

LA area data profile: Older people's pathway

Southampton

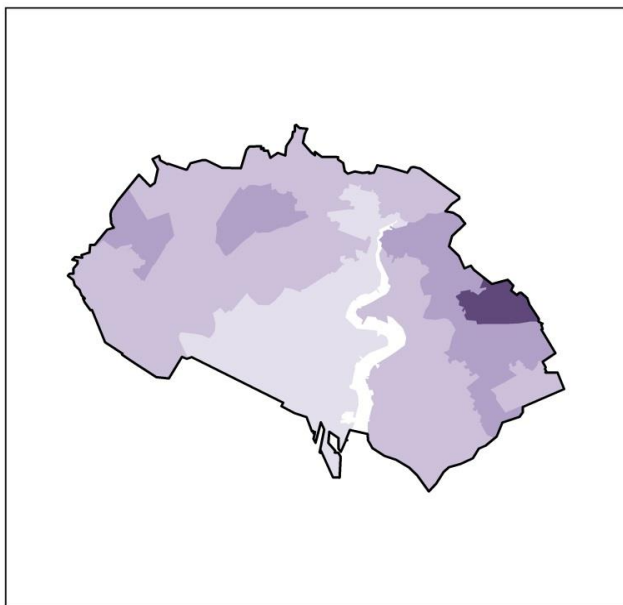
Date produced: 18 July 2019

Contact: [arealevelanalytics@cqc.org.uk](mailto:arealevelanalytics@cqc.org.uk)

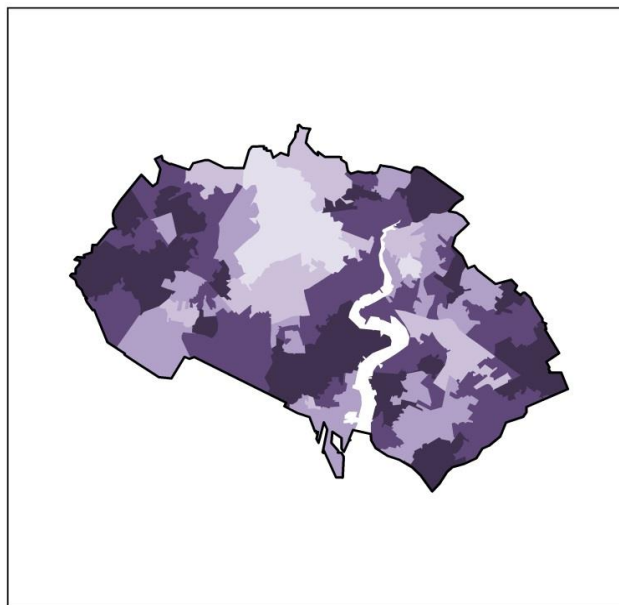
## Context

This data profile uses analysis to help identify issues within health and care systems in local authority areas. It is focused on care for older people (aged 65+), however some indicators are for the whole adult population. Full information about the analysis can be found in the technical [Link to technical appendix](#)

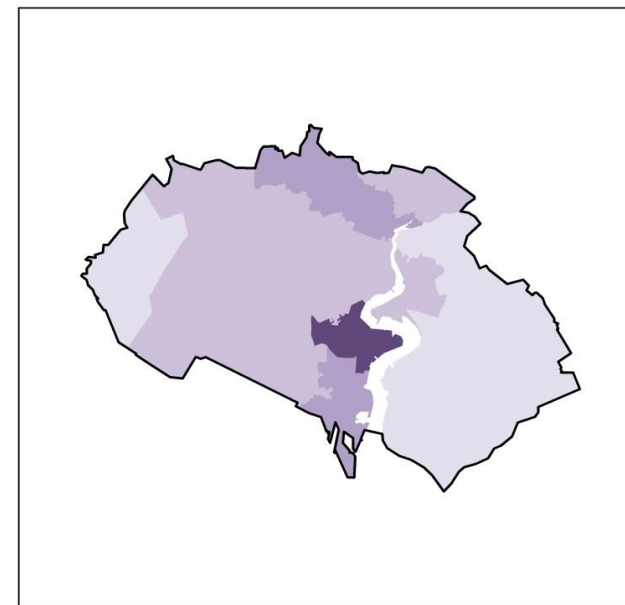
Demographic map- Age



Demographic map- Deprivation



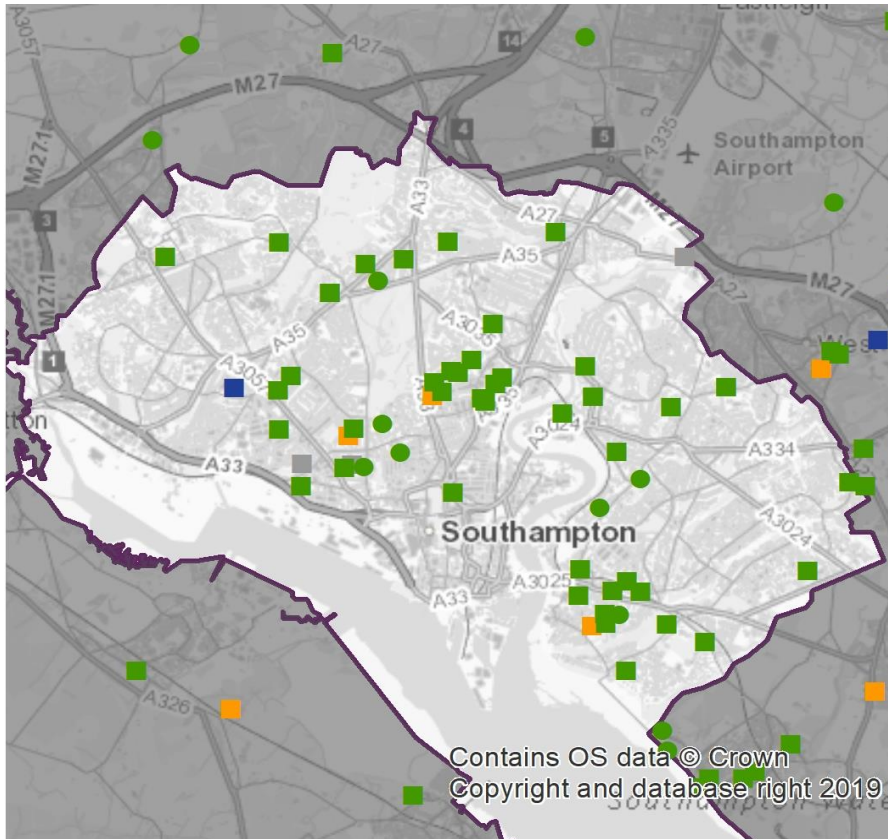
Demographic map- Ethnicity



# Ratings – adult social care



This map shows the overall ratings of active adult social care locations in Southampton. There may be multiple locations in one position so not all locations may be visible.



### Nursing homes - see circles on map

	Inadequate	R.I.*	Good	Outstanding	Unrated
This LA	0% (0)	0% (0)	100% (10)	0% (0)	0% (0)
Comparators	0%	22%	72%	2%	3%
England	2%	21%	68%	4%	4%

### Residential care homes - see squares on map

	Inadequate	R.I.*	Good	Outstanding	Unrated
This LA	0% (0)	8% (4)	87% (46)	2% (1)	4% (2)
Comparators	1%	12%	78%	4%	4%
England	1%	13%	79%	3%	4%

### Domiciliary care agencies - not shown on map

	Inadequate	R.I.*	Good	Outstanding	Unrated
This LA	0% (0)	6% (2)	71% (25)	3% (1)	20% (7)
Comparators	0%	12%	61%	4%	23%
England	1%	10%	65%	3%	21%

### Community care services - not shown on map

	Inadequate	R.I.*	Good	Outstanding	Unrated
This LA	0% (0)	0% (0)	33% (2)	0% (0)	67% (4)
Comparators	0%	7%	79%	3%	11%
England	0%	5%	69%	4%	22%

\*R.I. = requires improvement

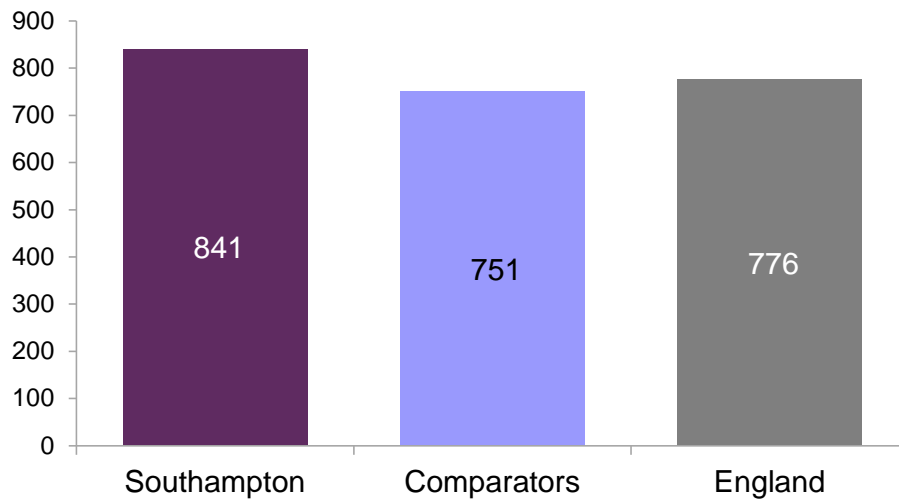
Numbers in brackets are the number of locations.

CQC data accessed on 18/07/19.

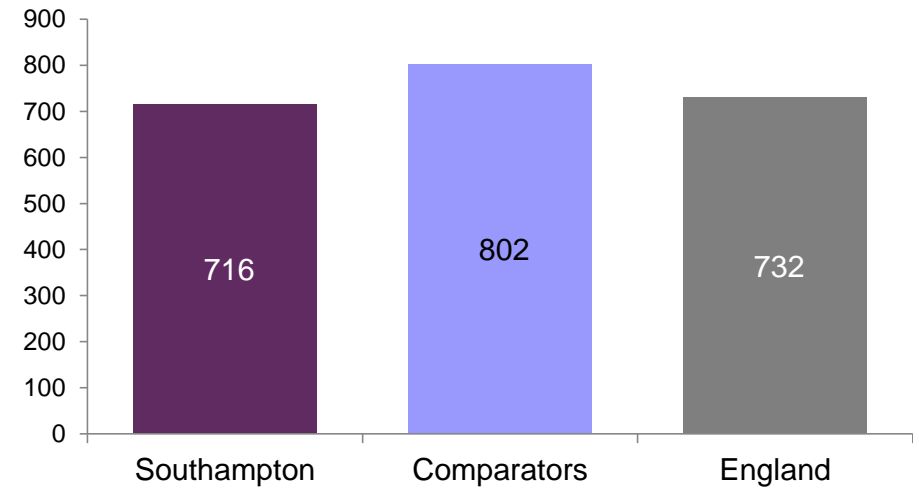
# Service provision – adult social care service provision



### Residential care beds per LA population (65+)



### Nursing care beds per LA population (65+)



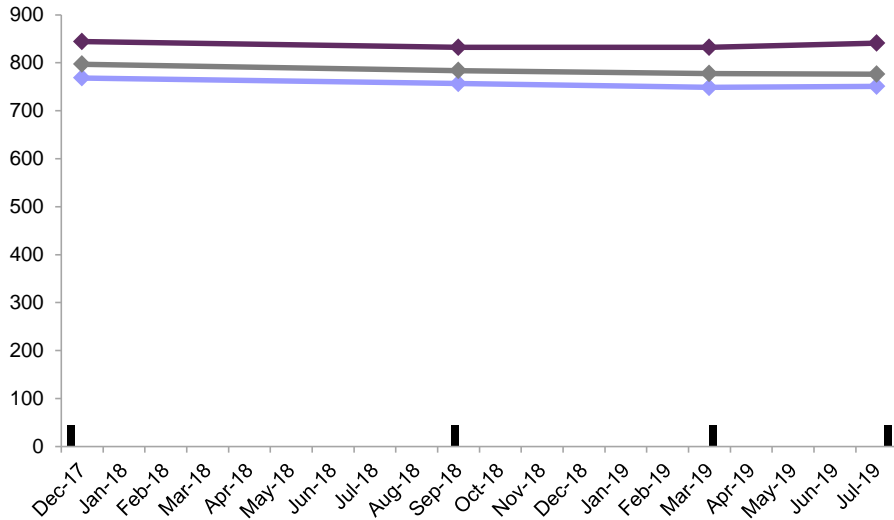
This slide shows the number of residential and nursing care home beds for the population of Southampton LA as at 18/07/19. The comparator group and England bars represent the number of care home beds available across those areas if their older populations were scaled to the same size as Southampton's older population. Population figures are ONS mid year estimates published for 2017.

# Service provision – change in care bed numbers



This slide shows change in residential and nursing care home beds per population aged 65+ between each iteration of this profile. The data points shown in the charts below correspond with the dates previous area profiles were produced and are also marked along the bottom of the charts.

