

**BCF 1- Non Elective Admissions**

Apr- Jun 2016	Jul- Sep 2016	Oct- Dec 2016	Jan- Mar 2017	TOTAL
Actual 7733	Actual 7732	Actual 8050	Actual 7935	31450
Plan: 8148	Plan: 7897	Plan: 8349	Plan: 7868	32,367

**BCF 2- Residential & Nursing Care Home Admissions**

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17 Target	52	104	156	208	260	312	364	416	468	520	572	623.7
16/17 Actual	56.7	117.5	179.7	232.3	276.9	352.6	439.0	439.0	452.5	470.0	489.7	500.7

**BCF 3- Reablement:**

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17 Target	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1
16/17 Actual	78.91	74.81	81.51	77.11	76.30	76.76	76.10	77.10	76.64			

**BCF 4- Delayed Transfers of Care**

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
16/17 Target	387	387	389	388	388	390	470	470	471	382	382	382
16/17 Actual	401	305	343	388	631	497	391	488	663	581	524	500

**BCF 5- Patient/ Service User experience metric**

Patient experience of hospital discharge- source CQC inpatient survey. Patients are asked to score their experience out of 10.

2015 score	2016 target	2016 score
6.8	6.9	7.1

**BCF 6- Local Metric**

No of people admitted (unplanned) to Redwoods with a diagnosis of dementia as a proportion of those with a dementia diagnosis  
This metric is reported annually. The target is to reduce unplanned admissions by a further 0.2% on 15/16

15/16 Baseline	16/17 Plan
	1.2%
1.4%	0.0%
44	0
3,139	0

**Overall Summary:**

Performance on NEA in quarter 4 is slightly below target and is therefore rated amber. Performance across the year is better than target.

Performance on residential/ care home admissions saw a significant improvement in quarter 4

Reablement data is available to the end of December and is slightly below target.

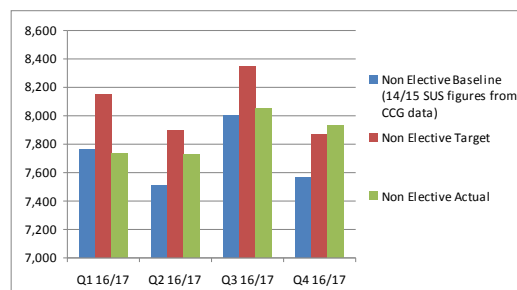
Performance on DTOC in quarter 4 shows some challenges- detailed system wide work is taking place around this.

Performance of the patient experience and local metrics are reported annually.

The 2015 score for patient experience has just been released and shows an improvement on 2014

# Total non-elective admissions (general & acute), all-age

	Q1 16/17	Q2 16/17	Q3 16/17	Q4 16/17
Non Elective Baseline (14/15 SUS figures from CCG data)	7,766	7,513	8,004	7,566
Non Elective Target	8,148	7,897	8,349	7,868
Non Elective Actual	7733	7732	8050	7935



	Apr - Jun 16	Jul - Sep 16	Oct - Dec 16	Jan - Mar 17
cumulative target	8,148	16,045	24,394	32,262
cumulative actual	7,733	15,465	23,515	31,450
variance	415	580	879	812

## Definition:-

Everyone Counts: Planning for Patients 2014/15 - 2018/19: Technical Definitions for Clinical Commissioning Groups and Area Teams

## E.C.4: Non-elective FFCes (First Finished Consultant Episode)

### DEFINITIONS Detailed Descriptor:

Total number of non-elective FFCes in general & acute (G&A) specialties in a month. Lines Within Indicator (Units):

Number of G&A non-elective FFCes in the period. Data Definition:

Non-Elective FFCes data are derived from the Monthly Activity Return, which is collected from the NHS. It is collected from providers (both NHS and IS) who provide the data broken down by Commissioner.

