Better Care Fund Metrics

Emergency admissions

NHS England measure: composite measure of sets of conditions/ages (below). Expressed as crude rate for BCF (admissions count per 100,000 ONS mid-year population estimates).

Includes:

- Chronic conditions in all ages (Asthma, Congestive heart failure, AF, Chronic ischemic heart disease, Diabetes complications, COPD, Angina, Iron-deficiency anaemia, Hypertension, Nutritional deficiencies, Epilepsy, Dementia)
- Acute conditions in all ages (Dehydration and gastroenteritis, Pyelonephritis, Perforated/bleeding ulcer, Cellulitis, Pelvic inflammatory disease, Ear, nose and throat infections, Dental conditions, Convulsions and epilepsy, Gangrene, Influenza, Pneumonia, Acute ischaemic heart disease, convulsions)
- Lower respiratory tract infections in 0-18yrs
- Asthma, epilepsy and diabetes in 0-18yrs

Difference in HES data obtained by CSU compared to NHS England reported figures:

<table>
<thead>
<tr>
<th>Composite total of Emergency Admissions</th>
<th>Apr 12</th>
<th>May 12</th>
<th>Jun 12</th>
<th>Jul 12</th>
<th>Aug 12</th>
<th>Sep 12</th>
<th>Oct 12</th>
<th>Nov 12</th>
<th>Dec 12</th>
<th>Jan 13</th>
</tr>
</thead>
<tbody>
<tr>
<td>City and Hackney – HES data, from CSU</td>
<td>71</td>
<td>77</td>
<td>94</td>
<td>84</td>
<td>89</td>
<td>63</td>
<td>68</td>
<td>97</td>
<td>84</td>
<td>85</td>
</tr>
<tr>
<td>NHS England Reported for C&amp;H: Operational Planning Atlas</td>
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<td>134</td>
<td>131</td>
<td>136</td>
<td>101</td>
<td>122</td>
<td>121</td>
<td>151</td>
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</tr>
<tr>
<td>NHSE reported for C&amp;H: BCF data sheet</td>
<td>84</td>
<td>90</td>
<td>88</td>
<td>85</td>
<td>86</td>
<td>78</td>
<td>80</td>
<td>82</td>
<td>98</td>
<td>85</td>
</tr>
</tbody>
</table>

Large differences between NHS England reported figures in the CCH Operational Planning Atlas and the data released for the BCF planning process (the BCF data is for Hackney and is based on resident not registered population, which may account for some of the difference). Data more similar for HES data obtained by CSU to the NHS England BCF data – for some months the same figure but some months 25% difference in counts of admissions (difference shown in graph below):
Count of emergency admissions: composite measure. HES data refers to City and Hackney, NHSE data for Hackney alone.

The crude rate of emergency admissions (count of admissions per 1000 population; no standardisation) is much lower for City and Hackney than England (this could be linked with our young population: fewer admissions in young people, therefore a crude rate will be lower). **NB:** linked with the data issues indicated above, the admissions rate for HES (obtained by CSU) is different to the one published by NHS England on the CCG Operational Planning Atlas.

Rate of emergency admissions: composite measure per 1000 population. Source: HES and NHSE

Using HES to look at all emergency admissions (excluding maternity, dental, sickle cell and mental health), City and Hackney seem to have a similar crude admission rate to London (only slightly
lower), with around 1750 admissions per month. The rate of admissions for over 75s is around 6 times higher (as over 75s is a smaller population with higher numbers of admissions), with around 350 admissions per month.

Emergency admissions: rates per 1000 population and counts (ALL non-elective excluding maternity, dental, sickle cell and mental health) – all ages, City and Hackney and London. Source: HES, Commissioning Support Unit
Delayed transfers of care

Total number of delayed days per month (ages 18+), Hackney. Source: NHSE data

Proportion of older people still at home 91 days after hospital discharge into rehabilitation

People discharged in to (and still in after 91 days) reablement/rehabilitation services (ages 65+), 2011/12, 2012/13. Source: NHSE data

For Hackney, in 2011/12 the 90.5% equates to 200 patients (out of 220) and in 2012/13 the 90.8% to 235 patients (out of 260).
Emergency bed days

All ages

City and Hackney patients spent over 47,500 emergency bed days over 2012/13 (all providers and all ages). Approximately 20% of these bed days were over the trim point.