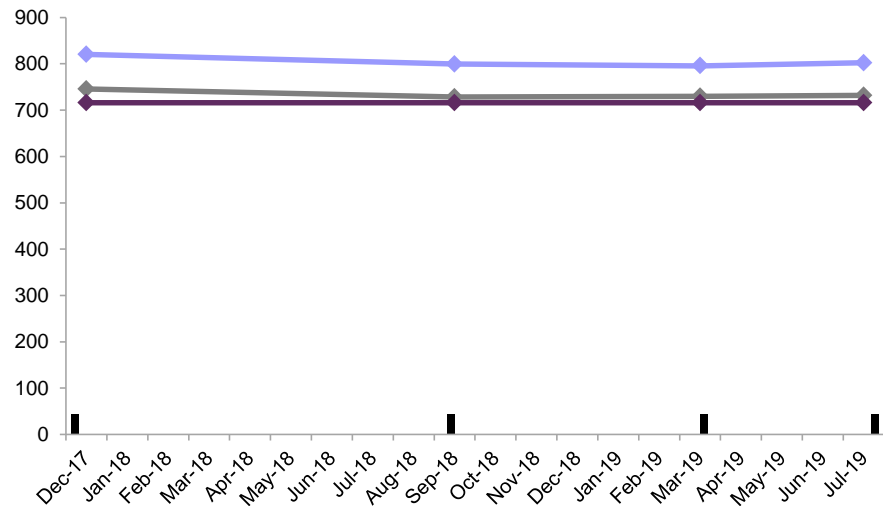
**Weighted provision of residential home beds over time**



Change in residential home beds between the profile published in December 2017 and this current profile:

Southampton	-0.4%	<span style="display:inline-block; width:10px; height:10px; background-color:purple;"></span>
Comparators	-2.3%	<span style="display:inline-block; width:10px; height:10px; background-color:blue;"></span>
England	-2.7%	<span style="display:inline-block; width:10px; height:10px; background-color:grey;"></span>

**Weighted provision of nursing home beds over time**



Change in nursing home beds between the profile published in December 2017 and this current profile:

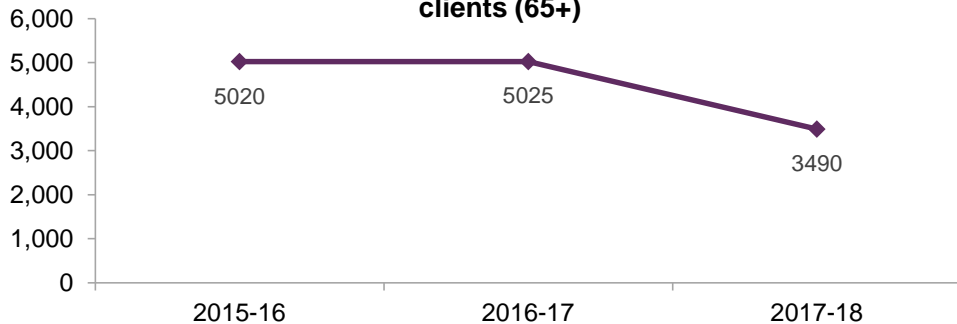
Southampton	0.0%	<span style="display:inline-block; width:10px; height:10px; background-color:purple;"></span>
Comparators	-2.2%	<span style="display:inline-block; width:10px; height:10px; background-color:blue;"></span>
England	-1.9%	<span style="display:inline-block; width:10px; height:10px; background-color:grey;"></span>

# Service provision – requests for ASC support

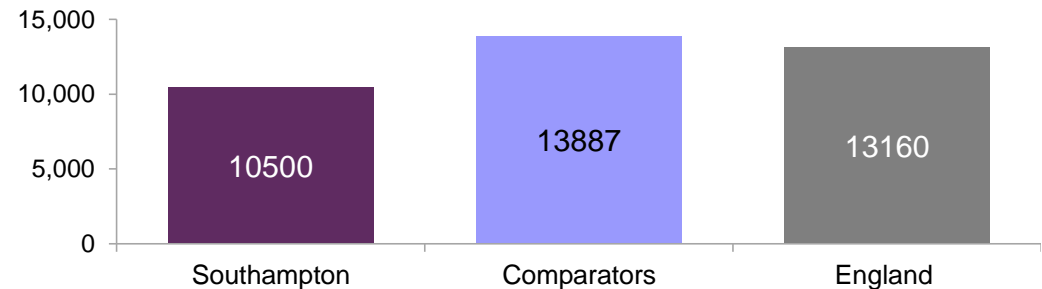


This slide shows the number of requests for adult social care support from new clients aged 65+ received by the selected local authority over the last 3 years and the rate of requests per 100,000 population in 2017/18 in the selected local authority compared to the average across comparator areas and England. This data was taken from the Adult Social Care Activity and Finance Report.

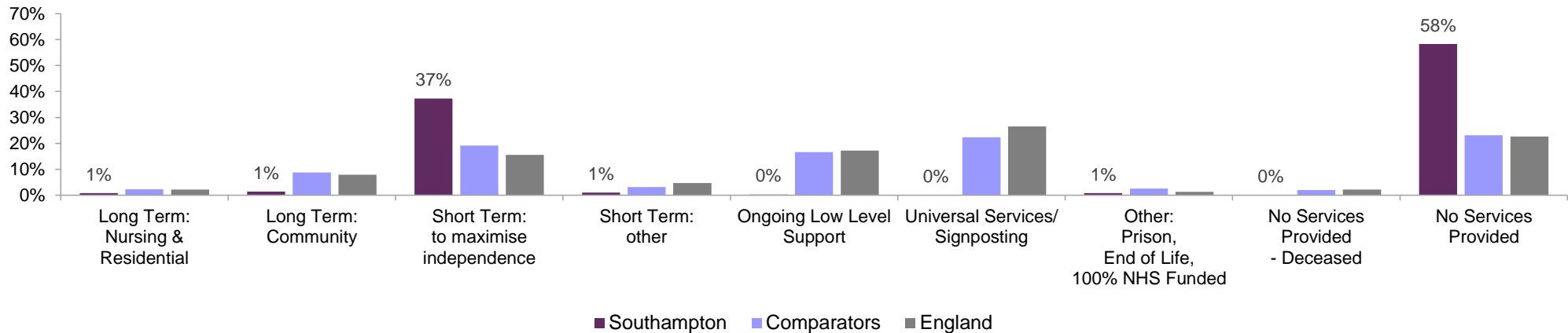
**Number of requests for ASC support received from new clients (65+)**



**Requests for ASC support received from new clients (65+), per 100,000 population (65+) (2017/18)**



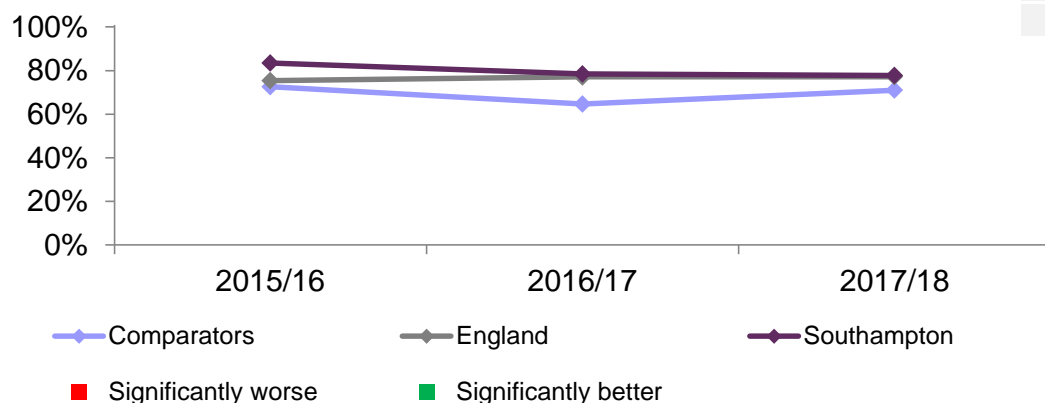
**Services received by new clients (65+) requesting ASC support in 2017/18**



# Service provision – short-term treatment outcomes and long-term care home admissions



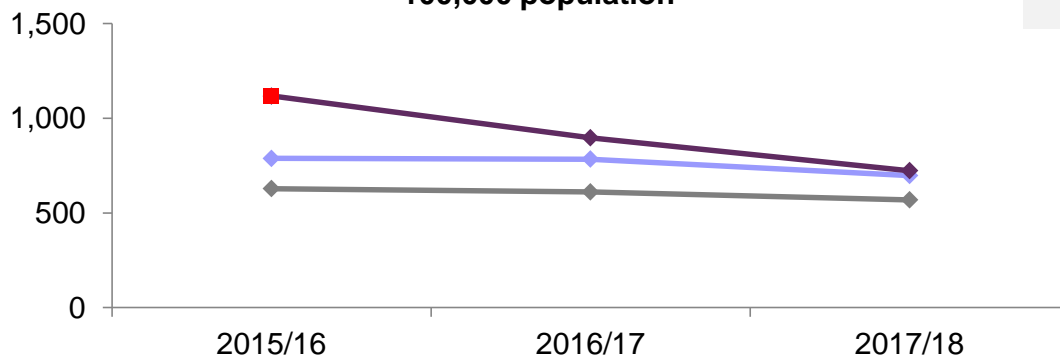
**Proportion of new service users (65+) who received a short term service to maximise independence who then required no ongoing support or support of a lower level**



	15/16	16/17	17/18
<b>Southampton</b>	<b>83%</b>	<b>78%</b>	<b>78%</b>
Comparators	73%	65%	71%
England	75%	77%	77%

This chart and table shows the proportion of older people (65+) who requested adult social care support from their local authority as a new service user and received a short term service to maximise their independence and who then went on to require no further ongoing support or support at a lower level. This data is taken from the Adult Social Care Outcomes Framework (ASCOF).

**Long-term support needs of older adults (65+) met by admission to residential and nursing care homes, per 100,000 population**

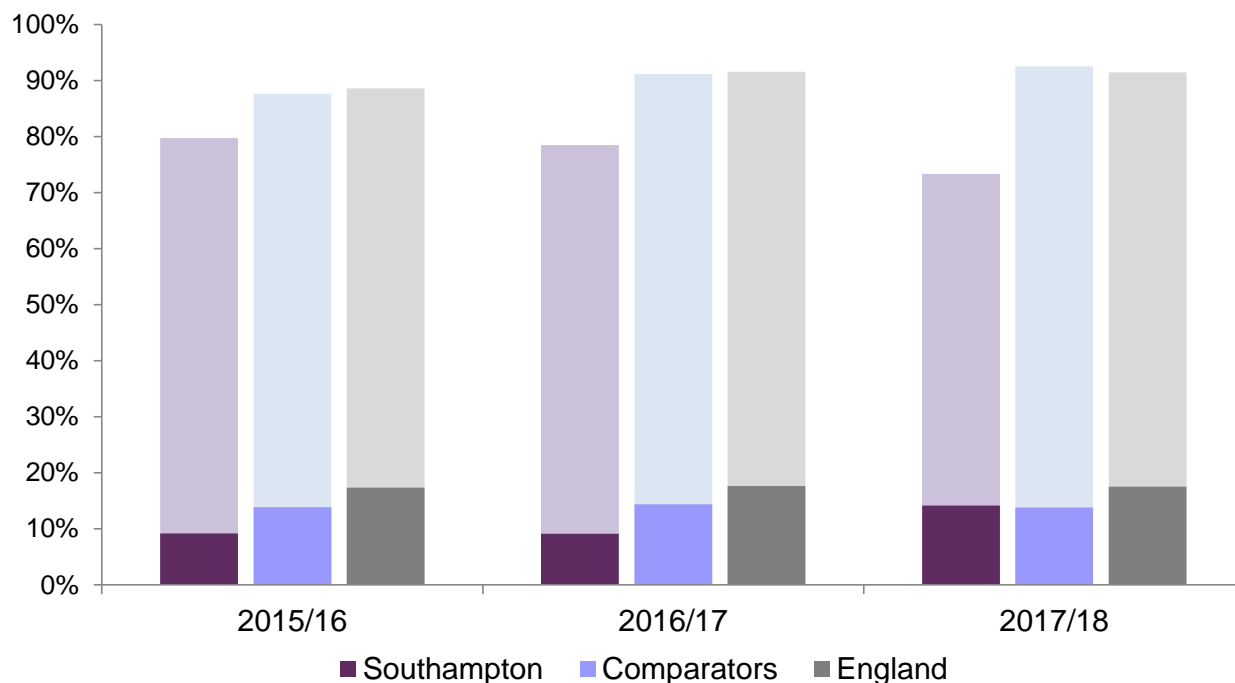


	15/16	16/17	17/18
<b>Southampton</b>	<b>1117</b>	<b>897</b>	<b>723</b>
Comparators	788	784	698
England	628	611	568

This chart and table shows the rate of council-supported older people (65+) whose long-term support needs were met by a change of setting to residential or nursing care during the year per 100,000 population. This data is taken from the Adult Social Care Outcomes Framework (ASCOF).

# Service provision – self directed support and direct payments for ASC

**Percentage of ASC service users (65+) who receive a direct payment**  
(Plus percentage receiving any other self-directed support)



Percentage of ASC service users aged 65+ who received any self-directed support (including direct payments)

	15/16	16/17	17/18
<b>Southampton</b>	<b>79.7%</b>	<b>78.5%</b>	<b>73.3%</b>
Comparators	87.6%	91.2%	92.5%
England	88.6%	91.6%	91.4%

Percentage of ASC service users aged 65+ who received direct payments

	15/16	16/17	17/18
<b>Southampton</b>	<b>9.2%</b>	<b>9.1%</b>	<b>14.2%</b>
Comparators	13.9%	14.4%	13.8%
England	17.3%	17.6%	17.5%

The bold-coloured bars on the chart show the percentage of people aged 65+ who were accessing long-term adult social care support at the end of March of each year who were receiving direct payments. The lighter shaded area of each bar represents the percentage who have a council-managed Personal Budget in place (another kind of self-directed support).



