently the highest coverage we have had. | 2013/14 |
| 3.3 Completed Dtap/IPV/Hib vaccine by their 2nd birthday | 97.4 | 98.2 |  | 97.6 | | 2013/14 |
| 3.4 Healthy Schools - Enhanced | | | | | Indicator data not yet available. | |
| 3.5 Excess weight in Year 6 children | 31.9 | 34.6 |  | 35.8 | After two significant historic increases, the trend is stabilising again. | 2013/14 |
| IDENTIFYING AND DEALING WITH PROBLEMS EARLY | | | | | | |
| 3.6 Uptake of health reviews - school entry | | | | | Indicator data not yet available. | |
| 3.7 Uptake of health reviews - transition to secondary school | | | | | Indicator data not yet available. | |
| 3.8 Coverage of health reviews - school entry | | | | | Indicator data not yet available. | |
| 3.9 Coverage of health reviews - transition to secondary school | | | | | Indicator data not yet available. | |
| TAKING GOOD CARE OF THOSE WITH HEALTH AND SOCIAL CARE NEEDS | | | | | | |
| 3.10 Chlamydia diagnosis rate aged 15-24 CTAD (PHOF 3.2) | 2552.0 | 2159.0 |  | 2254.1 | Diagnosis rate must stay above 2,400 to effect change in prevalence. | 2014 |
| 3.11 Under 18 conception rate (PHOF 2.4) | 46.1 | 27.7 |  | 30.5 | Conception rate continues to fall. | 2013 |
| 3.12 Under 18 alcohol related hospital admissions | 93.7 | 50.6 |  | 53.0 | Admission rate continues to fall - currently below SN average. | 2011/12-2013/14 |
| 3.13 Hospital admissions due to injury aged 0-14 | 147.3 | 144.8 |  | 141.8 | Currently around SN average. | 2013/14 |
| 3.14 Suicide and injury undetermined rate (PHOF 4.10) | 12.9 | 11.5 |  | 9.3 | Last two releases are promising following the recent peak in the suicide rate. | 2011-13 |
| 3.15 Children and young people's experience of healthcare (NHSOF 4.8) | | | | | Indicator data not yet available. | |
| 3.16 Women's experience of maternity services (NHSOF 4.5) | | | | | Indicator data not yet available. | |
| ADDRESSING THE NEEDS OF THE VULNERABLE AND COMPLEX | | | | | | |
| 3.17 Children hospital admissions as a result of self-harm (PHOF 2.10) | 368.7 | 531.7 |  | 504.8 | Limited trend, but currently above SN average. | 2013/14 |
| 3.18 GCSE attainment for LAC (5+ A*-C) | 22.6 | 15.0 |  | 21.6 | A recent fall in LAC GCSE attainment. | 2014 |
| 3.19 Children in poverty (PHOF 1.1) | 24.1 | 21.6 |  | 22.5 | Child poverty continues to fall. | 2012 |


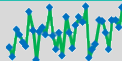


LIVING WELL

Many premature deaths and illnesses could be prevented by improving lifestyles. It is estimated that 80% of cases of heart disease, stroke and type 2 diabetes and 40% of cases of cancer could be avoided if lifestyle risk factors were eliminated.

