Hertfordshire and West Essex Integrated Care System

PCN Insights Pack 2024

Herts Five

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Working together
for a healthier future

Introduction

This latest version of the PCN pack has been developed around the ICB Clinical Priorities signed off by the ICB Board in March 23 and how they align to the population outcomes we are aiming to achieve. (See tables on the right hand side.)

The data contained within this pack compares the PCN data against Place and ICB. An overview table of all the data is available on the following page with areas of opportunity highlighted.

Some data will not be available at PCN level e.g. mortality rate for CVD. Where this is the case, proxy measures that will lead to improving this will be included e.g. early identification.

Where opportunities link with areas within the ECF or QOF a selection of related indicators have been shared alongside a link to Ardens Manager.

The data within this pack are shown at PCN level and are health focused. However to improve outcomes for our population, input from many partners is required. This pack can facilitate discussion within your Integrated Neighbourhood Teams as described within the Primary Care Strategy and also the wider HCP transformation spaces supported by your Primary Care Transformation leads.

Packs for other PCNs, Localities and Place can be found:

Population health management – Hertfordshire and West Essex Integrated Care System (hertsandwestessexics.org.uk)

Here you can also find previous PCN packs outlining the descriptive demographics for the PCNs.

Area	Clinical Priority
CYP	• Improved Readiness for school in children eligible for FSM • Reduce rates of Childhood obesity • Reduced unnecessary A&E attendances and admissions
Prevention and Health Inequalities	• Reduced premature mortality rate for CVD
LTC & Frailty	• Reduce attendance and admissions for falls, people with frailty and people in last year of life • Development of more proactive, preventative care models for management of LTC and Frailty
Mental Health	• Reducing suicide rates and attendances/ admission rates for self-harm • Reducing rates of A&E attendances involving substance misuse and violence

Outcome	Definition
Improve life expectancy	Average age at death for people who have died in the last 12 months
Improve healthy life expectancy	Average age of people who have left the 'healthy' segment in the last 12 months
Reduce the proportion of people living with advanced disease and complexity	Proportion of the registered population who are in the advanced disease and complexity segment (segment)
Reduce the rate of ambulatory care sensitive emergency hospital admissions	Rate of ambulatory care sensitive emergency admissions in the last 12 months
Reduce the overall spend on emergency hospital admissions	Spend on Emergency hospital admissions within a financial year

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Herts Five PCN at a Glance

The table on the right provides a summary of the data contained within this pack. It highlights how the PCN data compares with Place and ICB.

For Herts Five PCN areas of opportunity highlighted are :

- **A&E Attendances for Asthma (Children)**

- **Observed versus expected prevalence**

- **People with AF treated with Anti-coagulant**

- **% of people for secondary prevention CVD who are on low and medium intensity statins**

- **Admissions for hip fractures (75+)**

The following link takes you to Ardens Manager where there are reports. Here you will find the latest information on identification of LTCs and details of case finding Ardens searches available within EMIS and System one.
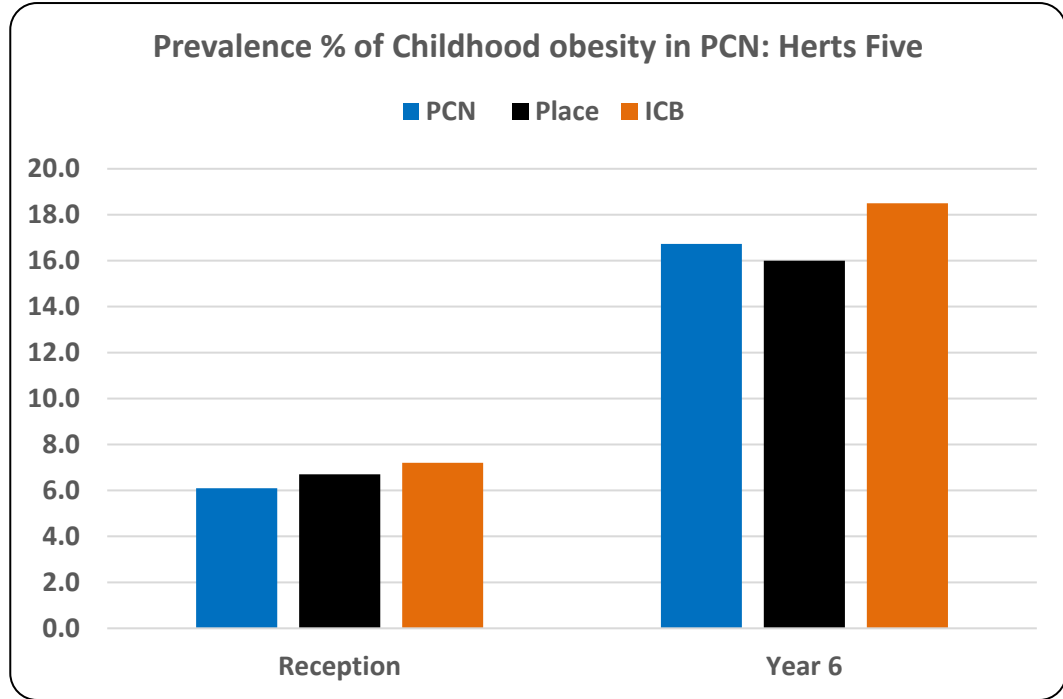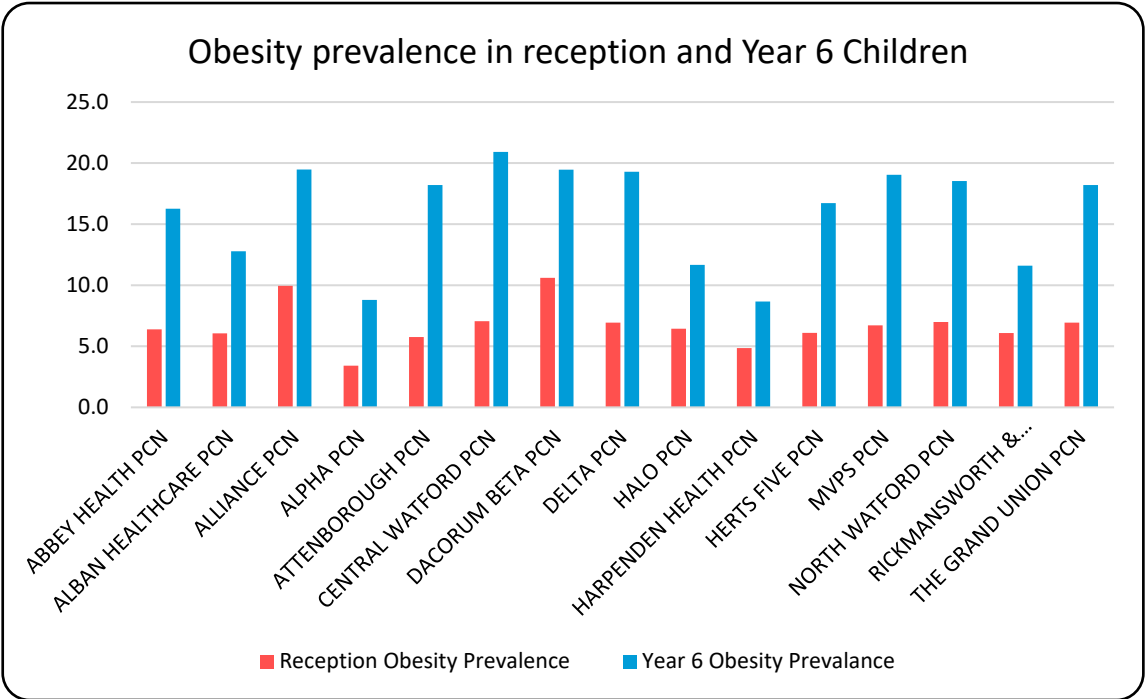
https://app.ardensmanager.com/login

Clinical Priority	Metric	PCN compared to Place average	PCN compared to ICB average
Childhood obesity	% of children in Reception who are overweight	↓	↓
	% of children in Year 6 who are overweight	↑	↓
Reduce rates of emergency care for children and young people	A&E Attendances for Asthma (Children)	↑	↑
	Admissions for Asthma (Children)	↓	↑
	Admissions for Wheeze (Children)	↓	↓
	Admissions for Diabetes (Children)	↓	↓
	Admissions for Epilepsy (Children)	↓	↓
Prevention and health inequalities (Premature mortality for CVD)	Lifestyle risk factors: Smoking	↔	↔
	Observed versus expected prevalence	↓	↓
	Annual Reviews completed for LTCs	↔	↔
	% of people with AF treated with Anti Coagulant	↓	↓
Preventative, Proactive care models for LTC	Control of hypertension	↔	↔
	Identification of hypertension	↑	↑
	% of people for secondary prevention CVD who are on low and medium intensity statins	↑	↑
	% of diabetics with all 8 care processes completed	↑	↑
	Admissions for ACS conditions	↓	↓
Preventative, Proactive care models for frailty and EOL	Admissions for falls (75+)	↔	↑
	Admissions for Hip Fractures (75+)	↑	↑
Mental Health	Prevalence of Mental Health Conditions including LD	↑	↑
	Admissions for Self-Harm	↑	↑

Rates of Childhood Obesity

- In keeping with the national trend, the PCN rates for Childhood Obesity are higher for year 6 in comparison to reception children.

- Compared to the ICB and Place rate, Herts Five PCN has a lower rate of Childhood Obesity for Children in Reception. However, by year 6 the rate of Childhood Obesity is slightly higher than place but lower than ICB.

- The data suggest that there is a deterioration from reception to Year 6 in childhood obesity in the PCN position against Place and ICB.
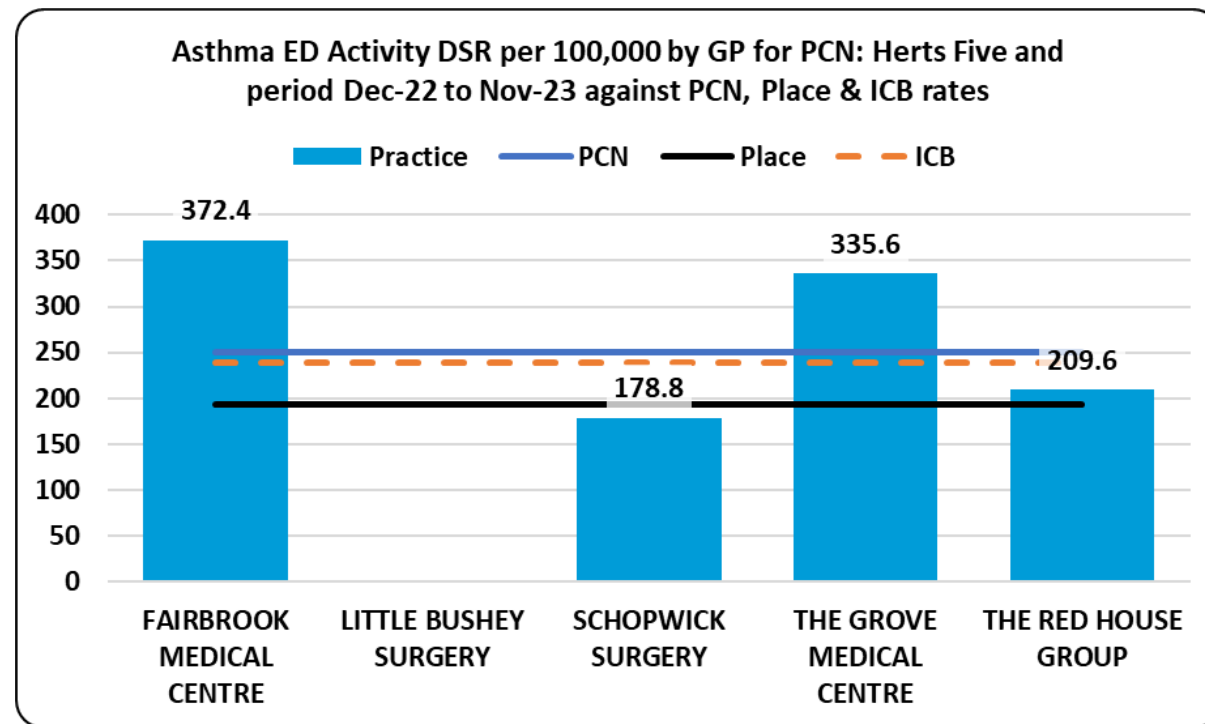

