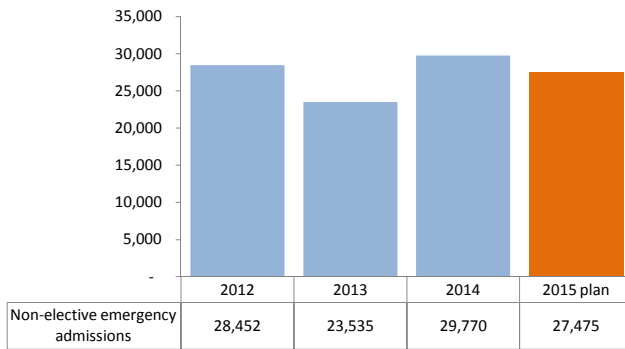


Part 1 - Emergency hospital admissions (pay-for-performance measure)

1

Annual trend



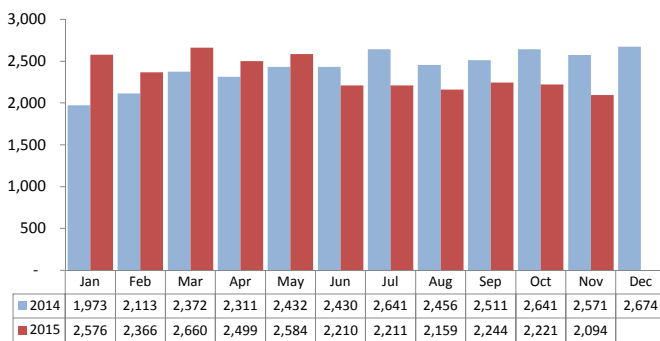
The volume of non-elective emergency admissions rose by 26% in 2014 compared to 2013.

This calculation does not take account of coding changes in ambulatory care, but is measured according to the national BCF metric.

Given the recent increases in emergency admissions, the BCF trajectory for a -3.5% reduction in emergency admissions represents a major challenge.

2

Monthly details



November was the sixth month in a row with a lower number of admissions than the corresponding month in 2014.

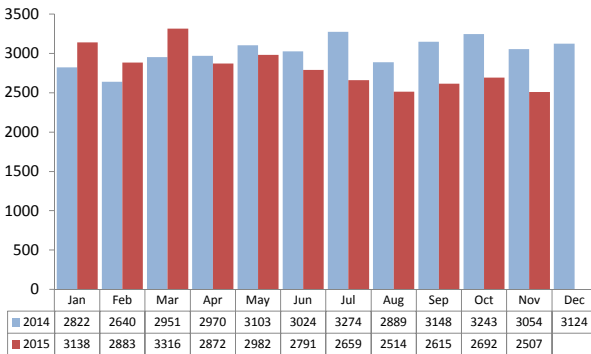
In November, emergency admissions reduced by 18.5% compared to June 2014.

Across the calendar year, there were 6270 fewer admissions in 2015 (Jan-Nov) compared to the previous year, a reduction of -2.4%

Part 2 - broader measure of non-elective emergency activity

Non-elective emergency admissions PLUS ambulatory care

3



Graphs 3 and 4 are included to give a broader context of non-elective activity.

Whereas Graph 2 uses the national measure of non-elective general and acute admissions, sourced from the Monthly Activity Return and mapped to the North Tyneside resident population, Graphs 3 and 4 are sourced from SLAM data, which is based on the CCG registered population, applies business rules, and includes ambulatory care

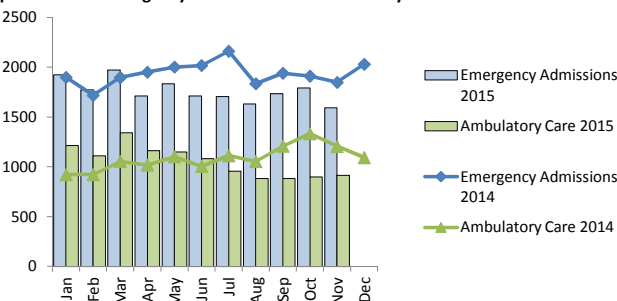
Source: RAIDR Finance & Contracting dashboard, 2015/10/23

Graph 5 shows that both emergency admissions and ambulatory care have fallen since April 2015, from a high point in March. Emergency admissions were below 2014 levels from Apr-July but ambulatory care only fell below 2014 levels in July 2015.

