

Health & Wellbeing Performance Framework: 2022/23
Quarter 1 Performance report

A good start in life

Measure	Target	Update	Q1 21/22		Q2 21/22		Q3 21/22		Q4 21/22		Q1 22/23		Notes
			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 to 750	750	Q1 2022/23									801	R	Measure changed to exclude unaccompanied children. Trajectories in place to reduce to the level of similar authorities
1.2 Maintain the number of children who are the subject of a child protection plan	550	Q1 2022/23	510	A	548	R	530	A	559	R	558	A	Target reset to 550. Marginally above target, but still 200 below high spot of June 2019 (758)
1.3.1 Mean waiting days for CAMHS	tbc	Q1 2022/23	106		132		110		86		114		Mean waiting time is 6% up on same time last year
1.3.2 Median waiting days for CAMHS	tbc	Q1 2022/23	99		97		106		48		89		Median waiting time is 2% down on same time last year
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	Q1 2022/23	85	R	146	R	202	A	280	A	43	G	43 admissions in first quarter. 172 pro rata for year
1.12 Reduce the level of smoking in pregnancy	6.5%	Q4 2021/22	6.9%	G	6.9%	G	5.7%	G	5.8%	G	7.0%	A	Figures ranged from 5.4 (Q1) and 7.0 (Q4) across the 4 quarters of 2021-22. Reaching 6.1 across all 4 quarters (391 women) a reduction since last year. This year maternity services across the ICP will be launching a bespoke targeted Stop Smoking Service
1.13 Increase the levels of Measles, Mumps and Rubella immunisations dose 1	95%	Q4 2021/22	93.1%	A	93.7%	A	92.6%	A	93.6%	A	93.7%	A	A national campaign to increase childhood MMR vaccination is ongoing since Feb 2022.
1.14 Increase the levels of Measles, Mumps and Rubella immunisations dose 2	95%	Q4 2020/21	92.5%	A	92.4%	A	91.6%	A	91.9%	A	91.6%	A	A national campaign to increase childhood MMR vaccination is ongoing since Feb 2022.
1.15 Reduce the levels of children obese in reception class	7%	Q4 2020/21	6.7%	A	6.7%	A	6.7%	A	6.7%	A			21/22 data not report as COVID resulted in unreportable sample size. However, the data we do have suggests an increase in obesity levels reporting on smaller proportion of cohort: Cherwell 7.1%; Oxford 6.5%; South 7.9%; Vale 5.5%; West Oxfordshire 7.4%
1.16 Reduce the levels of children obese in year 6	16%	Q4 2020/21	16.2%	A	16.2%	A	16.2%	A	16.2%	A			21/22 data not report as COVID resulted in unreportable sample size. However, the data we do have suggests that, as is the case nationally, there has been an increase in obesity
Increase the number of early help assessments to 2000 in 2020/21	5000	Q1 2022/23	801	G	1352	G	2188	G	2938	G	849	R	Target of 5000 for year. 849 in the first quarter, so just under 3400 in year. All local partners are identifying their pledges to early help via the children's trust
1.18 Monitor the number of children missing from home	Monitor only	Q1 2022/23	260		513		741		982		264		Last 12 months: 19% increase compared with last year; 5% increase on 2 years ago; 15% decrease on 3 years ago
1.19 Monitor the number of Domestic incidents involving children reported to the police.	Monitor only	Q1 2022/23	1782		3577		5166		6742				Last 12 months: 19% increase compared with last year; 5% increase on 2 years ago; 15% decrease on 3 years ago