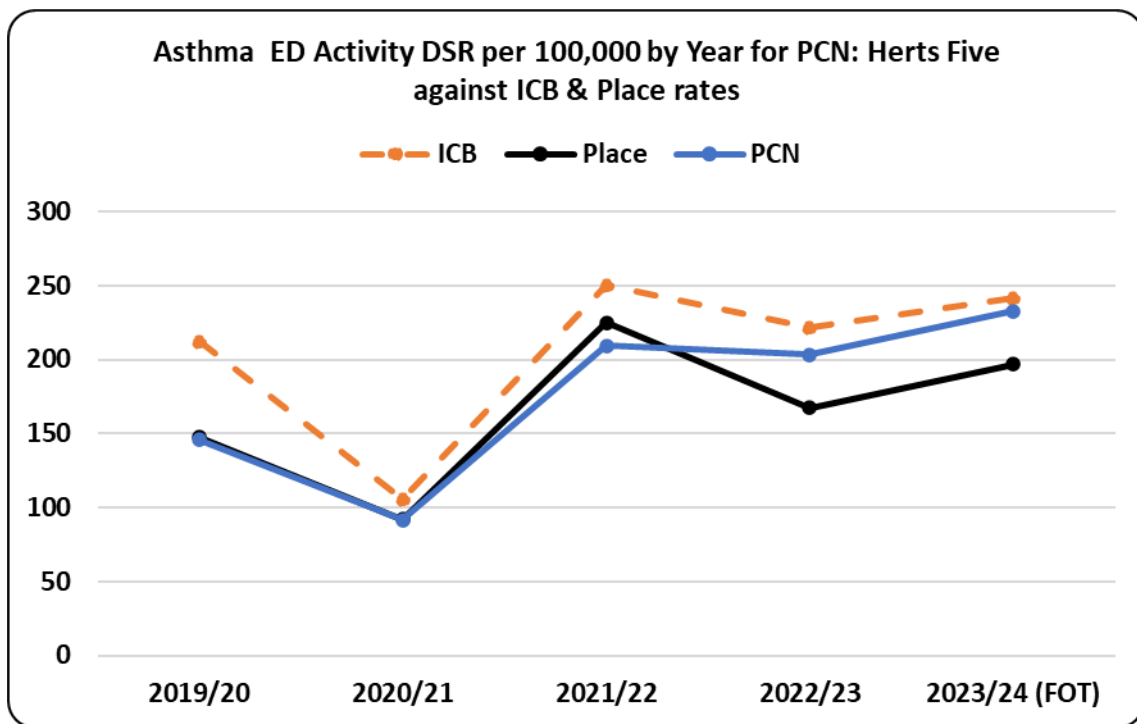Obesity prevalence in reception and Year 6 Children

Legend: Reception Obesity Prevalence, Year 6 Obesity Prevalance

Prevalence % of Childhood obesity in PCN: Herts Five

Legend: PCN, Place, ICB

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A&E attendances for Asthma (CYP)

- Compared to Place and the overall ICB, Herts Five PCN has a higher rate of A&E attendances for Children and Young People with Asthma (rolling years data on the right-hand side).

- Rates of Children and Young People attending A&E for Asthma have increased since 2020/21 post covid. The rates fluctuate annually with the latest forecast outturn from November data showing an increase on the previous year.

- The Children and Young Peoples programme can be contacted via hweicbenh.cypteam@nhs.net for details of projects underway.

Asthma ED Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Asthma ED Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

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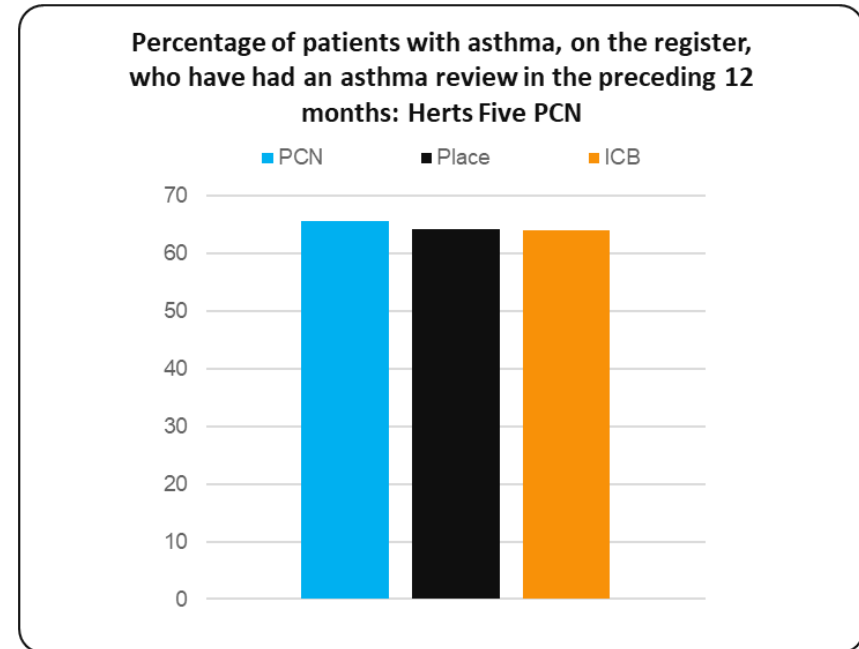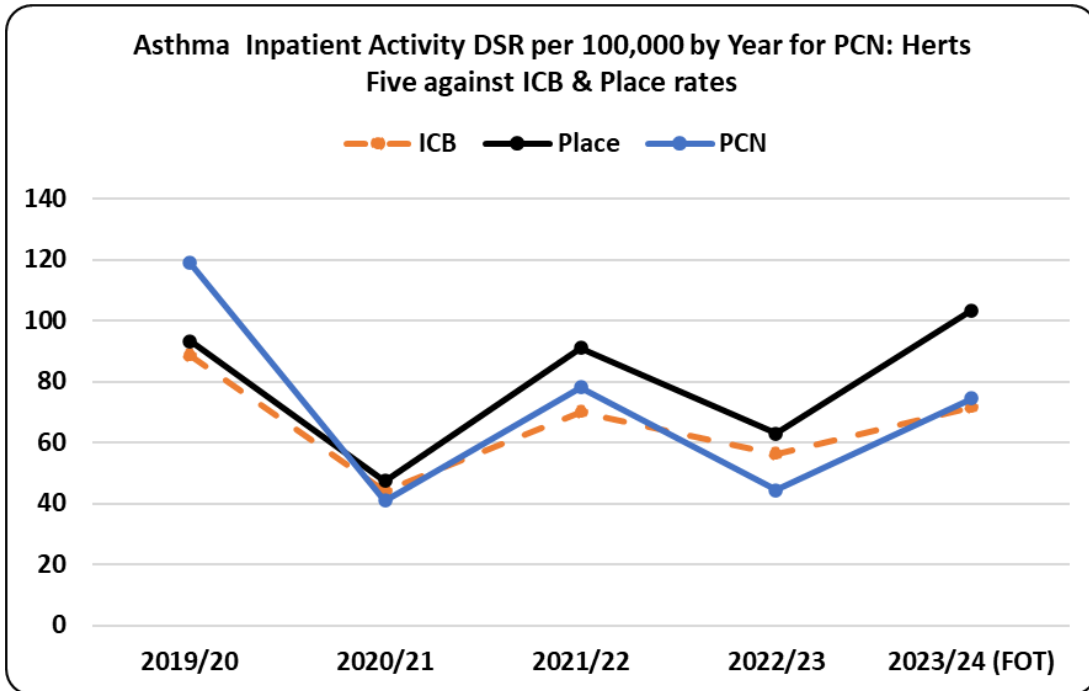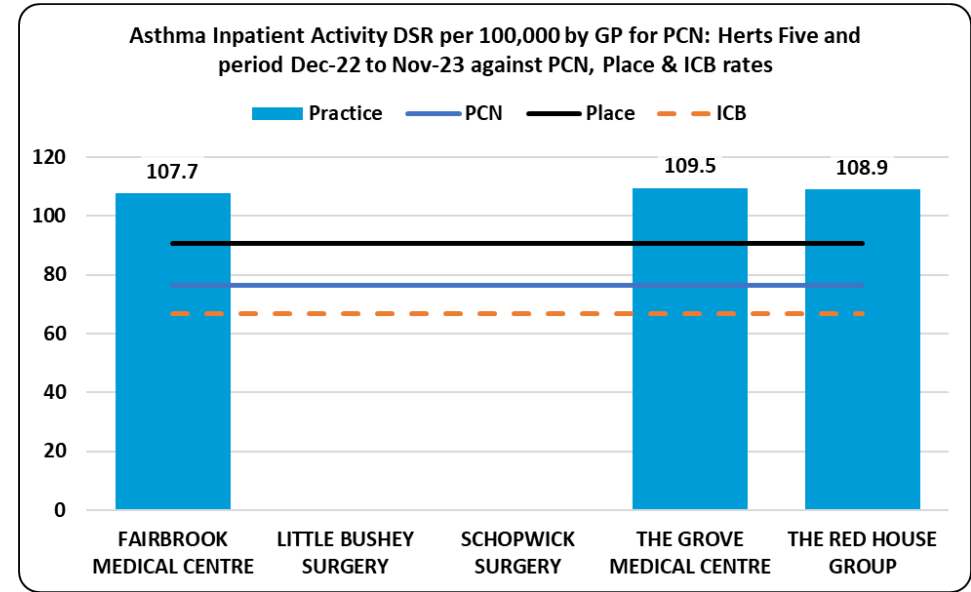
Source: SUS

Admissions for Asthma (CYP)

- Herts Five PCN has a lower rate of children's admissions for Asthma compared to place but higher than ICB (rolling years data on the right-hand side).

- The rates fluctuate annually with the latest forecast outturn from November data showing an increase on the previous year.

- Higher Proportion of Asthma Reviews are carried out within Herts Five PCN in comparison to Place and the ICB. However, the QOF is for all ages and children specific reviews cannot be identified within the data.

- The Children and Young Peoples programme can be contacted via hweicbenh.cypteam@nhs.net for details of projects underway.

Asthma Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

Legend: Practice — PCN — Place — ICB

- FAIRBROOK MEDICAL CENTRE: 107.7
- LITTLE BUSHEY SURGERY
- SCHOPWICK SURGERY
- THE GROVE MEDICAL CENTRE: 109.5
- THE RED HOUSE GROUP: 108.9

Asthma Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Legend: ICB — Place — PCN

Years: 2019/20, 2020/21, 2021/22, 2022/23, 2023/24 (FOT)

Percentage of patients with asthma, on the register, who have had an asthma review in the preceding 12 months: Herts Five PCN

Legend: PCN — Place — ICB

Admissions for Wheeze (CYP)

- Herts Five PCN has lower rates of Children and Young People admitted to hospital for abnormalities of breathing including wheeze compared to ICB and Place.

- Rates of Children and Young People admitted to Hospital for Wheeze have been decreasing annually with the latest forecast outturn from November continuing this trend.