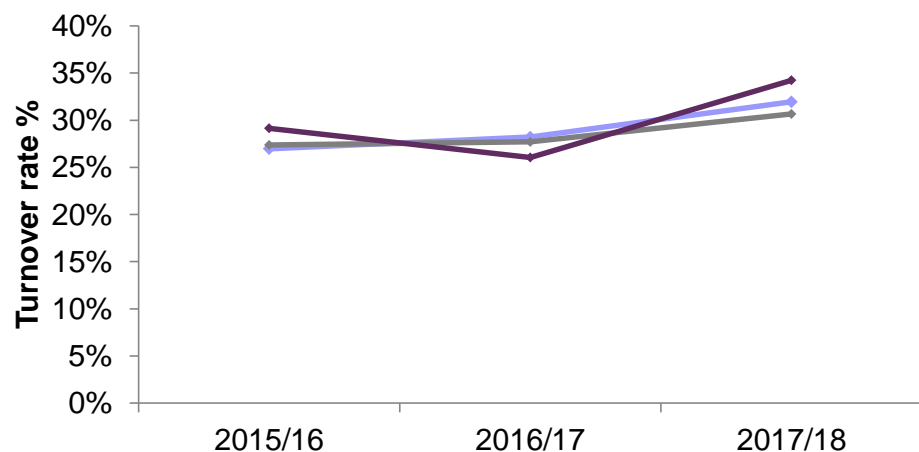
# Staffing – adult social care turnover and vacancy



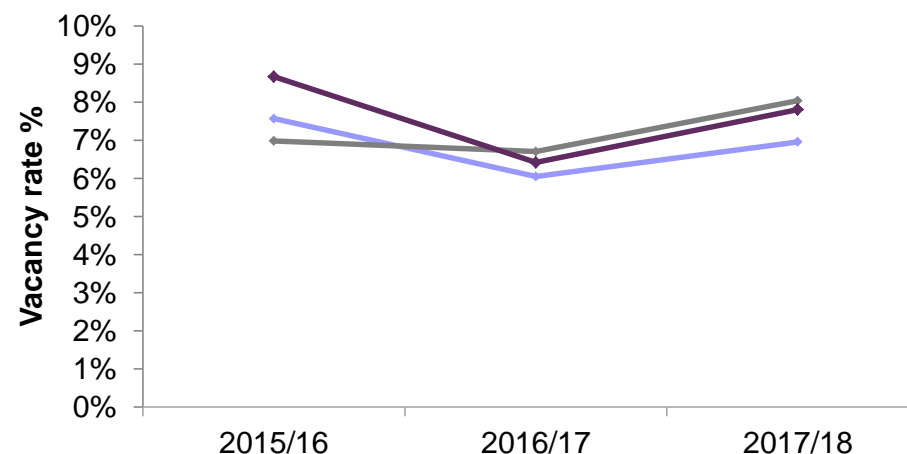
Area	Turnover rates		
	15/16	16/17	17/18
<b>Southampton</b>	<b>29.1%</b>	<b>26.0%</b>	<b>34.2%</b>
Comparators	27.0%	28.2%	31.9%
England	27.4%	27.7%	30.7%

Area	Vacancy rates		
	15/16	16/17	17/18
<b>Southampton</b>	<b>8.7%</b>	<b>6.4%</b>	<b>7.8%</b>
Comparators	7.6%	6.1%	7.0%
England	7.0%	6.7%	8.0%

**ASC staff turnover rates 2015 - 2018**



**ASC staff vacancy rates 2015 - 2018**



◆ Comparators     
 ◆ England     
 ◆ Southampton  
■ Significantly better     
 ■ Significantly worse

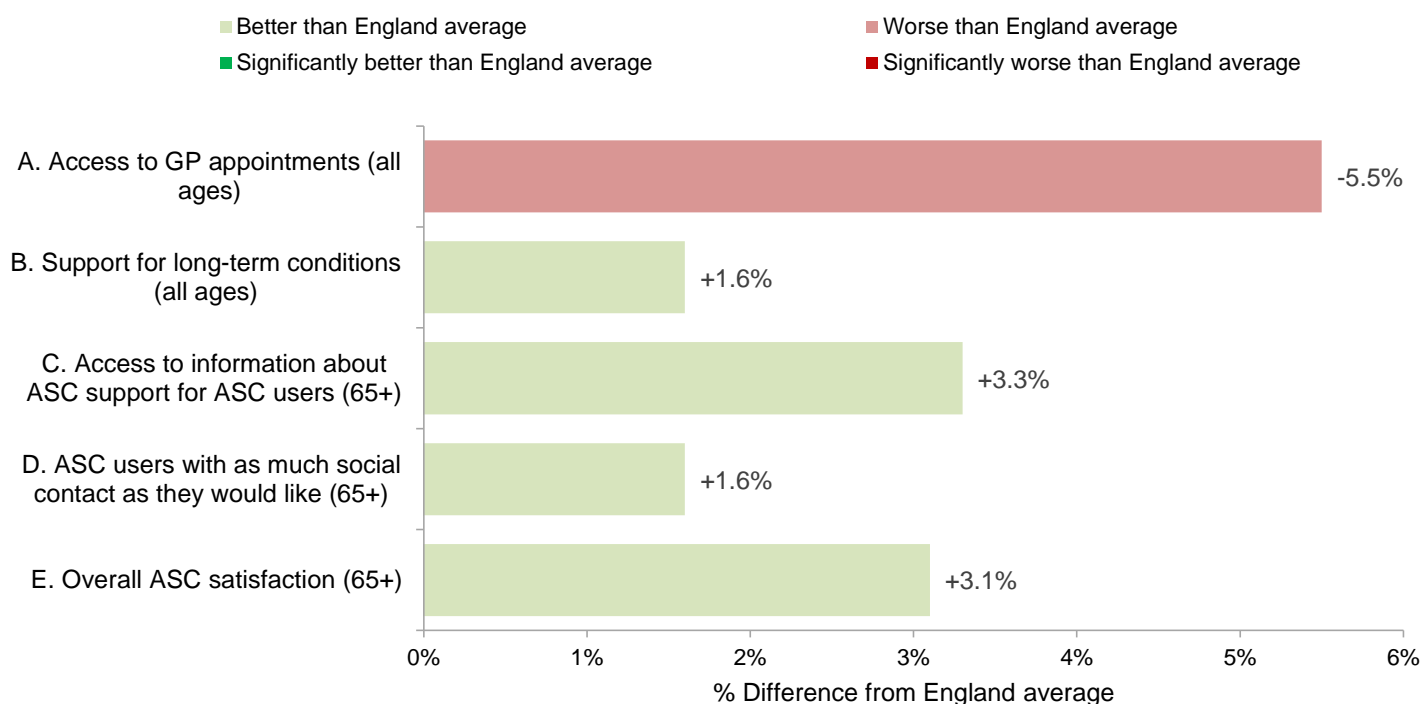
◆ Comparators     
 ◆ England     
 ◆ Southampton  
■ Significantly better     
 ■ Significantly worse

This slide provides information on estimated levels of staff turnover and vacancies within adult social care services in recent years. These estimates are developed by the Workforce Intelligence team at Skills for Care using data supplied by adult social care organisations. Data may be subject to data quality and completeness issues. Data supplied directly to CQC by Skills for Care in July 2018.

# Service user experience measures



## Performance of Southampton compared to the England average on selected 2017/18 patient experience measures



Measure	Southampton	England
A	63.2%	68.7%
B	61.2%	59.6%
C	78.3%	75.0%
D	45.6%	44.0%
E	66.0%	62.9%

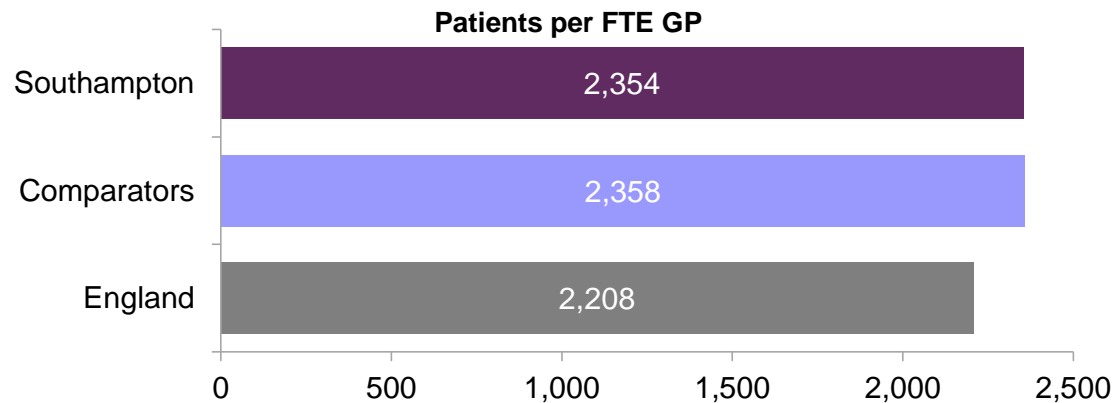
The chart above shows the performance of Southampton compared to the England average for selected service user experience measures. Measures where Southampton is performing better than the England average are in green and measures where it is performing worse than the England average are in red. Bolder colours mean performance is significantly better or worse. The actual values for each measure are detailed in the table on the right. Details of the source and time period of each measure is detailed in the technical appendix.

# Service provision – GP ratings, extended access and workforce



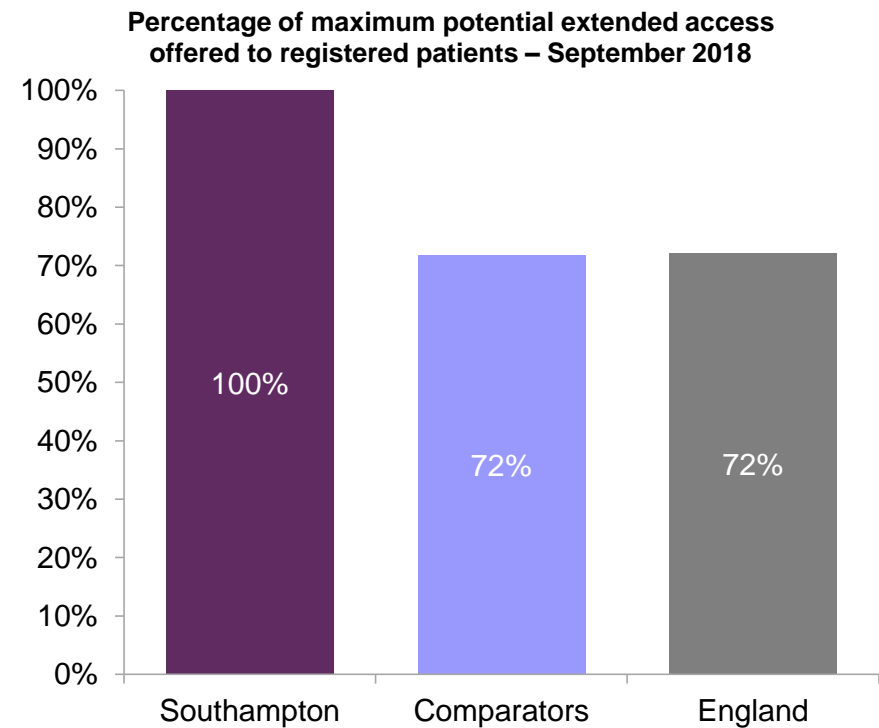
	GP ratings as at 18/07/19				
	Inadequate	R.I.*	Good	Outstanding	Unrated
This LA	0% (0)	0% (0)	100% (24)	0% (0)	0% (0)
Comparators	2%	5%	86%	4%	3%
England	1%	4%	86%	4%	5%

	Provision by GP practice			
	Full	Partial	None	No Data
Southampton	100%	0%	0%	0%
Comparators	53%	34%	9%	4%
England	54%	34%	8%	5%



The table at the top left of this slide shows CQC overall ratings of GP surgeries physically located within the LA. The chart above shows the number of registered patients for each full time equivalent GP working in surgeries located within the LA and across comparator areas at March 2019.

The table and chart on the right show the provision of extended access to GP appointments as at September 2018. NHS England set a target for CCGs to provide extended access for 100% of their population by 1 October 2018.



# Main community, mental health and combined provider(s)



The following provider(s) have been identified as serving Southampton based upon data on non-acute delayed transfers of care. This is a proxy measure and some providers may be missing, see technical appendix for further details. CQC data accessed 18/07/19

Trust code	Trust name	Primary inspection category	Overall Rating
R1C	Solent NHS Trust	Community health - NHS & Independent	Good
RW1	Southern Health NHS Foundation Trust	Mental health - community & residential - NHS	Requires improvement

## Community and MH core services relevant to older people

	R1C	RW1
Community health inpatient services	Good	Good
Community health services for adults	Good	Good
Community health (sexual health services)		
Community dental services		
Community end of life care		Good
Urgent care services		Requires improvement
Mental health crisis services and health-based places of safety	Good	Requires improvement
Wards for older people with mental health problems	Good	Requires improvement
Community-based mental health services for older people	Good	Good
Community mental health services for people with learning disabilities or autism		Good
Forensic inpatient/secure wards		Requires improvement

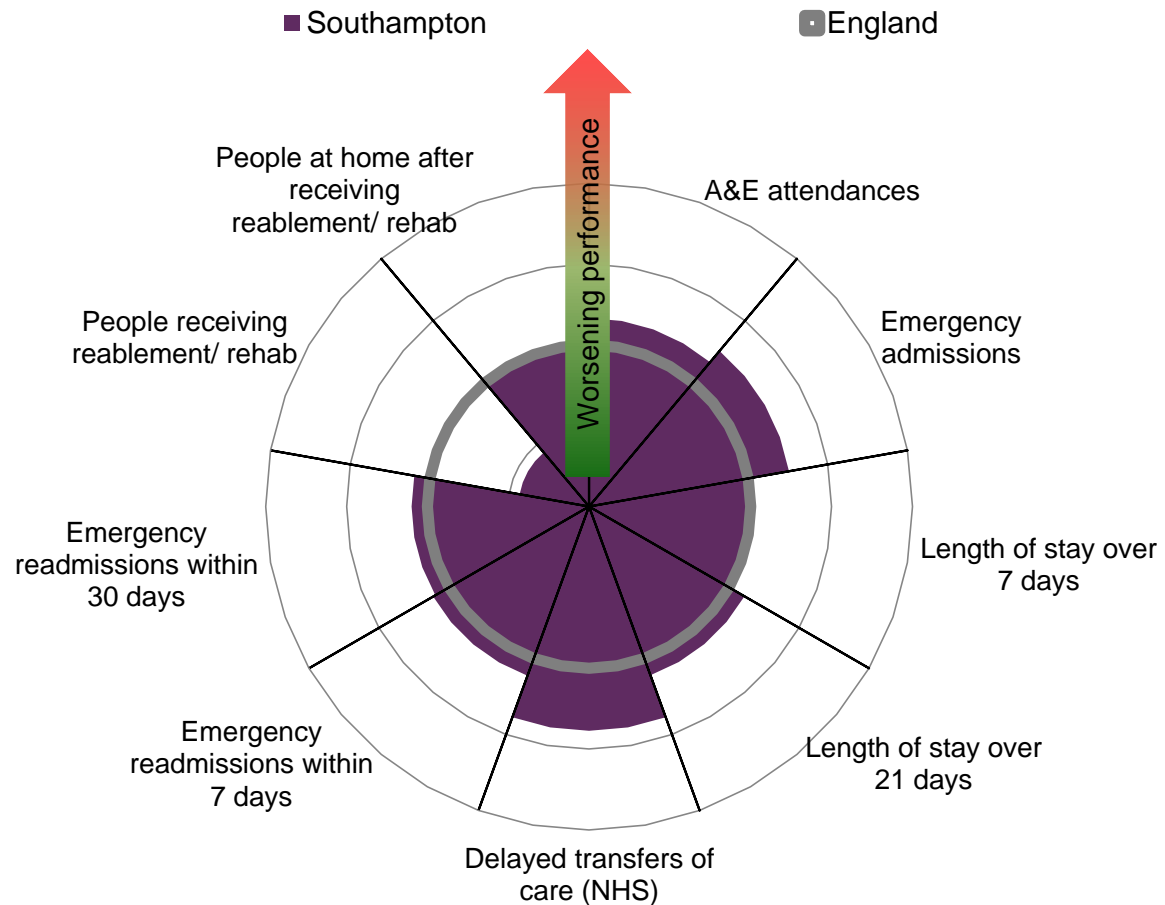
# Activity – acute hospital pathway overview



## Dartboard for all hospital attendees/admissions aged 65+

The shaded purple area in the dartboards represents the LA's performance relative to the average performance across England, which is denoted by the bold grey line. If the LA performance extends beyond the bold grey line then the performance of the LA is worse than the England average. Moving clockwise around the dartboards represents elements of an acute hospital pathway, through A&E attendance, to admission, discharge and readmission.