This data does NOT include the category of "Non-Elective Non-Emergency" admissions, which mainly relate to maternity

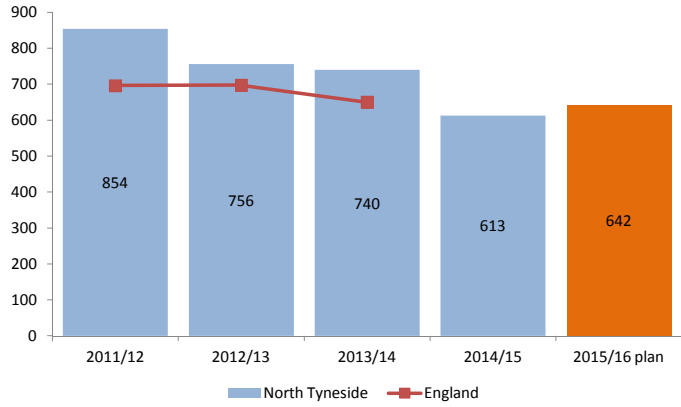
Split between emergency admissions and ambulatory care

4



Permanent admissions to residential care - rate per 100,000 persons aged 65+

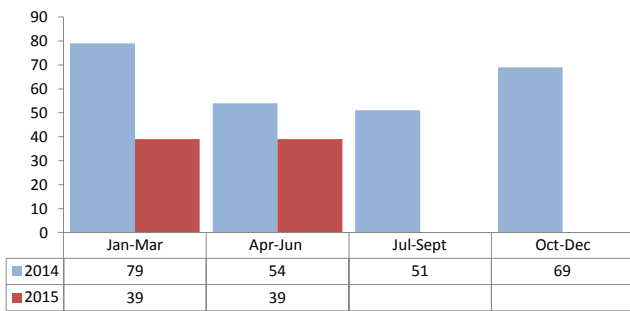
3



Although the rate of permanent admissions to residential care in North Tyneside is above the England average, it is steadily reducing and the 2015/16 rate is well within the BCF target.