- When looking at the data by practice there is variation between the practices.
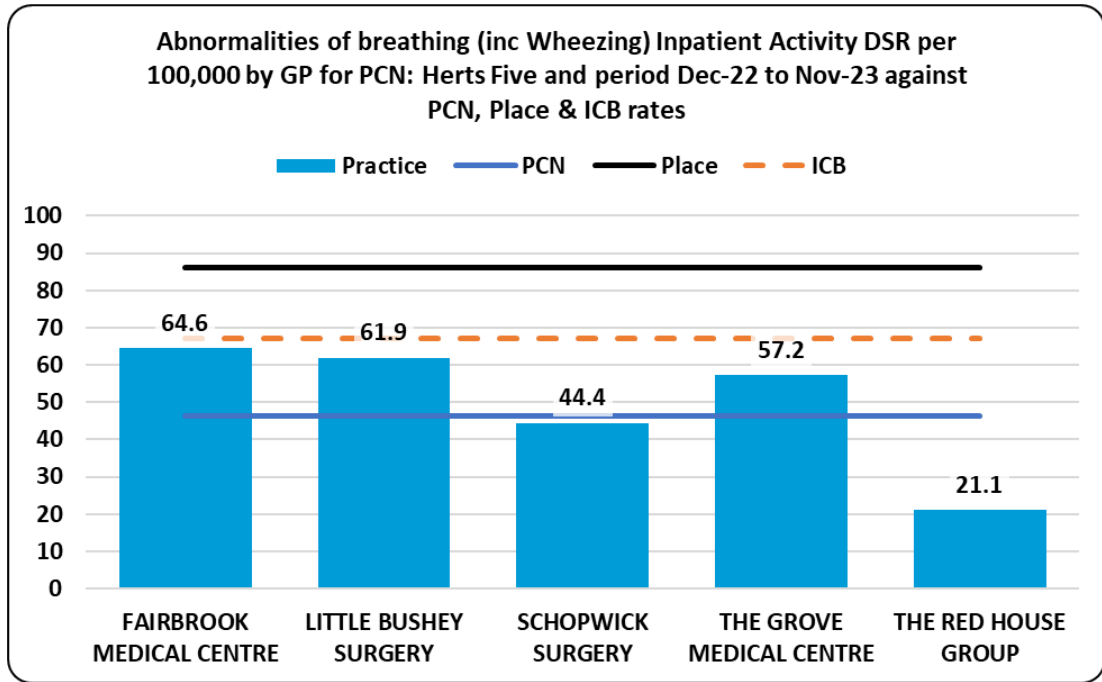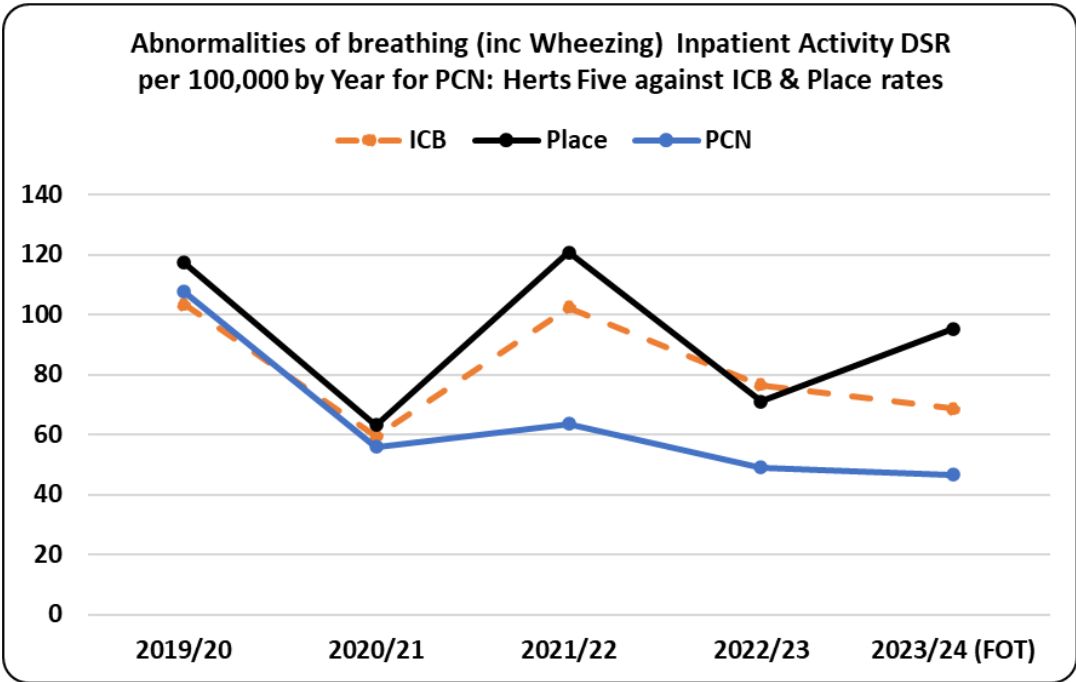
Abnormalities of breathing (inc Wheezing) Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Abnormalities of breathing (inc Wheezing) Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

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Source: SUS

Admissions for Diabetes (CYP)

- Diabetes is identified as an area of focus within the Core 20 plus 5 for children. Herts Five PCN rates are lower than both ICB and place.

- The numbers of children admitted for diabetes are small and this should be considered when looking at the data. There were no admissions for Little Bushey Surgery within the 12 months up to November 23.

- The data for diabetes will continue to be monitored at wider HCP and ICB footprints.
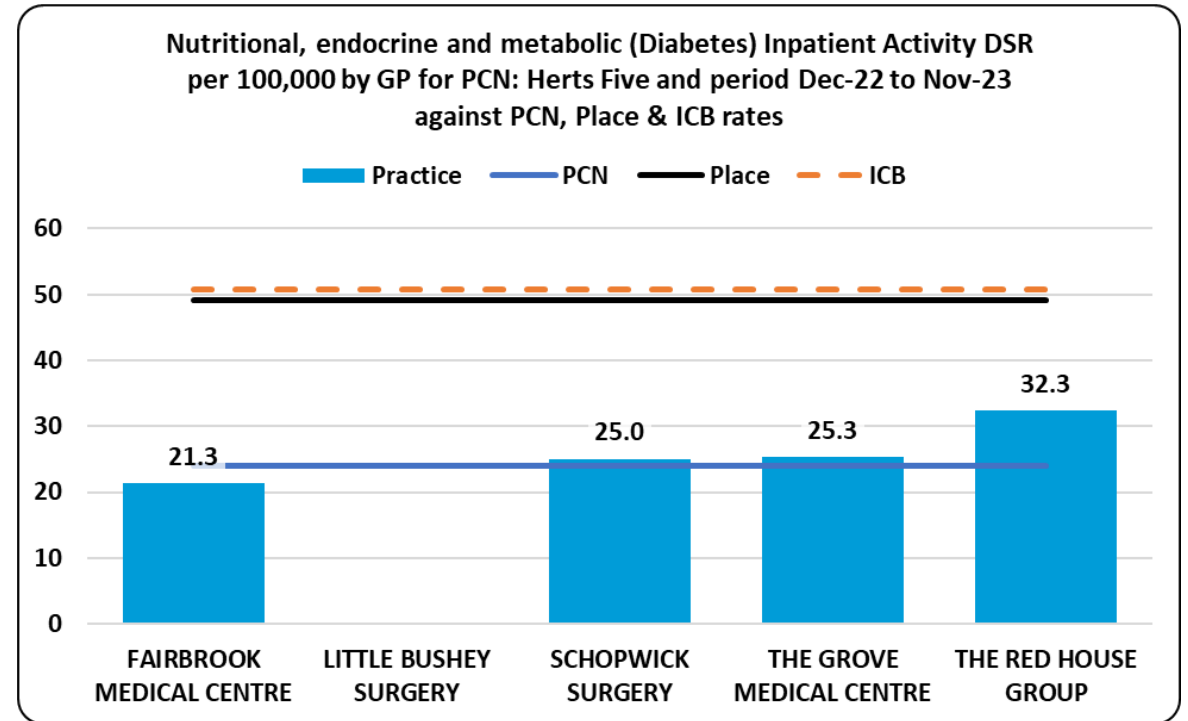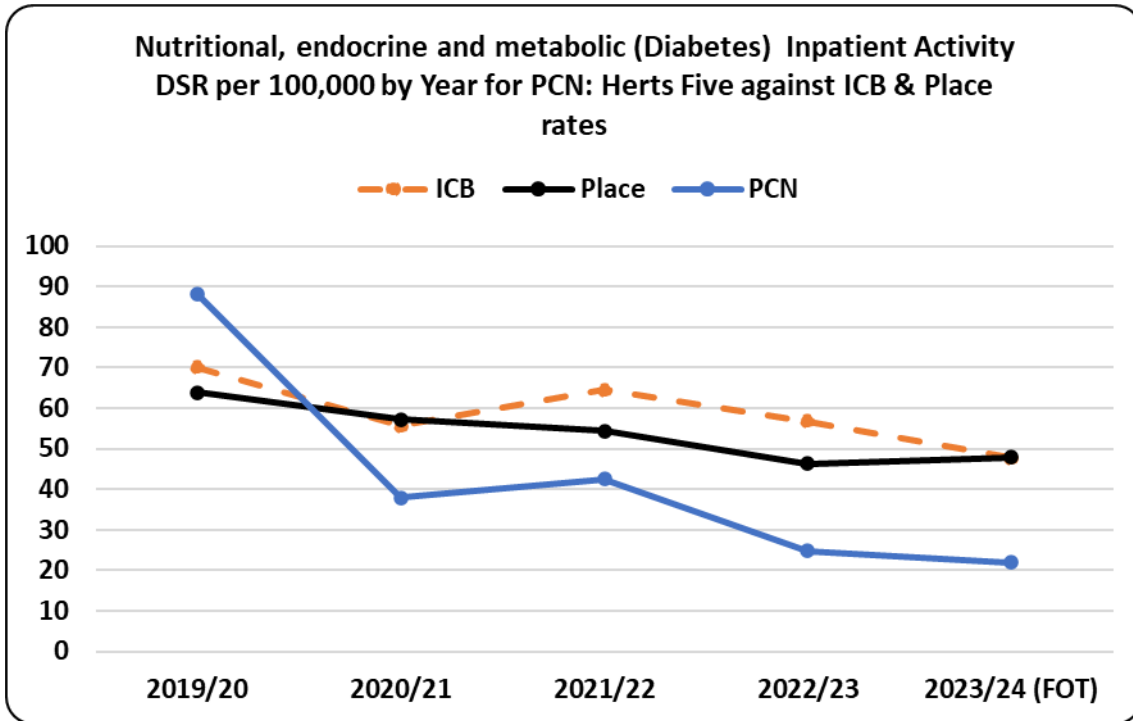
Nutritional, endocrine and metabolic (Diabetes) Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Nutritional, endocrine and metabolic (Diabetes) Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

Hertfordshire and West Essex Integrated Care System

Source: SUS

Admissions for Epilepsy (CYP)

- Epilepsy is identified as an area of focus within the Core 20 plus 5 for children. Herts Five PCN rates are lower than both ICB and place.

- The numbers of children admitted for epilepsy are small and therefore fluctuations in the trend are more prominent.

- The data for epilepsy will continue to be monitored at wider HCP and ICB footprints. The Children and Young Peoples programme can be contacted via hweicbenh.cypteam@nhs.net for details of projects underway.

