

Health & Wellbeing Performance Framework: 2023/24
Quarter 2 Performance report

A good start in life

Measure	Target	Update	Q1 22/23		Q2 22/23		Q3 22/23		Q4 22/23		Q1 23/24		Q2 23/24		Notes
			No.	RAG	No.	RAG	No.	RAG	No.	RAG	No.	RAG	No.	RAG	
1.1a Reduce the number of children who are cared for who are not unaccompanied young people	770	Q2 2023/24	801	R	817	R	805	R	777	A	741	G	701	G	Figure dropped by 117 in last 12 months
1.2 Maintain the number of children who are the subject of a child protection plan to below that of similar authorities	630	Q2 2023/24	558	A	637	R	648	R	560	A	526	G	509	G	Figure dropped by 137 in last 12 months
1.3.1 Mean waiting days for CAMHS	tbc	Jul 22 2022/23	114		124										Mean waiting time is 16% up on same time last year. Figures not updated since July because of the cyber-attack on the trust.
1.3.2 Median waiting days for CAMHS	tbc	Jul 22 2022/23	89		70										Median waiting time is 20% down on same time last year. Figures not updated since July because of the cyber-attack on the trust.
1.5 Reduce the number of hospital admissions as a result of self-harm (15-19 year) to the national average (rate: 617 actual admissions 260 or fewer)	260	Q2 2023/24	43	G	68	G	119	G	154	G	35	G	66	G	66 admissions in 6 months compared to 83 in the same period last year
1.12 Reduce the level of smoking in pregnancy	6.0%	Q1 2023/24	7.0%	A	7.0%	A	5.7%	G	6.7%	G	6.2%	G	5.9	G	Variation across quarters (small numbers). Stop smoking service to support pregnant women. Maternity tobacco dependency service to start soon. Family Nurse Partnership supporting young mothers to quit continues.
1.13 Increase the levels of Measles, Mumps and Rubella immunisations dose 1	95%	Q1 2023/24	93.7%	A	95.3%	G	93.6%	A	92.7%	A	92.2%	A	93.9%	A	The Improving Immunisation Uptake (IIU) action plan finalised. Focus on early years in education & health settings. Tool kits developed. Targetted support to practices with low take up
1.14 Increase the levels of Measles, Mumps and Rubella immunisations dose 2	95%	Q1 2023/24	91.6%	A	96.4%	G	89.5%	A	91.5%	A	91.6%	A	91.9%	A	Targetted communication campaign over summer to promote the MMR vaccine ahead of the new school year. NHSE Thames Valley Screening and Immunisation Team is reviewing the impact of this focussed communication campaign.
1.15 Reduce the levels of children overweight (including obese) in reception class (NCMP data) – Annual. Note definition of indicator changed in Q1 22/23	18.4%	2022/23	19.9%	G	19.9%	G	19.9%	G	19.9%	G	19.9%	A	19.3%	A	Small decrease in reception overweight and obesity since pre- pandemic levels in 2018/2019. Work continuing to address this through whole systems approach & specific programmes such as You Move and the child healthy weight service, Gloji Energy.
1.16 Reduce the levels of children overweight (including obese) in Year 6 (NCMP data) - Annual. . Note definition of indicator changed in Q1 22/23	31%	2022/23	33.4%	G	33.4%	G	33.4%	G	33.4%	G	33.4%	A	30.7%	A	Small decrease in reception overweight and obesity since pre- pandemic levels in 2018/2019. Work continuing to address this through whole systems approach & specific programmes such as You Move and the child healthy weight service, Gloji Energy.
Increase the number of multi agency strength and needs forms	750	Q2 2023/24	865	R	1629	R	2640	A	3559	A	887	A	2782	A	Target reset to rise to 7500 per year. Figures now include those completed by health visitors
1.18 Monitor the number of children missing from home	Monitor only	Q2 2023/24	264		525		756		1007		271		565		8% increase compared to first 6 months last year
1.19 Monitor the number of Domestic incidents involving children reported to the police.	Monitor only	Q2 2023/24	1834		3660		5363		7006		1616		3402		7% decrease compared to first 6 months last year

