

Health Performance Report Quarter 3 2010-11

	PI Type	Ref	Title	Service	Frequency & Measure	Rise or Fall	Baseline	Last Year Result	Target	Quarter 1	Quarter 2	Quarter 3	Predicted Year End Result	Direction of Travel	Data Quality
1	Leeds Strategic Plan - Partnership Agreed	NI 123A	16+ current smoking rate prevalence (City Wide)	PCT	Quarterly %	Fall	Not set	22.00%	21.00%	22.60%	22.43%	22.75%	21.00%	↑	No Concerns with data quality
		NI 123B	16+ current smoking rate prevalence (10% SOA)	PCT	Quarterly %	Fall	31.00%	30.00%	27.10%	29.67%	29.59%	29.94%	27.10%	↑	
<p>It is noted that there is an unexpected slight rise in smoking prevalence across Leeds both in terms of the smoking prevalence in deprived Leeds and across the city. This may in part be due to the suspension of the DH media campaigns which has resulted in a reduction of referrals coming to the smoking cessation service from the national helpline. In addition to local marketing and campaigns NHS Leeds is currently developing a number of innovative areas of work to address the smoking prevalence rates including:</p> <ul style="list-style-type: none"> - Promoting a more routine and systematic approach to the delivery of smoking cessation interventions and referrals to services by front line health care staff. Initially working in collaboration with GP consortia to identify practices where referral of smokers into services is less than the recommendations stated within NICE guidance. With cardiac rehab services, the systematic approach aims to encourage at least 5% of the smoking population to set a quit date with stop smoking services. This work will also look at the training needs and the accurate recording of smoking status. - Collaborating with other areas of 'healthy living' to establish a website, to provide information about available services and access to self help guides. - Conducting a feasibility study to test a social norms approach to working with young people which aims to reduce the initiation of smoking. 															
2	Leeds Strategic Plan - Government Agreed	NI 40	Number of drug users recorded as being in effective treatment	Community Safety	Quarterly Number	Rise	2,939	3,325	3,149	3,025	3,048	3,094	3,150	↓	No concerns with data quality
		<p>Rolling Year to Date = 3,094 (NB this is subject to a 3 month time lag as this data is validated by the National Treatment Agency). The actual number in effective treatment looks to have dropped significantly between Q4 2009/10 and Q1 2010/11 but this was due to a national data quality exercise undertaken by the National Treatment Agency. Performance in the current year is improving and is on track to meet the year end targets. This data is compiled by the Community Safety and is based on a snapshot taken each quarter. It does not represent the National Treatment Agency's refreshed data, which can be made available by the Community Safety, if required</p>													

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3	National Indicator	NI 51	Effectiveness of child and adolescent mental health (CAMHS) services	NHS Leeds	Quarterly Number	Rise	16 out of 16	13 out of 16	15 out of 16	14 out of 16	15 out of 16	15 out of 16	15 out of 16	↑	No concerns with data quality
		<p>This measure is assessed by answering a series of four questions each worth 4 points enabling a maximum score of 16. The assessment focuses on the following areas:</p> <ol style="list-style-type: none"> 1. range of CAMH services - assessed at 4 2. access to services and accommodation appropriate to their age and level of maturity - assessed at 4 3. availability of 24 hour cover to meet urgent mental health needs - assessed at 4 4. range of early intervention support services delivered in universal settings - assessed at 3. <p>Quarter 3 shows an improvement from the beginning of the year position and is static from the last quarter.</p> <p>The final area of improvement to achieve the full 16 score is: 'an increase in early intervention support services delivered in universal settings'. A key stakeholder event is planned in February, following the recent National Support Team visit, to promote area and to support the rollout of the Targeted Mental Health in Schools (TaMHS) model. If successful this will address performance in this final element of the assessment.</p>													
4	National Indicator	NI 53A	Coverage of breast-feeding at 6-8 wks from birth (Breastfeeding coverage)	NHS Leeds	Quarterly %	Rise	89.0%	90.9%	95.0%	93.3%	96.9%	98.8%	96.4%	↑	No concerns with data quality
		<p>The coverage rose again this quarter to 98.75%. This is the result of significantly improved and timely inputting of the data by health visitors.</p>													
5	National Indicator	NI 53B	Prevalence of breast-feeding at 6-8 wks from birth (Breastfeeding prevalence)	NHS Leeds	Quarterly %	Rise	41.0%	40.8%	44.0%	44.9%	49.0%	50.6%	48.2%	↑	No concerns with data quality
		<p>The prevalence rate increased again this quarter and remains above the year end target for 2010/11. Work continues on encouraging breastfeeding and there is targeted work in specific postcode areas with low prevalence.</p>													