Epilepsy Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Epilepsy Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

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Source: SUS
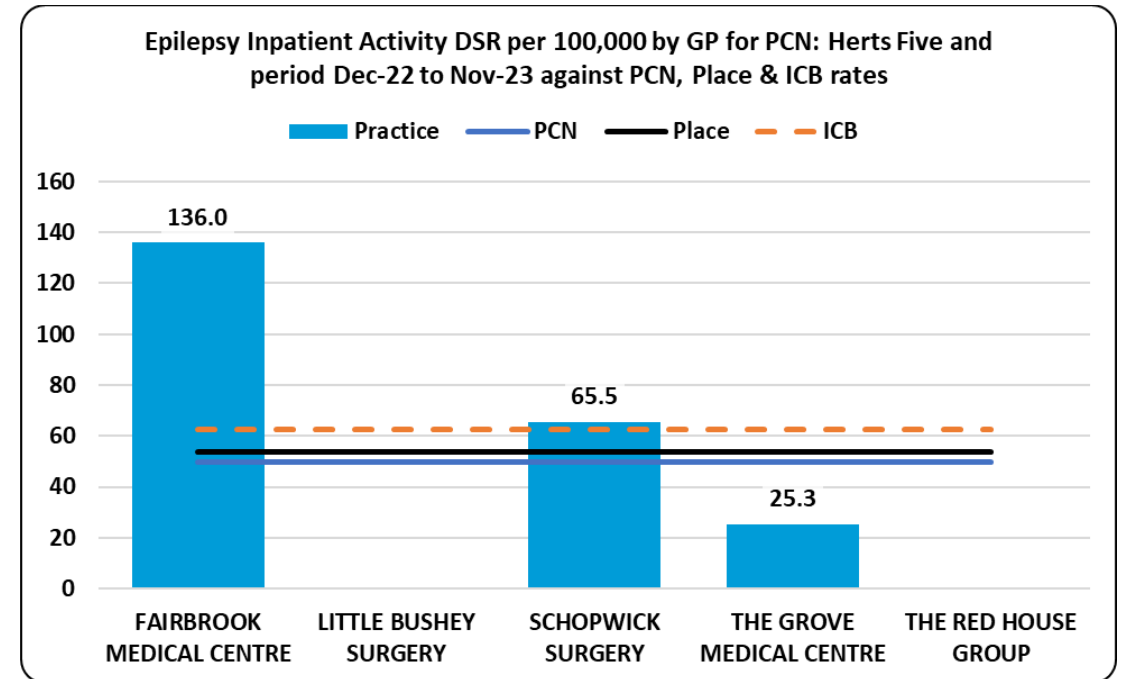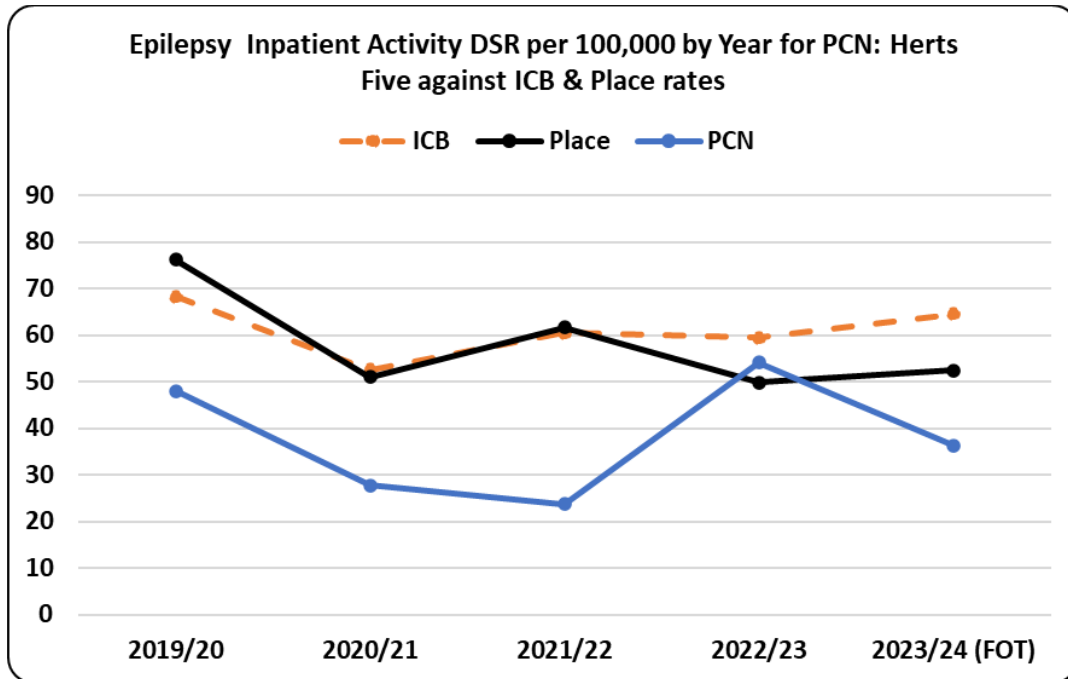
# Prevention and health inequalities – Lifestyle factors - Smoking

- Herts Five PCN data for smoking shows a similar picture to the Place and ICB.

- The table to the right gives detail by condition of the opportunity for further recording of smoking status. This shows the position in January. The latest position can be found on https://app.ardensmanager.com/login

	ECF 2023-24 - Condition Section Under Smoker, Smoking Status, and Smoking Status Recorded - as of Jan. 2024					
	Pre-Diabetes		Diabetes		Atrial Fibrillation	
Practices	Remaining % of Population with a Smoking status	Smoking Available Patients - Number	Remaining % of Population with a Smoking status	Smoking Available Patients - Number	Remaining % of Population with a Smoking status	Smoking Available Patients - Number
Fairbrook Medical Centre	42%	1169	14%	1098	0%	23
Little Bushey Surgery	19%	656	8%	458	0%	9
Schopwick Surgery	36%	1242	11%	1026	0%	10
The Grove Medical Centre	55%	682	49%	849	0%	15
The Red House	62%	1282	15%	985	0%	16

Percentage of patients* whose notes record smoking status in the preceding 12 months
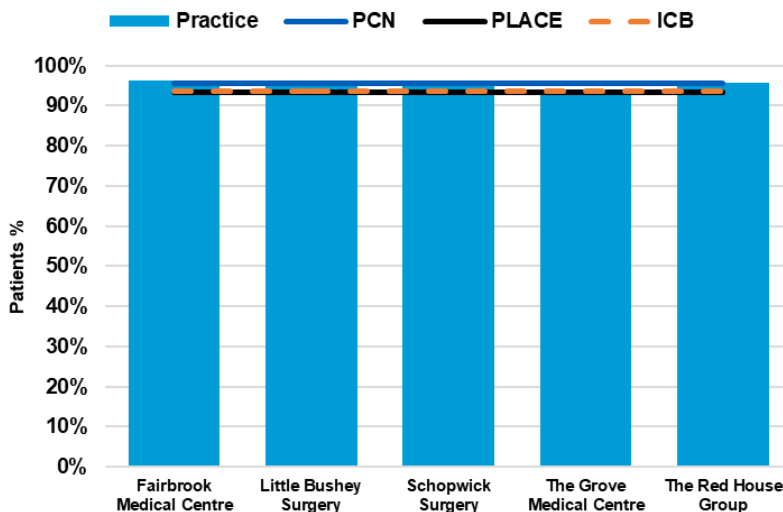
Percentage of patients aged 15+ who are current smokers with a record of an offer of support & treatment within preceding 24 months
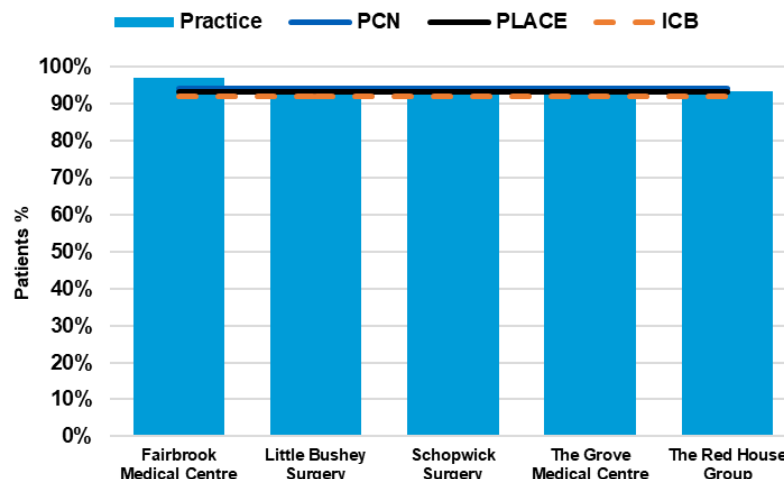
Percentage of patients* who are current smokers with a record of an offer of support & treatment within the preceding 12 months
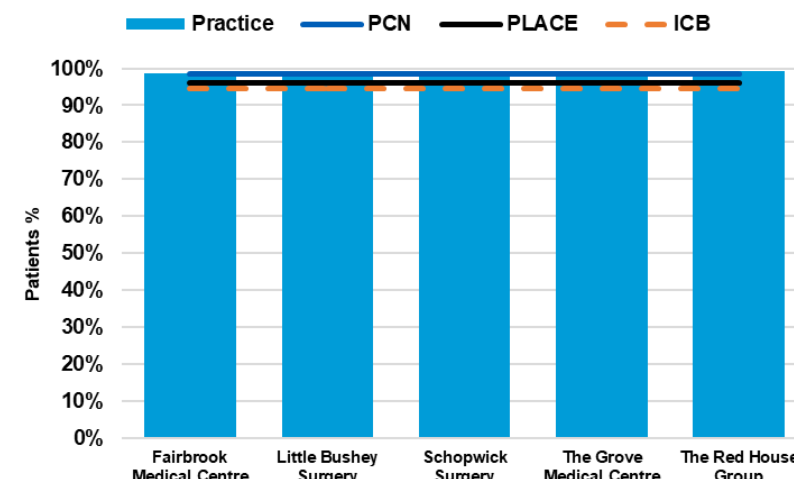
* with any or any combination of the following conditions: CHD, PAD, stroke or TIA, hypertension, diabetes, COPD, CKD, asthma, schizophrenia, bipolar affective disorder or other psychoses

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Source: Link: QOF Data Set & ECF Jan. 2024

Prevention and health inequalities
Early Identification: Expected vs observed prevalence

The data on here shows the national modelled estimated prevalence for the PCN compared with the latest published QOF prevalence for the PCN.

- Herts Five PCN recorded prevalence compared with the modelled estimated prevalence for the PCN is lower across all conditions.