4

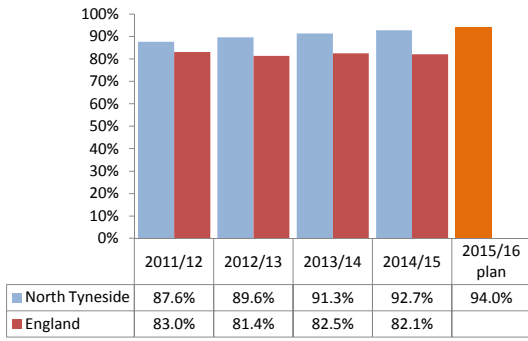
Number of admissions per quarter



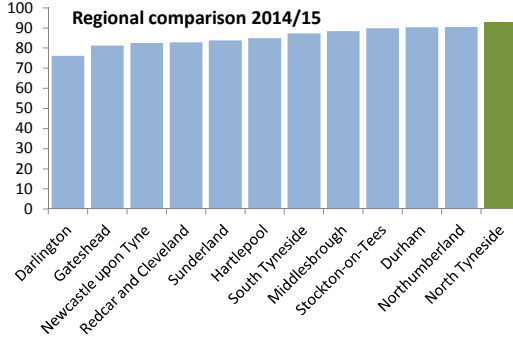
Effectiveness of reablement

5a

ASOCF 2B - % of patients still at home 91 days after reablement



5b

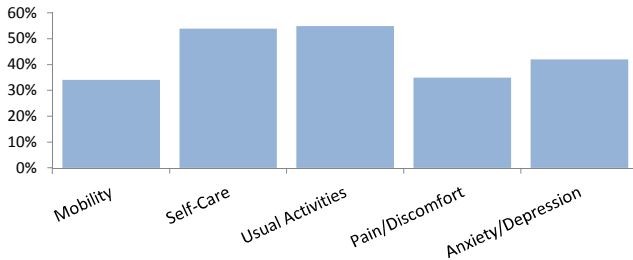


The national measure of “effectiveness of reablement” is the Proportion of older people (aged 65 and over) discharged from hospitals into reablement, who are out of hospital 91 days after the date of their discharge from hospital.

North Tyneside is in the best 25% of performers on this measure. North Tyneside performance this year – 93% is slightly below the increased target of 94%. The North Tyneside performance has been higher than the England average for each of the last five years (Graph 5a) and is the highest in the

6a

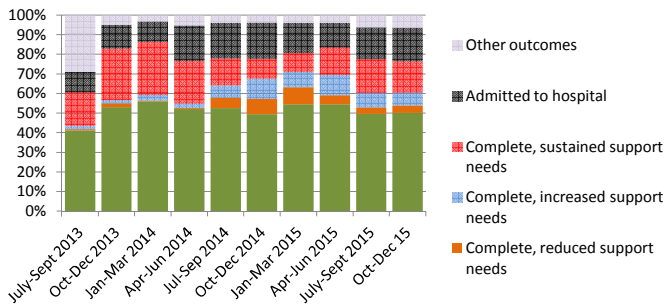
Reablement: % of clients reporting a "better" outcome following reablement (EQ-5D)



To supplement the national measure, we also measure client-reported outcomes using the EQ-5D tool, which allows measurement of the degree of problems associated with mobility; self-care; usual activities' pain & discomfort; and anxiety/depression, both before and after reablement. (Graph 5a)

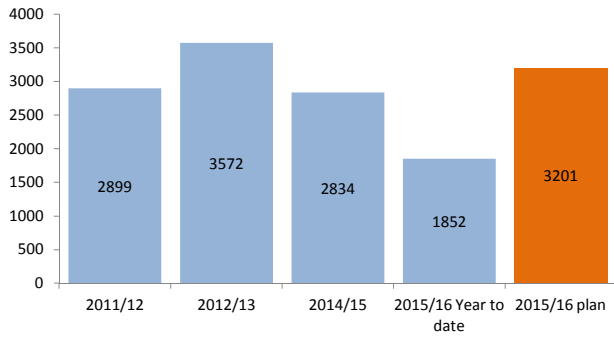
6b

Reablement outcomes - service use



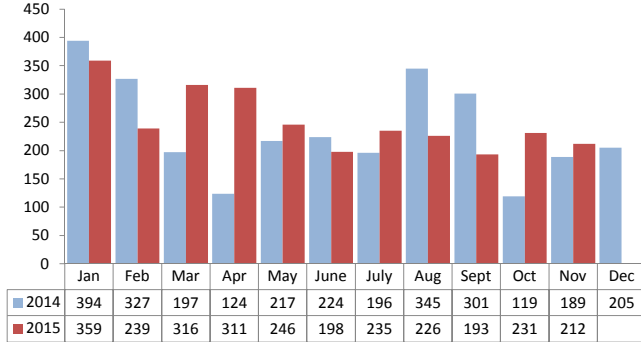
Delayed transfers of care

7 Delayed transfers of care - number of days of delay - annual trend



The rate of delayed transfers in North Tyneside is in the best 25% of HWBs.

8 Monthly details



Due to an increase in delayed transfers in October and November, there was a year-to-date increase of 5.1% , or an extra 133 days of delay.

