

Everyone counts – Ambitions for GCCG for 7 key outcome measures

Outcome ambition	Outcome framework measure	Baseline	2014/15 Ambition	2015/16 Ambition	Support measures	Plans for delivery
1. Securing additional years of life for the people of England with treatable mental and physical health conditions.	Potential years of life lost to conditions amenable to healthcare in the respective calendar year per 100,000 population	1753.6	1725.9 (1.6% reduction)	1698.6 (1.6% reduction)	None	<ul style="list-style-type: none"> Map the impact of identified QIPP schemes on this measure Impact from our health promotion work agenda.
2. Improving the health related quality of life of the 15 million+ people with one or more long-term condition, including mental health conditions.	Health-related quality of life for people with long-term conditions	75.0	75.1	75.2	<p>Increase dementia diagnosis rate to 67% by March 2015 and maintain in 2015/16.</p> <p>Maintain IAPT recovery rate of 50%</p>	<ul style="list-style-type: none"> Outcome focus for Clinical programme groups Establish/ review pathways for specific cohorts of patients, prioritising diabetes, COPD, respiratory and stroke. Implementation of integrated care teams To promote improved quality of life GCCG have set a challenging target to improve dementia diagnosis rates from 56% to 67%. Cancer, focus on patient experience Alignment of mental health liaison services with acute provider
3. Reducing the amount of time people spend avoidably in hospital through better and more integrated care in the community, outside of hospital.	Composite of all avoidable emergency admissions	1824.7	1848.4 (1.3% growth)	1872.5 (1.3% growth)	None	<ul style="list-style-type: none"> Implementation of integrated community teams and creation of virtual wards and rapid response teams Urgent care strategy, OPAL, IDT and AEC Review of primary out of hours service provision SWAST right care right place initiative Emergency admissions for children with lower respiratory infections – review pathway
4. Increasing the proportion of older people living independently at home following discharge from hospital.	No indicator available at CCG level.				Adult social care outcomes framework indicator on reablement / rehabilitation	<p>BCF ambition to improve performance from 71.6% to 77.5% by March 2015.</p> <ul style="list-style-type: none"> Reablement pathway review Increased access to domiciliary care Stroke high intensity service <p>The Gloucestershire ambition is to increase access to the service, whilst improving the proportion of people who are able to live at home (see BCF ambition 4)</p>
5. Increasing the number of people having a positive experience of hospital care.	Patient experience of inpatient care (average number of negative responses per 100 patients)	147.0	146.1	145.2	None	<ul style="list-style-type: none"> Patient experience CQUIN has been included in contracts to promote improvements Extension of the Friends and Family test across services during 2014/15 (building into Day Cases, Outpatients, Staff, Mental Health and Community services); with the rest of services to follow by the end of March 2015.
6. Increasing the number of people with mental and physical health conditions having a positive experience of care outside hospital, in general practice and in the community.	Patient experience of primary care (average number of negative responses per 100 patients)	4.1	4.1	4.1	None	<ul style="list-style-type: none"> Primary care LES – improving quality in primary care OOH tender
7. Making significant progress towards eliminating avoidable deaths in our hospitals caused by problems in care.	National indicator is in development.				Health care acquired infections	<p>Gloucestershire have adopted the national set target for clostridium difficile of less than 201 cases & 0 cases of MRSA.</p> <ul style="list-style-type: none"> RCA (Root Cause Analysis (localised)) of each case continues. Local Task & Finish Group reviews C.diff outcome data and mitigating actions. Including: Practices to review all patients over 80 years on PPIs using Eclipse Live audits. Request prescribing of PPI as STAR PU by practice. Ribotyping of all C diff cases Continuous education and information to GPs via multi media