- The data shows an opportunity for further identification for these conditions. Case finding searches can be found within the Ardens Suite of searches: https://app.ardensmanager.com/login

Disease/ Condition	Disease Detection Modelling for Herts Five PCN - No. of New Diagnoses to Meet ICS & PLACE Rates - 2023/24	
	Number to meet ICS rate	Number to meet PLACE rate
Asthma	3927	141
Atrial Fibrillation	37	110
Chronic Kidney Disease	1811	208
Chronic Obstructive Pulmonary Disease		61
Coronary Heart Disease	1821	63
Diabetes Mellitus		103
Epilepsy	378	41
Heart Failure		21
Hypertension	9274	217
Non-Diabetic Hyperglycaemia		192
Peripheral Arterial Disease	292	16
Stroke and Transient Ischaemic Attack	1104	23

LTC QOF Disease - Observed & Expected Rates for Prevalence at PCN Level

Legend: ■ Estimated Prevalence (modelled) ■ QOF Prevalence 22-23 (%)

Prevalence %

- Atrial Fibrillation: 2.56% / 2.17%
- Chronic Obstructive Pulmonary Disease: 2.06% / 1.47%
- Heart Failure: 1.35% / 0.84%
- Hypertension: 25.48% / 14.27%
- Non-Diabetic Hyperglycaemia: 11.28% / 9.29%

HERTS FIVE

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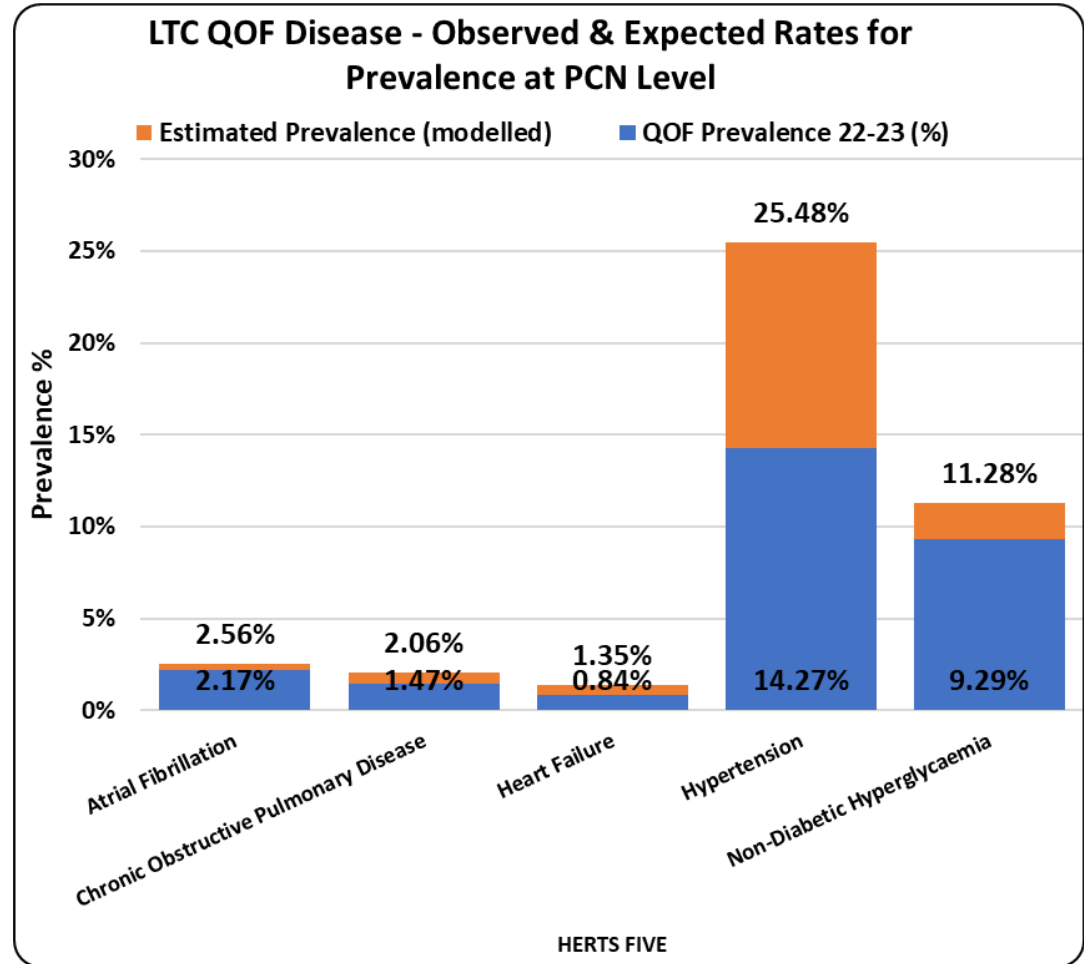
Development of more proactive, preventative care models for LTC - Prevalence

- Following the expected and observed prevalence modelling in the previous slide, where there are opportunities for further identification, this slide looks at the recorded prevalence by practice for the PCN compared with Place and ICB.

- The development of an ICB Data Platform will create a longitudinal record for our patients which will allow the data to be viewed by different characteristics such as deprivation, ethnicity, co-morbidities.

- For LTCs, QOF and ECF data can help us understand areas of opportunity for improving outcomes for our population living with LTCs.

Herts Five PCN - Long-Term Conditions 2022-23 QOF Prevalence, with 3 Year Trend.

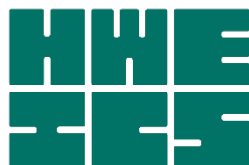| QOF Disease/ Condition	QOF 22-23 - ICB %	QOF 22-23 - PLACE %	QOF 22-23 - PCN %	FAIRBROOK MEDICAL CENTRE QOF 2022-23	3 Year Trend	SCHOPWICK SURGERY QOF 2022-23	3 Year Trend	THE RED HOUSE GROUP QOF 2022-23	3 Year Trend	THE GROVE MEDICAL CENTRE QOF 2022-23	3 Year Trend	LITTLE BUSHEY SURGERY QOF 2022-23	3 Year Trend
Asthma	6.16%	5.84%	5.76%	6.01%		6.36%		5.80%		4.96%		5.70%	
Atrial fibrillation	2.09%	2.01%	2.17%	1.76%		2.49%		2.30%		1.47%		2.82%	
Chronic kidney disease	3.46%	3.84%	5.11%	4.62%		7.87%		3.51%		2.26%		7.28%	
Chronic obstructive pulmonary disease (COPD)	1.49%	1.39%	1.47%	1.89%		1.19%		1.14%		1.43%		1.69%	
Diabetes mellitus	6.63%	6.56%	7.50%	8.52%		7.84%		5.73%		7.17%		8.25%	
Epilepsy	0.70%	0.70%	0.69%	0.99%		0.81%		0.51%		0.65%		0.51%	
Heart Failure	0.80%	0.72%	0.84%	0.91%		0.95%		0.61%		0.71%		1.02%	
Hypertension	13.84%	13.36%	14.27%	14.25%		15.58%		13.91%		11.62%		15.97%	
Non-diabetic hyperglycaemia	6.42%	7.43%	9.29%	10.78%		9.59%		7.80%		6.01%		12.27%	
Peripheral arterial disease	0.44%	0.41%	0.41%	0.42%		0.54%		0.35%		0.44%		0.29%	
Secondary prevention of coronary heart disease	2.67%	2.62%	3.26%	2.81%		3.96%		3.30%		2.13%		4.10%	
Stroke and transient ischaemic attack	1.63%	1.53%	1.62%	1.63%		1.97%		1.59%		1.36%		1.52%	

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Development of more proactive, preventative care models for LTC : Annual Reviews

- The table on the right shows a summary of the percentage of patients receiving an annual review or risk assessment by condition.

- Where the cell is highlighted, the percentage is lower than the place value.

- Herts Five PCN shows a lower percentage of patients receiving an annual review than Place and ICB for AF, blood pressure and Heart Failure.

- The source of data in this table is QOF national reporting. More detailed information with the latest position is available to practices via https://app.ardensmanager.com/login

	ICB	SWH	Herts Five PCN	Fairbrook Medical Centre	Little Bushey Surgery	Schopwick Surgery	The Grove Medical Centre	The Red House Group
% of AF Patients with Stroke Risk Assessed in the last 12 months	92.9	94.2	93.7	93.3	95.5	94.8	83.3	97.3
The % of patients aged 45 or over who have a record of blood pressure in the preceding 5 years	85.7	85.1	83.2	84.1	91.3	87.5	77.8	79.9
The % of patients with a diagnosis of heart failure on the register, who have had a review in the preceding 12 months	72.7	80.0	78.9	54.1	90.3	88.4	76.0	92.3
The % of patients with asthma, on the register, who have had an asthma review in the preceding 12 months	64.0	64.1	65.6	57.2	81.2	68.5	57.5	69.5
The % of patients with COPD, on the register, who have had a review in the preceding 12 months	75.7	75.3	84.4	84.4	94.2	87.3	68.4	91.8
The % of patients with diabetes, on the register, with a record of a foot examination and risk classification: 1) low risk (normal sensation, palpable pulses), 2) increased risk (neuropathy or absent pulses), 3) high risk (neuropathy or absent pulses plus deformity or skin changes in previous ulcer) or 4) ulcerated foot within the preceding 12 months	75.5	76.1	77.8	79.8	90.0	84.0	59.2	78.9
The % of patients with non-diabetic hyperglycaemia who have had an HbA1c or fasting blood glucose performed in the preceding 12 months.	82.9	84.0	85.7	78.3	93.6	91.1	82.9	85.9

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Prevention and health inequalities – Atrial Fibrillation

- Herts Five PCN recorded prevalence for Atrial Fibrillation is higher than both Place and the ICB prevalence.

- Once identified the percentage of patients currently treated with anti-coagulant drug therapy is lower than the Place and ICB.

- Latest AF indicators can be found at https://app.ardensmanager.com/login

Atrial Fibrillation Prevalence - QOF (2022/23)

In those patients with Atrial Fibrillation, Percentage of Patients who are currently treated with anti-coagulation drug therapy QOF (2022/23)

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# Prevention and health inequalities – Hypertension

- Herts Five PCN recorded prevalence for hypertension is higher than both Place and the ICB prevalence.

- Once identified the data shows the percentage of patients in whom the latest BP reading is below the age-appropriate treatment threshold is slightly higher than Place and ICB, however there is variation between the practices.

- The latest hypertension indicators can be found at https://app.ardensmanager.com/login

Hypertension Prevalence QOF (2022/23)

CVD Prevent: Percentage of patients aged 18 and over, with GP recorded hypertension, in whom the last blood pressure reading (measured in the preceding 12 months) is below the age appropriate treatment threshold – all ages.