| INDICATORS | | | | | | |
|--|----------|-----------------|---|---------------|--|-----------------|
| Outcome | Baseline | Latest position | Direction of travel | SN average | Commentary | Latest data |
| HELPING PEOPLE STAY WELL | | | | | | |
| 4.1 Current adult smokers | 20.7 | 20.7 |  | NOT AVAILABLE | Smoking continues to fall in line with the national picture. | 2010 |
| 4.2 Adult overweight and obese | 51.1 | 54.7 |  | NOT AVAILABLE | Adult obesity continues to increase. | 2010 |
| 4.3 Physically active adults | 42.3 | 42.5 |  | NOT AVAILABLE | Physical activity is increasing in Bolton, but very slowly. | 2010 |
| 4.4 Physically inactive adults | 18.8 | 17.1 |  | NOT AVAILABLE | The latest position is better than historical target, but this must be maintained. | 2010 |
| 4.5 Drinking over limit/severely over limit | 27.8 | 30.9 |  | NOT AVAILABLE | Drinking continues to increase in line with the national picture. | 2010 |
| 4.6 Multiple risk factors | | | | | Indicator data not yet available. | |
| 4.7 Number killed or seriously injured on roads (all ages) (PHOF 1.10) | 32.3 | 27.0 |  | 31.6 | Number of people killed or seriously injured shows consistent reduction. | 2011-13 |
| IDENTIFYING AND DEALING WITH PROBLEMS EARLY | | | | | | |
| 4.8 NHS Health Check uptake (PHOF 2.22ii) | 61.4 | 89.0 |  | 56.2 | 5-year cumulative figure - we are the best in the country. | 2013/14-2014/15 |
| 4.9 Prevalence of recorded diabetes (PHOF 2.17) | 5.4 | 7.7 |  | 7.1 | Recorded diabetes continues to increase linearly towards our estimated prevalence. | 2013/14 |
| 4.10 Diagnosed cancer at Stage 1 & 2 as a proportion of all cancers (PHOF 2.19) | 48.2 | 46.6 |  | 42.3 | Limited trend. | 2013 |
| TAKING GOOD CARE OF THOSE WITH HEALTH AND SOCIAL CARE NEEDS | | | | | | |
| 4.11 Patients with LTC supported to manage their conditions (NHSOF 2.1) | 68.2 | 65.4 |  | 64.1 | Little change from baseline, but trend is limited. | 2014/15 |
| 4.12 Emergency readmissions within 30 days of discharge (NHSOF 3b) | 10.2 | 11.3 |  | 12.3 | Trend erratic but currently better than SN average. | 2011/12 |
| 4.13 Health related quality of life for carers (ASCOF 1D) | 8.5 | 8.5 |  | 8.1 | Only one point in time at present. | 2013/14 |
| 4.14 Mortality from causes considered amenable to healthcare (NHSOF 1a) | 113.7 | 130.9 |  | 134.7 | Very strong consistent reduction in this indicator. | 2013 |
| 4.15 Delayed transfers of care (ASCOF 2C) | 9.1 | 6.6 |  | 7.4 | Positive reductions. | 2013/14 |
| 4.16 Patient experience of primary care (NHSOF 4a) | 88.8 | 86.0 |  | 83.8 | Minor reductions have been seen in the releases so far. | 2014/15 |
| 4.17 Patient experience of hospital care (NHSOF 4b) | 75.8 | 78.3 |  | NOT RELEVANT | Since baseline, indicator has fallen but latest three updates show improvement. | 2014/15 |
| ADDRESSING THE NEEDS OF THE VULNERABLE AND COMPLEX | | | | | | |
| 4.18 Adults in contact with mental health services in settled accommodation (PHOF 1.6ii) | 89.9 | 87.7 |  | 60.3 | Limited trend, but notably higher than SN average. | 2013/14 |
| 4.19 Adults with learning disability in settled accommodation (PHOF 1.6i) | 81.6 | 94.5 |  | 84.2 | Limited trend, but higher than SN average. | 2013/14 |
| 4.20 Successful drug treatments (PHOF 2.15i) | 7.0 | 3.6 |  | 5.6 | Successful treatments are reducing, but numbers are small. | 2013 |
| 4.21 Households in temporary accommodation (PHOF 1.15ii) | 0.5 | 0.4 |  | 0.3 | We remain average for SN. | 2013/14 |

WORKING WELL

Work contributes to health by improving self-worth, fulfilment, personal identity and standing in the community, as well as providing the means for maintaining and enhancing standards of living and social participation. A fit, healthy and motivated workforce helps increase productivity and is essential for economy prosperity. Conversely unemployment negatively impacts on health as poor financial circumstances lead to material deprivation.