Time periods differ between indicators. Full details can be found in the technical appendix (linked in slide 2)



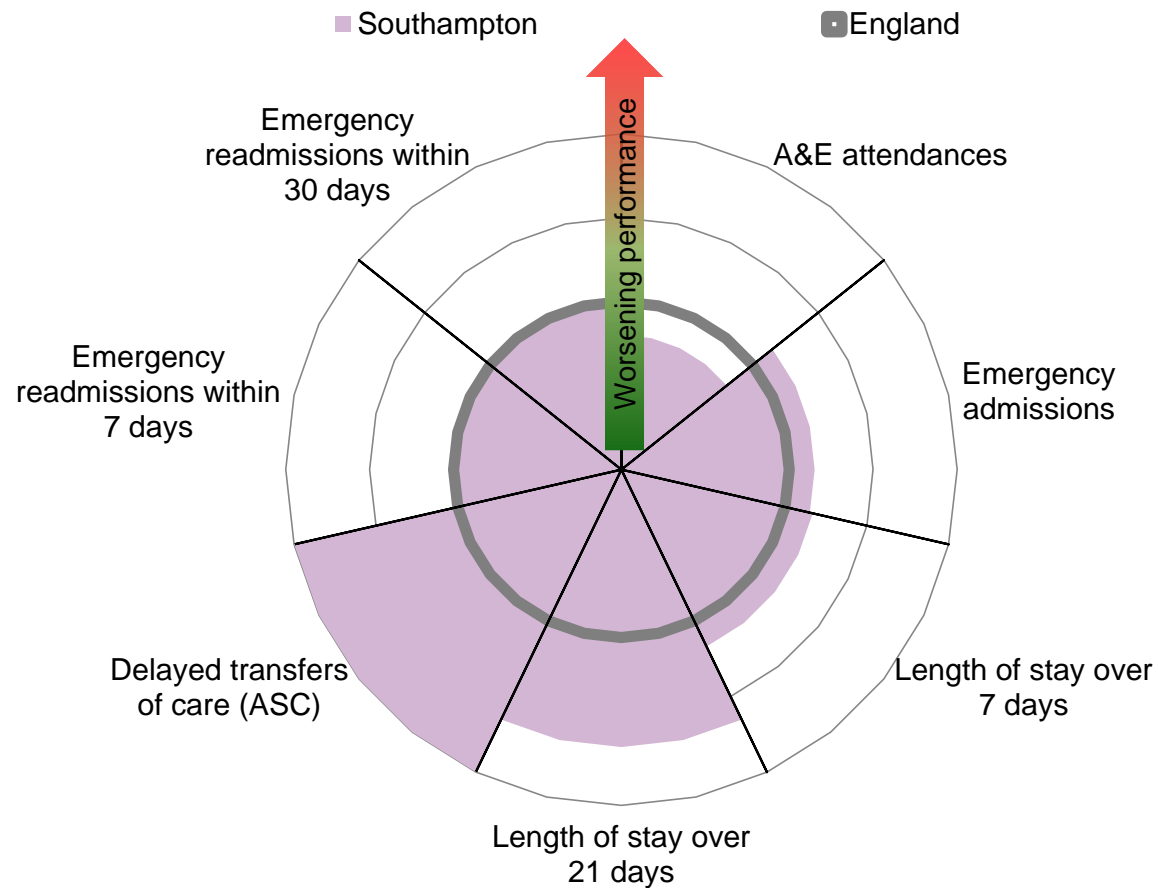
# Activity – acute hospital pathway overview (from care homes)

## Dartboard for hospital attendees/admissions aged 65+ coming from care homes

The shaded purple area in the dartboards represents the LA's performance relative to the average performance across England, which is denoted by the bold grey line. If the LA performance extends beyond the bold grey line then the performance of the LA is worse than the England average. Moving clockwise around the dartboards represents elements of an acute hospital pathway, through A&E attendance, to admission, discharge and readmission.

The analysis uses postcode of residence to identify activity from care homes. As such, it may include data pertaining to other addresses within the same postcode and overestimate activity from care homes.

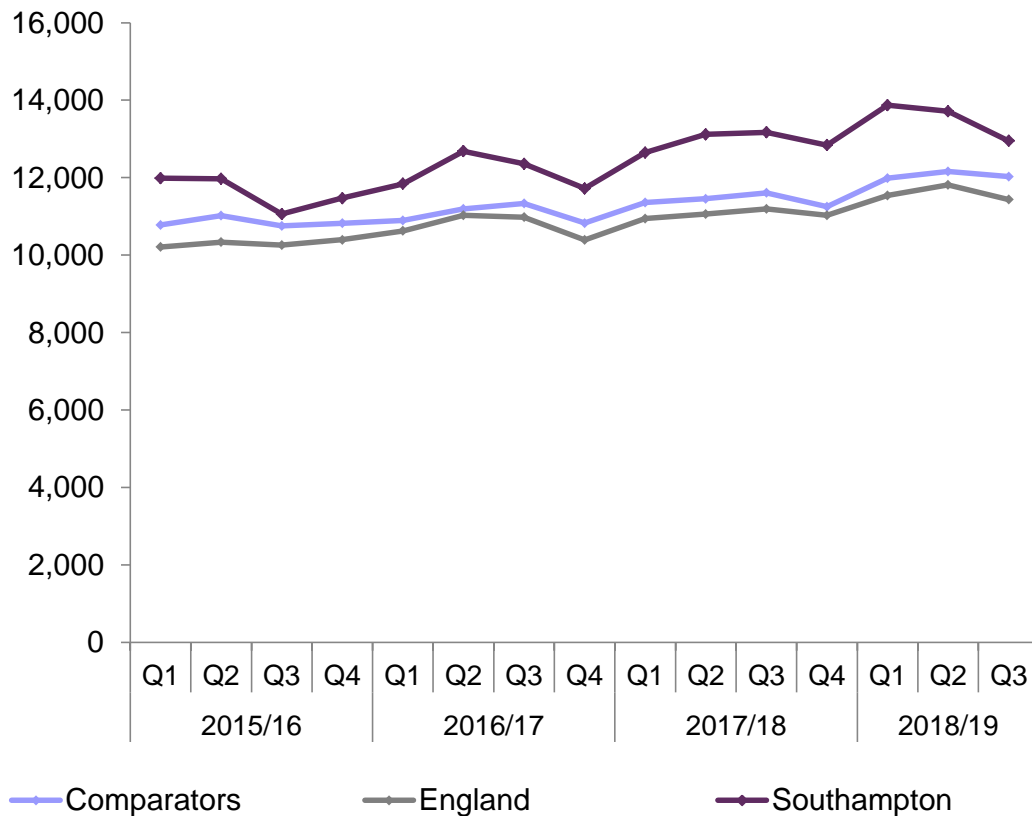
Time periods differ between indicators. Full details can be found in the technical appendix (linked in slide 2)



# Activity – A&E attendances aged 65+



**Rate of A&E attendances per 100,000 population aged 65+**



This slide shows analysis of A&E attendance rates for people aged 65+. High rates of A&E attendance may indicate problems in system working and access to primary or community care. This is based on Hospital Episodes Statistics (HES) data from April 2015 - December 2018.

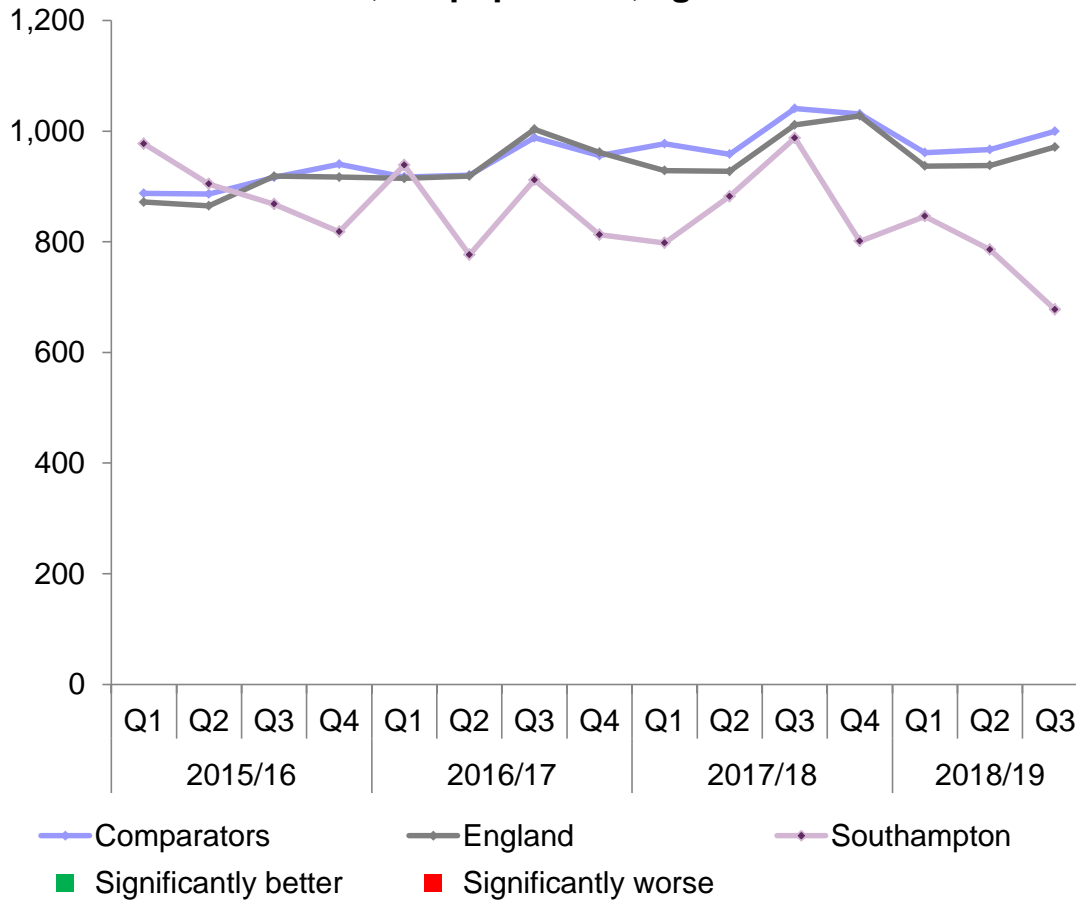
Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>12,841</b>	<b>13,868</b>	<b>13,717</b>	<b>12,949</b>
Comparators	11,248	11,983	12,161	12,025
England	11,025	11,537	11,810	11,436

■ Significantly better    ■ Significantly worse

# Activity – A&E attendances from care homes aged 65+



**Rate of A&E attendances from care homes per 100,000 population, aged 65+**



This slide shows analysis of A&E attendance rates for people aged 65+ coming from care homes. This is based on Hospital Episodes Statistics (HES) data from April 2015 - December 2018. The analysis uses postcode of residence to identify activity from care homes. As such, it may include data pertaining to other addresses within the same postcode and overestimate activity from care homes.

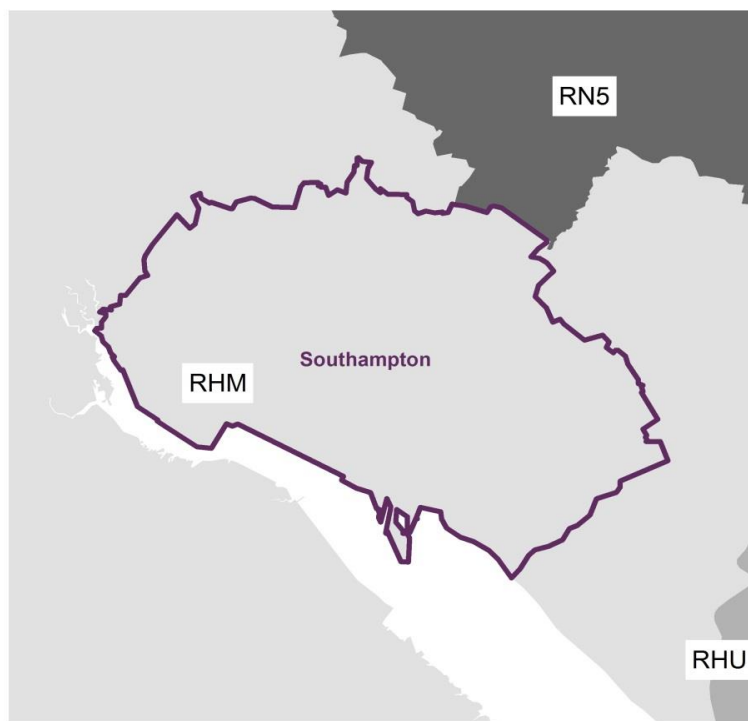
Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>801</b>	<b>846</b>	<b>786</b>	<b>677</b>
Comparators	1,031	961	967	1,000
England	1,028	937	938	971



# Ratings – main acute trust(s) by admissions



Trust code	Trust name	Rating	% of LA's admissions to trust	% of trust's admissions from LA
RHM	University Hospital Southampton NHS Foundation Trust	Good	96%	38%



The table above shows the main acute hospital trust(s) serving the LA population. Trusts are included in this list if they receive more than 10% of the LA's admissions (based on Hospital Episode Statistics (HES) activity across 2017/18).