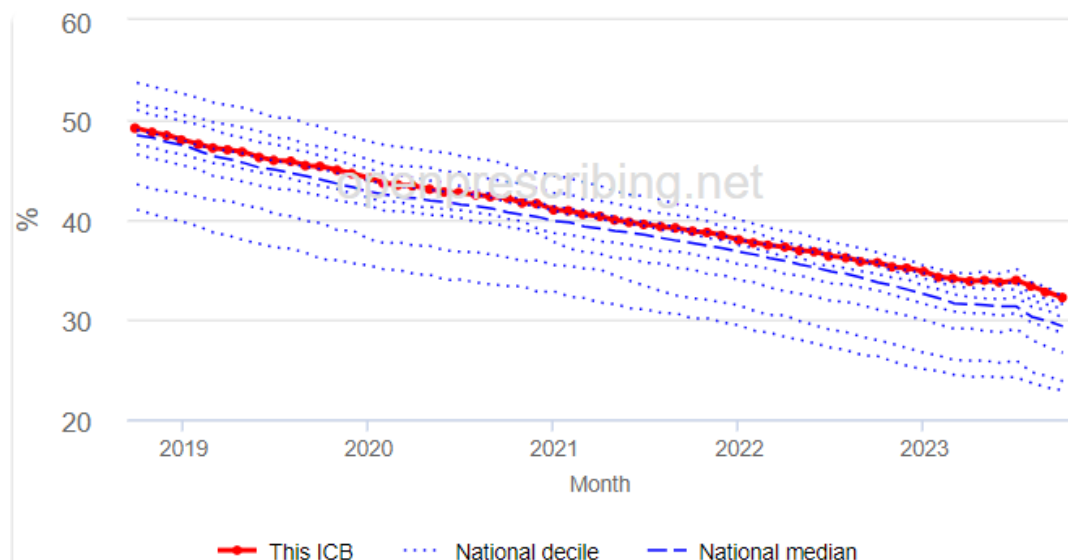Hertfordshire and West Essex Integrated Care System
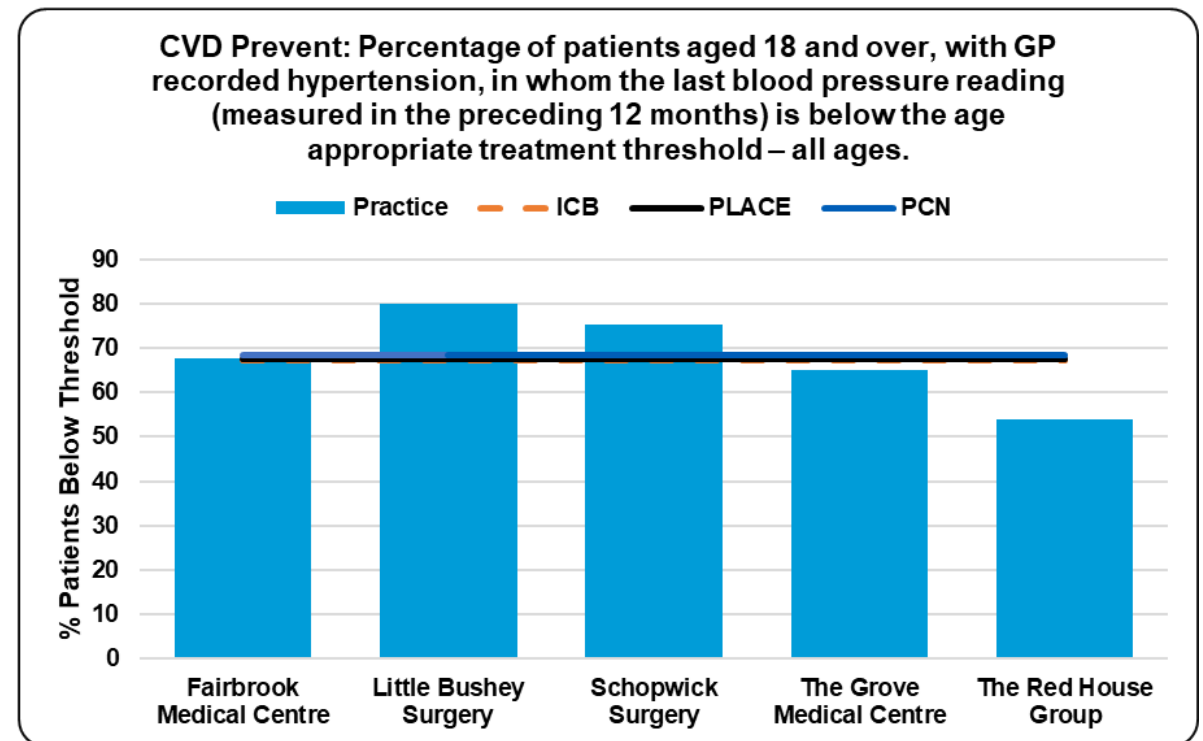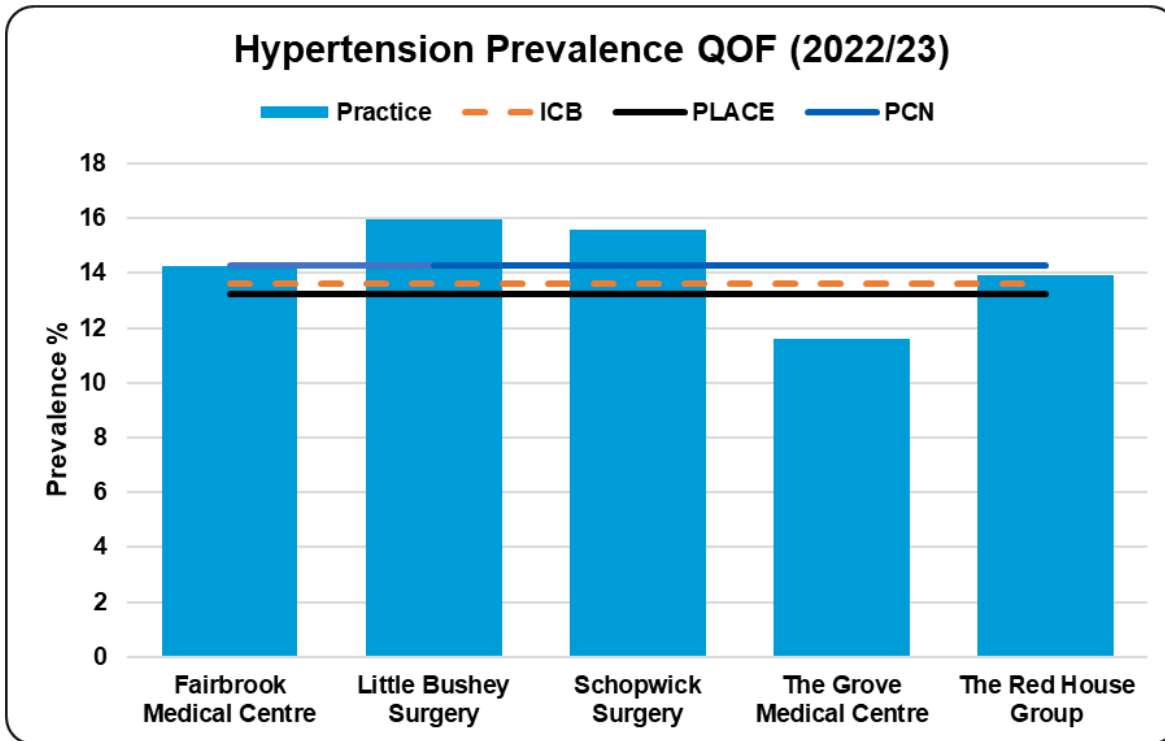
Lipid management : Percentage of people on lipid lowering therapy for secondary prevention who are on high intensity statins

- National lipid management pathways (Link to guidance) recommend the use of high intensity statins for all people with a history of Cardiovascular disease as well as where high dose statins are needed to control cholesterol. People on high intensity statins will see a greater reduction in c-LDL levels and reduce the risk of cardiovascular events.

- Data from OpenPrescribing provides information on the proportion of people who are on statins that are currently prescribed low or medium intensity doses. The ICS is a negative outlier in this area, with a higher proportion of people on a high intensity statin.

- The data for Herts Five PCN shows that there is an opportunity to improve statin treatment, prescribing a higher proportion of people onto high intensity statins. The PCN is in the 84th percentile with 33.8% of people not on high intensity statins. This compares to 28.3% nationally.

PCN – Items of Low and Medium Intensity Statins as a Percentage of Items of All Statins by Year
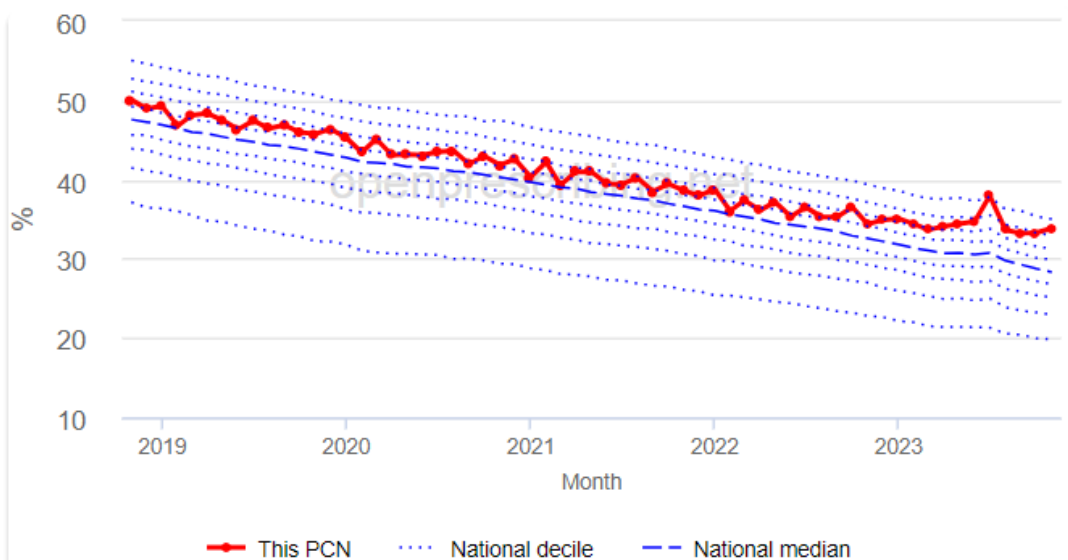
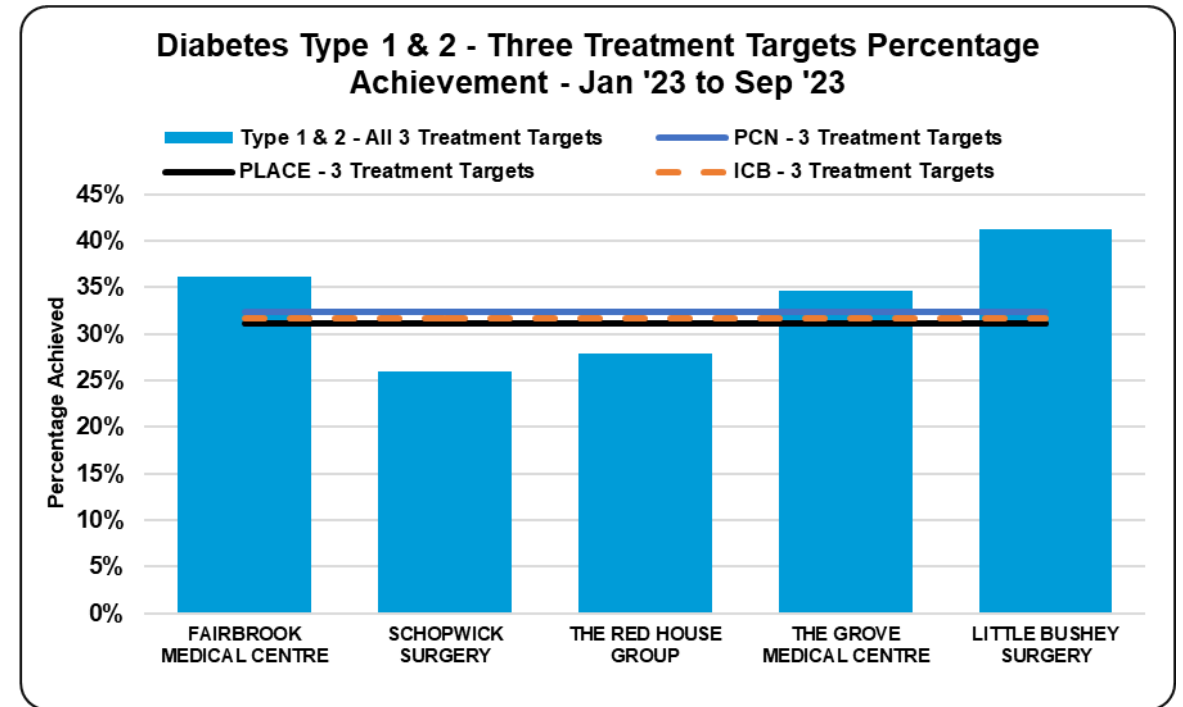**ICB – Items of Low and Medium Intensity Statins as a Percentage of Items of All Statins by Year**

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Source: OpenPrescribing.net – Link Here

Development of more proactive, preventative care models for LTC : 8 Care Processes & 3 treatment targets (all diabetes type 1 & 2)

- The percentage of people living with diabetes who have received the 8 care processes in Herts Five PCN is higher than both Place and the ICB, this is also seen in the data for three treatment targets.

- The latest information can be found within Ardens Manager.