Quality Premium ambitions

NHS Outcome framework domain	Quality premium measure	Baseline	2014/15 Ambition	Plans for delivery
1. Preventing people from dying prematurely	Potential years of life lost to conditions amenable to healthcare in the respective calendar year per 100,000 population	1753.6	1725.9 (1.6% reduction)	See 7 key ambition section – ambition 1 for further information.
2. Enhancing quality of life for people with long term conditions	Improving access to psychological therapies (IAPT)	12.0%	15.0%	<ul style="list-style-type: none"> Increased investment in 2014/15 to increase capacity Full implementation of intermediate care teams New care pathways for anxiety and depression IAPT
3: Helping people to recover from episodes of ill health or following injury	Composite of all avoidable emergency admissions	1824.7	1848.4 (1.3% growth)	<p>2014/15 ambition from 14/15 profiled quarterly.</p> <ul style="list-style-type: none"> 0.2% growth from Q1 to Q2 0.5% growth from Q2 to Q3 0.6% growth from Q3 to Q4 <p>See 7 key ambition section – ambition 3 for further information</p>
4. Ensuring that people have a positive experience of care.	Addressing issues identified in the 2013/14 Friends and Family Test (FFT), supporting roll out of FFT in their local health economy in 2014/15 and showing improvement in a selected indicator from Domain 4 of the CCG Outcomes Indicator Set			See 7 key ambition section – ambition 6 for further information
5. Treating and caring for people in a safe environment and protecting them from avoidable harm	Improved reporting of medication-related safety incidents			This is in the process of being agreed with the HWB as plans are developed further iterations will be taken for discussion and sign off.
6. Further local measure agreed by each CCG with their local Health and Wellbeing Board and with NHS England	Emergency admissions for children with lower respiratory tract infection.	539	527	<p>Emergency admissions for children with lower respiratory infections:</p> <ul style="list-style-type: none"> A joint CCG, GCS and GHT work programme to review admissions and look at patient pathways has been established

Better Care Fund national and local ambitions

BCF ambition	NHS outcomes framework	Adult social care outcomes framework	BCF national / Local metric	Baseline	2014/15 Ambition	2015/16 Ambition	Plans for delivery
Permanent admissions of older people (aged 65 and over) to residential and nursing care homes, per 100,000 population.		2A(ii)	✓ national	791 (April 2012 - March 2013)	N/A	731.9	<ul style="list-style-type: none"> Revise integrated discharge team pathways to improve timely discharge to reduce dependency enabling more people to remain in their normal place of residency. Impact of increased re-ablement capacity and review of re-ablement pathways Implementation of telecare ICTs enabling treatment in own home and reducing hospital admissions reducing dependency
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into re-ablement / rehabilitation services	3.6(i)	2B(i)	✓ national	71.6% (April 2012 - March 2013)	N/A	77.5%	<ul style="list-style-type: none"> Review of re-ablement pathway with increased access to re-ablement services and domiciliary care. Integrated community teams, high intensity service implementation
Delayed transfers of care from hospital per 100,000 population (average per month)		2C(i)	✓ national	306.75 (Dec 2012 - Nov 2013)	301.53	296.37	<ul style="list-style-type: none"> Urgent care working group focus on delayed discharge
Avoidable emergency admissions (composite measure): <ul style="list-style-type: none"> Unplanned hospitalisation for chronic ambulatory care sensitive conditions (all ages) Unplanned hospitalisation for asthma, diabetes and epilepsy in children Emergency admissions for acute conditions that should not usually require hospital admission (all ages) Emergency admissions for children with lower respiratory tract infection. 	2.3(i) 2.3(ii) 3a 3.2		✓ national	1,946.47 (Oct 2012 - Sept 2013)	1,963.53	1,980.82	<ul style="list-style-type: none"> Revise IDT pathways Integrated community teams, rapid response and HIS CHC increase in capacity See 7 key ambition section – ambition 3 for further information and Quality Premium 3
Patient / service user experience (GCCG has chosen to use the national measure which is under development)	Domain 4	Domain 3	✓ national				<ul style="list-style-type: none"> Patient experience CQUIN has been included in contracts to promote improvements. Extension of the Friends and Family test across services during 2014/15 (building into Day Cases, Outpatients, Staff, Mental Health and Community services); with the rest of services to follow by the end of March 2015.
Adult Social Care Outcomes Framework - 1D: Carer-reported quality of life		1D	✓ local	7.7	N/A	8.1	<ul style="list-style-type: none"> Review current results to establish areas of improvement Development of plan with GCC & implementation during summer 2014 Repeat of survey November 2014, evaluation of results to establish the impact of changes Further action plan if required in 2015

