

ACP Progress Report

Sheffield Accountable Care Partnership Board

October 2019

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| Author(s): | Kathryn Robertshaw (ACP Deputy Director for Delivery) |
| Sponsor : | Mark Tuckett (Director Sheffield ACP) |
| 1. Purpose | |
| <ul style="list-style-type: none"> a. To provide a detailed assessment of progress against the agreed indicators and measures b. To improve understanding and awareness around key system themes and related experiences | |
| 2. Introduction / Background | |
| <p>In order to determine whether the ACP has achieved its vision and has had the intended impact on the wider health population of the people of Sheffield, a set of key progress indicators were developed. The process included a consultation with representatives from all of the ACP workstreams as well as each of the partner organisations on the proposed indicators and the development of the dashboard. These key indicators are measured against local or national targets, or if no target has been set then the indicator is compared against the national figure. Information on targets can be seen in the glossary.</p> <p>The development of this progress report continues as we work to obtain measures for the remaining areas and the individual workstream outcome measures are finalised.</p> | |
| 3. Is your report for Approval / Consideration / Noting | |
| For noting | |
| 4. Recommendations / Action Required by Accountable Care Partnership | |
| <p>The Board is asked to:</p> <ul style="list-style-type: none"> a. Receive the Integrated Progress Report for October 2019. b. Note the progress standards that are being achieved and the areas highlighted in the executive summary as areas requiring attention | |
| 5. Other Headings | |
| N/A | |
| 6. Are there any Resource Implications (including Financial, Staffing etc)? | |
| N/A | |

| Section | Pg. | Section | Pg. |
|---|-----|---|-----|
| Executive Summary | 1 | 2.10 Blood Pressure | 16 |
| 1.0 Health & Care Outcomes - Population | 2 | 2.11 Patient Activation Measure | 16 |
| 1.1 Under 18 Conception | 2 | 2.12 IAPT Recovery Rate | 17 |
| 1.2 Infant Mortality | 2 | 2.13 CAMHS | 17 |
| 1.3 Smoking during pregnancy | 3 | 2.14 End of life plan | 18 |
| 1.4 Child Development | 3 | 3.0 Service User Experience | 19 |
| 1.5 Obesity: Reception Class | 4 | 3.1 Friends & Family Test | 19 |
| 1.6 Obesity: Year 6 | 4 | 3.2.1 Primary Care - GP Patient Survey | 19 |
| 1.7 Mental Health & Employment | 5 | 3.2.2 Primary Care - PAM Scores | 20 |
| 1.8 Learning Disability & Employment | 5 | 4.0 Workforce Satisfaction | 21 |
| 1.9 Working days lost through sickness | 6 | 4.1.1 Staff Survey – Engagement | 21 |
| 1.10 Self-reported wellbeing | 6 | 4.1.2 Staff Survey – Health & Wellbeing | 21 |
| 1.11 Smoking Prevalence | 7 | 4.2 Health & Wellbeing | 22 |
| 1.12 Life Expectancy Inequality | 7 | 4.3 Vacancy | 22 |
| 1.13 Healthy Life Expectancy Inequality | 8 | 4.4 Collaboration | 23 |
| 1.14 Preventable years of life lost | 8 | 5.0 Financial Sustainability | 24 |
| 1.15 Deaths under 75 years of age | 9 | 5.1 Financial Position | 24 |
| 1.16 Deaths under 75 years of age with mental illness | 9 | 5.2 Projected Position | 24 |
| | | 6.0 ACP Workstreams | TBC |
| 1.17 Suicide rate | 10 | 6.1 Children's & Maternity | TBC |
| 1.18 Alcohol specific deaths | 10 | 6.2 Community, Wellbeing & Social Value | TBC |
| 2.0 Health & Care Outcomes - Service Users | 11 | 6.3 Elective Care | TBC |
| 2.1 A&E 4 hour wait | 11 | 6.4 Long Term Conditions | TBC |
| | | 6.5 Mental Health & Learning Disability | TBC |
| 2.2 A&E Attendances | 11 | 6.6 Primary Care | TBC |
| 2.3 Non Elective Admissions | 12 | 6.7 Urgent & Emergency Care | TBC |
| 2.6 Reablement offered | 14 | | |
| 2.7 Reablement 91 days after discharge | 14 | ACP Dashboard | 26 |
| 2.8 Referral to Treatment | 15 | ACP Dashboard Glossary | 27 |
| 2.9 Cancer Pathways | 15 | | |

Executive Summary

Areas Performing Well

The following areas and measures are performing well:

- a. There has been a significant drop in **smoking prevalence** since 2018, bringing prevalence in Sheffield well under the national average.
- b. **Good work continues on DTOC** with the number of delayed patients being below the target of 45 for 5 weeks in early April and again for week 11/06/19. Slight increases have continued to be effectively managed to ensure lower numbers than the same period last year overall.
- c. The percentage of **cancer patients treated within 2 months** of an urgent GP referral has seen an improvement since the downward trend in 2018/19 (though still below target)
- d. **IAPT** completion and recovery rates are an improving picture – now above target

Areas Requiring Attention

The key areas and measures requiring attention are:

- a. **Suicide rates have been reducing** each year from 2013-15, however there was a slight increase in the last reporting period. With only one data point showing an increase it is impossible to say whether this is the start of a trend. Sheffield remains below the national average.
- b. **A&E four hour waits** are consistently below target apart from at SCH. There was a slightly improved position in this last reporting period.
- c. **Admissions to Care Homes** remains below target, however there has been an upward trend, which if continues will take Sheffield above the set target level.
- d. The percentage of patients starting treatment within **18 weeks of referral** has dropped significantly for Sheffield Children's Hospital.
- e. The percentage of **patients seen within 18 weeks of non-urgent CAMHS** referrals has been falling since Jan-19 and in Aug-19 this was below 75%.

1.0

Health & Care Outcomes - Population

| Metric Description | Sheffield Position | Regional Position (Y&H) | National Position | Trend | Comments & Actions |
|--|---|----------------------------------|-------------------|---|---|
| <div>1.1 Under 18 Conception</div> <p>Rate of conceptions per 1,000 females aged 15-17 in Sheffield.</p> <p>Workstream: Starting & Developing Well</p> | 18.0 | 20.6 | 17.8 | <p>1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017</p> <p>Sheffield Yorkshire and the Humber region England</p> | Conception rates in 15-17 year olds nationally has reduced year on year since 2007. Conception rates in Sheffield have also been reducing but remained higher than the national average. In 2017 these were only slightly greater than the national average with no significant difference. |
| <div>1.2 Infant Mortality</div> <p>Rate of deaths in infants aged under 1 year per 1,000 live births in Sheffield.</p> <p>Workstream: Starting & Developing Well</p> | 4.85 | 4.12 | 3.92 | <p>2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 -03 -04 -05 -06 -07 -08 -09 -10 -11 -12 -13 -14 -15 -16 -17</p> <p>Sheffield Region (Y&H) England</p> | Rate of deaths in infants in Sheffield is higher than the regional and national figures. Rates in Sheffield fluctuate and although did decrease from 2014-16 to 2015-17 still higher than preceding 3 reporting periods. |
| | Target: being corrected Reporting Period: 2017 | Updated: Jun-19 (no new data) | | | |
| | Target: None set Reporting Period: 2015-17 | Updated: Apr-19 (no new data) | | | |

| Metric Description | Sheffield Position | Regional Position (Y&H) | National Position | Trend | Comments & Actions |
|---|---|-------------------------|----------------------------------|---|--|
| <div>1.3 Smoking During Pregnancy</div> <p>Percentage of woman who smoke at time of delivery</p> <p>Workstream: Starting & Developing Well</p> | 12.0% | 14.2% | 10.8% | <p>2010/11 2011/12 2012/13 2013/14 2014/15 2015/16 2016/17 2017/18</p> <p>— Sheffield — Yorkshire and the Humber region — England</p> | Percentage of woman smoking at time of delivery has remained higher in Sheffield than the rest of England since 2010/11 but there is a downward trend nationally. The percentage in Sheffield is lower than the regional percentage and reduced from 2016/17 to 2017/18. |
| | Target: None set Reporting Period: 2017/18 | | Updated: Jun-19 (no new data) | | |
| <div>1.4 Child Development</div> <p>Percentage of children at or above expected level of development in all 5 areas of development at 2 and 1/2 years</p> <p>Workstream: Starting & Developing Well</p> | 87.5% | 86.0% | 83.3% | This metric was first recorded in 2017/18 | The percentage of children at or above the expected development level is higher in Sheffield compared to both the national and regional averages. |
| | Target: None set Reporting period: 2017-18 | | Updated: Apr-19 (no new data) | | |