Diabetes Type 1 & 2 - Eight Care Processes Percentage Achievement - Jan '23 to Sep '23

Diabetes Type 1 & 2 - Three Treatment Targets Percentage Achievement - Jan '23 to Sep '23

Source: National Diabetes Audit 2023-24 – Quarterly report January 2023 to September 2023, Link: NDA Quarterly Reports
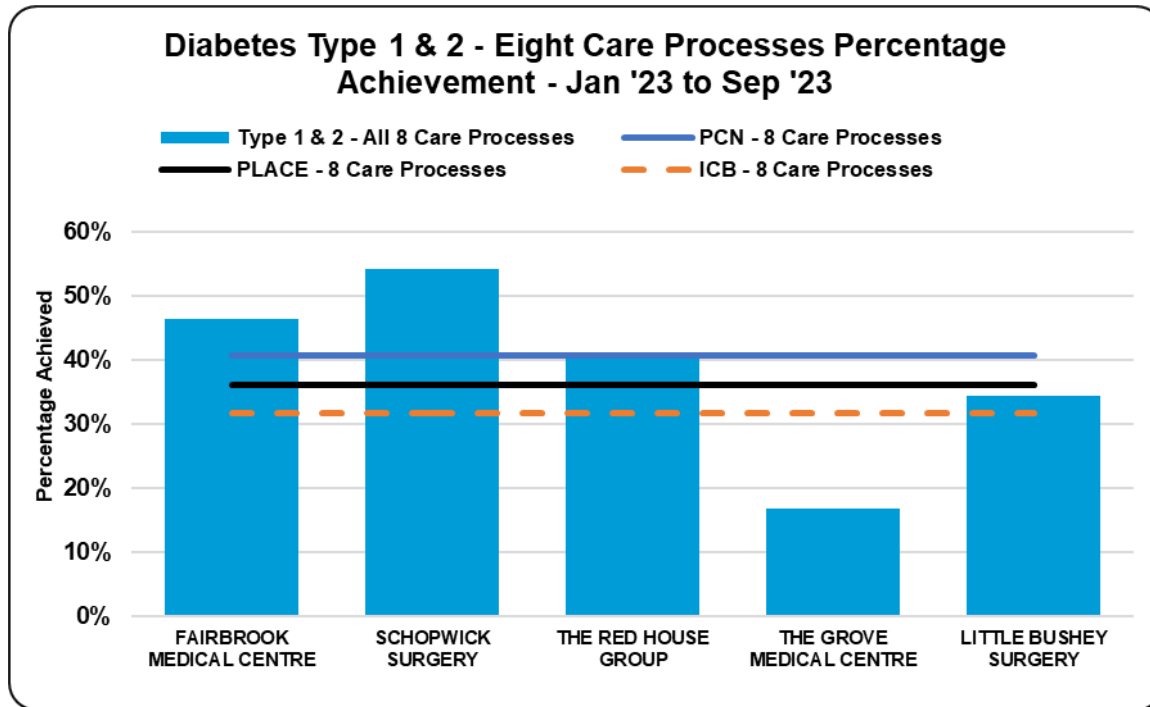
Reduction in admissions rates of Chronic Ambulatory Care Sensitive (ACS) conditions

LTC Outcome – Reduce the rate of ambulatory care sensitive emergency hospital admissions

ICB overarching outcome of Reduce the rate of emergency admission for chronic ambulatory care sensitive conditions associated with LTCs

Chronic Ambulatory Care Sensitive Conditions: Number of Emergency Admissions per Condition as DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Chronic Ambulatory Care Sensitive Conditions: Number of Emergency Admissions per Condition as DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place, & ICB rates
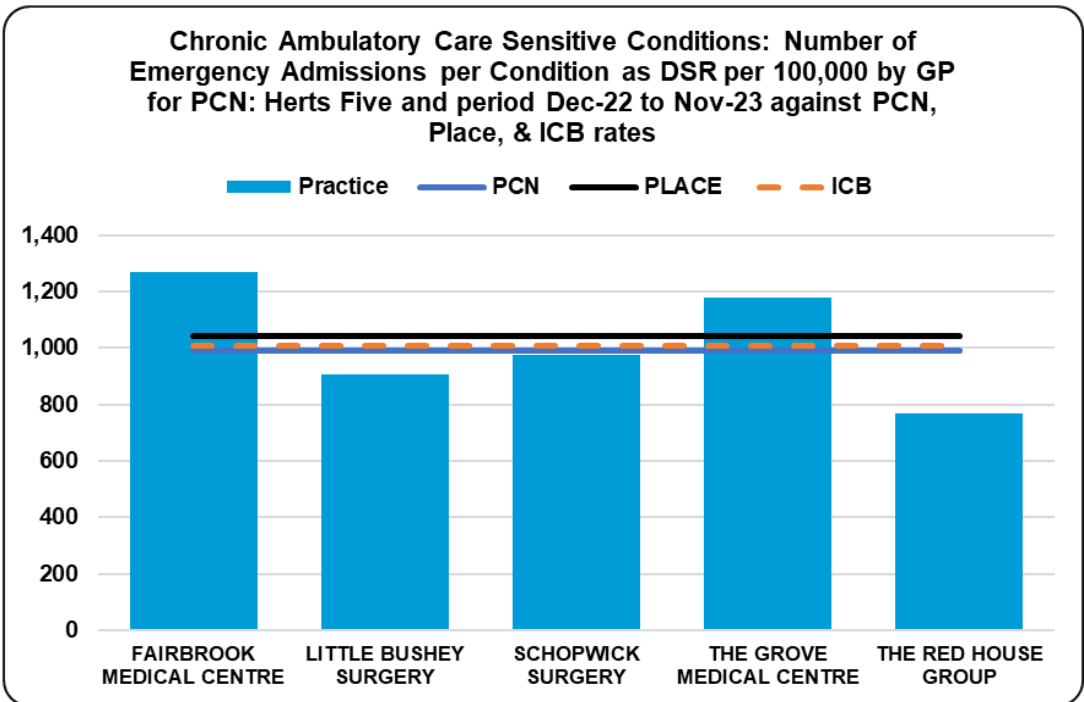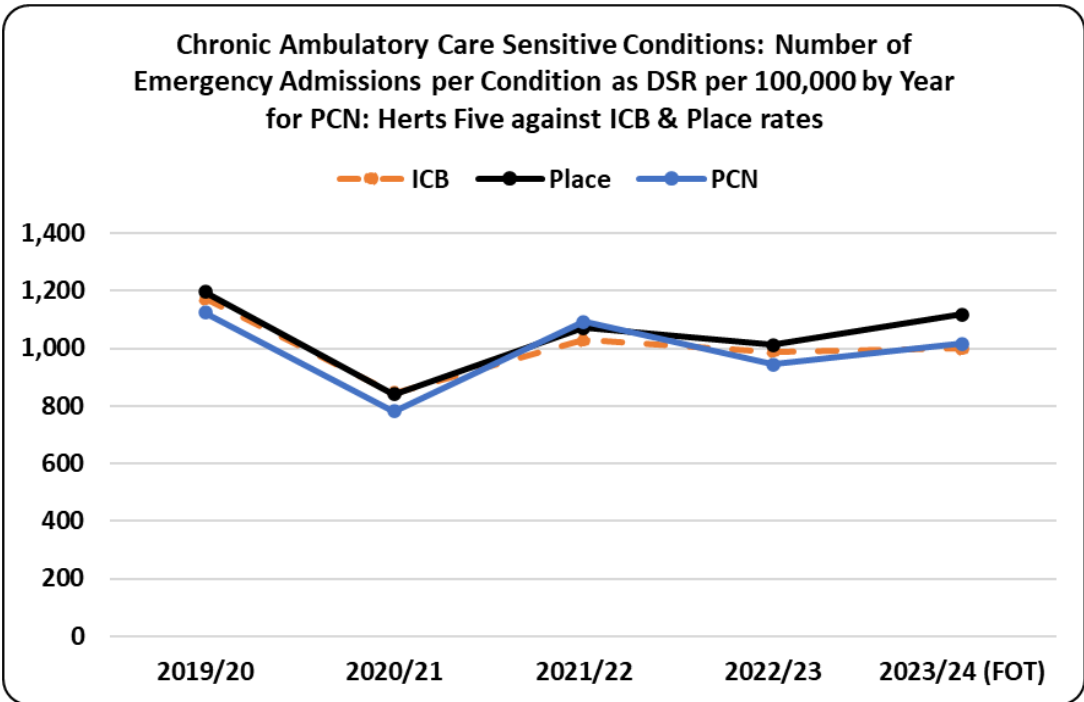
- Ambulatory care sensitive (ACS) conditions are conditions where effective community care and person-centred care can help prevent the need for hospital admission. (Nuffield Trust)

- Herts Five PCN's admission rate for Chronic ACS conditions is lower than both ICB and place rate when looking at the 12 months data up to November 2023.

- Atrial Fibrillation and flutter, Heart Failure, and Diseases of the blood (includes diabetes), are conditions with the highest volume and are also showing an upward trend.

- The data on page 11 looking at observed versus expected prevalence shows an opportunity for further identification of those with COPD and Heart Failure.

Chronic Ambulatory Care Sensitive Conditions for Herts Five PCN	PCN Per 100,000 Rate Apr-23 to Nov-23	5 Year Trend	2024/25 Trajectory
Angina: Angina pectoris	32.52		UP
Asthma	62.60		UP
Atrial fibrillation and flutter	181.33		UP
COPD	121.45		UP
Congestive heart failure	170.60		UP
Diseases of the blood	254.96		UP
Epilepsy	44.54		UP
Hypertension	61.81		UP
Mental and behavioural disorders	2.32		DOWN
Nutritional, endocrine and metabolic	83.93		UP

Source: SUS   Link: Chronic ACS Conditions & NHSOF

Emergency Admission rates for Falls in persons aged +75

- When looking at the rolling 12 months up to November 2023 the data shows that Herts Five PCN has a higher rate of admissions for falls than ICB and a similar rate to place.

- There is variation in the data for the practices within the PCN.

- Data in the following pages shows the data for the PCN compared with Place and PCN for areas within the ECF that aim to support reducing falls. Frailty Clinical Leads will be able to advise on current programmes of work within your area aimed at reducing falls.

Falls Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Falls Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