Overall trust ratings are accurate as of 18/07/19.

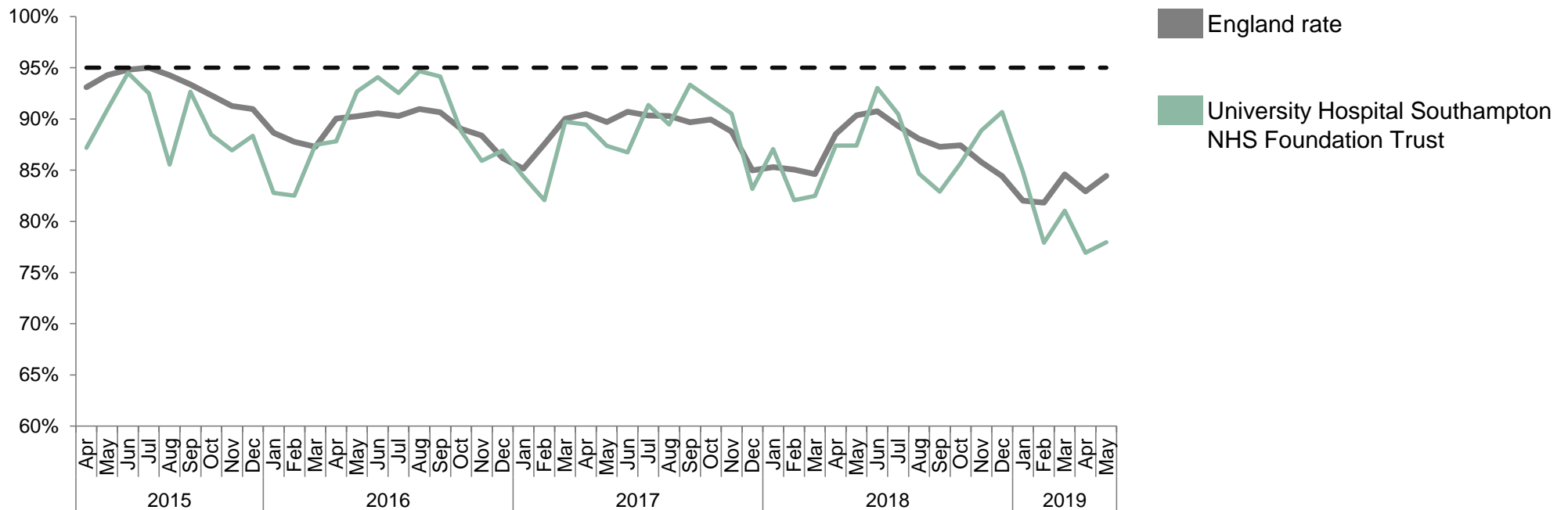
The map on the left shows the main trust(s) serving different parts of the LA (based on MSOA populations) as well as the surrounding area.

The trust boundaries are not to be seen as exclusive, rather the map serves more as a guide to which acute NHS trusts people residing in different parts of the LA are likely to access. The shading of the map does not indicate any value.

# Activity – A&E four hour waits



Percentage of A&E attendances seen within 4 hours



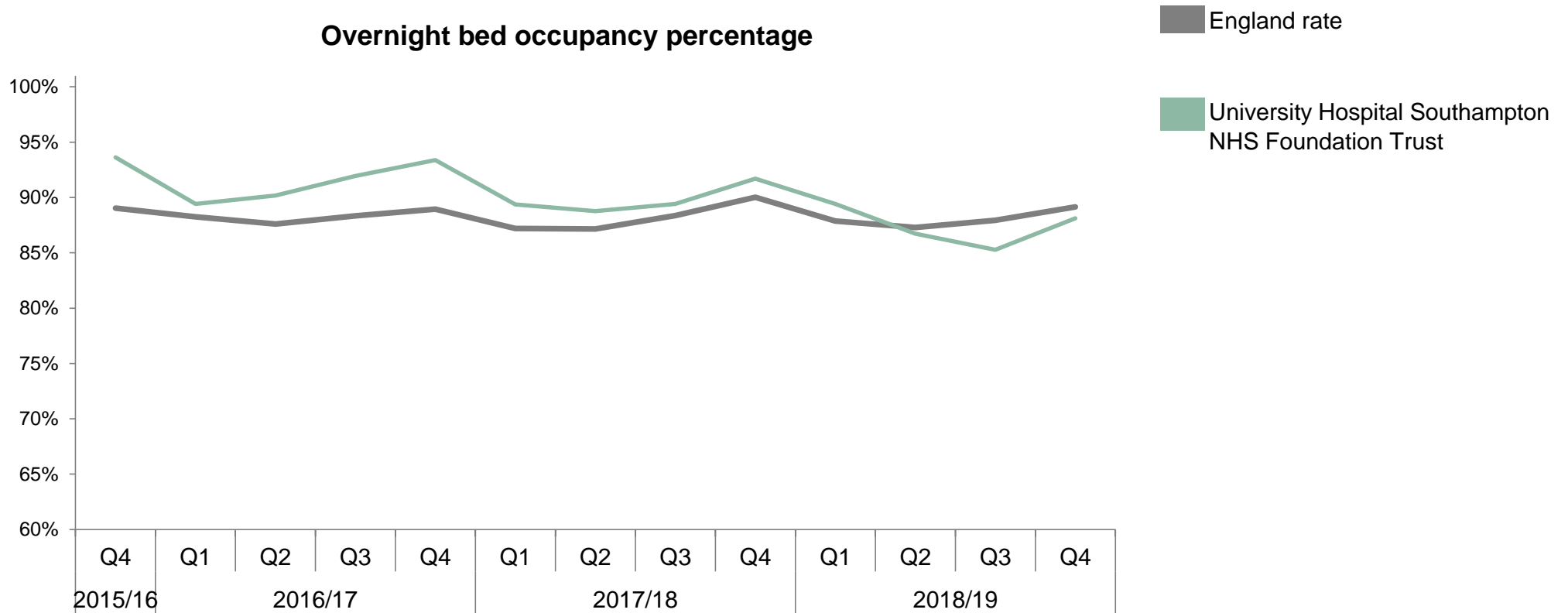
The NHS Constitution sets out that a minimum of 95% of patients attending an A&E department in England must be seen, treated and then admitted or discharged in under four hours. A&E waiting times are often used as a barometer for overall performance of the NHS and social care system. This is because A&E waiting times can be affected by changing activity and pressures in other services such as the ambulance service, primary care, community-based care and social services.

Please note that as at May 2019, fourteen NHS acute trusts have agreed to work with national bodies to test proposed new standards for urgent and emergency care and, as such, they are not returning data against the four hour standard. This will impact on the national average. Please see the technical appendix for further information.

# Service provision – acute bed occupancy



### Overnight bed occupancy percentage



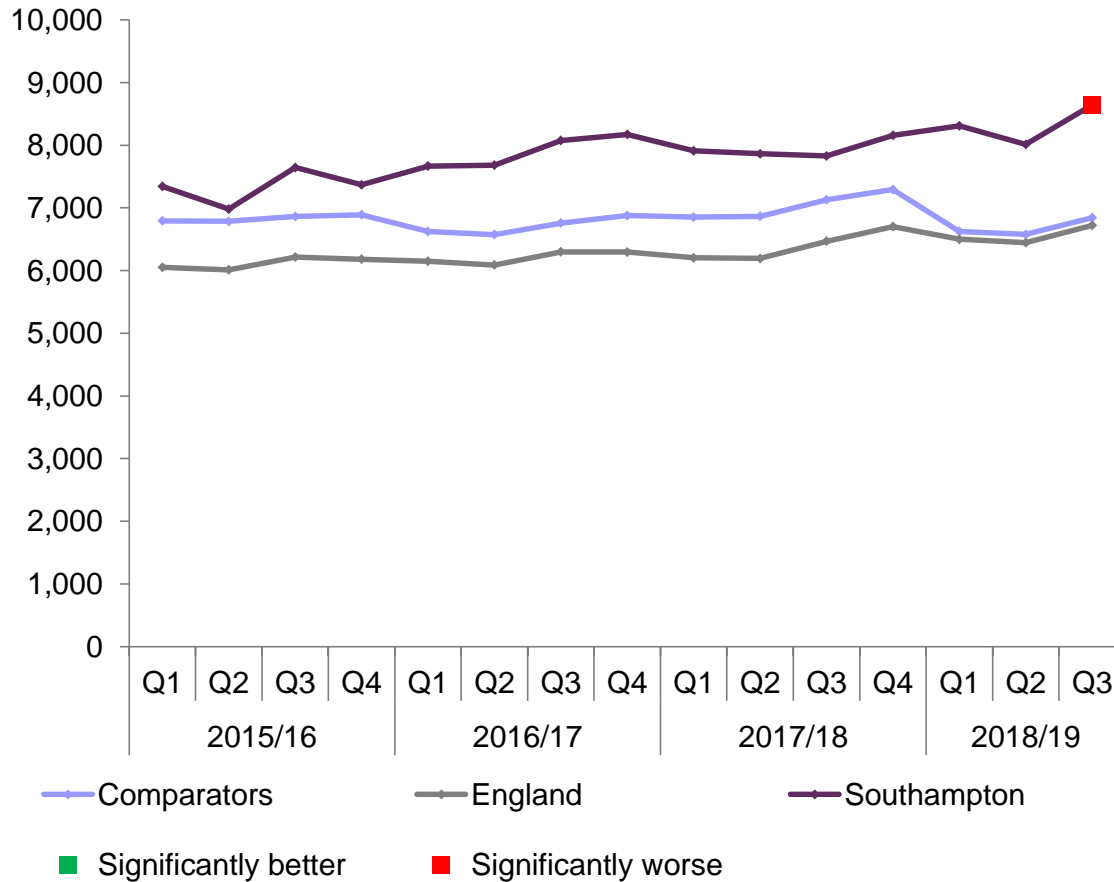
This slide shows the percentage of overnight beds that were occupied in the main trusts serving the LA in each quarter against England average figures for the quarter. Please note that England average figures for each quarter may be affected by missing data.

Although optimum occupancy rates for hospital beds may vary according to type of services offered, hospitals with average bed-occupancy levels above 85% risk facing regular bed shortages, periodic bed crises and increased numbers of health care-acquired infections.

# Activity – emergency admissions aged 65+



**Rate of emergency admissions per 100,000 population aged 65+**



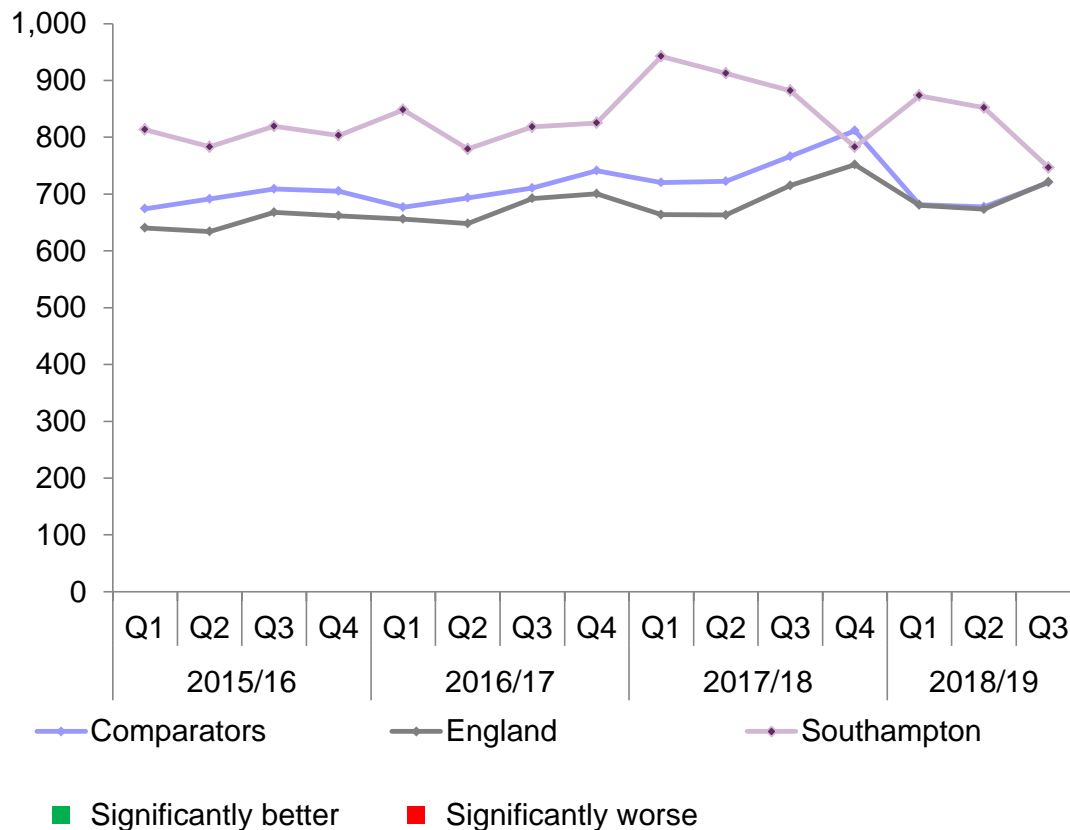
This slide shows analysis of emergency admission rates for people aged 65+. High rates of emergency admission may indicate problems with the wider health and social care system. This is based on Hospital Episodes Statistics (HES) data from April 2015 – December 2018

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>8,156</b>	<b>8,310</b>	<b>8,012</b>	<b>8,644</b>
Comparators	7,292	6,627	6,577	6,842
England	6,704	6,499	6,443	6,723

# Activity – emergency admissions from care homes aged 65+



**Rate of emergency admissions from care homes per 100,000 population aged 65+**



This slide shows analysis of emergency admission rates for people aged 65+ coming from care homes. This is based on Hospital Episodes Statistics (HES) data from April 2015 – December 2018.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>783</b>	<b>873</b>	<b>852</b>	<b>747</b>
Comparators	812	681	677	720
England	752	680	673	721

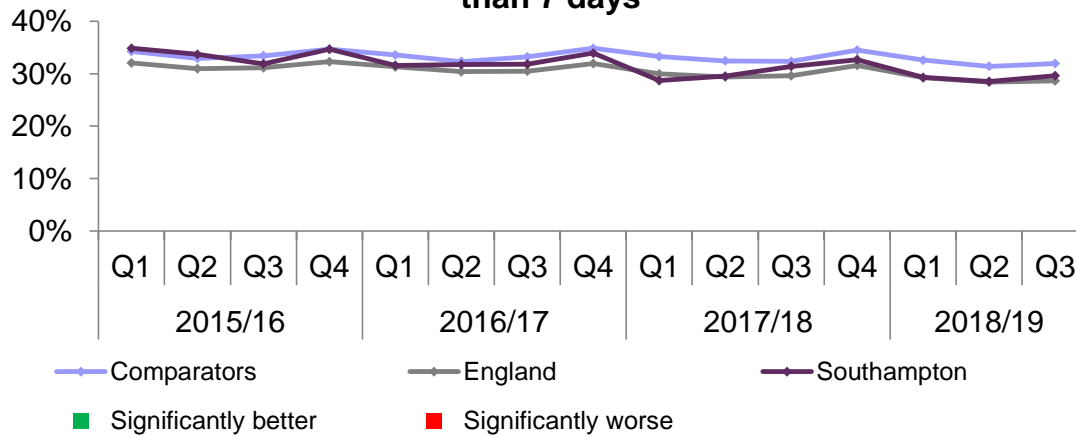
The analysis uses postcode of residence to identify activity from care homes. As such, it may include data pertaining to other addresses within the same postcode and overestimate activity from care homes.