Living well

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2.2 Proportion of all providers described as outstanding or good by CQC remains above the national average	86%	Q2 2023/24	95%	G	95%	G	91%	G	92%	G	92%	G	91%	G	Routine inspection on hold, inspecting only where a concern is raised. National average 86%
2.11 Increase the number of people with learning disability having annual health checks in primary care to 75% of all registered patients by March 2020	75%	Q2 2023/24	9%		20%		44%		82%	G	10%		24%		Performance improvement on last year and on target
2.12 The number of people with severe mental illness in employment	18%	Q1 2022/23	22%	G											975/4340. Latest figures June. Figures not updated since June because of the cyber-attack on the trust.
2.13 Number of new permanent care home admissions for people aged 18-64	< 31	Q2 2023/24	11	A	18	G	25	A	33	A	2	G	6	G	6 people admitted in the year - compared to 20 in first six months last year
2.14 The number of people with learning disabilities and/or autism admitted to specialist in-patient beds by March 2022	10	Q2 2023/24	7	G	8	G	7	G	5	G	7	G	8	G	
2.16 Reduce the Percentage of the population aged 16+ who are inactive (less than 30 mins / week moderate intensity activity)	20.0%	Nov 21/22	21%	A	21%	A	21%	A	19%	G	19%	G	19%	G	Inactivity levels worsened in Covid.New projects e.g. Move Together (July 2021) & You Move (June 2022) should improve performance. Local physical activity framework, Oxfordshire on the Move launched Apr 2023.
2.17 Increase the number of smoking quitters per 100,000 smokers in the adult population	> 1267 per 100,000	Q1 2023/24	1384	G	1154	G	1242	G	1246	G	1403	G	1003	A	Extra capacity added to Stop Smoking service to anticipate extra referrals from targetted key priority groups & via the Tobacco Dependency Service within hospitals. Figure anticipated to improve as referrals are realised as part of this approach
2.18 Increase the level of flu immunisation for at risk groups under 65 years	60.4%	Sep 22-Feb 23	60.4%	R	60.4%	R	60.4%		56.5%	R	56.5%	R	56.5%	R	Improvement on 17/18 baseline, but below 21/22 (mirroring regional data). Public may be less sensitised to the need for vaccinations compared to height of COVID. NHS England Thames Valley Public Health Commissioning Teams are completing a review of the 22/23 flu vaccination programme with a view to maximising uptake and reducing inequalities in 23/24.
2.19 % of the eligible population aged 40-74 years offered an NHS Health Check	5%	Q2 2023/24									3.7%	A	4.9%	A	Health Check invitations increased compared to Q1 & close to target with increase activity by NHS Health Care providers in Q2 23/24. NB: The methodology has been slightly adjusted and backdated from April 2022 to match the public reporting from Public Health Outcome Framework
2.20 % of the eligible population aged 40-74 years receiving a NHS Health Check	45%	Q4 2022/23	32.7%	A	28.3%	A	30.2%	R	32.8%	R	45.2%	G	45.2%	G	GP Practices actively invite eligible patients; a countywide marketing campaign. Newly commissioned supplementary NHS Health Check Services Implementation Phase between October - December 2022 & delivery from 1st February 2023. Oxon service continues to benchmark higher than regional and national averages
2.21 Increase the level of Cervical Screening (Percentage of the eligible population women aged 25-49) screened in the last 3.5)	80%	Q2 2023/24	66.5%	R	66.5%	R	67.0%	R	64.7%	R	64.7%	R	65.1%	R	The NHSE Thames Valley Screening and Immunisation Team are now working with targeted practices in central Oxford with the lowest cervical screening coverage in the 25-49-year-old cohort to support completion of audits to understand uptake of cervical screening by ethnicity and student status.
2.21 Increase the level of cervical Screening (Percentage of the eligible population women aged 25-64) screened in the last 5.5 years	80%	Q2 2023/24	75.0%	R	75.0%	R	75.3%	R	74.7%	R	74.7%	R	74.9%	R	Direct work between NHSE Thames Valley Screening and Immunisation team and practices with low cervical screening coverage rates in the younger cohort will be expanded to better understand specific reasons for lower coverage in the older cohort.