Hertfordshire and West Essex Integrated Care System

Source: SUS
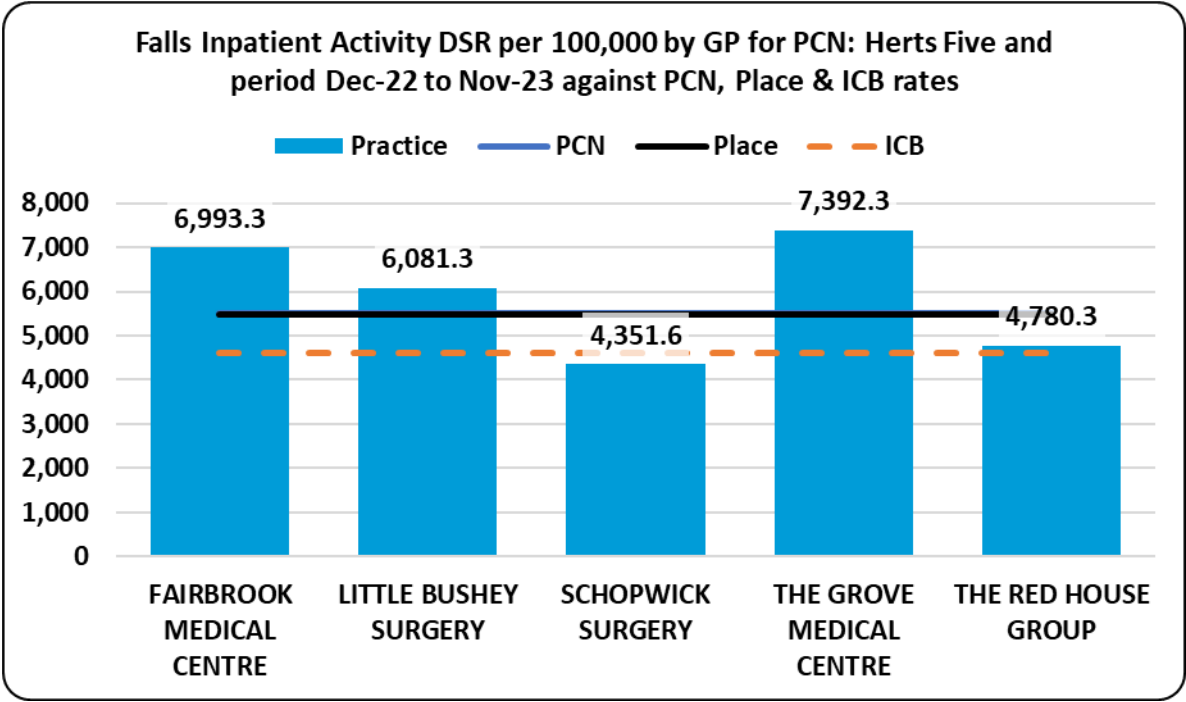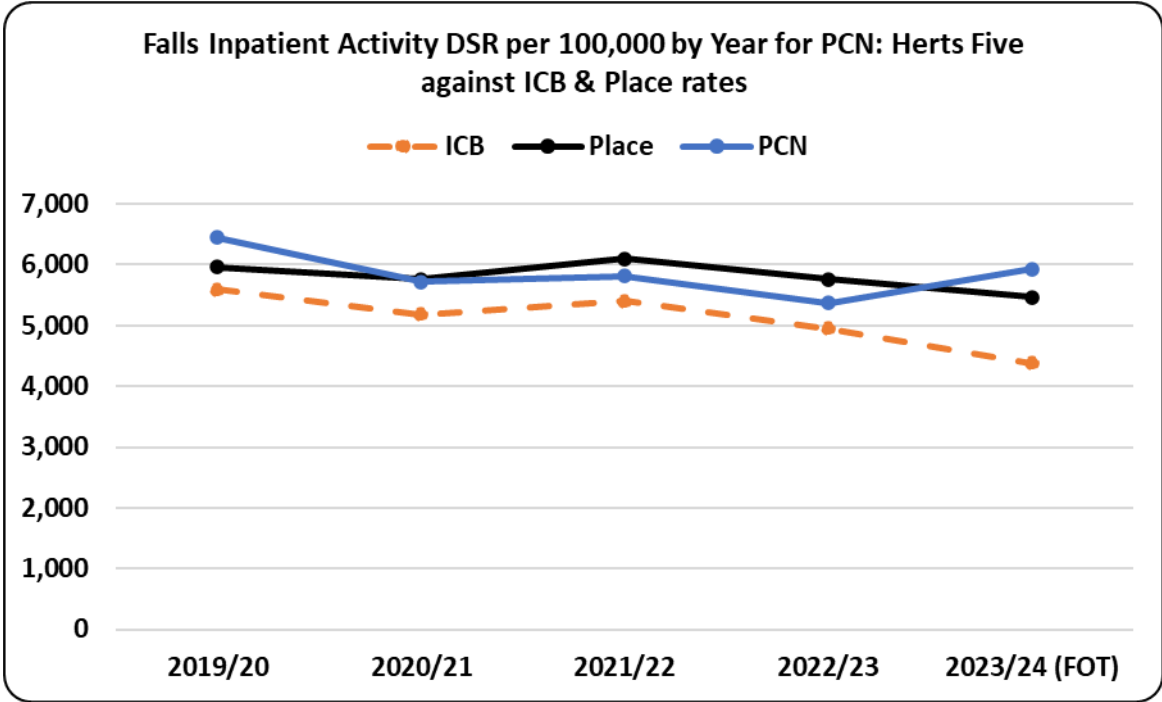
Emergency admission rates for Hip fractures in all over 75's

- The 12 months data up to November 2023 the data shows that Herts Five PCN has a higher rate of admissions for hip fractures than Place and ICB.

- When looking at the data by PCN the small numbers will cause fluctuations over the years. The latest trend data shows an upward trend.

- The ECF indicators on the next page shows potential areas of opportunity through benchmarking the PCN against Place and ICB.

Fracture of femur Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Fracture of femur Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

Practice	Value
FAIRBROOK MEDICAL CENTRE	1,696.1
LITTLE BUSHEY SURGERY	1,243.2
SCHOPWICK SURGERY	1,116.7
THE GROVE MEDICAL CENTRE	1,245.3
THE RED HOUSE GROUP	733.6

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Source: SUS

ECF indicators for frailty and EOL

- The data shows that Herts Five PCN has a high percentage of falls frat scores completed, when compared to Place and ICB as at end Dec 23.

- The percentage of the population recorded as moderately or severely frail is higher than place and ICB.

- The data contained within the table below is up to the end of December, the latest position can be found at Ardens Manager.

Herts Five Enhanced Commissiong Framework (ECF) 2023-24 for the period 1 April 23 to 31 Dec 23

	Frailty			EOL						
	Mod/Sev + falls Frat score done %	Mod fraily + SMR or polypharmacy medication review %	% Mod/Sev frailty of population	% population on EOL register	GSF %	DNACPR %	ACP %	PPD %	PPC %	SCR Consent %
ICB	16.0%	19.5%	1.9%	0.7%	64.9%	53.3%	11.3%	37.3%	39.8%	34.8%
SWH	15.9%	24.1%	1.9%	0.5%	42.8%	57.7%	18.6%	43.1%	44.2%	2.2%
PCN	18.8%	25.3%	3.4%	0.6%	42.4%	60.0%	16.8%	43.1%	44.1%	0.0%
Fairbrook Medical Centre	31.6%	41.8%	3.3%	0.5%	34.6%	44.9%	6.4%	24.4%	26.9%	0.0%
Little Bushey Surgery	5.9%	16.0%	6.0%	0.4%	16.7%	54.2%	12.5%	45.8%	50.0%	0.0%
Schopwick Surgery	25.6%	41.3%	2.4%	1.5%	66.7%	67.1%	14.2%	48.9%	49.3%	0.0%
The Grove Medical Centre	29.0%	7.8%	1.6%	0.5%	1.4%	54.3%	40.0%	44.3%	44.3%	0.0%
The Red House Group	12.2%	17.8%	4.6%	0.2%	3.2%	64.5%	12.9%	45.2%	45.2%	0.0%

Hertfordshire and West Essex Integrated Care System

Prevalence of mental health conditions (QOF)

- The data on this page looks at the recorded prevalence of conditions within the Mental Health section of QOF. It shows the PCN prevalence against the place and ICB. Future iterations will include comparisons against modelled expected prevalence.

- The data shows that Herts Five PCN has a higher recorded prevalence across all areas.

- The table below shows the trend over the last three years for each area.

- The following page looks at some of the wider QOF indicators around Mental Health.

Recorded Prevalence of Mental Health related conditions QOF (2022/23): Herts Five PCN

■ Herts Five PCN   ● S&W Herts   ● ICB
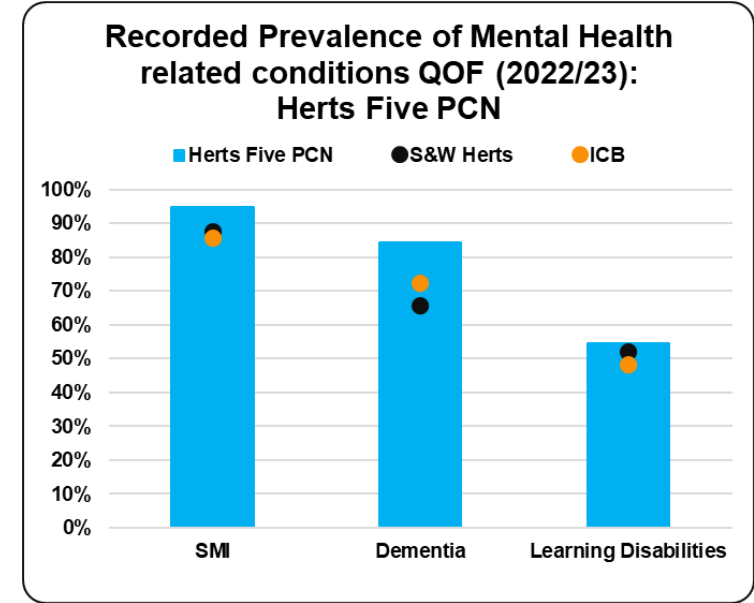
Herts Five PCN- Mental Health Conditions 2022-2023 QOF prevalence, with 3 year trend									
Fairbrook Medical Centre		**Little Bushey Surgery**		**Schopwick Surgery**		**The Grove Medical Centre**		**The Red House Group**	
QOF Prevalence 22-23	3 year Trend	QOF Prevalence 22-23	3 year Trend	QOF Prevalence 22-23	3 year Trend	QOF Prevalence 22-23	3 year Trend	QOF Prevalence 22-23	3 year Trend
Dementia 0.7%		0.9%		1.0%		1.0%		0.6%	
Depression 14.2%		9.3%		13.6%		12.5%		12.3%	
Learning Disability 0.7%		0.4%		0.7%		0.5%		0.5%	
SMI 1.1%		0.8%		1.0%		1.2%		0.7%	

Recorded Prevalence of Depression QOF (2022/23)

● S&W Herts   ● ICB

Herts Five PCN

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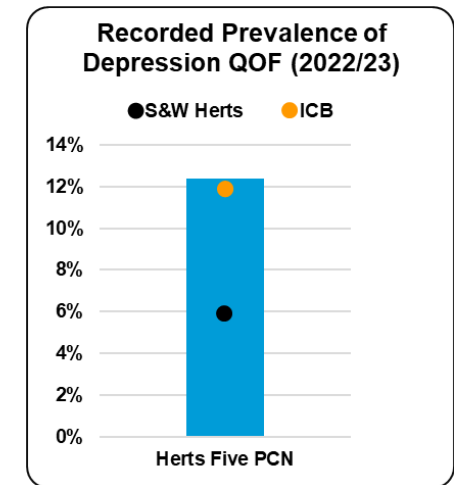
Mental Health QOF Indicators 22-23

- The data for mental Health QOF metrics for 2022-23 show that Herts Five PCN achieved higher for all metrics for both SMI and Depression in comparison to Place and the ICB.

- The data contained within the table below is up to the end of December, the latest position can be found at Ardens Manager.

	SMI					Depression
	% of patients with SMI who have a care plan	% of patients with SMI who have a record of BMI in the preceding 12 months	% of patients with SMI who have a record of alcohol consumption in preceding 12 months	% of patients with SMI who have a record of a lipid profile in the preceding 12 months	% of patients with SMI who have a record of blood glucose of HbA1C in preceding 12 months	% of patients with a diagnosis of depression who have been reviewed within 10-56 days
ICB	82.6	88.7	89.3	83.1	83.0	83.0
SWH	87.2	90.0	90.4	84.8	84.4	84.9
Herts Five PCN	96.0	97.1	95.9	93.7	95.7	85.5
Fairbrook Medical Centre	94.4	95.5	96.7	93.7	94.6	93.8
Little Bushey Surgery	97.5	94.7	94.9	94.6	93.5	90.9
Schopwick Surgery	95.4	98.3	95.5	96.2	97.7	83.9
The Grove Medical Centre	94.9	96.9	97.6	93.4	95.3	86.0
The Red House Group	98.9	98.9	93.4	90.4	96.1	81.0

Hertfordshire and West Essex Integrated Care System

Emergency Admissions Rates for Self – Harm

- Herts Five PCN has a lower rate of admissions for self-harm compared with both place and ICB.

- When looking at the data it should be noted that the numbers at PCN level are small and therefore more fluctuation between the years will be seen.

- The data will continue to be monitored at wider HCP and ICB footprints.

Self-harm Inpatient Activity DSR per 100,000 by Year for PCN: Herts Five against ICB & Place rates

Self-harm Inpatient Activity DSR per 100,000 by GP for PCN: Herts Five and period Dec-22 to Nov-23 against PCN, Place & ICB rates

Hertfordshire and West Essex Integrated Care System

Source: SUS