■ Significantly better    ■ Significantly worse

# Activity – length of hospital stay



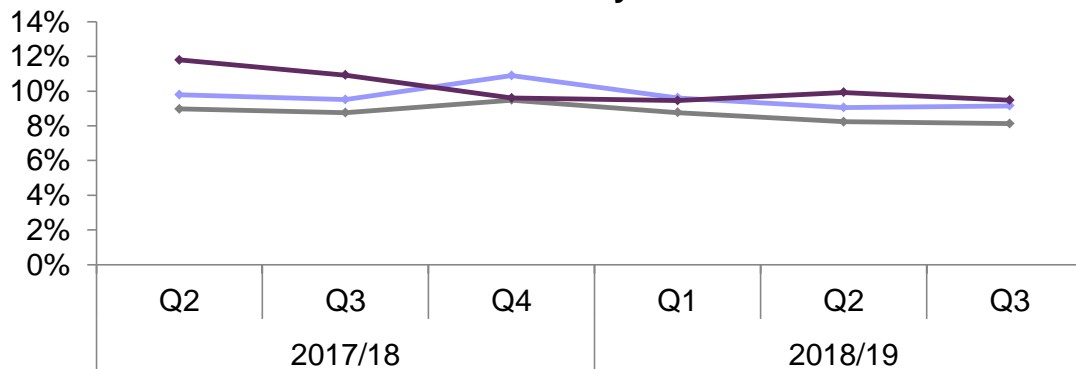
**Percentage of emergency admissions that last longer than 7 days**



Longer lengths of stay can act as a powerful proxy indicator of poor patient flow. CQC has looked at quarterly trends in emergency admissions for people aged 65+ that lasted longer than 7 days. This is based on Hospital Episodes Statistics (HES) data from April 2015 – December 2018.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>33%</b>	<b>29%</b>	<b>29%</b>	<b>30%</b>
Comparators	34%	33%	31%	32%
England	32%	29%	28%	29%

**Percentage of emergency admissions that last longer than 21 days**



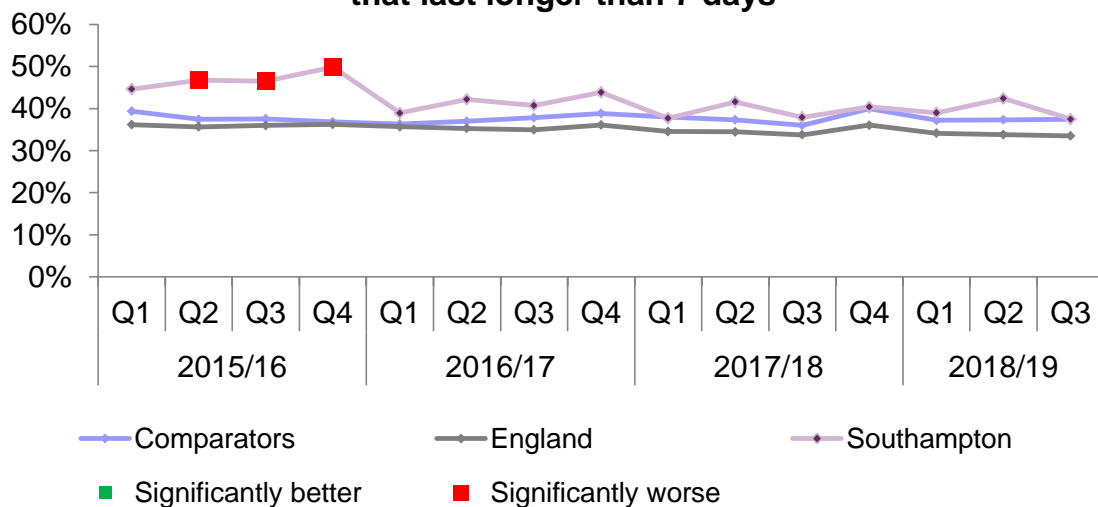
The 21 day measure is from July 2017 - December 2018. It follows a similar methodology to the measure above.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>10%</b>	<b>9%</b>	<b>10%</b>	<b>9%</b>
Comparators	11%	10%	9%	9%
England	9%	9%	8%	8%

# Activity – length of hospital stay - from care homes



**Percentage of emergency admissions from care homes that last longer than 7 days**

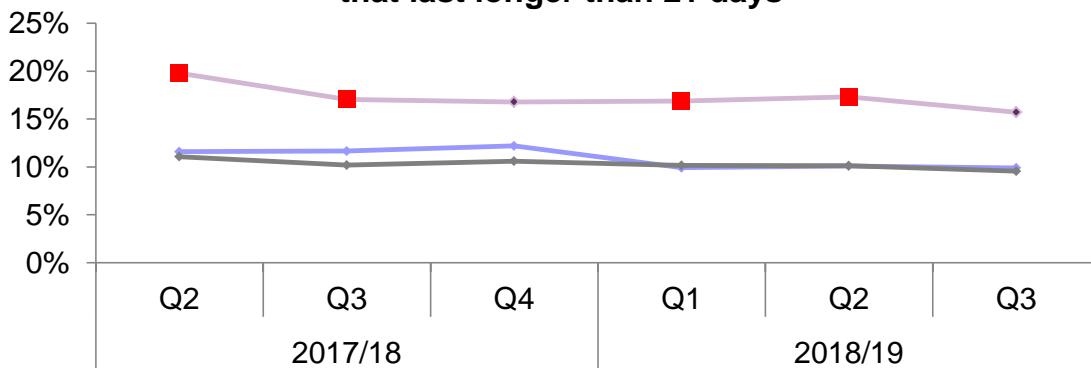


CQC has also analysed emergency admissions for people aged 65+ coming from care homes that lasted longer than 7 days. This is based on Hospital Episodes Statistics (HES) data from April 2015 – December 2018.

It uses the postcode of residence to identify hospital activity from care homes and so may include data pertaining to other addresses within the same postcode and overestimate activity from care homes.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>40%</b>	<b>39%</b>	<b>42%</b>	<b>38%</b>
Comparators	40%	37%	37%	37%
England	36%	34%	34%	34%

**Percentage of emergency admissions from care homes that last longer than 21 days**



The 21 day measure is from July 2017 - December 2018. It follows a similar methodology to the measure above.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>17%</b>	<b>17%</b>	<b>17%</b>	<b>16%</b>
Comparators	12%	10%	10%	10%
England	11%	10%	10%	10%

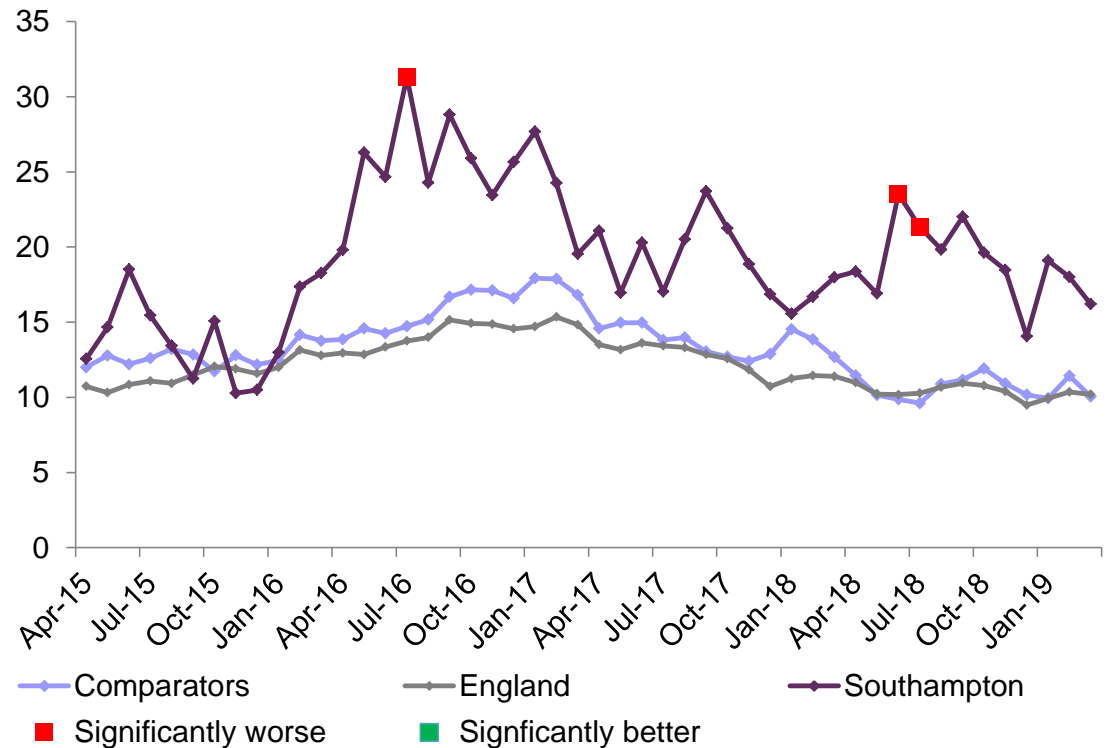
# Activity – delayed transfers of care



This slide shows the daily average number of days transfers of care have been delayed as a rate per 100,000 population aged 18+ between April 2015 and March 2019. Delayed transfers of care reflect the ability of the system to ensure appropriate transfer from hospital to social care services for the entire adult population. It is an important marker of the effective joint working of local partners, and is a measure of the effectiveness of the interface between health and social care services. Analysis is based on data from NHS England.

Area	Time period					
	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19
<b>Southampton</b>	<b>19.6</b>	<b>18.5</b>	<b>14.0</b>	<b>19.1</b>	<b>18.0</b>	<b>16.2</b>
Comparators	11.9	10.9	10.2	9.9	11.4	10.1
England	10.8	10.4	9.5	9.9	10.3	10.2