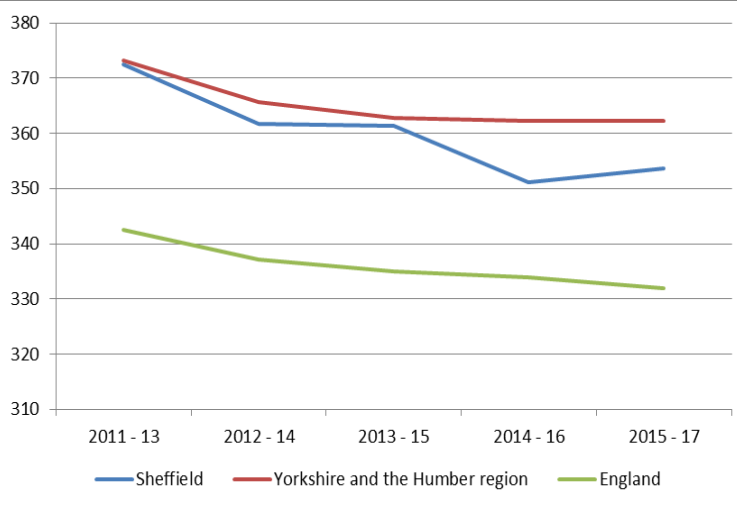
| Metric Description | Sheffield Position | Regional Position (Y&H) | National Position | Trend | Comments & Actions |
|--|---|----------------------------------|-------------------|--|---|
| <div>1.5 Obesity: Reception Class</div> <p>Prevalence of obesity (including severe obesity) among children in Reception (ages 4-5 years)</p> <p>Workstream: Starting & Developing Well</p> | 9.88% | 9.94% | 9.53% | <p>2006/07 2007/08 2008/09 2009/10 2010/11 2011/12 2012/13 2013/14 2014/15 2015/16 2016/17 2017/18</p> <p>Sheffield Region (Y&H) England</p> | The prevalence of obesity in reception was the same in Sheffield as for England in 2016/17 but for 2017/18 it is now slightly greater than the England figure. |
| <div>1.6 Obesity: Year 6</div> <p>Prevalence of obesity (including severe obesity) among children in Year 6 (ages 10-11 years)</p> <p>Workstream: Starting & Developing Well</p> | 21.14% | 20.63% | 20.14% | <p>2006/07 2007/08 2008/09 2009/10 2010/11 2011/12 2012/13 2013/14 2014/15 2015/16 2016/17 2017/18</p> <p>Sheffield Region (Y&H) England</p> | The prevalence of obese children aged 10—11 years is higher in Sheffield than the regional and England averages. Prevalence overall, has increased since 2006-07. |
| | Target: None set Reporting period: 2017/18 | Updated: Apr-19 (no new data) | | | |

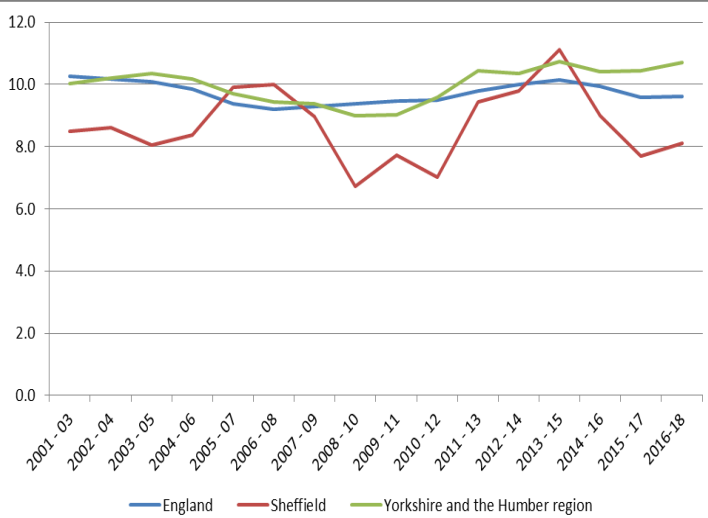
| Metric Description | Sheffield Position | Regional Position (Y&H) | National Position | Trend | Comments & Actions |
|---|--|----------------------------------|-------------------|---|--|
| <p>1.7 Mental Health & Employment</p> <p>Gap in the employment rate between those in contact with secondary mental health services and the overall employment rate</p> <p>Workstream: All Age Mental Health</p> | 64.4% | 64.5% | 68.2% | <p>2011/12 2012/13 2013/14 2014/15 2015/16 2016/17 2017/18</p> <p>Sheffield Region (Y&H) England</p> | <p>The gap in employment is increasing nationally. Although the percentage gap in Sheffield is lower than the national figure it is still high and increased from 2016/17 to 2017/18. This large gap in employment means the Sheffield employment rate for people in contact with secondary mental health services is 6% and the national average is 7%.</p> |
| <p>1.8 Learning Disability & Employment</p> <p>Percentage gap in the employment rate for those in contact with a learning disability and the overall employment rate.</p> <p>Workstream: All Age Mental Health</p> | 66.9 | 66.1 | 69.2 | <p>2011/12 2012/13 2013/14 2014/15 2015/16 2016/17 2017/18</p> <p>Sheffield Yorkshire and the Humber region England</p> | <p>The percentage gap is increasing nationally. Sheffield has had a smaller gap in employment since 2015/16 but the gap remains high and increased from 2016/17 to 2017/18. The large gap means that in the Sheffield employment rate for those in contact with a learning disability is 3.5% which is lower than the national average of 6%.</p> |
| | Target: being corrected Reporting period: 2017/18 | Updated: Jun-19 (no new data) | | | |