Total emergency bed days, within and beyond the trim point (all ages), 2012/13. Source: Commissioning Support Unit

8 HRG chapters account for 75% of the total emergency bed days for all ages (35,600 of the total 47,500). The below graph shows how the number of emergency bed days for each of the top 8 HRGs varies across 2012/13:

Total emergency bed days by HRG chapter (all ages), 2012/13. Source: Commissioning Support Unit
There were 9,300 excess bed days (over trim point) for all ages over 2012/13. 73% of these (6,800) were accounted for by 7 HRG chapters. The make-up of this 73% of excess bed days by these HRG chapters (compared with the total number of excess bed days) is shown below:

**Number excess emergency bed days (beyond trim point) by HRG chapter (all ages), 2012/13. Source: Commissioning Support Unit**

Looking at cost of bed days for all ages, admissions which do not go over the trim point make up 82% of City and Hackney spend on bed days/admissions. Admissions which go over trim point make up 12% of City and Hackney spend on bed days/admissions (of which 57% of spend is on excess bed days). Across 2012/13 80% of City and Hackney spend on excess bed days (over trim point) is at the Homerton (range: 65-86% per month).

**Cost of emergency bed days, within and beyond the trim point (all ages). Source: Commissioning Support Unit**
Over 75s

City and Hackney patients aged over 75 spent over 14,200 emergency bed days over 2012/13 (all providers). Approximately 25% of these bed days were over the trim point.

Total emergency bed days, within and beyond the trim point (over 75s only). Source: Commissioning Support Unit

8 HRG chapters account for 86% of the total emergency bed days for over 75s (12,200 of the total 14,200). The below graph shows how the number of emergency bed days for each of the top 8 HRGs varies across 2012/13:

Total emergency bed days by HRG chapter (over 75s), 2012/13. Source: Commissioning Support Unit
There were 3,500 excess bed days (over trim point) for over 75s over 2012/13. 80% of these (2,600) were accounted for by 6 HRG chapters. The make-up of this 80% of excess bed days by these HRG chapters (compared with the total number of excess bed days) is shown below:

**Number excess emergency bed days (beyond trim point) by HRG chapter (over 75s), 2012/13. Source: Commissioning Support Unit**

Looking at cost of bed days for over 75s, admissions which do not go over the trim point make up 77% of City and Hackney spend on bed days/admissions. Admissions which go over trim point make up 19% of City and Hackney spend on bed days/admissions (of which 60% of spend is on excess bed days). Across 2012/13, 87% of City and Hackney spend on excess bed days (for over 75s) at all providers is at the Homerton (range: 64-98% per month).

**Cost of emergency bed days, within and beyond the trim point (over 75s). Source: Commissioning Support Unit**
Number of readmissions to hospital within 30 days of discharge

Over April 2012 to November 2013, there were over 6,100 readmissions within 30 days of discharge of City and Hackney patients (all providers).

Due to IG issues, small numbers (any with value of less than 6) had to be repressed by the CSU in giving the data to the CCG, so I have assumed all cells where the data had to be repressed to have a value of 6 when calculating totals.

Number of readmissions within 30 days of discharge (all providers) by age group. Source: Commissioning Support Unit

To account for the higher number of admissions in different age groups, readmissions can also be expressed as a % of emergency admissions in each age group:

Readmissions within 30 days of discharge expressed as a % of all emergency admissions (all providers) by age group. Source: Commissioning Support Unit
Percentage of deaths in hospital

City and Hackney is in the highest quintile in the country for % of deaths in hospital (but 16th highest of 31 PCTs in London).

Percentage of deaths in hospital by gender and age group, City and Hackney, England and London. Source: EOLC Intelligence Network, 2008-2010

Therefore, males 0-64 have higher % of deaths than England, but main issue is with females who for all ages have higher % of deaths in hospital than England (and higher than London for 65-84 and 85+).