| INDICATORS | | | | | | |
|---|----------|-----------------|---|------------|---|-------------|
| Outcome | Baseline | Latest position | Direction of travel | SN average | Commentary | Latest data |
| HELPING PEOPLE STAY WELL | | | | | | |
| 5.1 Workplaces signed up to Clock-on-2-Health | | | | | Locally derived; indicator data not yet available. | |
| 5.2 Staff members signed up to Clock-on-2-Health | | | | | | |
| IDENTIFYING AND DEALING WITH PROBLEMS EARLY | | | | | | |
| 5.3 Sickness absence (PHOF 1.09i) | 2.2 | 2.3 |  | 2.8 | Bolton currently performs better than SN average, but not significantly so. | 2010-12 |
| TAKING GOOD CARE OF THOSE WITH HEALTH AND SOCIAL CARE NEEDS | | | | | | |
| 5.4 Employment of people with long-term conditions (NHSOF 2.2) | 54.6 | 60.5 |  | 54.2 | Erratic trend. | 2014 q1 |
| ADDRESSING THE NEEDS OF THE COMPLEX AND VULNERABLE | | | | | | |
| 5.5 Proportion of adults with learning disabilities in paid employment (ASCOF 1E) | 1.1 | 1.4 |  | 5.5 | Performing notably worse than SN and England average. | 2013/14 |
| 5.6 Employment of people with mental illness (NHSOF 2.5) | 22.9 | 30.6 |  | 32.7 | After dropping significantly during the recession, the rate is now improving. | 2014 q1 |

AGEING WELL

Although many older people live active lives and make a positive contribution to their community there are increased risks of poor health, deprivation and isolation as age increases.

INDICATORS

| Outcome | Baseline | Latest position | Direction of travel | SN average | Commentary | Latest data |
|---|----------|-----------------|---|------------|---|---------------------|
| HELPING PEOPLE STAY WELL | | | | | | |
| 6.1 Injuries due to falls - over 65s (PHOF 2.24i) | 1316.0 | 1617.0 |  | 2325.3 | Comfortably below SN average and England but is increasing. | 2013/14 |
| 6.2 Excess winter deaths (PHOF 4.15) | 16.7 | 18.3 |  | 16.9 | After a long period of reduction this indicator is beginning to increase. | Aug 2010 - Jul 2013 |
| 6.3 Flu vaccinations - over 65s (PHOF 3.3xiv) | 72.2 | 74.1 |  | 74.1 | After a of period increase, flu vaccinations have begun to plateau. | 2014/15 |
| IDENTIFYING AND DEALING WITH PROBLEMS EARLY | | | | | | |
| 6.4 Permanent admissions to residential and nursing care homes (65+) (ASCOF 2A) | 809.9 | 834.4 |  | 728.1 | After a sharp fall we are now more consistent. | 2013/14 |
| 6.5 Reported vs. expected prevalence on GP Dementia Registers | 51.9 | 68.5 |  | 51.5 | Recently increased above SN average. | 2013/14 |
| TAKING GOOD CARE OF THOSE WITH HEALTH AND SOCIAL CARE NEEDS | | | | | | |
| 6.6 Satisfaction of people who use social services with their care and support (ASCOF 3A) | 57.8 | 66.0 |  | 62.9 | Currently performing just better than SN average and England. | 2013/14 |
| 6.7 Satisfaction of carers with social services (ASCOF 3B) | 44.9 | 44.9 |  | 45.5 | Only one point in time at present. | 2013/14 |
| 6.8 Stroke patients reporting improvement in activity/lifestyle (NHSOF 3.4) | | | | | Indicator data not yet available. | |
| 6.9 Older people (65+) still at home 91 days after discharge from hospital (ASCOF 2B) | 51.5 | 78.5 |  | 83.5 | Relatively consistent with England. | 2013/14 |
| 6.10 Rate of stroke admissions (65+) | 762.9 | 1002.7 |  | 774.0 | Stroke admissions are increasing locally and are much higher than SN average. | 2011/12 |
| ADDRESSING THE NEEDS OF THE VULNERABLE AND COMPLEX | | | | | | |
| 6.11 People who feel safe using services (ASCOF 4B) | 80.9 | 75.8 |  | 78.3 | Three points in time so far, but little significant change is evident. | 2013/14 |
| 6.12 Emergency readmissions (75+) | 12.9 | 13.5 |  | 16.3 | Recent peak, but are now performing better than SN average. | 2011/12 |

END OF LIFE

Whilst we would all aspire to live a healthy long life, death is inevitable and our experience of death is important not only to minimise the individuals personal suffering but also for those who are bereaved.