| Metric Description | Sheffield Position | Regional Position (Y&H) | National Position | Trend | Comments & Actions | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------------------------------|-------------------|-------|--------------------|------------------|-----------|---------------------------------|---------|-----------|-------|-------|-------|-----------|-------|-------|-------|-----------|-------|-------|-------|-----------|-------|-------|-------|-----------|-------|-------|-------|-----------|-------|-------|-------|-----------|-------|-------|-------|
| <div><div>1.9 Working days lost through sickness</div><p>Percentage of working days lost due to sickness absence.</p><p>Workstream: Workforce and OD</p></div> <div><div>1.5</div><div>1.3</div><div>1.1</div></div> <div><div>Target: None set Reporting period: 2015-17</div><div>Updated: Apr-19 (no new data)</div></div> | <div><table><caption>Percentage of working days lost due to sickness absence</caption><thead><tr><th>Reporting Period</th><th>Sheffield</th><th>Yorkshire and the Humber region</th><th>England</th></tr></thead><tbody><tr><td>2009 - 11</td><td>1.80%</td><td>1.70%</td><td>1.50%</td></tr><tr><td>2010 - 12</td><td>2.00%</td><td>1.70%</td><td>1.60%</td></tr><tr><td>2011 - 13</td><td>2.40%</td><td>1.80%</td><td>1.50%</td></tr><tr><td>2012 - 14</td><td>2.00%</td><td>1.80%</td><td>1.50%</td></tr><tr><td>2013 - 15</td><td>1.40%</td><td>1.40%</td><td>1.30%</td></tr><tr><td>2014 - 16</td><td>1.30%</td><td>1.30%</td><td>1.20%</td></tr><tr><td>2015 - 17</td><td>1.50%</td><td>1.30%</td><td>1.10%</td></tr></tbody></table></div> | | | | | Reporting Period | Sheffield | Yorkshire and the Humber region | England | 2009 - 11 | 1.80% | 1.70% | 1.50% | 2010 - 12 | 2.00% | 1.70% | 1.60% | 2011 - 13 | 2.40% | 1.80% | 1.50% | 2012 - 14 | 2.00% | 1.80% | 1.50% | 2013 - 15 | 1.40% | 1.40% | 1.30% | 2014 - 16 | 1.30% | 1.30% | 1.20% | 2015 - 17 | 1.50% | 1.30% | 1.10% |
| Reporting Period | Sheffield | Yorkshire and the Humber region | England | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2009 - 11 | 1.80% | 1.70% | 1.50% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2010 - 12 | 2.00% | 1.70% | 1.60% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2011 - 13 | 2.40% | 1.80% | 1.50% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2012 - 14 | 2.00% | 1.80% | 1.50% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2013 - 15 | 1.40% | 1.40% | 1.30% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2014 - 16 | 1.30% | 1.30% | 1.20% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2015 - 17 | 1.50% | 1.30% | 1.10% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div><div>1.10 Self-reported wellbeing</div><p>The percentage of respondents scoring 0-4 to the questions "Overall, how satisfied are you with your life nowadays"</p><p>Workstream: all workstreams</p></div> <div><div>5.2%</div><div>5.1%</div><div>4.5%</div></div> <div><div>Target: None set Reporting period: 2016-17</div><div>Updated: Apr-19 (no new data)</div></div> | <div><table><caption>Percentage of people with low life satisfaction</caption><thead><tr><th>Reporting Period</th><th>Sheffield</th><th>Yorkshire and the Humber region</th><th>England</th></tr></thead><tbody><tr><td>2011/12</td><td>7.80%</td><td>7.10%</td><td>6.50%</td></tr><tr><td>2012/13</td><td>7.30%</td><td>6.30%</td><td>5.80%</td></tr><tr><td>2013/14</td><td>6.50%</td><td>6.10%</td><td>5.70%</td></tr><tr><td>2014/15</td><td>6.40%</td><td>5.60%</td><td>4.80%</td></tr><tr><td>2015/16</td><td>5.10%</td><td>4.90%</td><td>4.70%</td></tr><tr><td>2016/17</td><td>5.20%</td><td>5.10%</td><td>4.60%</td></tr></tbody></table></div> | | | | | Reporting Period | Sheffield | Yorkshire and the Humber region | England | 2011/12 | 7.80% | 7.10% | 6.50% | 2012/13 | 7.30% | 6.30% | 5.80% | 2013/14 | 6.50% | 6.10% | 5.70% | 2014/15 | 6.40% | 5.60% | 4.80% | 2015/16 | 5.10% | 4.90% | 4.70% | 2016/17 | 5.20% | 5.10% | 4.60% | | | | |
| Reporting Period | Sheffield | Yorkshire and the Humber region | England | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2011/12 | 7.80% | 7.10% | 6.50% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2012/13 | 7.30% | 6.30% | 5.80% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2013/14 | 6.50% | 6.10% | 5.70% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2014/15 | 6.40% | 5.60% | 4.80% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2015/16 | 5.10% | 4.90% | 4.70% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2016/17 | 5.20% | 5.10% | 4.60% | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

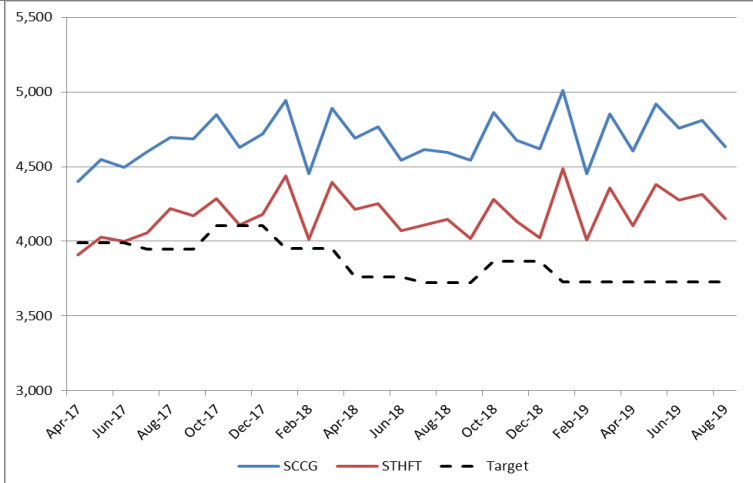
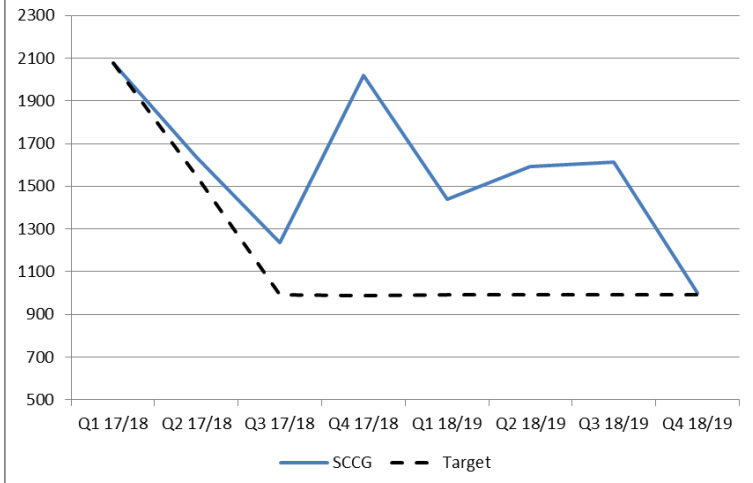
| Metric Description | Sheffield Position | Regional Position (Y&H) | National Position | Trend | Comments & Actions |
|---|---|-------------------------|--------------------------------------|---|---|
| <div>1.11 Smoking Prevalence</div> <p>Prevalence of smoking among persons 18 years and over as a proportion of the population.</p> <p>Workstream: Primary Care & Population Health</p> | 12.5 | 16.7 | 14.4% | <p>2011 2012 2013 2014 2015 2016 2017 2018</p> <p>England Sheffield Yorkshire and the Humber region</p> | Smoking prevalence has decreased nationally since 2011. Sheffield has a similar trend over recent years but has seen a significant decrease in the last year. Smoking prevalence increased from 2016 to 2017. |
| | Target: None set Reporting period: 2018 | | | Updated: Oct-19 | |
| <div>1.12 Life Expectancy Inequality</div> <p>Inequality in life expectancy at birth for females (Slope Index of inequality in years). Difference between most and least deprived areas for males and females.</p> <p>Workstream: all workstreams</p> | Female: 8.3 yrs Male: 9.3 yrs | | Female: 7.4 yrs Male: 9.4 yrs | <p>2010 - 12 2011 - 13 2012 - 14 2013 - 15 2014 - 16 2015 - 17</p> <p>Sheffield (Females) Sheffield (Males) England (Females) England (Males)</p> | The difference in life expectancy at birth for females and males has been increasing nationally. In Sheffield the female gap has also increased and has remained above the national average. For males the gap has decreased and in 2015-17 was slightly lower than the national average. |
| | Target: None set Reporting period: 2015-17 | | | Updated: Apr-19 (no new data) | |
| Metric Description | Sheffield | Regional | National | Trend | Comments & Actions |

