

Demand Management Framework Indicators

The following tables map the demand management priorities of the HWB strategy against relevant outcomes contained in the Public Health, NHS and Adult Social Care outcomes frameworks.

The following acronyms are used to reflect the sources of data:

ASC-CAR : Adult Social Care Combined Activity Return

DECC: Department of Energy and Climate Change

HES: Hospital Episode Statistics

NHFD: The National Hip Fracture Database

ONS: Office for National Statistics

P: Provisional

PROMS: Patient Recorded Outcome Measures

QOF: Quality Outcomes Framework

TBC: To Be Confirmed

TARN: Trauma Audit Research Network

SSNAP: Sentinel Stroke National Audit Programme

Fuel Poverty

Indicator	Frequency	Lag	Source
(Holding) Department of Energy and Climate Change fuel poverty measure	Annual	2 years	DECC
4.15 Excess winter deaths	Annual	1 year	ONS death registrations

Alcohol Consumption

Indicator	Frequency	Lag	Source
PHOF			
? 2.10 Self-harm (Placeholder)	TBC	TBC	TBC
2.18 Alcohol-related admissions to hospital (Placeholder)	TBC	TBC	TBC
4.6: Under 75 mortality rate from liver disease	Annual	1 year	ONS death registrations (3 year pooled) and mid-year population estimates
NHSOF			
1.3: Under 75 mortality rate from liver disease	Annual	18 months	ONS: mortality data by cause

Co-ordination of Care

Framework/outcome	Frequency	Lag	Source
PHOF			
4.3: mortality rate from causes considered preventable	Annual	2 year	ONS/ HES
4.11: emergency readmissions within 30 days of discharge from hospital	Annual	1 year	HES
NHSOF			
2.1: Proportion of people feeling supported to manage their condition	Biannual	3 months	GP Patient Survey
2.3i: Unplanned hospitalisation for chronic ambulatory care sensitive conditions (adults)	Monthly (P)/ Annual	3 Months (p)/ 18 months	HES
3a: Emergency admissions for acute conditions that should not usually require hospital admission	Monthly	3 Months (p)/ 18 months	HES
3b: Emergency readmissions within 30days of discharge from hospital*	Annual	18 months	HES
3.3: Proportion of people who recover from major trauma	TBC	TBC	TARN
3.4: Proportion of stroke patients reporting an improvement in activity/lifestyle on the Modified Rankin Scale at 6 months	Annual (Summer 2014)	18 Months	SSNAP

3.5: Proportion of patients recovering to their previous levels of mobility/walking ability at			
i:30 days	Annual	18 months	NHFD
ii: 120 days	Annual	18 months	NHFD
3.6i: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation service	Annual	6 Months	ASC-CAR
3.6ii: Proportion offered rehabilitation following discharge from acute or community hospital	Annual	6 Months	HES
ASCOF			
2b: Proportion of people over 65 who are still at home 91 days after discharge from hospital into reablement/ rehabilitation services	Annual	1 year	ASC-CAR
2c: Delayed transfers of care from hospital and those that are attributable to social care	Annual	1 year	Unify2 (DH)

Older People

Framework/ Indicator	Frequency	Lag	Source
PHOF			
2.24: Injuries due to falls in people aged 65 and over (all sub-indicators)	Annual	2 years	HES
4.12: Preventable sight loss (all sub-indicators)	Annual	1 year/ 3 year	CVI/ HSC
4.13 Health-related quality of life for older people (Placeholder)			
4.15: excess winter deaths	Annual (3 year pooled)	2 years	ONS death registrations
4.16: estimated diagnosis rate for people with dementia	Annual	1 year	QOF/ 2007 dementia study
NHSOF			
2.6i: Estimated diagnosis rate for people with dementia	Annual	18 months	QOF/ 2007 dementia study
??3.1 Total health gain as assessed by patients for elective procedures			
I. Hip replacement	Monthly	Approx 6 Months	Proms
II. Knee replacement	Monthly	Approx 6 Months	Proms
III. Groin hernia	Monthly	Approx 6 Months	Proms

IV. Varicose veins	Monthly	Approx 6 Months	Proms
V. Psychological therapies	Monthly	Approx 6 Months	Proms
3.4: Proportion of stroke patients reporting an improvement in activity/lifestyle on the Modified Rankin Scale at 6 months	Annual (financial year)	1 year	SSNAP
3.5: Proportion of patients recovering to their previous levels of mobility/walking ability at			
I: 30 and	Annual	6 months	NHFD
li: 120 days	Annual	6 months	NHFD
3.6 i: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation service	Annual	6 Months	ASC-CAR
3.6 ii: Proportion offered rehabilitation following discharge from acute or community hospital	Annual	6 Months	HES
ASCOF			
2b: Proportion of people over 65 who are still at home 91 days after discharge from hospital into reablement/ rehabilitation services	Annual	1 year	ASC-CAR

Improved Joined up Care Pathways

(ALL)

Health and wellbeing of carers

Outcome/ Framework	Frequency	Lag	Source
NHS Outcomes Framework			
2.4: Health-related quality of life for carers	Bi-annually	3 Months	GP Patient Survey
4.6: Bereaved carers' views on the quality of care in the last 3 months of life	Annual	1 year	VOICES survey of bereaved adults
ASC Outcomes Framework			
1d: Carer reported quality of life	Biennial	TBC	The Carers Survey
3b: Overall satisfaction of carers with social services	Biennial	TBC	The Carers Survey
3c: Proportion of carers who report that they have been included or consulted in discussion about the person they care for	Biennial	TBC	The Carers Survey
3d: Proportion of people who use services and carers who find it easy to find information about services	Annual (ASCS) Biennial (Carers)	1 year/ TBC	ASCS/ Carers survey

Self Management and Self Responsibility

Framework/ Outcome	Frequency	Lag	Source
PH Outcomes			
2.22ii: - Take up of NHS Health Check programme by those eligible - health check take up	TBC	TBC	Locally Collected??
2.11- Diet (In development)	TBC	TBC	
2.12: Excess weight in adults (local data In development)	TBC	TBC	
2.13 Proportion of physically active and inactive adults	Bi-Annual (rolling)	2 Months	Active people survey
2.14 Smoking prevalence – adults (over 18s)	Annual	6 Months	Integrated Household Survey
NHS Outcomes			
2.1: Proportion of people feeling supported to manage their condition	Biannual	3 months	GP Patient Survey