Average daily delayed days per 100,000, aged 18+

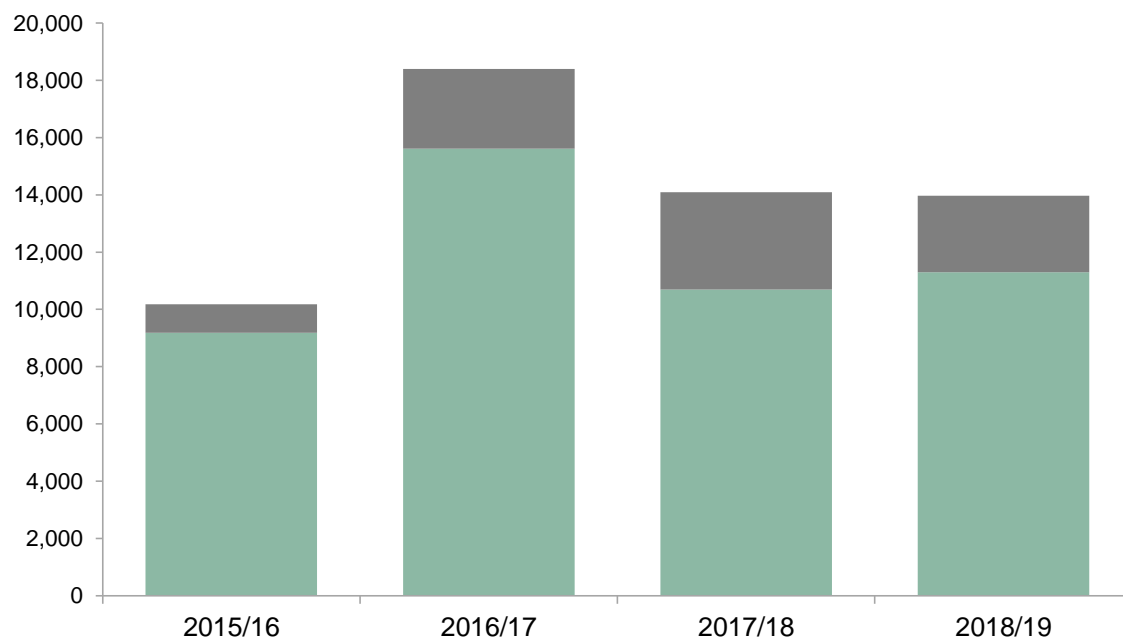




# Activity – delayed transfers of care by main trust(s)



### Delayed transfers of care by main trusts each year



### Key

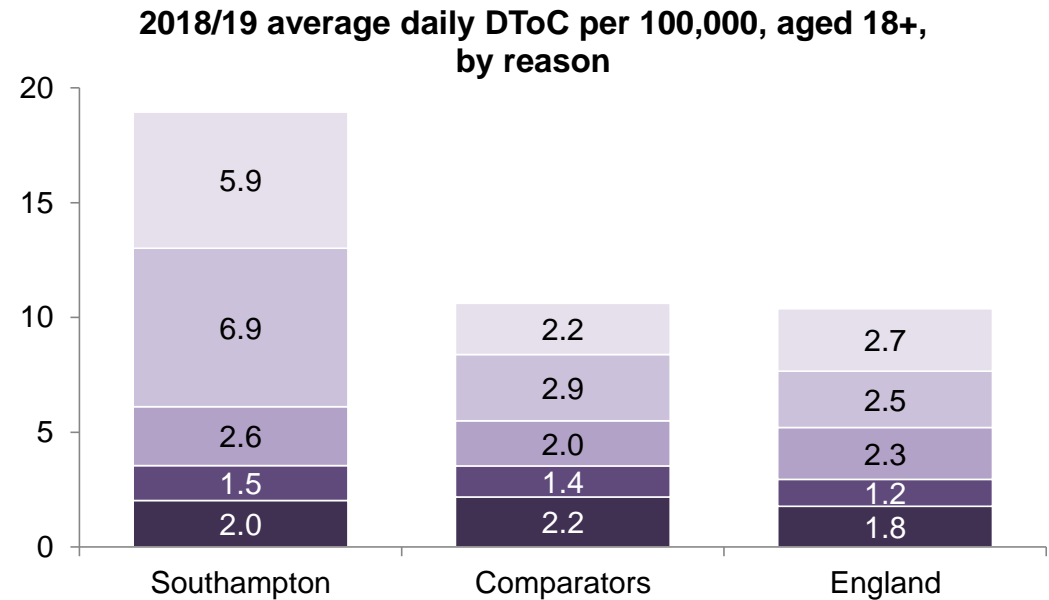
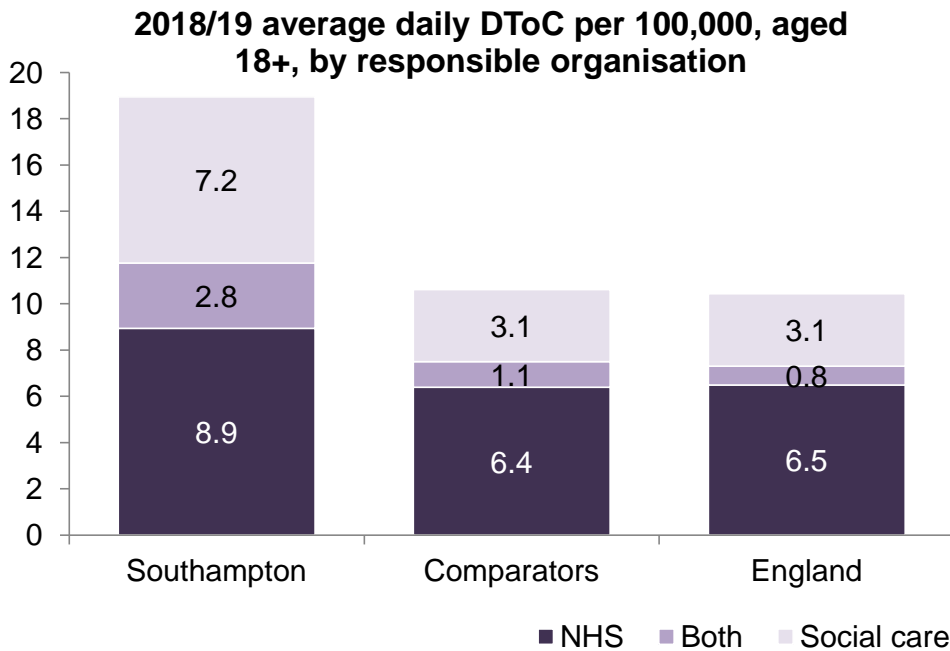
- All other providers
- RHM University Hospital Southampton NHS Foundation Trust

The chart shows delayed transfers of care within Southampton broken down by the trusts that those delays are coming from. Trusts are included if they have contributed more than 15% of DToCs in any year. As well as acute trusts, this slide may include DToCs from MH or community healthcare providers. Please note the main trusts contributing to delayed transfers of care in an area may not be the main providers in terms of volume of activity

# Activity – delayed transfers of care by responsible organisation and reason



This slide shows the rate of delayed days per 100,000 population aged 18+ over the past year (April 2018 - March 2019), broken down to show the rate of delayed days attributed to the NHS against the rate attributed to social care and those attributed to a mix of both. The slide also shows the rate of delayed days according to the reason for delay. For the purpose of our analysis, some of the reasons have been grouped.



'Further non-acute NHS care' includes community and mental health care, intermediate care, rehabilitation services etc. 'Other' includes public funding, patient or family choice, disputes and housing. The categories are self-reported categories. Different LAs show a large variation in how frequently they report in the 'Other' category. For more information see:

[DToC Guidance](#)

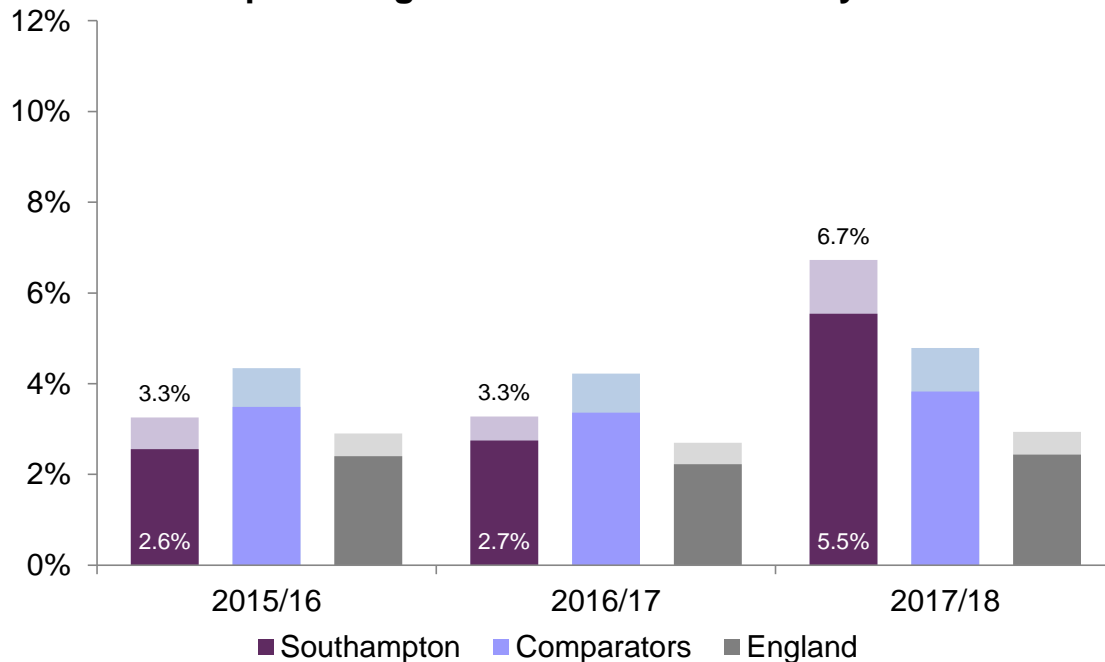
- Awaiting residential or nursing home placement
- Awaiting care package in own home or community equipment/adaptations
- Other\*
- Awaiting completion of assessment
- Awaiting further non-acute NHS care

# Activity – reablement services



This slide shows the proportion of people aged 65+ discharged from hospital into reablement services, and the proportion still at home 91 days after discharge from hospital into reablement services. These measures are taken from the Adult Social Care Outcomes Framework (ASCOF). The chart provides a more nuanced view of the two ASCOF indicators by combining them to show the proportion of people aged 65+ who received reablement following discharge from hospital (lighter shaded bars) and, of all people aged 65+ discharged from hospital, the proportion that received reablement and were still at home 91 days later (bold shaded bars). The chart therefore shows the true volume of older people who benefitted from 'successful' reablement.

**Percentage of people aged 65+ discharged from hospital who receive reablement and the percentage still at home after 91 days**



Percentage who received reablement

	2015/16	2016/17	2017/18
<b>Southampton</b>	<b>3.3%</b>	<b>3.3%</b>	<b>6.7%</b>
Comparators	4.3%	4.2%	4.8%
England	2.9%	2.7%	2.9%

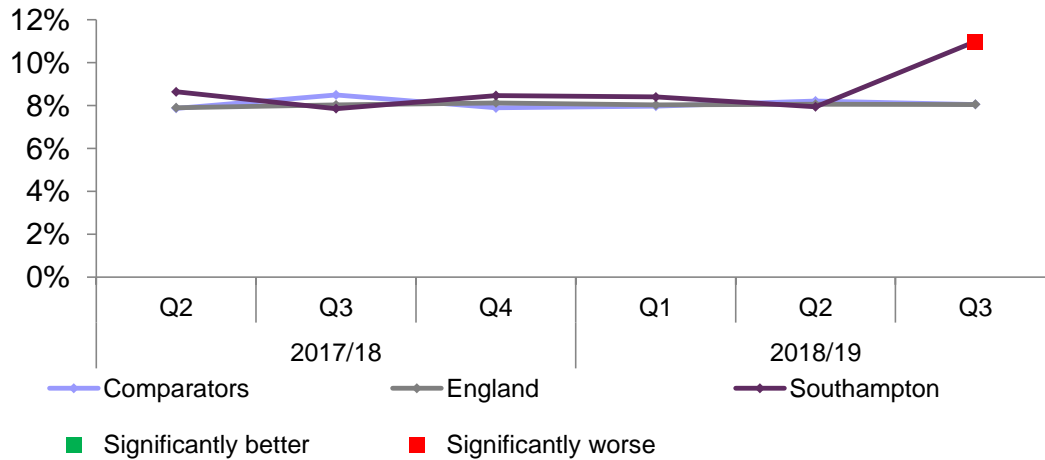
Percentage who received reablement and were still at home 91 days following discharge

	2015/16	2016/17	2017/18
<b>Southampton</b>	<b>78.6%</b>	<b>83.9%</b>	<b>82.3%</b>
Comparators	80.4%	79.7%	80.0%
England	82.7%	82.5%	82.9%

# Activity – emergency readmissions



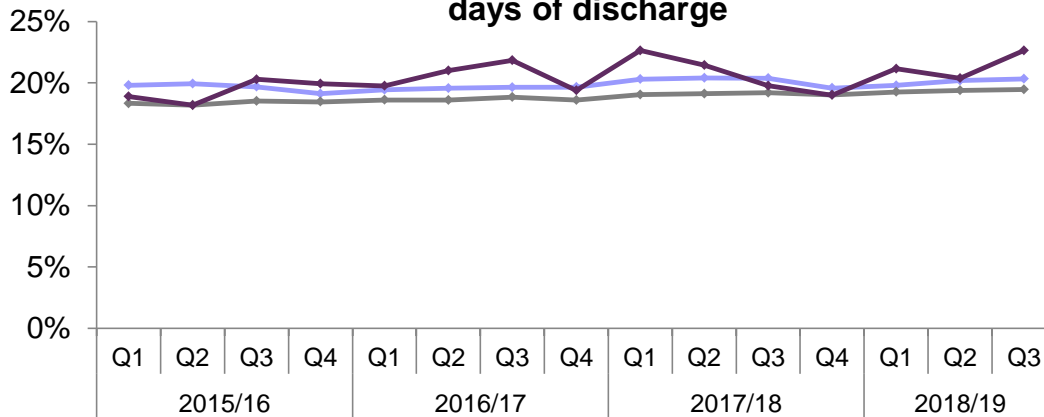
**Percentage of emergency readmissions within 7 days of discharge**



Emergency readmissions to hospital may reflect poor discharge planning and handover of care. CQC has looked at quarterly trends in emergency readmissions for people aged 65+ within 7 days of discharge. Analysis is based on Hospital Episodes Statistics (HES) data from June 2017 – December 2018.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	8%	8%	8%	11%
Comparators	8%	8%	8%	8%
England	8%	8%	8%	8%

**Percentage of emergency readmissions within 30 days of discharge**



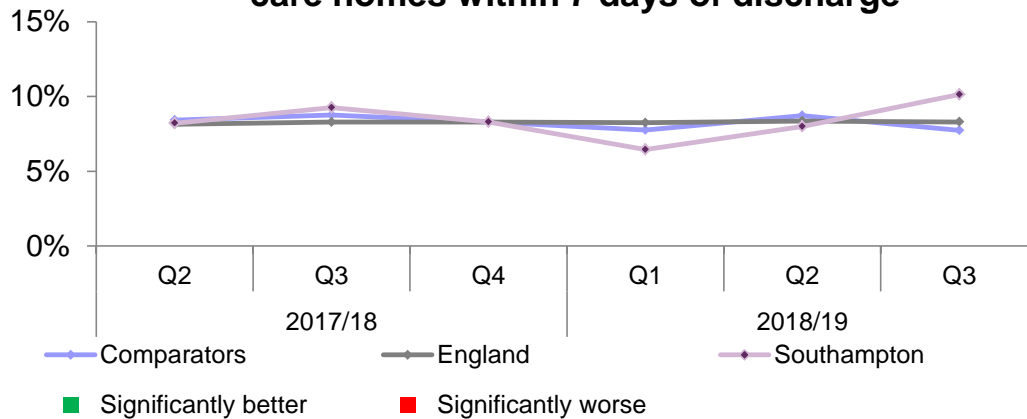
The 30 day measure covers April 2015 - December 2018. It follows a similar methodology to the measure above.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	19%	21%	20%	23%
Comparators	20%	20%	20%	20%
England	19%	19%	19%	19%

# Activity – emergency readmissions from care homes



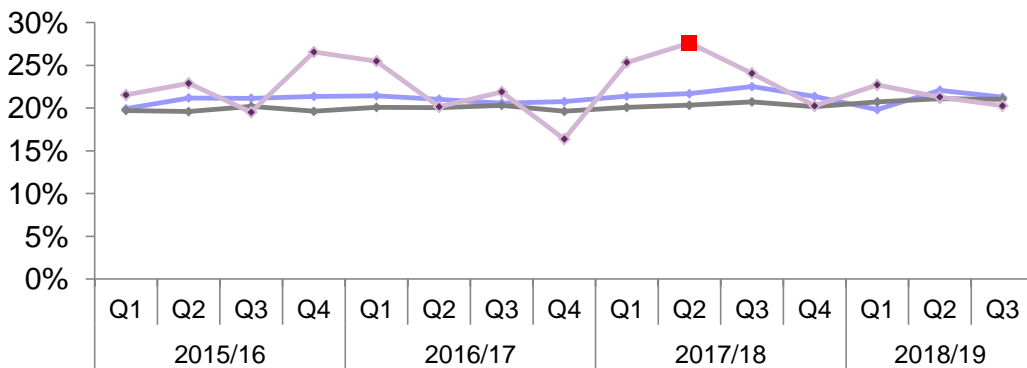
**Percentage of emergency readmissions from care homes within 7 days of discharge**



CQC has looked at quarterly trends in emergency readmissions from care homes of people aged 65+ within 7 days. Analysis is based on Hospital Episodes Statistics (HES) data from July 2017 - December 2018. It uses the postcode of residence to identify hospital activity from care homes and so may include data pertaining to other addresses within the same postcode and overestimate activity from care homes.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>8%</b>	<b>6%</b>	<b>8%</b>	<b>10%</b>
Comparators	8%	8%	9%	8%
England	8%	8%	8%	8%

**Percentage of emergency readmissions from care homes within 30 days of discharge**



The 30 day measure covers April 2015 - December 2018. It follows a similar methodology to the measure above.