INDICATORS

| Outcome | Baseline | Latest position | Direction of travel | SN average | Commentary | Latest data |
|--|----------|-----------------|---------------------|------------|---|-------------------------|
| HELPING PEOPLE STAY WELL | | | | | | |
| 7.1 Deaths at home | 19.7 | 22.0 | | 22.5 | Only minor changes, but the trends are positive. | 2013 |
| 7.2 Deaths in hospital | 58.3 | 51.1 | | 50.8 | | 2013 |
| IDENTIFYING AND DEALING WITH PROBLEMS EARLY | | | | | | |
| 7.3 People with palliative care need identified on GP Palliative Care Register | 22.7 | 33.5 | | 36.3 | A promising increase moving us toward SN average. | April 2012 - March 2013 |
| TAKING GOOD CARE OF THOSE WITH HEALTH AND SOCIAL CARE NEEDS | | | | | | |
| 7.4 Number of care homes | 2.6 | 2.6 | | 3.7 | Only one point in time at present. | 2012 |
| 7.5 Number of care home beds | 91.3 | 91.3 | | 111.3 | Only one point in time at present. | 2012 |
| ADDRESSING THE NEEDS OF THE VULNERABLE AND COMPLEX | | | | | | |
| 7.6 Terminal admissions that are emergencies | 91.2 | 91.2 | | 92.2 | Only one point in time at present. | 2010/11 |
| 7.7 Terminal admissions that are 8 days or longer | 47.2 | 47.2 | | 46.9 | Only one point in time at present. | 2010/11 |

SUPPLEMENTARY INFORMATION

For each indicator in the performance management framework the below table provides its definition.