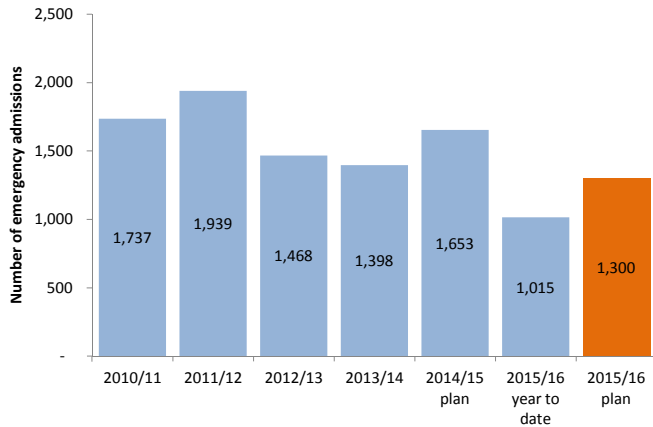
In Nov 2015 there were:

- 35 days of delay at NTW
- Zero delays at Northumbria Healthcare
- 166 days of delay at Newcastle Hospitals

201 days were attributable to the NHS
11 days were attributable to social care
0 days were attributable to both agency

Number of emergency hospital admissions due to falls - patients aged 65+

9

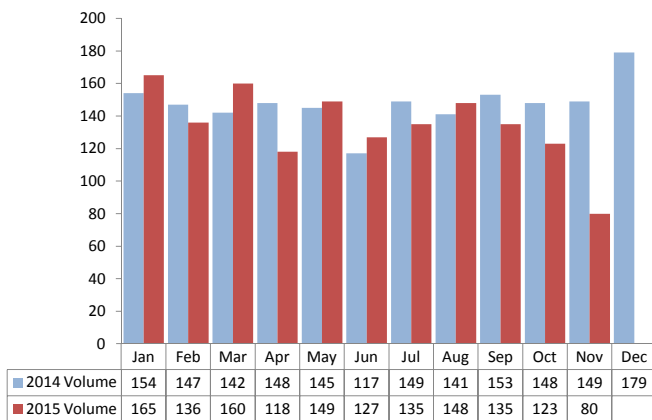


North Tyneside is in the worst 10% of HWBs for the number of emergency admissions due to falls.

Following a reduction in 2012/13 and 2013/14, there was an increase in 2014/15.

A new falls service provided by Northumbria Healthcare commenced in January 2015.

10 Monthly details

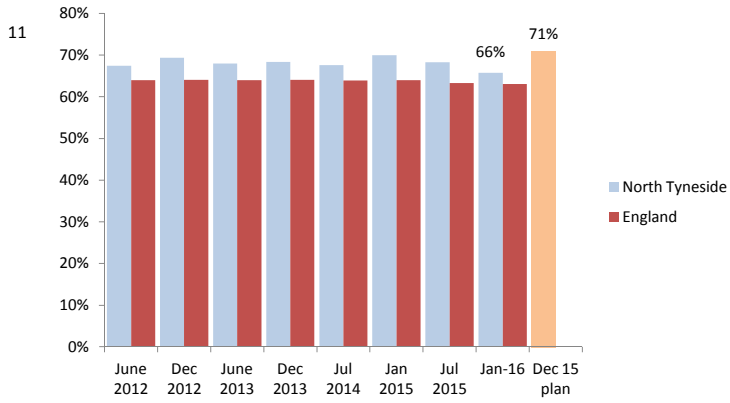


There were 82 fewer admissions due to falls in Apr-Oct 2015, compared to the same period in 2014, which is a 5.7% reduction.

The above calculation does not include data for November - the most recent data available - because that may change when clinical coding is refreshed the following month.

The BCF target is for a 10% reduction.

% of patients who report they have received enough support to manage their long term condition in the last six months



The latest set of data from the GP-Patient Survey shows that the % of patients who report receiving enough support to manage their long term condition has declined to 66% and therefore the target of 71% has not been met.

The North Tyneside position remains above the England average.