Area	Financial year quarter			
	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19
<b>Southampton</b>	<b>20%</b>	<b>23%</b>	<b>21%</b>	<b>20%</b>
Comparators	21%	20%	22%	21%
England	20%	21%	21%	21%

# Local Authority to Clinical Commissioning Group mapping



The table below details the percentage of the LA population that is contained within the below CCGs as at Q3 18/19. It also shows the latest overall rating from NHS England's annual assessment of CCGs and the latest quarterly quality of leadership rating from the CCG Improvement and Assessment Framework. Mergers that happened at April 2019 are noted and represented in the map but not the table.

CCG code	CCG name	% of LA in CCG	% of CCG in LA	NHSE rating 2018/19	Quality of leadership rating 2018/19 Q3
10X	Southampton	100%	95%	Good	Requires improvement



The map on the left shows this LA outlined in purple with the latest post-April 2019 CCGs it covers underneath.

The CCG boundaries can be seen by the greyscale shapes which are labelled with the text in the white boxes. The shading of the CCGs on the map do not indicate any value.

# Activity – NHS continuing healthcare (CHC)

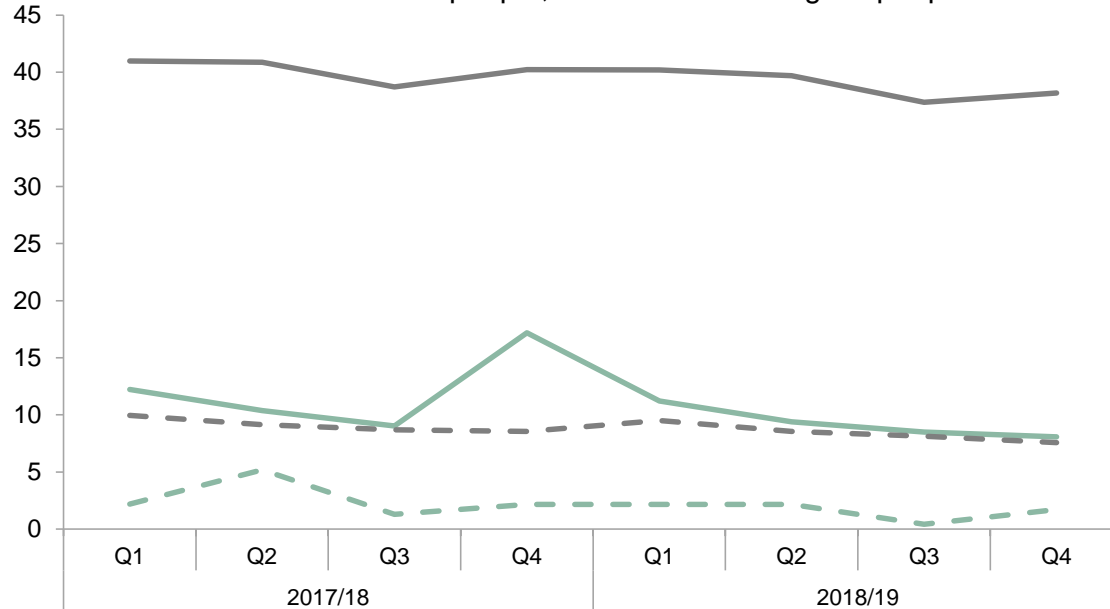


## Key for all charts

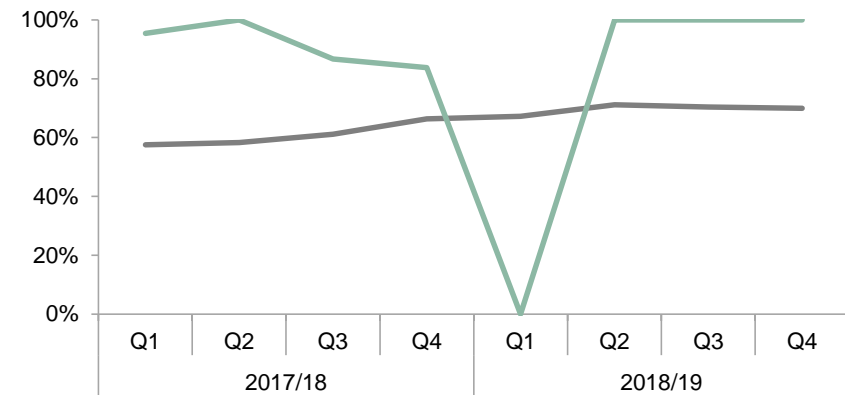
- England
- NHS Southampton CCG

### Number of new cases per 100,000 population aged 18+

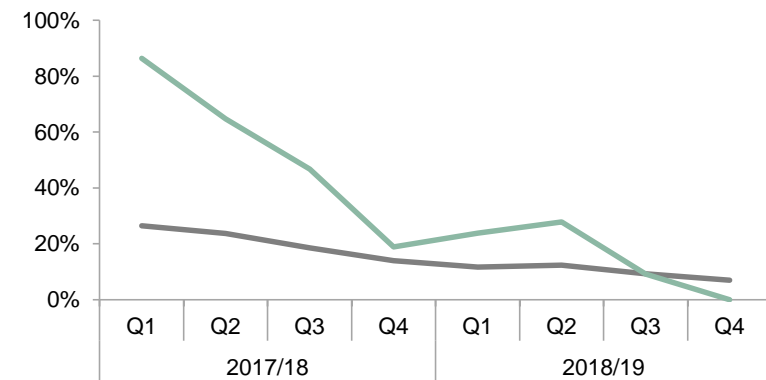
Thick lines are referred people, dotted lines are eligible people



### Percentage of CHC referrals completed within 28 days



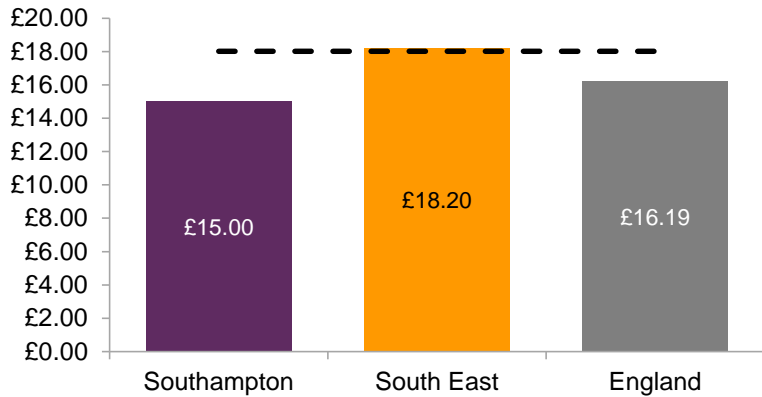
### Percentage of decision support tools completed in an acute setting



# Funding – LA ASC costs



## Average cost of an hour of homecare



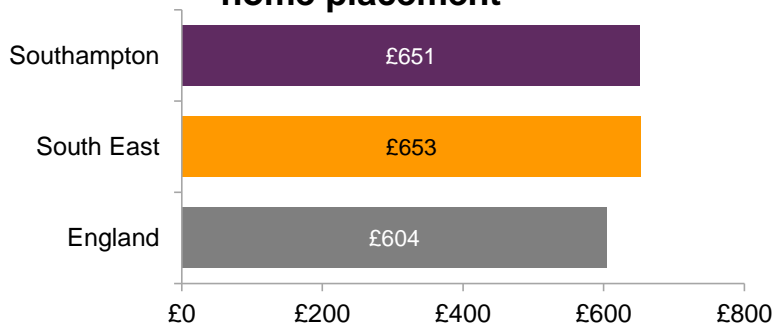
This chart uses figures from the 2018 UK Homecare Association report to show the average cost of an hour of homecare within the selected LA compared to the wider region and England. Data was collected via Fol requests submitted to each council for their average cost during a week in April 2018.

The UKHCA also calculated a **minimum price of £18.01 per hour of homecare**, represented as the dotted line on the chart. UKHCA’s minimum price is designed to cover the cost of an hour of homecare commissioned by local authorities, while enabling providers to meet their legal obligations (including the National Minimum Wage) and the ability to run a sustainable business. The UKHCA have also set a minimum price of £18.93 for April 2019.

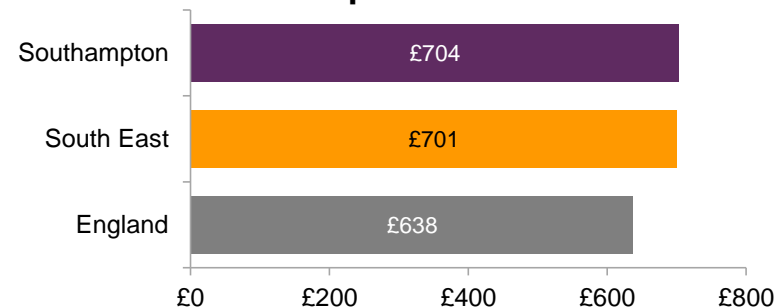
[Link to UKHCA report](#)

The charts below are taken from the 2017/18 Adult Social Care Finance Return (ASC-FR) and relate to people aged 65+

## Average weekly unit cost of residential home placement



## Average weekly unit cost of nursing home placement





# Progress against High Impact Changes



Implementation of the High Impact Change Model is designed to support system-wide improvements in transfers of care and is one of the four national conditions for the Better Care Fund plans for 2017-19.

The table below details the HWB's self-assessment of current and planned performance against each of the High Impact Changes for each quarter of 2018/19. The table at the bottom shows the national distribution of performance for the most recently published quarter.

Southampton		Early discharge planning	Systems to monitor patient flow	MDT/multi-agency discharge teams	Home first/discharge to assess	Seven-day service	Trusted assessors	Focus on choice	Enhancing health in care homes	Red Bag scheme
Performance	18/19 Q1	Established	Established	Mature	Mature	Plans in place	Established	Mature	Established	Plans in place
Performance	18/19 Q2	Established	Established	Mature	Mature	Plans in place	Established	Established	Established	Established
Performance	18/19 Q3	Established	Established	Mature	Mature	Plans in place	Not yet established	Mature	Established	Established
Plans	18/19 Q4	Established	Established	Mature	Mature	Not yet established	Established	Mature	Mature	Established

National performance - 2018/19 Q3	Early discharge planning	Systems to monitor patient flow	MDT/multi-agency discharge teams	Home first/discharge to assess	Seven-day service	Trusted assessors	Focus on choice	Enhancing health in care homes	Red Bag scheme
Not yet established	0%	0%	0%	0%	1%	1%	0%	0%	5%
Plans in place	13%	9%	5%	13%	31%	29%	7%	9%	21%
Established	65%	66%	61%	66%	55%	59%	71%	72%	57%
Mature	21%	24%	29%	18%	13%	11%	21%	17%	15%
Exemplary	1%	1%	4%	3%	1%	1%	1%	1%	1%

## Appendix – comparators



Local authority comparator areas have been drawn from the Chartered Institute of Public Finance and Accountancy's Nearest Neighbours model (data downloaded on 04/05/2017). This model identifies the 15 local authorities that are most similar to a selected LA, based on 39 variables that cover population size and density, age, gender and ethnicity make-up, deprivation, employment and housing. Local authorities are not compared to all other authorities in the country, but according to their categorisation into the following groups: London Boroughs, Metropolitan Districts and Unitary Authorities, and Counties.

The comparator group for Southampton LA is made up of the following local authorities, with the LA listed as number 1 being the most similar to Southampton.

- |                       |                   |
|-----------------------|-------------------|
| 1 Bristol, City of    | 9 Sheffield       |
| 2 Portsmouth          | 10 Derby          |
| 3 Plymouth            | 11 North Tyneside |
| 4 Newcastle upon Tyne | 12 Bolton         |
| 5 Coventry            | 13 Swindon        |
| 6 Nottingham          | 14 Peterborough   |
| 7 Brighton and Hove   | 15 Medway         |
| 8 Salford             |                   |

## Appendix – statistical analysis



Where we can transform the data into a standard normal distribution we have generated z-scores to measure how far the observed values of the selected LA deviate from the national average or 'mean'.

The z-scores reflect the number of standard deviations from the mean, after winsorising the data at the 10% level and controlling for over-dispersion.

Where an LA's z-score is greater than 2 or less than -2 it is said to be either 'significantly better' or 'significantly worse' than the national average.

Organisations are excluded from statistical analysis if their values are too low. This is represented by "-" in the accompanying table for the indicator.