| Outcome | Definition |
|--|--|
| STARTING WELL | |
| 2.1 Infant mortality (<i>PHOF 4.1</i>) | Rate of deaths in infants aged under 1 year per 1,000 live births |
| 2.2 Low birth weight | Proportion of total births with a birth weight less than 2500 grams |
| 2.3 Breastfeeding prevalence 6-8 weeks (<i>PHOF 2.2ii</i>) | Percentage of all infants due a 6-8 week check that are totally or partially breastfed |
| 2.4 Smoking in pregnancy (<i>PHOF 2.3</i>) | Percentage of women who smoke at time of delivery |
| 2.5 Tooth decay in children under 5 years (<i>PHOF 4.2</i>) | Mean severity of tooth decay in children aged five years based on the mean number of teeth per child sampled which were either actively decayed or had been filled or extracted – decayed/missing/filled teeth (d3mft) |
| 2.6 Excess weight in Reception children | Percentage of children aged 4-5 classified as overweight or obese |
| 2.7 Attainment at Early Years Foundation Stage | Children defined as having reached a good level of development at the end of the EYFS as a percentage of all eligible children |
| 2.8 Unplanned admission rate for children: asthma, diabetes, epilepsy (<i>NHSOF 2.3ii</i>) | Age-sex standardised emergency admission episodes for people under 19 where asthma, diabetes, or epilepsy was the primary diagnosis, per 100,000 population |
| 2.9 Emergency admission rates for children: LRTIs (<i>NHSOF 3.2</i>) | Age-sex standardised emergency admission episodes for people under 19 where lower respiratory tract infection was the primary diagnosis, per 100,000 population |
| 2.10 LAC annual health assessment | Percentage of looked after children who had their annual health assessment |
| 2.11 LAC up to date immunisations | Percentage of looked after children whose immunisations were up to date |
| 2.12 Troubled Families outcome indicators | Not yet defined |
| DEVELOPING WELL | |
| 3.1 Uptake rates for universal health screens | Not yet defined |
| 3.2 Completed MMR immunisation by 5th birthday (<i>PHOF 3.3x</i>) | Percentage of eligible children who have received two doses of MMR vaccine on or after their 1st birthday and at any time up to their 5th birthday |
| 3.3 Completed Dtap /IPV/ Hib vaccine by their 2nd birthday | Percentage of eligible children who received 3 doses of Dtap / IPV / Hib vaccine at any time by their 2nd birthday |
| 3.4 Healthy Schools - Enhanced | Not yet defined |
| 3.5 Excess weight in Year 6 children | Percentage of children aged 10-11 classified as overweight or obese |
| 3.6 Uptake of health reviews - school entry | Not yet defined |
| 3.7 Uptake of health reviews - transition to secondary school | Not yet defined |
| 3.8 Coverage of health reviews - school entry | Not yet defined |
| 3.9 Coverage of health reviews - transition to secondary school | Not yet defined |
| 3.10 Chlamydia diagnosis rate aged 15-24 (<i>PHOF 3.2</i>) | Crude rate of chlamydia diagnoses per 100,000 young adults aged 15-24 using CTAD |
| 3.11 Under 18 conception rate (<i>PHOF 2.4</i>) | Rate of conceptions per 1,000 females aged 15-17 |
| 3.12 Under 18 alcohol specific hospital admissions | Crude rate per 100,000 under 18 year olds for alcohol specific hospital admissions |
| 3.13 Hospital admissions due to injury <18s | Crude rate per 10,000 (<18) for emergency hospital admissions following injury |
| 3.14 Suicide and injury undetermined rate (<i>PHOF 4.10</i>) | Age-standardised mortality rate from suicide and injury of undetermined intent per 100,000 population |
| 3.15 Children and young people's experience of healthcare (<i>NHSOF 4.8</i>) | Not yet available at LA level |
| 3.16 Women's experience of maternity services (<i>NHSOF 4.5</i>) | Not yet available at LA level |
| 3.17 Children hospital admissions as a result of self-harm (<i>PHOF 2.10</i>) | Directly standardised rate per 100,000 for hospital admissions for self-harm aged 10-17 |
| 3.18 GCSE attainment for LAC (5+ A*-C) | Percentage of children looked after achieving 5 or more GCSEs or equivalent including maths and English |
| 3.19 Children in poverty (<i>PHOF 1.1</i>) | Percentage of all dependent children under 20 in relative poverty (living in households where income is less than 60 per cent of median household income before housing costs) |
| LIVING WELL | |
| 4.1 Current adult smokers | Age-sex standardised prevalence of current smokers (%) |
| 4.2 Adult overweight and obese | Age-sex standardised prevalence of adult overweight and obese (%) |
| 4.3 Physically active adults | Age-sex standardised prevalence of physically active adults (%) |
| 4.4 Physically inactive adults | Age-sex standardised prevalence of physically inactive adults (%) |
| 4.5 Drinking over limit/Severely over limit | Age-sex standardised prevalence of adults drinking over limit/Severely over limit (%) |
| 4.6 Multiple risk factors | Not yet defined |
| 4.7 Killed or seriously injured on roads (all ages) (<i>PHOF 1.10</i>) | Rate of people KSI on the roads, all ages, per 100,000 resident population |
| 4.8 NHS Health Check uptake (<i>PHOF 2.22ii</i>) | Percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check |
| 4.9 Prevalence of recorded diabetes (<i>PHOF 2.17</i>) | Percentage of QOF-recorded cases of diabetes registered with GP practices aged 17+ |
| 4.10 Diagnosed cancer at Stage 1 & 2 as a proportion of all cancers (<i>PHOF 2.19</i>) | Patients with cancer diagnosed at stage 1 and 2 as a proportion of cancers diagnosed |
| 4.11 Patients with LTC supported to manage their conditions (<i>NHSOF 2.1</i>) | Proportion of people feeling supported to manage their conditions, based on responses to one question from the GP Patient Survey |
| 4.12 Emergency readmissions within 28 days of discharge (<i>NHSOF 3b</i>) | Percentage of emergency admissions occurring within 28 days of the last, previous discharge from hospital after admission. |
| 4.13 Health related quality of life for carers (<i>ASCOF 1D</i>) | This measure combines individual responses to six questions in the Carers' Survey measuring different outcomes related to overall quality of life - points out of 12 |
| 4.14 Mortality from causes considered amenable to healthcare (<i>NHSOF 1a</i>) | Age-sex standardised mortality rate (<75) from causes considered amenable to healthcare per 100,000 population |
| 4.15 Delayed transfers of care (<i>ASCOF 2C</i>) | Delayed transfers of care from hospital per 100,000 population |
| 4.16 Patient experience of primary care (<i>NHSOF 4a</i>) | Percentage of people reporting a very good or fairly good experience of their GP surgery, weighted for design and non-response. |
| 4.17 Patient experience of hospital care (<i>NHSOF 4b</i>) | Patient experience measured by scoring the results of a selection of questions from the national inpatient survey looking at a range of elements of hospital care - score out of percentage of adults (age 18-69) who are receiving secondary mental health services |
| 4.18 Adults with mental illness in settled accommodation (<i>PHOF 1.6ii</i>) | on the Care Programme Approach recorded as living independently, with or without support |
| 4.19 Adults with learning disability in settled accommodation (<i>PHOF 1.6i</i>) | Percentage of adults with a learning disability who are known to the council, who are recorded as living in their own home or with their family |