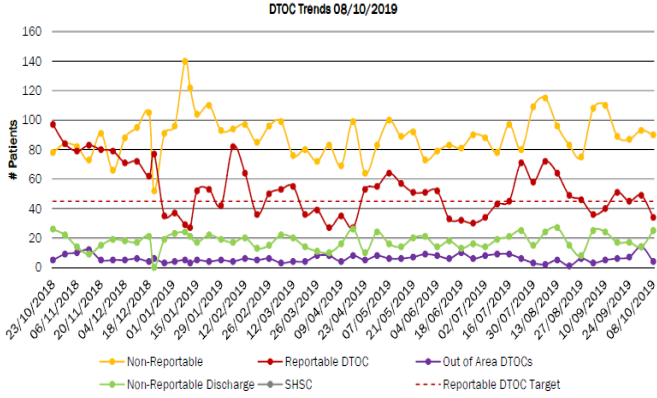
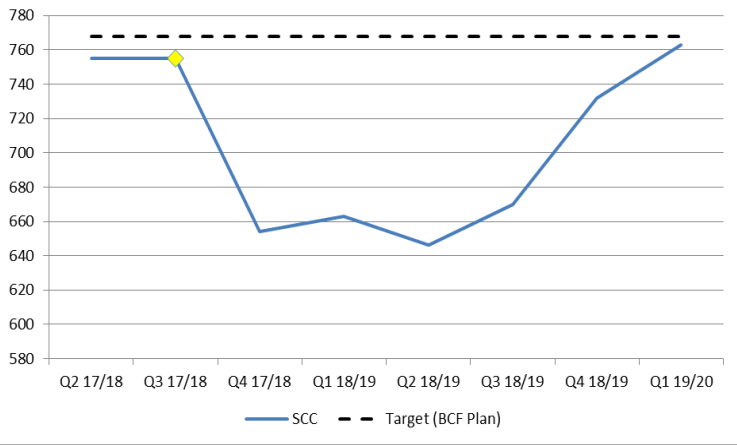
| | | | | | |
|---|---|----------------|----------|--|---|
| | Position | Position (Y&H) | Position | | |
| <div><div>1.13 Healthy Life Expectancy Inequality</div><p>Inequality in healthy life expectancy at birth (Slope Index of inequality in years). Difference between most and least deprived areas.</p><p>Workstram: all workstreams</p></div> | Females: 19.7yrs | | | Only one time point measured | The inequality in healthy life expectancy is greater in females and is greater for both males and females than the inequality in life expectancy for the same time period (see section 1.12). Out of the measured areas the gap in Sheffield was second greatest in the Yorkshire and Humber region, and within the top ten in England for females and males. |
| | Males: 18.8yrs | | | | |
| | Target: None set Reporting period: 2009-13 <i>Updated: Apr-19 (no new data)</i> | | | | |
| <div><div>1.14 Preventable years of life lost</div><p>Mortality rate from causes considered preventable per 100,000 population</p><p>Workstram: all workstreams</p></div> | 193.3 | 197.2 | 181.5 | <p>— Sheffield — Yorkshire and the Humber region — England</p> | The mortality rate from causes considered preventable per 100,000 has been gradually decreasing since 2001-03 but the rate of this decrease has slowed since 2010-12. The rate in Sheffield has consistently been above the national rate since 2004-06. |
| | Target: None set Reporting period: 2015-17 <i>Updated: Apr-19 (no new data)</i> | | | | |
| Metric Description | Sheffield | Regional | National | Trend | Comments & Actions |

| | | | | | |
|---|--|---|----------------------------|--|--|
| <div data-bbox="123 199 313 391"> <p>1.15 Deaths under 75 years of age</p> </div> <p>Directly age-standardised mortality rate for all deaths registered in the respective calendar years, in people aged under 75 per 100,000</p> <p>Workstream: all workstreams</p> | <p>Position</p> <p>354</p> <p>Target: None set Reporting period: 2015-17</p> | <p>Position (Y&H)</p> <p>362</p> <p>Updated: Apr-19 (no new data)</p> | <p>Position</p> <p>332</p> |  <p>The number of deaths per 100,000 in under 75s has decreased since 2011-13 but not steadily in Sheffield. Figures in Sheffield are higher than the England average and increased from 2014-16 to 2015-17.</p> | <p>The number of deaths per 100,000 in under 75s has decreased since 2011-13 but not steadily in Sheffield. Figures in Sheffield are higher than the England average and increased from 2014-16 to 2015-17.</p> |
| <div data-bbox="123 758 313 949"> <p>1.16 Deaths under 75 years of age with mental illness</p> </div> <p>Excess under 75 mortality rate in adults with serious mental illness: ratio of observed to expected mortalities (expressed as a percentage)</p> <p>Workstream: All Age Mental Health</p> | <p>373.6%</p> <p>Target: None set Reporting period: 2014-15</p> | <p>376.9%</p> <p>Updated: Apr-19 (no new data)</p> | <p>370.0%</p> |  <p>The ratio of observed to expected mortalities in under 75 with severe mental illness have increased Nationally. Sheffield figures have reduced since 2009/10 but were still greater than the National figures in 2014/15. Sheffield figures were lower than the regional figures.</p> | <p>The ratio of observed to expected mortalities in under 75 with severe mental illness have increased Nationally. Sheffield figures have reduced since 2009/10 but were still greater than the National figures in 2014/15. Sheffield figures were lower than the regional figures.</p> |
| Metric Description | Sheffield | Regional | National | Trend | Comments & Actions |

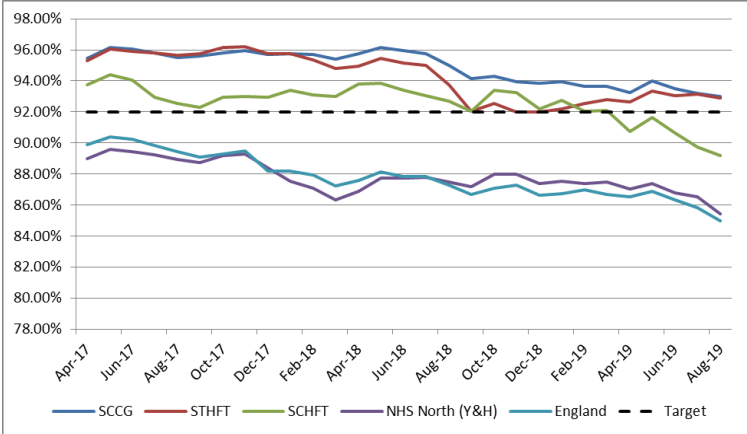
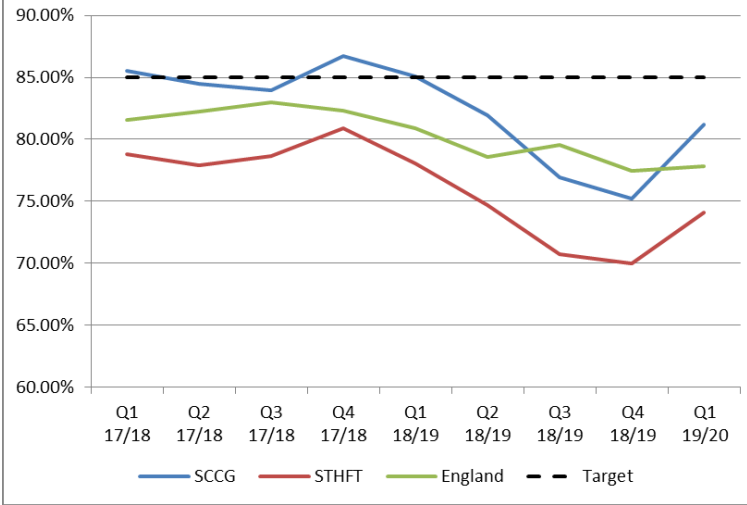
| | Position | Position (Y&H) | Position | | |
|--|----------|----------------|----------|--|---|
| <div>1.17 Suicide Rates</div> <p>Number of deaths from suicide and injury of undetermined intent registered in the respective calendar years per 100,000</p> <p>Workstream: All Age Mental Health</p> | 8.1 | 10.7 | 9.6 |  <p>Target: None set Reporting period: 2016/2017 <i>Updated: Oct-19</i></p> | <p>Suicide rates have remained around 10 per 100,000 nationally with fluctuations above and below. The Figure in Sheffield also fluctuates above and below the national average. Suicide rates have fallen in Sheffield since 2013-15 but in the last reporting period have shown a slight increase. With only one data point it is impossible to say whether this is the start of a trend.</p> |
| <div>1.18 Alcohol specific deaths</div> <p>Deaths from alcohol-specific conditions, all ages, directly age-standardised rate per 100,000 population (standardised to the European standard population)</p> <p>Workstream: Primary Care & Population Health</p> | 15.40 | 12.36 | 10.63 |  <p>Target: None set Reporting period: 2015-17 <i>Updated: Apr-19 (no new data)</i></p> | <p>The rate of alcohol specific deaths in Sheffield has risen since 2010 compared to the national figure which has remained similar.</p> |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|---|---------------|--|-------|-------|------|-------------------|-------|--|
| <div>2.1 A&E four hour wait</div> <p>Percentage of patients seen/treated within 4 hours of arrival in A&E Workstream: Urgent & Emergency Care</p> | | 87 | 98.25 | 84.36 | | 87.63 | | SCCG figure consistently below A&E 4 hour wait target but typically better than national figure. SCH consistently achieves target whereas STH does not. Percentage seen within 4 hours at STH dropped from Mar-19 to Apr-19 to lowest point since Feb-18. Lower than both Apr-2018 and 2017. Starting to see an improvement in this reporting period |
| <div>2.2 A&E attendance</div> <p>Number of all types of attendances at A&E Workstream: Urgent & Emergency Care</p> | | 17576 | 3945 | 19453 | | | | <p>Number of A&E attendances has been above target for SCCG since Dec-17. Figures dropped to below target this month.</p> <p><i>NB. SCCG number of attendances underestimated by the amount of WIC data from STH (c.6-7k).</i></p> |
| | Target: 95% | Reporting period: Aug -19 Updated: Oct19 | | | | | | |
| | Target: 17729 | Reporting period: Aug 19 Updated: Oct-19 | | | | | | |
| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |

| | | | | | | | | |
|---|--|------|-----|-----|------|-------------------|--|--------------------|
| <div>2.3 Non Elective Admissions</div> <p>Number of non-elective admissions.</p> <p>Workstream: Urgent & Emergency Care</p> | <div>4634</div> <div>4154</div> | | | | | |  <p>The total number of non-elective admissions for SCCG is consistently above our target.</p> | |
| | Target: 3726 Reporting period: Aug 19 <i>Updated: Oct 19</i> | | | | | | | |
| <div>2.4.1 Delayed transfers of care - Days</div> <p>DTOC - Delayed Days (rate per 100,000 18+ population)</p> <p>Workstream: Urgent and emergency care</p> | <div>1000.2</div> | | | | | |  <p>The delayed days rate per 100,000 is consistently above target level since Q1 17/18. The rate steadily increased from Q1 to Q3 18/19 but dramatically dropped for Q4 18/19. The figure being slightly above the target.</p> | |
| | Target: 992.70 Reporting period: Q4 18/19 <i>Updated: Jun-19</i> <i>No new data</i> | | | | | | | |
| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |

| | | | |
|--|--|--|---|
| <p>2.4.2 Delayed transfers of care - Patients</p> <p>DTOC – Delayed patients</p> <p>Workstream: Urgent and emergency care</p> | <div> <div></div> <div></div> <div></div> <div>34</div> <div></div> <div></div> </div> <div> Target: 45 Reporting Period: 08.10.19 Updated: Oct-19 </div> |  <p>DTOC Trends 08/10/2019</p> <p>The chart displays the number of patients over time from 23/10/2018 to 08/10/2019. The Y-axis represents the number of patients (0 to 160). The X-axis shows dates. The legend includes: Non-Reportable (yellow line with diamonds), Reportable DTOC (red line with squares), Out of Area DTOCs (purple line with circles), Non-Reportable Discharge (green line with triangles), SHSC (grey line with crosses), and Reportable DTOC Target (dashed red line). The Reportable DTOC line fluctuates significantly, often exceeding the target line.</p> | <p>The number of reportable delayed patients fluctuates but has achieved target or been close to the target for most of 2019. For 08/10/19 this dropped below target.</p> |
| <p>2.5 Admissions to care homes</p> <p>Number of admissions to care homes per 100,000 population.</p> <p>Workstream: Ageing Well</p> | <div> <div></div> <div></div> <div></div> <div>763</div> <div></div> <div></div> </div> <div> Target: 767.70 Reporting period: Q1 19/20 Updated: Oct-19 </div> |  <p>The chart shows the number of admissions to care homes per 100,000 population over time from Q2 17/18 to Q1 19/20. The Y-axis ranges from 580 to 780. The X-axis shows quarters. The legend includes: SCC (solid blue line) and Target (BCF Plan) (dashed black line). The SCC line starts at approximately 760 in Q2 17/18, drops to around 655 in Q4 17/18, and then rises to about 765 in Q1 19/20, remaining below the target line.</p> | <p>The number of admissions to care homes, per 100,000 is consistently below target but has increased from Q2 18/19.</p> <p>NB No data available for Q3 17/18</p> |