Number of first finished consultant episodes (FFCEs) for the G&A specialties (see below) relating to hospital provider spells for which:

- ☐ patient classification = ordinary admission;
- ☐ admission method = emergency admission, maternity admission, other admission (codes 21-83);

Exclude "well babies". These are defined as having admission method = other and neonatal level of care = normal care.

General & Acute specialties;

- ☐ include: 100-192, 300-460, 502, 800-831, 900 and 901

- ☐ exclude: 501, 700-715.

Monthly Activity Return guidance is available here: <http://www.england.nhs.uk/statistics/statistical-work-areas/hospital-activity/monthly-hospital-activity/>

MONITORING Monitoring Frequency:

Monthly Monitoring Data Source:

Monthly Activity Returns

ACCOUNTABILITY What success looks like, Direction, Milestones:

There should be a reduction in the growth of the number of non-elective FFCes. Timeframe/Baseline:

Ongoing

Everyone Counts: Planning for Patients 2014/15 - 2018/19: Technical Definitions for Clinical Commissioning Groups and Area Teams

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## Rationale:

Where clinically appropriate, it is better for patients to be treated or continue their treatment at home or in their community rather than in hospital.

The local NHS should be looking to treat patients in the most clinically appropriate way.

PLANNING REQUIREMENTS Are plans required and if so, at what frequency?

CCG – Yes, monthly for 2014/15 and 2015/16 and annual from 2016/17 to 2018/19 via ProvCom template.

Area Team – Yes, monthly for 2014/15 and 2015/16 and annual from 2016/17 to 2018/19, via ProvCom template.

Please note: Data entered regarding Area Team activity should be based on the activity that is commissioned by an Area Team irrespective of the location of the provider .

For those Area Teams with responsibility for Specialised Commissioning, this will include activity in line with the contractual arrangements i.e all activity based on a provider footprint not a registration basis.

## FURTHER INFORMATION

This information will be used to reconcile with data collected in the finance planning template.

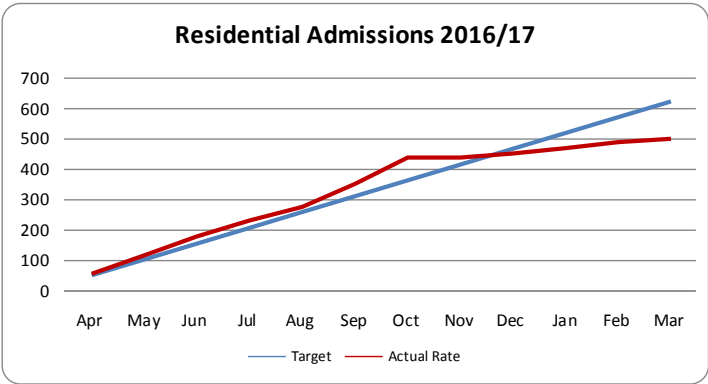
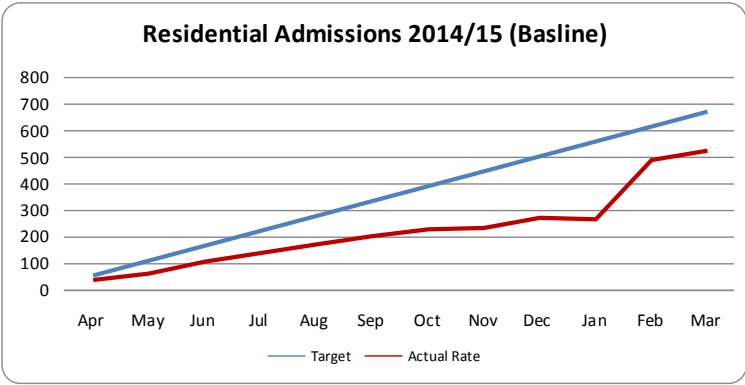
Residential admissions

Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population

	14/15 Baseline	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	16/17
Target	749.2	56	112	168	224	280	336	392	448	504	560	616	672	623.7
Actual Rate	548.8	39.2	63.5	108.1	140.5	172.9	204.0	229.6	235.0	272.9	267.5	490.3	525.5	611.9
Number	389	29	47	80	104	128	151	170	174	202	198	363	389	453
Population	70885	74,029	74,029	74,029	74,029	74,029	74,029	74,029	74,029	74,029	74,029	74,029	74,029	74,029

	16/17	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	16/17
Target	672	52	104	156	208	260	312	364	416	468	520	572	623.7	
Actual Rate		56.7	117.5	179.7	232.3	276.9	352.6	439.0	439.0	452.5	470.0	489.7	500.7	0.0
Number		42	87	133	172	205	261	325	325	335	345	355	364	0
Population	74029	74029	74029	74029	74029	74029	74029	74029	74029	74029	74029	74029	74029	74029

Note: BCF figures and Shropshire Council annual rate figures vary due to use of different population figures



Reablement

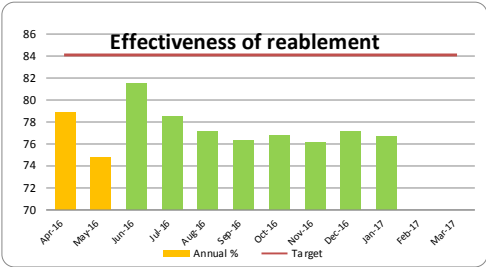
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement

	2013/14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16
Target		80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	80.6	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9	81.9
Annual %	77.4	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	72.4	78.5	79.7	79.5	79.7	80.3	79.5	82.5	83.6	83.1	84.5	84.5	83.8	83.5	83.4	84.0	84.5
Number	120								76	164	243	346	444	552	116	221	336	444	563	673	771	855	948	1068	1184
Denominator	155								105	209	305	435	557	687	146	268	402	534	666	796	920	1024	1137	1272	1402

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	2016/17
Target	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	84.1	
Annual %	78.9	74.8	81.5	78.5	77.1	76.3	76.8	76.1	77.1	76.6	#DIV/0!	#DIV/0!	84.1
Number	116	98	119	333	438	541	644	726	825	909			132
Denominator	147	131	146	424	568	709	839	954	1070	1186			157

79.03226 80.76923 82.30088 80.64516  
98 84 93 275  
124 104 113 341

ASCOF Oct - Dec = 80.6%



**Delayed transfers of care**

Delayed transfers of care (delayed days)  
from hospital per 100,000 population  
(aged 18+).

14/15 Baseline	Q1	Q2	Q3	Q4
Target	919.6	697.1	433	682.2
Actual	735.8	931.9	1121.7	1041.7
Number	1842	2333	2808	2624
Denominator	250337	250337	250337	251983

		Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
Target		387	387	389	388	388	390	470	470	471	382	382	382
Actual		400.6	305.1	342.6	388.4	631.1	497.3	391.1	488.2	662.7	581.0	523.7	500.1
Number		1015	773	868	984	1599	1260	991	1237	1679	1480	1334	1274
Denominator		253356	253356	253356	253356	253356	253356	253356	253356	253356	254742	254742	254742

		Q1 16/17	Q2 16/17	Q3 16/17	Q4 16/17
Target		1163.2	1165.9	1411.1	1146.3
Actual		1048.3	1516.8	1542.1	1604.8
Number		2656	3843	3907	4088
Denominator		253356	253356	253356	254742

**Patient / Service User Experience Metric**

CQC inpatient survey "leaving hospital" measures shown an improvement against the 15/16 position. Patients are asked to score their experience out of 10

2015 score	2016 target	2016 score
6.8	6.9	7.1
10	10	10

**Local Metric**

Local people admitted (unplanned) to Redwoods Hospital with a diagnosis of dementia as a proportion of those with a

Target  
Metric Value  
Numerator  
Denominator

15/16 baseline 16/17

1.4%	1.2%
1.4%	0.0%
44	0
3,139	0