Measures of Success 2014/15 to 2015/16

NHS Constitution – National Standards for Access to Care with National Targets

Reference	Description	Target	2013/14	2014/15 (RAG status)	2015/16 (RAG status)	Plan for Delivery
CB_B1	The percentage of admitted pathways within 18 weeks for admitted patients whose clocks stopped during the period on an adjusted basis	90%	92.7%			<ul style="list-style-type: none"> Continued maintenance of target during 14/15 and 15/16 Clinical and diagnostic capacity issues within Urology. Recruitment of consultants and increased CT & pathology capacity to be completed by Q1 2014 Pressure on performance due to increase demand for services within Ophthalmology and Cardiology, schemes relating to demand management are being worked up to include expansion of Peer Review and Advice & Guidance.
CB_B2	The percentage of non-admitted pathways within 18 weeks for non-admitted patients whose clocks stopped during the period	95%	97.4%			
CB_B3	The percentage of incomplete pathways within 18 weeks for patients on incomplete pathways at the end of the period	92%	95.1%			
CB_B4	Diagnostic test waiting times – under 6 week waits	99%	99.2%			<ul style="list-style-type: none"> Demand pressures for endoscopy services driven partly by national screening programmes impacting on providers ability to deliver the 6 week target CCG are securing additional capacity for 2014/15 and retendering for AQP (Any Qualified Provider) diagnostic services.
CB_B6	All Cancer 2 week waits	93%	94.0%			<ul style="list-style-type: none"> Continued maintenance of target during 14/15 and 15/16
CB_B7	Two week wait for breast symptoms (where cancer was not initially suspected)	93%	88.0%			<ul style="list-style-type: none"> Increased referrals for breast services have impacted on GHT's ability to achieve the target. CCG has completed a capacity and demand review with GHT to ensure that improved performance is sustainable. Demand management - educational events for GPs and individual practice/locality support.
CB_B8	Percentage of patients receiving first definitive treatment within one month of a cancer diagnosis (measured from 'date of decision to treat')	96%	99.3%			<ul style="list-style-type: none"> Continued maintenance of target during 14/15 and 15/16, targets are met on a continuous basis. No issues identified for 14/15 and 15/16
CB_B9	31-day standard for subsequent cancer treatments - surgery	94%	98.9%			
CB_B10	31-day standard for subsequent cancer treatments – anti cancer drug regimens	98%	99.6%			
CB_B11	31-day standard for subsequent cancer treatments - radiotherapy	94%	100%			
CB_B12	All cancer two month urgent referral to first treatment wait	85%	80.5%			<ul style="list-style-type: none"> Pressures in achieving target throughout 2013/14 Demand management programme in place Capacity review has highlighted issues with Radiology, Pathology and Histology capacity at GHT, plans are in place to address these issues during 2014/15. Out of county performance issues are being reviewed with host commissioners.
CB_B13	62-day wait for first treatment following referral from an NHS cancer screening service	90%	98.2%			<ul style="list-style-type: none"> Continued maintenance of target during 14/15 and 15/16, targets are met on a continuous basis. No issues identified for 14/15 and 15/16
CB_B14	62-day wait for first treatment for cancer following a consultants decision to upgrade the patient's priority	90%	92.7%			

Reference	Description	Target	2013/14	2014/15 (RAG status)	2015/16 (RAG status)	Plan for Delivery
CB_B5iii	A&E Department - % of A&E attendances under 4 hours	95%	94.1%			<ul style="list-style-type: none"> • Delivery during 2013/14 has been challenging with performance being achieved in Q2 and Q3 only • Focus on making improvements across the USC system ensuring patients are seen at the right time and right place • Continued work during 2014/15 on managing demand at the front door which will be impacted by ICT/Rapid Response, Care Homes Programme, further development of SWAST “see and treat” and NHS 111 enhanced clinical advice service.
CB_B15i	Ambulance clinical quality – Category A (Red 1) 8 minute response time	75%	69.7%			<ul style="list-style-type: none"> • Performance challenges seen during 13/14, work is ongoing with the South West Ambulance Service FT (SWAST) to address the issues. • Recovery plan is in place which will span across 14/15 and discussions are taking place with SWAST regarding delivery of key targets to redress the difference in performance between Northern and Southern divisions.
CB_B15ii	Ambulance clinical quality – Category A (Red 2) 8 minute response time	75%	72.3%			
CB_B16	Ambulance clinical quality – Category A 19 minute transportation time	95%	94.9%			
CB_B17	Mixed Sex Accommodation (MSA) Breaches	0	48			<ul style="list-style-type: none"> • During 2013/14 GHT undertook a reconfiguration of some of their services onto a single site model. During the implementation phase a number of mixed sex breaches were reported. The reconfiguration is now complete and this is not perceived to be an ongoing issue for the Trust.
CB_B18	Cancelled Operations – not rebooked within 28 days	0	43			<ul style="list-style-type: none"> • It should also be noted that due to the recording against this target the breaches represent a GHT view not specifically for GCCG patients.
CB_B19	Mental Health Measure – Care Programme Approach (CPA) 7 day follow up on discharge	95%	99.0%			<ul style="list-style-type: none"> • Continued maintenance of target during 14/15 and 15/16, targets are met on a continuous basis. No issues identified for 14/15 and 15/16