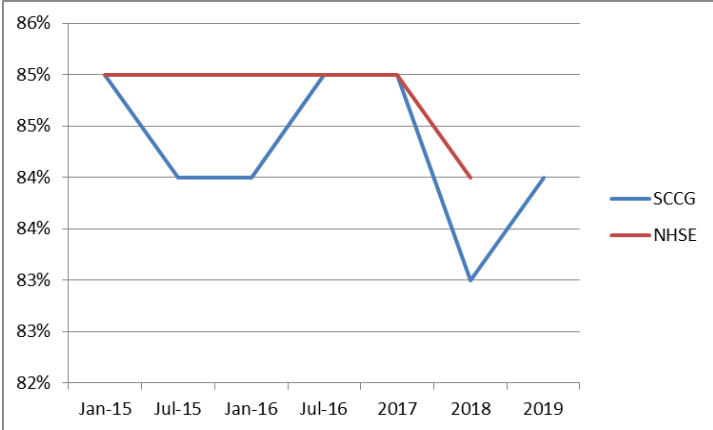
| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|--|------|------|-----|-----|------|-------------------|--|---|
| <p>2.6 Reablement offered</p> <p>The proportion of older people (65+) offered reablement services following discharge from hospital</p> <p>Workstream: Ageing Well</p> | 8.0% | | | | | 2.9% | <p>Target: None set Reporting period: 2017-18 <i>Updated: Apr-19 (no new data)</i></p> | <p>The proportion of people aged 65 and over offered reablement in Sheffield fluctuates but has been greater than the national average since 2014-15 and has been increasing overall. The number increased from 2016/17 to 2017/18.</p> |
| <p>2.7 Reablement 91 days after discharge</p> <p>The proportion of older people (65+) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services</p> <p>Workstream: Ageing Well</p> | 83.1 | | | | | | <p>Target: 80.0% Reporting period: Q1 19/20 <i>Updated: Oct 19</i></p> | <p>The proportion of older people still at home after 91 days from discharge has decreased each quarter from Q1 to Q1 19/20. The proportion of people still at home is consistently above the target and for each quarter in 2018/19 was higher than the previous year.</p> |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|---|-----|-------|-------|-------|------|-------------------|---|--|
| <p>2.8 Referral to treatment</p> <p>Patients starting treatment within 18 weeks of referral (%).</p> <p>Workstream: Elective care.</p> | | 92.97 | 89.20 | 92.90 | | 84.98 |  | The percentage of patients starting treatment within 18 weeks of referral is above target for SCCG. The figure for SCH is only slightly above the target for this period. For SCH the percentage has dropped below target. |
| Target: 92% Reporting period: Aug 19 19 Updated: Oct 19 | | | | | | | | |
| <p>2.9 Cancer Pathways</p> <p>The percentage of patients treated within 2 months (62 days) of an urgent GP referral.</p> <p>Workstream: Elective care.</p> | | 81.18 | | 74.06 | | 77.83 |  | The overall SCCG percentage of cancer patients treated within 2 months of urgent GP referral has been below target for the whole of the previous year. The first quarter of 2019 however, saw an upward trend |
| Target: 85% Reporting Period: Q1 19/20 Updated: Oct-19 | | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-----------|--------------|---------|-----|------|-------------------|---|--------------------|-----------|--------------|---------|---------|------|------|------|---------|------|------|------|---------|------|------|------|---------|------|------|------|---------|------|------|------|--|
| <div>2.10 Blood Pressure</div> <p>The percentage of patients with hypertension in whom the last blood pressure reading (measured in the previous 12 months) is 150/90 mmHg or less</p> <p>Workstream: Ageing Well</p> | | 80.53 | | | | 79.13 | <table><caption>Controlled Blood Pressure Data (2013/14 - 2017/18)</caption><thead><tr><th>Year</th><th>Sheffield</th><th>Region (Y&H)</th><th>England</th></tr></thead><tbody><tr><td>2013/14</td><td>80.5</td><td>80.5</td><td>79.5</td></tr><tr><td>2014/15</td><td>81.5</td><td>81.5</td><td>80.8</td></tr><tr><td>2015/16</td><td>81.0</td><td>81.0</td><td>80.2</td></tr><tr><td>2016/17</td><td>81.0</td><td>81.2</td><td>80.0</td></tr><tr><td>2017/18</td><td>81.0</td><td>80.2</td><td>79.2</td></tr></tbody></table> | Year | Sheffield | Region (Y&H) | England | 2013/14 | 80.5 | 80.5 | 79.5 | 2014/15 | 81.5 | 81.5 | 80.8 | 2015/16 | 81.0 | 81.0 | 80.2 | 2016/17 | 81.0 | 81.2 | 80.0 | 2017/18 | 81.0 | 80.2 | 79.2 | The percentage of hypertension patients with controlled blood pressure at 150/90 or less is consistently slightly better in Sheffield compared to England. This percentage has gradually and slightly been decreasing since 2014/15. |
| Year | Sheffield | Region (Y&H) | England | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2013/14 | 80.5 | 80.5 | 79.5 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2014/15 | 81.5 | 81.5 | 80.8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2015/16 | 81.0 | 81.0 | 80.2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2016/17 | 81.0 | 81.2 | 80.0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2017/18 | 81.0 | 80.2 | 79.2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div>2.11 Patient Activation Measure</div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|---|-----|-------|-------|-----|-------|-------------------|---|---|
| <div>2.12 IAPT Recovery Rate</div> <p>IAPT percentage completing treatment and moving to recovery.</p> <p>Workstream: All Age Mental Health</p> | | 50.55 | | | 51.09 | | <p>Target: 50% Reporting period: Q1 19/20 Updated: Oct-19</p> | The percentage of IAPT patients completing treatment and moving to recovery was a great deal below the target in Q3 2017-18 but this was brought above/around the target in through 17/18 and 18/19. The first quarter of 19/10 has seen the highest position for a significant period. |
| <div>2.13 CAMHS</div> <p>Percentage of patients seen for first appointment within 18 weeks of CAMHS non-urgent referral.</p> <p>Workstream: All Age Mental Health</p> | | | 74.62 | | | | <p>Target: 92% Reporting period: Aug-19 Updated: Oct 19</p> | The percentage of patients seen within 18 weeks of non-urgent CAMHS referral has been falling since Jan-19 and from Apr-19 has been below target. |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|---|-----|------|-----|-----|------|-------------------|-------|--------------------|
| <div>2.14 End of Life Plan</div> <p>Percentage of people who die with an end of life plan.</p> <p>Workstream: Ageing Well</p> | | | | | | | | |
| | | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|---|---|------|-----|-----|------|-------------------|---|---|
| <p>3.1 Friends & Family Test</p> <p>Average number of respondents who would recommend services to a friend or family member.</p> <p>Workstreams: all workstreams</p> | - | - | - | - | - | - | Reporting mechanism under review | Friends and Family Test reporting section under review. Will be updated for next quarterly report. |
| <p>3.2.1 GP Patient Survey</p> <p>The percentage of people who described their overall experience of their GP practice as good</p> <p>Workstream: Primary care & population health</p> | | 84% | | | | 83% |  | <p>The percentage of people rating the overall experience at their GP practice as good is typically either the same as or 1% below the national average. Sheffield figures remain consistent around 83-85%.</p> |
| | <p>Target: 85%</p> <p>Reporting Period: Aug 2019</p> <p>Updated: Oct-19</p> | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|-----------------------------|-----|------|-----|-----|------|-------------------|-------|--------------------|
| <div>3.2.2 PAM Scores</div> | | | | | | | | |
| | | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|--|--|------|-----|-----|------|-------------------|-------|--|
| <div>4.1.1 Staff Survey - Engagement</div> <p>Overall organisational position for staff engagement from staff survey</p> <p>Workstream: Workforce & OD</p> | | 7.1 | 7.1 | 7.0 | 6.7 | 7.0 CCGs 7.1 | | <p>All organisations apart from SHSC above or same as their benchmark average for staff engagement at last reporting period. SCH consistently above since 2014. SHSC below since 2015. SCCG has been the same since 2017. SCH and SHSC figures improved in 2018 compared to 2017 whereas STH dropped.</p> <p><i>NB: SCC data not comparable with NHS data.</i></p> |
| | Target: None set Reporting period: 2018 <i>Updated: Apr-19 (no new data)</i> | | | | | | | |
| <div>4.1.2 Staff Survey – Health & Wellbeing</div> <p>Overall organisational position for staff health & wellbeing from staff survey</p> <p>Workstream: Workforce & OD</p> | | 6.5 | 5.9 | 5.9 | 5.8 | 5.9 CCGs 6.5 | | <p>Overall position for staff health & wellbeing at SCCG has been dropping since 2015 but has remained consistent with benchmark. STH and SCH have remained same or above benchmark since 2015 and 2016 respectively but SHSC has been below since 2017.</p> <p><i>NB: SCC data not comparable with NHS data.</i></p> |
| | Target: None set Reporting period: 2018 <i>Updated: Apr-19 (no new data)</i> | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|---|-----|------|------|------|------|-------------------|---|--|
| <div>4.2 Health & Wellbeing</div> <p>Sickness absence rate percentage</p> <p>Workstream: Workforce & OD</p> | TBC | 3.35 | 4.46 | 4.74 | 6.84 | 4.77 | <p>Target: None set Reporting period: Jan-19</p> <p>Updated: Jun-19 No new data</p> | All sickness rates are lower than the national figure apart from SHSC which consistently has higher sickness rates than other organisations. Sickness rates in Jan-19 are comparable to rates in Jan-18. |
| <div>4.3 Vacancy</div> <p>Vacancy rate across all organisations</p> <p>Workstream: Workforce & OD</p> | | | | | | | | |

| Metric Description | SCC | SCCG | SCH | STH | SHSC | National Position | Trend | Comments & Actions |
|--|-----|------|-----|-----|------|-------------------|-------|--------------------|
| <div><div>4.4 Integration</div><div>Neighbourhoods MDT collaboration</div></div> | | | | | | | | |
| | | | | | | | | |