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6	National Indicator	NI 125	Achieving independence for older people through rehabilitation/intermediate care	Access & Inclusion	Quarterly %	Rise	91.9%	78.8%	85.0%	85.7%	87.8%	88.3%	↑	No Concerns with data quality	
															During the first three quarters of 2010/11 on 121 of the 137 occasions where people were discharged from a hospital setting for intermediate care the person was living in their own home three months subsequent to discharge.
7	National Indicator	NI 131	Delayed transfers of care	PCT	Quarterly Number	Fall	5.2	4.4	Not Set	6.5	6.7	6.7	6.7	↓	No Concerns with data quality
8	National Indicator	NI 113	Prevalence of Chlamydia in under 25 year olds measured through % percentage of the resident population aged 15 - 24 accepting a test/screen for chlamydia	PCT	Quarterly	Rise	n/a	32025	49106	7736	6829 YTD 14565	7162 YTD 21727	28000	↓	No Concerns with data
9	PCT Vital Signs	VSA01	Incidence of MRSA - number of cases	PCT	Quarterly Number	Fall	n/a	n/a	34	9	7	8	>34	↓	No Concerns with data
10	PCT Vital Signs	VSA03	Incidence of C difficile - number of cases	PCT	Quarterly Number	Fall	870	425	579	81	92	111	400	↓	No Concerns with data
11	PCT Vital Signs	VSA13	% patients waiting no more than 62 days from referral to treatment for cancer	PCT	Quarterly %	Rise	n/a	84.78%	85%	83.3%	80.4%	87.2%	85%	↑	No Concerns with data

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Whilst performance has dipped during this year, more recent data is showing a recovery. Actions in place seem to be having an effect. LTHT now undertake root cause analysis (RCA) when a speciality has two or more breaches and where YTD performance is less than target.															
12	PCT Vital Signs	VSA12	Cancer: 31 day wait standard - diagnosis to treatment and subsequent surgery	PCT	Quarterly %	Rise	n/a	96.99%/89.93%	96%/94%	96.3%/96.3%	96.5%/91.5%	98.6%/95.7%	96%/94%	↑	No Concerns with data
The 31 day subsequent surgery indicator is now back on track. Key problem areas have been identified and addressed.															
13	PCT Vital Signs	VSA12	Cancer; 31 day wait standard - subsequent drug and radiotherapy	PCT	Quarterly %	Rise	n/a	99.53%/90.40%	98%/94%	98.8%/93.1%	99.8%/96.9%	99.5%/98.7%	98%/94%	↑	No Concerns with data
These indicators are at satisfactory performance levels.															
14	PCT Vital Signs	VSB 10	% Children who completed immunisation by recommended ages	PCT	Quarterly %	Rise	n/a	n/a	95%	77.5% to 94.7%, across the range	84.5% to 95.1% across the range	84.8% to 95.6% across the range	85% to 95%	↑	No Concerns with data
Performance is reported on a matrix of 12 metrics, combined into 7 indicators, to give an overall score. Performance has been improving, over recent months, though some specific immunisations continue to present performance issues.															