Aging Well

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3.4 Increase the proportion of discharges (following emergency admissions) which occur at the weekend	>18.8%	Q2 2023/24	20%	G	21%	G	21%	G	20%	G	21%	G	22%	G	Figure for year to date. 21% for September
3.5 Ensure the proportion of people who use social care services who feel safe remains above the national average	> 69.9%	Feb 2023	73.7	G	73.7	G	73.7	G	72.6	G	73.7	G	73.7	G	Data from Feb 23 survey. Slight drop but still above the national average
3.6 Maintain the number of home care hours purchased per week	21,779	Q2 2023/24	25,395	G	25,786	G	26,808	G	29,668	G	30,899	G	30,561	G	14% increase in last 12 months
3.7 Reduce the rate of Emergency Admissions (65+) per 100,000 of the 65+ population	24,550 or fewer	Q2 2023/24	22,476	G	23,673	G	23,183	G	23,998	G	23,306	G	22,554	G	
3.8 90th percentile of length of stay for emergency admissions (65+)	18 or below	Q2 2023/24	16	G	18	G	15	G	16	G	15	G	15	G	Year to date; 13 days for September
3.19 (New measure): unplanned hospitalisation for chronic ambulatory care sensitive conditions per 100,000 population (crude rate)	710.6	Q2 2023/24	740	A	689	G	745	A	699	G	813	R	772.4	R	Reviewing activity by site; analysis of opportunity to manage via integrated neighbourhood teams; urgent care response; emergency department and ambulatory assessment units.
3.21 (New measure) % of people discharged to their normal place of residence	93.0%	Q2 2023/24	90.5%	R	90.8%	R	90.6%	R	90.5%	R	90.8%	R	91.0%	R	Actions in place to improve allocation to discharge pathways; diversion from home with care to home with no care; and from short term bed to home with care within a Home First ethos and practice.
3.22 (New measure) Emergency hospital admissions due to falls in people aged 65 and over.	1895.4	Q2 2023/24									2222.4	R	2078.8	R	review activity by site and admissions pathway (care home, community, geography) to identify opportunity
3.12 Reduce unnecessary care home admissions such that the number of older people placed in a care home each week (BCF measure)	7.6	Q2 2023/24	8.6	G	8.2	G	8.2	G	9.2	A	7.1	G	7.3	G	190 admissions in first 6 months
3.13 Increase the % of older people (65+) who were still at home 91 days after discharge from hospital into reablement / rehabilitation services (BCF measure)	84%	Oct - Dec 2022	82	G	82	G	82	G	85	G	82	G	82	G	Targeted amended in line with BCF. Improvement in the year
3.14 Increase the Proportion of older people (65+) who are discharged from hospital who receive reablement / rehabilitation services	3.3% or more	Q1 2023/24	2.20%	A	2.20%	A	2.20%	A	2.28%	A	2.90%	A	2.90%	A	34% increase since Oct-Dec 22 (when national figure is taken)
3.15 Increase the estimated diagnosis rate for people with dementia	67.8%	Feb 2023	61.0%	R	61.7%	R	62.0%	R	61.2%	R	61.9%	R	62.6%	R	Dementia Diagnosis rates increased by 0.8% in last 12 months. Performance below national rate, the same as SE rate and higher than BOB
3.16 Maintain the level of flu immunisations for the over 65s	86%	Sep 22 - Feb 23	86.4%	G	86.4%	G	86.4%	G	84.9%	R	84.9%	R	84.9%	R	Improvement on 17/18 baseline, but below 21/22 (mirroring regional data). Public may be less sensitised to the need for vaccinations compared to height of COVID. NHS England Thames Valley Public Health Commissioning Teams are completing a review of the 22/23 flu vaccination programme with a view to maximising uptake and reducing inequalities in 23/24.
3.17 Increase the percentage of those sent bowel screening packs who will complete and return them (aged 60-74 years)	60% (Acceptable 52%)	Q4 2022/23	69.0%	G	68.3%	G	68.3%	G	68.6%	G	67.6%	G	69.5%	G	The programme is meeting the achievable standard for uptake. Age-extension for the bowel screening programme is taking place, with age-extension to 54 year olds in 2023. Work on the remaining cohort 50-52yrs will start shortly.
3.18 increase the level of Breast screening - Percentage of eligible population (women aged 50-70) screened in the last three years (coverage)	80% (Acceptable 70%)	Q4 2022/23	69.6%	R	71.5%	G	71.5%	G	68.6%	R	63.5%	R	71.4%	A	Programme impacted by pandemic. Local performance above SE (63.1%) & England (58%). NHS England South East regional teams are working collaboratively to develop a breast screening workforce plan. Health Equality Audit being undertaken. Text messaging implemented for those who miss appointments