| Metric Description | Individual Measure | £'m | Trend | Comments & Actions | | | | | | | | | | | | | | | | | | | | | |
|---|---|-----------------|---|--|------------------|------------------|------------------|------------------|-----------------|------------------|---------|------|------|------|------|------|-------|------------------|-----|-----|-----|------|------|------|--|
| <div>5.1 2019/20 Financial Position</div> <p>A combined organisational year to date financial position</p> <p>()= deficit</p> | Planned Outturn | 4.4 | Combined position was not recorded in 2018/19 until Quarter Two | Business as usual outturned better at Quarter One but was unable to offset the full impact of underperformance against savings targets resulting in a £0.5m combined deficit position. | | | | | | | | | | | | | | | | | | | | | |
| | Actual Outturn | 4.9 | | | | | | | | | | | | | | | | | | | | | | | |
| | Outturn Variance | 0.5 | | | | | | | | | | | | | | | | | | | | | | | |
| | Planned Savings | 22 | | | | | | | | | | | | | | | | | | | | | | | |
| | Actual Savings | 17.4 | | | | | | | | | | | | | | | | | | | | | | | |
| | Savings Variance | 4.6 | | | | | | | | | | | | | | | | | | | | | | | |
| | Reporting period: Q1 2019/20 Updated: Oct-19 | | | | | | | | | | | | | | | | | | | | | | | | |
| <div>5.2 2019/20 Forecast Position</div> <p>A combined organisational projection of outturn and required savings.</p> <p>()= deficit</p> | 2019/20 Planned Outturn | 0.6 | <table><thead><tr><th></th><th>Planned Outturn</th><th>Forecast Outturn</th><th>Outturn Variance</th><th>Savings Planned</th><th>Savings Outturn</th><th>Savings Variance</th></tr></thead><tbody><tr><td>2018/19</td><td>12.0</td><td>42.0</td><td>30.0</td><td>80.0</td><td>78.0</td><td>(2.0)</td></tr><tr><td>2019/20 Forecast</td><td>0.6</td><td>1.7</td><td>1.1</td><td>78.9</td><td>63.8</td><td>15.1</td></tr></tbody></table> | | Planned Outturn | Forecast Outturn | Outturn Variance | Savings Planned | Savings Outturn | Savings Variance | 2018/19 | 12.0 | 42.0 | 30.0 | 80.0 | 78.0 | (2.0) | 2019/20 Forecast | 0.6 | 1.7 | 1.1 | 78.9 | 63.8 | 15.1 | Final agreed plans assume a £0.6m planned surplus. The Council have provided £11m non-recurrent support from central reserves into business as usual planning to bring required savings down to £79m across the system. Current planning assumes that business as usual underspends will offset the underperformance against required savings targets. |
| | | Planned Outturn | | Forecast Outturn | Outturn Variance | Savings Planned | Savings Outturn | Savings Variance | | | | | | | | | | | | | | | | | |
| | 2018/19 | 12.0 | | 42.0 | 30.0 | 80.0 | 78.0 | (2.0) | | | | | | | | | | | | | | | | | |
| | 2019/20 Forecast | 0.6 | | 1.7 | 1.1 | 78.9 | 63.8 | 15.1 | | | | | | | | | | | | | | | | | |
| | 2019/20 Forecast Outturn | 1.7 | | | | | | | | | | | | | | | | | | | | | | | |
| | 2019/20 Forecast Outturn Variance | 1.1 | | | | | | | | | | | | | | | | | | | | | | | |
| | 2019/20 Savings Planned | 78.9 | | | | | | | | | | | | | | | | | | | | | | | |
| Forecast Savings Outturn | 63.8 | | | | | | | | | | | | | | | | | | | | | | | | |
| Forecast Savings Variance | 15.1 | | | | | | | | | | | | | | | | | | | | | | | | |
| Reporting period: June-19 Updated: Jun-19 | | | | | | | | | | | | | | | | | | | | | | | | | |

Sheffield Accountable Care Partnership

ACP Dashboard
14th October 2019

Health & Care Outcomes - Population

| | | Reporting Period | Target | Sheffield Position | Regional Position | National Position |
|--|---|------------------|--------|--------------------|-------------------|-------------------|
| Under 18 Conception | Under 18 conception rate per 100,000 population | 2017 | TBC | 18.0 | 20.6 | 17.8 |
| Infant Mortality | Infant Mortality rate per 100,000 population | 2015 - 17 | | 4.85 | 4.12 | 3.32 |
| Smoking during pregnancy | Smoking status at time of delivery | 2017-18 | | 12.0% | 14.2% | 10.8% |
| Child Development | % of children at or above expected level of development in all 5 areas of development at 2.1/2 years | 2017/18 | | 87.5% | 86.0% | 83.3% |
| Prevalence of obesity Reception Class | % of children in reception classified as obese by PCH | 2017/18 | | 9.88% | 9.94% | 9.53% |
| Prevalence of obesity Year 6 | % of children in Year 6 classified as obese by PCH | 2017/18 | | 21.1% | 20.6% | 20.1% |
| Mental Health & Employment | Gap in the employment rate between those in contact with secondary mental health services and the overall employment rate | 2017/18 | TBC | 64.4 | 64.5 | 68.2 |
| Learning Disability & Employment | Percentage point gap in the employment rate for those in contact with a learning disability and the overall employment rate | 2017/18 | TBC | 66.9 | 66.1 | 69.2 |
| Working days lost through sickness | % working days lost due to sickness absence | 2015 - 17 | | 15 | 13 | 11 |
| Self-reported wellbeing | % People reporting low life satisfaction | 2016/17 | | 5.2% | 5.1% | 4.5% |
| Smoking Prevalence | Smoking prevalence in adults - current smokers | 2017 | | 17.0% | 17.0% | 14.9% |
| Life Expectancy Inequality | Inequality in life expectancy at birth. Difference between most and least deprived areas for... | 2015-17 | | 8.3 yrs | | 7.4 yrs |
| Healthy Life Expectancy Inequality | Inequality in healthy life expectancy at birth. Difference between most and least deprived areas for... | 2015-17 | | 9.3 yrs | | 9.4 yrs |
| Preventable years of life lost | Mortality rate from causes considered preventable per 100,000 population | 2015 - 17 | | 193.3 | 197.2 | 181.5 |
| Deaths under 75 years of age | Under 75 mortality rate (all causes) | 2015 - 17 | | 354 | 362 | 332 |
| Deaths under 75 years of age with mental illness | Excess under 75 mortality rate in adults with serious mental illness | 2014/15 | | 373.6 | 376.9 | 370.0 |
| Suicide rate | Suicide rate over 100,000 population | 2016-2017 | | 8.1 | 10.7 | 9.6 |
| Alcohol specific deaths | Alcohol specific mortality rate per 100,000 population | 2015 - 17 | | 15.4 | 12.38 | 10.63 |

| Key | | |
|----------------------------------|-------|-----------------|
| Compared with National Benchmark | Green | Same, or Better |
| | Red | Worse |
| | Grey | Not Compared |

| Key | | |
|--------------------|-------|--------------|
| Target Achievement | Green | Achieved |
| | Red | Not Achieved |
| | Grey | No Target |

Health & Care Outcomes - Service Users

| | | Reporting Period | Target | SCC | SCCG | SCH | STH | SHSC | National Position |
|---------------------------|--|------------------|--------|-------|--------|--------|--------|--------|-------------------|
| A&E | A&E 4 hour wait % | Aug-19 | 95% | | 87.00% | 98.25% | 84.36% | | 87.63% |
| A&E Attendances | Number of all types of attendances at A&E | Aug-19 | 17,729 | | 17,576 | 3,945 | 19,453 | | |
| Non Elective Admissions | Number of non-elective admissions | Aug-19 | 3,726 | | 4,634 | | 4,154 | | |
| Delayed transfers of care | Delayed Days (rate per 100,000 18+ population) | Q4 18/19 | 992.7 | | 1000.2 | | | | |
| | Delayed patients | 08.10.19 | 45 | | | | 34 | | |
| Admissions to care homes | Number of admissions to care homes per 100,000 population | Q119/20 | 767.7 | 763 | | | | | |
| Reablement | Proportionate of people offered reablement | 2017-18 | | 8.0% | | | | | 2.9% |
| | Proportionate of people still at home 91 days after discharge | Q119/20 | 80% | 83.0% | | | | | |
| Referral to Treatment | All patients wait less than 18 weeks for treatment to start | Aug-19 | 92% | | 92.97% | 89.20% | 92.90% | | 84.98% |
| Cancer Pathways | The percentage of patients treated within 2 months (62 days) of an urgent GP referral | Q119/20 | 85% | | 81.16 | | 74.08 | | 77.83 |
| Blood Pressure | The percentage of patients with hypertension in whom the last blood pressure reading (measured in the previous 12 months) is 150/90 mmHg or less | 2017/18 | | | 80.53% | | | | 79.13% |
| PAM | Patient Activation Measure score | | | | | | | | |
| IAPT Recovery Rate | IAPT % completing treatment and moving to recovery | Q119/20 | 50% | | 50.55% | | | 51.09% | |
| CAMHS | Percentage of patients seen for first appointment within 18 weeks of CAMHS non-urgent referral | Aug-19 | 92% | | | 74.62% | | | |
| End of life plan | % of people who die with an end of life plan | | | | | | | | |