| | |
|--|--|
| 4.20 Successful drug treatments (<i>PHOF 2.15i</i>) | Percentage of opiate drug users that left drug treatment successfully who do not re-present to treatment within 6 months |
| 4.21 Households in temporary accommodation (<i>PHOF 1.15ii</i>) | Households in temporary accommodation per 1,000 households |
| WORKING WELL | |
| 5.1 Workplaces signed up to Clock-on-2-Health | Not yet defined |
| 5.2 Staff members signed up to Clock-on-2-Health | Not yet defined |
| 5.3 Sickness absence (<i>PHOF 1.09i</i>) | Percentage of employees who had at least one day off due to sickness absence in the previous working week |
| 5.4 Employment of people with long-term conditions (<i>NHSOF 2.2</i>) | Employment rate of people with a long-term condition, based on LFS data, by financial year quarter |
| 5.5 Proportion of adults with learning disabilities in paid employment (<i>ASCOF 1E</i>) | The proportion of all adults with learning disabilities who are known to the council, who are recorded as being in paid employment within the current financial year |
| 5.6 Employment of people with mental illness (<i>NHSOF 2.5</i>) | Employment rate of people with a mental illness, based on LFS data, by financial year |
| AGEING WELL | |
| 6.1 Injuries due to falls - over 65s (<i>PHOF 2.24i</i>) | Age-sex standardised rate of emergency hospital admissions for injuries due to falls in persons aged 65+ per 100,000 population |
| 6.2 Excess winter deaths (<i>PHOF 4.15</i>) | Excess Winter Deaths Index (3 years, all ages) |
| 6.3 Flu vaccinations - over 65s (<i>PHOF 3.3xiv</i>) | Percentage of eligible adults aged 65+ who have received the flu vaccine |
| 6.4 Permanent admissions to residential and nursing care homes (65+) (<i>ASCOF 2A</i>) | Permanent admissions (65+) to residential and nursing care homes, per 100,000 |
| 6.5 Reported vs. expected prevalence on GP Dementia Registers | Number recorded on dementia QOF Register as a proportion of estimated prevalence from POPPI |
| 6.6 Satisfaction of people who use social services with their care and support (65+) (<i>ASCOF 3A</i>) | Overall satisfaction of people who use service with their care and support - 'extremely satisfied' or 'very satisfied' (%) |
| 6.7 Satisfaction of carers with social services (<i>ASCOF 3B</i>) | Overall satisfaction of carers with social services - 'extremely satisfied' or 'very |
| 6.8 Stroke patients reporting improvement in activity/lifestyle (<i>NHSOF 3.4</i>) | Not yet defined |
| 6.9 Older people (65+) still at home 91 days after discharge from hospital (<i>ASCOF 2B</i>) | Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (%) |
| 6.10 Rate of stroke admissions (65+) | Directly standardised rate of hospital admissions for stroke in the elderly per 100,000 population aged 65 and over |
| 6.11 People who feel safe using services (65+) (<i>ASCOF 4B</i>) | The proportion of people (65+) who use services who say that those services have made them feel safe and secure (%) |
| 6.12 Emergency readmissions within 28 days of discharge (75+) | Percentage of emergency admissions aged 75+ occurring within 28 days of the last, previous discharge from hospital after admission. |
| END OF LIFE | |
| 7.1 Deaths at home | Percentage of all deaths that occur in own home |
| 7.2 Deaths in hospital | Percentage of all deaths that occur in hospital |
| 7.3 People with palliative care need identified on GP Palliative Care Register | People with palliative care need identified on GP Palliative Care Register (%) |
| 7.4 Number of care homes | Number of care homes per 1,000 population aged 75 and over |
| 7.5 Number of care home beds | Number of care home beds per 1,000 population aged 75 and over |
| 7.6 Terminal admissions that are emergencies | Percentage of hospital admissions ending in death (terminal admissions) that are emergencies |
| 7.7 Terminal admissions that are 8 days or longer | Percentage of hospital admissions ending in death (terminal admissions) with a stay of 8 days or longer |