



East Sussex Better Together (ESBT) Outcomes Framework



The ESBT Alliance Outcomes Framework shows our commitment to measuring our progress against the health and care priorities that matter to you. For local people using our services in the new ESBT Alliance, that means a way to measure whether the services they receive (activities) will improve their health, well-being and experience of care and support (outcomes). Overall we want to improve the health and wellbeing of our population, the quality and experience of health and care services, and keep this affordable.



The measures and key indicators in this document have been chosen because they are what people have told us is important to them, and will give us a good indication of overall system performance. The ESBT Alliance Outcomes Framework complements the existing Outcomes and Performance Frameworks that the individual ESBT organisations work to for Adult Social Care, Children's Services, Public Health and the NHS, and is designed to provide an overview of how well we are performing together as a system.



Population health and wellbeing

We want to improve health and wellbeing for local people

Outcomes	These indicators and measures will tell us how we are doing...		
All children have a healthy start in life	The proportion of babies who were fully or partially breastfed	⇒	Increase in the percentage of babies aged 6-8 weeks who were fully or partially breastfed
	The rate of obesity among children	⇒	Reduction in excess weight in children aged 4-5 years Reduction in excess weight in children aged 10-11 years
	The proportion of mothers known to be smokers at the time of delivery	⇒	Reduction in the percentage of mother known to be smokers at the time of delivery
People have a good quality of life	The proportion of people reporting a good quality of life	⇒	Improvement in health-related quality of life for older people Improvement in social-care-related quality of life for adults Increase in number of people who feel they have enough social contact
	The rate of overall mental wellbeing	⇒	Increase in the proportion of people who say they are not anxious or depressed Decrease in attendances at A&E for self-harm per 100,000 of local population
People live in good health	The average number of years a person would expect to live in good health	⇒	Improvement in healthy life expectancy at birth for men Improvement in healthy life expectancy at birth for women
	The rate of preventable deaths	⇒	Reduction in preventable mortality Reduction in mortality amenable to healthcare

We want to reduce health inequalities for local people

Inequalities in healthy life expectancy are reduced	The gap in rates of obesity in children between the most and least deprived areas	⇒	Reduction in the gap in excess weight of 4-5 year olds between the most and least deprived areas Reduction in the gap in excess weight of 10-11 year olds between the most and least deprived areas
	The gap in health related quality of life for older people between the most and least deprived areas	⇒	Reduction in the gap in health-related quality of life for older people between the most and least deprived areas
	The gap in rates of preventable deaths between the most and least deprived areas	⇒	Reduction in the gap in preventable mortality between the most and least deprived areas Reduction in the gap in mortality amenable to healthcare between the most and least deprived areas



The experience of local people

We want good communication and access to information for local people - *moved to the top*

Outcomes	These indicators and measures will tell us how we are doing...	
Health and care services talk to each other so that people receive seamless services	The proportion of people and carers reporting they have only had to tell their story once	⇒ Number of people who contact us about their support who have not had to keep repeating their story Proportion of carers who contact us about support who have not had to keep repeating their story
Jargon free health and care information can be found in a range of locations and formats	The proportion of people and carers reporting they find it easy to access and use information about services	⇒ Proportion of people who find it easy to find information and advice about support, services or benefits. Proportion of carers who find it easy to find information and advice about support, services or benefits

We want to put people in control of their health and care

People feel respected and able to make informed choices about services	The proportion of people using services who feel they have been involved in making decisions about their support	⇒ Proportion of people using services who receive self-directed support Proportion of people receiving services who feel they have enough choice over their care and support services Proportion of people receiving services feel they have as much control as they want over their daily life
	The proportion of carers who feel they have been involved in decisions about services	⇒ Proportion of carers who feel they have been involved or consulted as much as they wanted to be, in discussions about the support or services provided to the person they care for Proportion of carers who feel that their needs as a carer were taken into account in planning their support
People have choice and control over services and how they are delivered	The number of people in receipt of direct payments for their care or personal health budgets	⇒ Number of people using services who receive direct payments for their care Number of people in receipt of personal health budgets
	The number of carers in receipt of direct payments	⇒ Number of carers using services who receive direct payments