Service User Experience

| | | Reporting Period | Target | SCC | SCCG | SCH | STH | SHSC | National Position |
|-----------------------|--|------------------|--------|-----|------|-----|-----|------|-------------------|
| Friends & Family Test | Average number of respondents who would recommend services to a friend or family member | Q119/20 | | | 81% | 90% | 92% | 62% | |
| Primary Care | GP patient Survey - The percentage of people who described their overall experience of their GP practice as good | 2018 | 85% | | 84% | | | | 83% |
| | PAM scores | | | | | | | | |

Workforce Satisfaction

| | | Reporting Period | Target | SCC | SCCG | SCH | ST | SHSC | Nat |
|--------------------|--|------------------|--------|-----|------|------|-----|------|-----|
| Staff Survey | Overall organisational position for staff engagement | 2018 | | | 7.1 | 7.1 | 7.0 | 6.7 | 7.0 |
| | Overall organisational position for staff health & wellbeing | 2018 | | | 6.5 | 5.9 | 5.9 | 5.8 | 5.9 |
| Health & Wellbeing | Sickness % | Jan-19 | | | 3.35 | 4.46 | 5 | 6.84 | 4.8 |
| Vacancy | Vacancy rate across all organisations | | | | | | | | |
| Integration | Neighbourhoods MDT collaboration | | | | | | | | |

Financial Sustainability

| | | Reporting Period | £'m |
|----------------------------|-----------------------------------|------------------|--------|
| 2019/20 Financial Position | Planned Outturn | 2019/20 | (4.4) |
| | Actual Outturn | 2019/20 | (4.9) |
| | Outturn Variance | 2019/20 | (0.5) |
| | Planned Savings | 2019/20 | 22.0 |
| | Actual Savings | 2019/20 | 17.4 |
| Projected Position | Savings Variance | 2019/20 | (4.6) |
| | 2019/20 Planned Outturn | Oct-19 | 0.6 |
| | 2019/20 Forecast Outturn | Oct-19 | 1.7 |
| | 2019/20 Forecast Outturn Variance | Oct-19 | 1.1 |
| | 2019/20 Daving Planned Forecast | Oct-19 | 78.9 |
| | 2019/20 Savings Outturn Forecast | Oct-19 | 63.8 |
| | 2019/20 Savings Variance | Oct-19 | (15.1) |

() = deficit

ACP Dashboard Glossary

| Health & Care Outcomes - Population | | Measure and target sources |
|--|--|--|
| Under 18 Conception | Under 18 conception rate per 100,000 population | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Infant Mortality | Infant Mortality rate per 100,000 population | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Smoking during pregnancy | Smoking status at time of delivery | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Child Development | % of children at or above expected level of development in all 5 areas of development at 2 1/2 years | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Prevalence of obesity: Reception Class | % of children in reception classified as obese by PCH | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Prevalence of obesity: Year 6 | % of children in Year 6 classified as obese by PCH | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Mental Health & Employment | % Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate | Data from Finger tips developed by Public Health England & NHS Digital No target but compared with national average |
| Learning Disability & Employment | % Gap in the employment rate for those in contact with a learning disability and the overall employment rate | Data from Finger tips developed by Public Health England & NHS Digital No target but compared with national average |
| Working days lost through sickness | % working days lost due to sickness absence | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Self-reported wellbeing | % People reporting low life satisfaction | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Smoking Prevalence | Smoking prevalence in adults - current smokers | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Life Expectancy Inequality (Female) | Inequality in life expectancy at birth for females. Difference between most and least deprived areas for females and males | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Preventable years of life lost | Mortality rate from causes considered preventable per 100,000 population | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Deaths under 75 years of age | Under 75 mortality rate (all causes) | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Deaths under 75 years of age with mental illness | Excess under 75 mortality rate in adults with serious mental illness | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Suicide rate | Suicide rate over 100,000 population | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Alcohol specific deaths | Alcohol specific mortality rate per 100,000 population | Data from Finger tips developed by Public Health England. No target but compared with national average |
| Health & Care Outcomes - Service Users | | |
| A&E | A&E 4 hour wait % | Data from SCCG Info, Performance & PMO A&E Monthly SITREP Pivot. Target is set nationally by NHSE |
| A&E Attendances | Number of all types of attendances at A&E | Data from NHSE / SCCG Info, Performance & PMO A&E Monthly SITREP File. Target from SCCG submitted plans (Total exc. planned follow-ups) |
| Non Elective Admissions | Number of non-elective admissions | Data from SCCG Info, Performance & PMO A&E Monthly SITREP Pivot. Target from Better Care Fund (BCF) 2018/19 submitted plan |
| Delayed transfers of care | Delayed Days (rate per 100,000 18+ population) Delayed patients | Data from NHS improvements then derived based on Sheffield population. Target from Better Care Fund (BCF) 2018/19 submitted plan |
| Admissions to care homes | Number of admissions to care homes per 100,000 population | Data from STH DTOC Dashboard Updates Data from SCC. Target from Better Care Fund (BCF) 2018/19 submitted plan |
| Reablement | Proportionate of people offered reablement Proportionate of people still at home 91 days after discharge | Data from Adult Social Care Outcomes Framework (ASCOF). No target but compared with national average Data from SCC. Target from Better Care Fund (BCF) 2018/19 submitted plan |
| Referral to Treatment | All patients wait less than 18 weeks for treatment to start | Data from SCCG Info, Perf & PMO RTT PowerPivot with most recent from NHSE. Target is set nationally by NHSE |
| Cancer Pathways | The percentage of patients treated within 2 months (62 days) of an urgent GP referral | Data from NHSE. Target is set nationally by NHSE |
| Blood Pressure | The percentage of patients with hypertension in whom the last blood pressure reading (measured in the previous 12 months) is 150/90 mmHg | Data from Finger tips developed by Public Health England. No target but compared with national average |
| PAM | Patient Activation Measure score | TBC |
| IAPT Recovery Rate | IAPT % completing treatment and moving to recovery | Data from SCCG Info, Perf & PMO Team PQOR with most recent from NHS Digital. Target is set nationally by NHSE |
| CAMHS | Percentage of patients seen for first appointment within 18 weeks of CAMHS non-urgent referral. | Data from SCHFT CAMHS Performance Report - Overview. Target set by SCH locally |
| End of life plan | % of people who die with an end of life plan | TBC |
| Service User Experience | | |
| Patient Experience | Overall satisfaction of people who use services with their care and support | TBC |
| Friends & Family Test | Average number of respondents who would recommend services to a friend or family member | Data from NHSE Friends & Family Test results (average of scores used) No target |
| Primary Care | GP patient Survey - overall satisfaction PAM scores | Data from GP Patient Survey. No target but compared with national average TBC |
| Workforce Satisfaction | | |
| Staff Survey | Overall organisational position for staff engagement Overall organisational position for staff health & wellbeing | Data from NHS staff surveys. TBC for SCC. No target but compared against national average |
| Health & Wellbeing | Sickness % | Data from NHS Digital. No target but compared against national average |
| Vacancy | Vacancy rate across all organisations | TBC |
| Collaboration | Neighbourhoods MDT collaboration | TBC |
| Integration | | TBC |
| Financial Sustainability | | |
| 2018/19 Financial Position | A combined organisational financial position | ACP Finance team |
| Projected Position | A combined organisational projected position | ACP Finance team |