Living well

	Target	Update	Q1 21/22		Q2 21/22		Q3 21/22		Q4 22/23		Q1 22/23		Notes
			No.	RAG	No.	RAG	No.	RAG	No.	RAG	No.	RAG	
2.2 Proportion of all providers described as outstanding or good by CQC remains above the national average	86%	Q1 2022/23	94%	G	93%	G	95%	G	95%	G	95%	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%	Q1 2022/23	8%		20%		39%		71%	G	9%		Action plan in place. Checks tend to happen at the end of the year. Above the same point last year when target was met. Target increased to 75%
2.12 The number of people with severe mental illness in employment	18%	Q1 2022/23	20%	G	21%	G	22%	G	22%	G	22%	G	975/4340
2.13 Number of new permanent care home admissions for people aged 18-64	< 39	Q1 2022/23	6	G	10	G	20	G	33	G	10	A	10 people permanently admitted to care homes in the quarter (pro rate 40), marginally above target, still top quartile nationally
2.14 The number of people with learning disabilities and/or autism admitted to specialist in-patient beds by March 2022	10	Q1 2022/23	5	G	10	A	10	A	8	G	7	G	
2.16 Reduce the Percentage of the population aged 16+ who are inactive (less than 30 mins / week moderate intensity activity)	18.6%	Nov-21	21.3%	R	22.4%	R	22.4%	R	21.0%	R	21%	A	Decreased nationally (covid affect). New projects (Move together & You move) expected to improve figures. Cherwell 24.4%; Oxford; 15.1%; South Oxon 21.4%; VoWH 23.7%; West Oxon 20.7%
2.17 Increase the number of smoking quitters per 100,000 smokers in the adult population	> 1146 per 100,000*	Q4 2020/21			678	R	1042	A	1306	G	1384	G	The new smoking cessation provider has made excellent efforts to achieve their target 4 week quit rates by delivering the service remotely and continuing to engage with clients through the Covid pandemic.
2.18 Increase the level of flu immunisation for at risk groups under 65 years	85%	Sep 21 to Feb 22	58.9%	R	58.9%	R	58.9%	R	60.4%	R	60.4%	R	The 2021/22 flu programme offered the flu vaccine to the largest number of people in the history of the programme and was offered alongside the national COVID-19 vaccine programme. Uptake within the under 65 year 'at risk' cohort remained stable with an increase seen in the over 65 years cohort and the 50 – 64 years cohort.
2.19 % of the eligible population aged 40-74 years invited for an NHS Health Check (Q1 2015/16 to Q4 2019/20)	70%	Q1 2022/23	67.0%		69.6%		69.6%		72.6%		62.6%	A	NHS Health Check Programme, commissioned via GP Practices, improved performance back to pre-pandemic levels for Q1 2022/23. A few practices are still paused in their delivery of the NHS Health Checks as they restore services during this recovery phase.
2.20 % of the eligible population aged 40-74 years receiving a NHS Health Check (Q1 2015/16 to Q4 2019/20)	42%	Q1 2022/23	31.7%		32.6%		32.6%		33.5%		32.7%	A	Currently commissioning a new extra service for health checks via third-party to provide targeted outreach due to start 1/1/23. Programme paused nationally (COVID). A few GP Practices are still paused .
2.21 Increase the level of Cervical Screening (Percentage of the eligible population women aged 25-49) screened in the last 3.5)	80%	Q3 2021/22	65.9%	R	67.1%	R	67.6%	R	67.1%	R	66.5%	R	Below England (68.1%) & South (70.8%). Lower coverage in LSOAs with a higher percentage non-white population. NHSE Screening team working with BOB ICS to improve uptake, for younger, non-white women. This includes ensuring ceasing records are up to date and accurate in line with the National ceasing audit.
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%	Q3 2021/22	75.7%	R	75.3%	R	75.4%	R	75.3%	R	75.0%	R	Comparable to England (74.8%) and the South (75.5%).

Aging Well

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3.4 Increase the proportion of discharges (following emergency admissions) which occur at the weekend	>18.8%	Q1 2022/23	20%	G	20%	G	20%	G	20%	G	20%	G	
3.5 Ensure the proportion of people who use social care services who feel safe remains above the national average	> 69.9%	Feb-22	72%	G	72%	G	72%	G	73.7	G	73.7	G	National social care user survey run each February
3.6 Maintain the number of home care hours purchased per week	21,779	Q1 2022/23	26,333	G	25,643	G	25,128	G	24,509	G	25,395	G	
3.7 Reduce the rate of Emergency Admissions (65+) per 100,000 of the 65+ population	24,550 or fewer	Q1 2022/23	21,822	G	22,949	G	22,061	G	20,798	G	22,476	G	
3.8 90th percentile of length of stay for emergency admissions (65+)	18 or below	Q1 2022/23	13	G	14	G	14	G	15	G	16	G	
3.19 (New measure): unplanned hospitalisation for chronic ambulatory care sensitive conditions per 100,000 population	720	Q1 2022/23	769.6	R	745	R	749.5	R	732.0	R	740	A	185 for the quarter - pro rata for the year
3.21 (New measure) % of people discharged to their normal place of residence	93.0%	Q1 2022/23	91.0%	R	90.9%	R	90.6%	R	90.6%	R	90.5%	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.
3.12 Reduce unnecessary care home admissions such that the number of older people placed in a care home each week (BCF measure)	8.8	Q1 2022/23	9.4	G	8.1	G	9	G	9.2	G	8.6	G	112 admissions in the first 3 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)	77%	Oct - Dec 2022	62	R	62	R	62	R	84	G	84	G	Figure fell in year, possibly as people with higher needs were supported. Targeted amended in line with BCF
3.14 Increase the Proportion of older people (65+) who are discharged from hospital who receive reablement / rehabilitation services	3.3% or more	Oct - Dec 2021	2.85%	A	2.85%	A	2.85%	A	2.20%	A	2.20%	A	Figure dropped in year - measured at time of contract change which may have impacted performance
3.15 Increase the estimated diagnosis rate for people with dementia	67.8%	Q4 2021/22	63.0%	R	63.0%	R	61.0%	R	60.9%	R	61.0%	R	Below target, but above BoB and SE average
3.16 Maintain the level of flu immunisations for the over 65s	85%	Sep 21-Feb 22	84.4%	G	84.4%	G	84.4%	G	86.4%	G	86.4%	G	The 2021/22 flu programme offered the flu vaccine to the largest number of people in the history of the programme and was offered alongside the national COVID-19 vaccine programme.
3.17 Increase the percentage of those sent bowel screening packs who will complete and return them (aged 60-74 years)	60% (Acceptable 52%)	Q3 2021/22	70.3%	G	70.3%	G	70.9%	G	71.7	G	69.0%	G	The service is currently inviting at 129% of their pre-COVID-19 rate. Service is fully restored, recovered its backlog in July 2021 and performs within the invite target threshold of inviting within +/- 6 weeks. National average = 68.8%.
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%)	Q3 2021/22	55.4%	R	55.4%	R	76.9%	R	66.6%	R	69.6%	R	COVID-19 restrictions impacted on programme as did workforce sickness/self-isolation. Fewer women presented potentially related to Covid. Additional capacity now in place and provider expects to be back to a sustained round from the Autumn 2022.