We want to deliver services that meet people's needs and support their independence

People are as independent as possible	The number of people living at home and accessing support in their communities	⇒ Number of people accessing the support available to them in their local communities Number of people are permanently admitted to residential and nursing care homes ADD: Number of people accessing Technology Enabled Care Services (TECS).
	The proportion of people with support needs who are in paid employment	⇒ Proportion of adults with learning disabilities in paid employment Proportion of adults in contact with secondary mental health services in paid employment
	The proportion of people who regain their independence after using services	⇒ Proportion of people 65+ who are still at home three months after a period of rehabilitation Proportion of people needing less acute, or no ongoing, support after using short-term services
People feel safe	The proportion of people and carers who report feeling safe	⇒ Proportion of people who feel as safe as they want DELETE: People feel care and support services help them feel safe Proportion of carers feel safe and have no worries about their personal safety



Transforming services for sustainability

We want to demonstrate financial and system sustainability

Outcomes	These indicators and measures will tell us how we are doing...	
People have access to timely responsive and joined up care	The waiting times for primary care GP services and community support and care services	⇒ Number of people who report they are satisfied with their experience of making a GP appointment Waiting time for home care packages ADD: Number of staff in GP practices who are trained in care navigation
	The referral times for health treatment	⇒ Constitutional NHS standards are met Proportion of people referred with first episode of psychosis who are seen within 2 weeks
	The length of stay in hospital	⇒ Length of stay in hospital Average daily rate of delayed transfers of care out of hospital
People use emergency hospital services only when they need to	The number of people accessing hospital in an unplanned way	⇒ Number of A&E attendances Number of non-elective admissions Emergency admissions for chronic ambulatory care sensitive conditions
Financial balance is achieved across the health and care system	The average Year of Care Costs	⇒ Average spend per head

We want to deliver joined up information technology

People and staff have access to shared and integrated electronic information	The proportion of people and staff in all health and care settings able to retrieve relevant information about an individual's care from their local system	⇒ Proportion of systems feeding in to the integrated personal record Proportion of systems feeding in to the integrated reporting system Proportion of systems feeding in to the citizen record
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We want to prioritise prevention, early intervention, self care and self management

People get help early and services support those most at risk.	The flow of investment from acute hospital services to preventative, primary GP, and community health and care services	⇒ Increase the proportion of funding invested in preventative, primary and community provision
	The proportion of services developed to intervene proactively to support people before their needs increase	⇒ Activation levels of people receiving services Number of people being screened for frailty Number of people who have a care plan from a proactive service Proportion of clients/patients who have benefited from active care coordination ADD: Number of carers identified in GP practices through the Frail and Vulnerable Patients Scheme ADD: Proportion of older people in residential or nursing care who have had a person-centred medication review at least annually



Quality care and support

We want to provide safe, effective and high quality care and support

Outcomes	These indicators and measures will tell us how we are doing...	
People receive high quality care and support	The proportion of people reporting satisfaction with the services they have received	⇒ Number of people who report they are satisfied with the care and support they receive Number of carers who report they are satisfied with the care and support they receive
	The effectiveness of the health and care intervention the person has received	⇒ Health gain people experience after elective procedures DELETE: Number of older people still at home 91 days after discharge from hospital ADD: Emergency readmissions within 30 days of discharge from hospital
People are kept safe and free from avoidable harm	The number of healthcare-related infections and serious incidents	⇒ Healthcare-related infections Number of serious incidents in healthcare
	The effectiveness of the safeguarding enquiry	⇒ Ensure adults are asked what their desired outcomes of the safeguarding enquiry are, and of those how many were fully/partially achieved
	The number of falls in the population of local people	⇒ Number of hospital admissions from falls in East Sussex

We want to deliver person centred care through integrated and skilled service provision

People are supported by skilled staff, delivering person-centred care	The levels of staff satisfaction	⇒ Staff satisfaction levels Staff turnover
	The proportion of staff who have received training in person-centred care	⇒ Percentage of staff who have completed their mandatory and statutory training
	ADD: The proportion of temporary staff used	⇒ ADD: Percentage of temporary agency staff used