Isle of Man Government
Reiltys Ellan Vannin

Department of Health and Social Care

Rheynn Slaynt as Kiarail y Theay

DHSC Health Outcomes Framework

Indicator Specifications

Version 2.0

Contents

Domain 1: Preventing people from dying prematurely

1 Under 75 mortality rate from cardiovascular disease

Overview

Indicator title

1 Under 75 mortality rate from cardiovascular disease

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduce premature mortality from cardiovascular disease.

Plain English description

A measure of the likelihood of dying of heart disease under the age of 75, which allows for comparisons between populations with different age profiles and over time.

Technical description

Directly age-standardised mortality rate from cardiovascular disease for people aged under 75 years.

Alignment with other Outcomes Frameworks

Shared with Public Health Outcomes Framework Indicator 4.04i – Under 75 mortality rate from all cardiovascular diseases.

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality Dataset

Construction

Introduction

Numerator data for each age band are divided by the denominator population data for each age band respectively to give age specific death rates for the area.

These age specific rates are multiplied by the standard population for each age group respectively and aggregated across all the age groups to give the age adjusted count of deaths for the area.

This age adjusted count of deaths is divided by the total standard population for the whole age range included in the indicator, and multiplied by 100,000 to give the age standardised mortality rate for the area.

Data fields

Age group

European Standard Population per age group

No. of deaths (ICD Codes I00-I99) per age group

2016 Census population data per age group

Age-specific death rate per age group

Age-standardised death rate per age group

Death rate per 100,000

Lower Confidence Interval

Upper Confidence Interval

Data filters

1. Field name: Underlying Cause of Death Code

   Conditions: ICD Codes I00-I99

   Rationale: Selecting those whose underlying cause of death was coded on their death certificate as cardiovascular disease

2. Field name: Age Group

   Conditions: <75 years

Rationale: Selecting those under 75 years of age

Calculation

Denominator

Population-years (aggregated populations for the three years) for people of all ages, aggregated into quinary age bands (0-4, 5-9, …, 70-74).

Numerator

Number of deaths from all cardiovascular diseases (classified by underlying cause of death recorded as ICD codes I00-I99) registered in the respective calendar years, in people aged under 75, aggregated into quinary age bands (0-4, 5-9,…, 70-74).

Presentation

Breakdowns

Gender

Excel and CSV output

Column Name	Output
Age Group	quinary age bands (<1, 1-4, 5-9, …, 70-74)
ESP	European Standard population per Age Group
Deaths	Deaths per age group (ICD codes I00-I99)
Population	2016 Census data per age group (for 3 years)
Age Specific	Age Specific death rate per age group
Age Standardised	Age standardised death rate per age group
Rate	Death rate per 100,000

1.2 Under 75 mortality rate from respiratory disease

Overview

Indicator title

1.2 Under 75 mortality rate from respiratory disease

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduce premature mortality from respiratory disease.

Plain English description

A measure of the likelihood of dying of respiratory disease under the age of 75, which allows for comparisons between populations with different age profiles and over time.

Technical description

Directly standardised mortality rate from respiratory disease for people aged under 75.

Alignment with other Outcomes Frameworks

Shared with Public Health Outcomes Framework Indicator 4.07i - Age-standardised rate of mortality from respiratory disease in persons less than 75 years per 100,000 population.

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality Dataset

Construction

Introduction

Numerator data for the relevant year, for each age band are divided by the denominator population data for each age band respectively to give age specific death rates for the area.

These age specific rates are multiplied by the standard population for each age group respectively and aggregated across all the age groups to give the age adjusted count of deaths for the area.

This age adjusted count of deaths is divided by the total standard population for the whole age range included in the indicator, and multiplied by 100,000 to give the age standardised mortality rate for the area.

Data fields

Age group

European Standard Population per age group

No. of deaths per age group

2016 Census population data per age group

Age-specific death rate per age group

Age-standardised death rate per age group

Death rate per 100,000

Lower Confidence Interval

Upper Confidence Interval

Data filters

1. Field name: Underlying Cause of Death Code

   Conditions: ICD Codes J00-J99

   Rationale: Selecting those whose underlying cause of death was coded on the death certificate as respiratory disease

2. Field name: Age Group

   Conditions: < 75 Years

   Rationale: Capturing those under 75 years at time of death

3. Field name: Date of Registration

   Conditions: between 1st January and 31st December of the last 3 respective calendar years inclusive

   Rationale: Selecting those deaths registered during the relevant calendar years

Calculation

Denominator

Population-years (aggregated populations for the three years) for people of all ages, aggregated into quinary age bands (0-4, 5-9, …, 70-74).

Numerator

Number of deaths from respiratory diseases (classified by underlying cause of death recorded as ICD codes J00-J99) registered in the respective calendar years, in people aged under 75, aggregated into quinary age bands (0-4, 5-9,…, 70-74).

Presentation

Breakdowns

Gender

Age

Excel and CSV output

Column Name	Output
Age Group	quinary age bands (<1, 1-4, 5-9, …, 70-74)
ESP	European Standard population per Age Group
Deaths	Deaths per age group (ICD codes J00-J99)
Population	2016 Census data per age group (for 3 years)
Age Specific	Age Specific death rate per age group
Age Standardised	Age standardised death rate per age group
Rate	Death rate per 100,000

1.3 Under 75 mortality rate from liver disease

Overview

Indicator title

1.3 Under 75 mortality rate from liver disease

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduce premature mortality from liver disease.

Plain English description

A measure of the likelihood of dying of liver disease under the age of 75, which allows for comparisons between populations with different age profiles and over time.

Technical description

Directly standardised mortality rate from liver disease for people aged under 75.

Alignment with other Outcomes Frameworks

Shared with Public Health Outcomes Framework Indicator 4.06i - Age-standardised rate of mortality from liver disease in persons less than 75 years of age per 100,000 population

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality Dataset

Construction

Introduction

Numerator data for each age band are divided by the denominator population data for each age band respectively to give age specific death rates for the area.

These age specific rates are multiplied by the standard population for each age group respectively and aggregated across all the age groups to give the age adjusted count of deaths for the area.

This age adjusted count of deaths is divided by the total standard population for the whole age range included in the indicator, and multiplied by 100,000 to give the age standardised mortality rate for the area.

Data fields

Age group

European Standard Population per age group

No. of deaths per age group

2016 Census population data per age group

Age-specific death rate per age group

Age-standardised death rate per age group

Death rate per 100,000

Lower Confidence Interval

Upper Confidence Interval

Data filters

1. Field name: Underlying Cause of Death Code

   Conditions: ICD Codes B15-B19, C22, I81, I85, K70-K77, T86.4

   Rationale: Selecting those whose underlying cause of death was coded on the death certificate as liver disease

2. Field name: Age Group

   Conditions: <75

   Rationale: Capturing those under 75 years at time of death

3. Field name: Date of Registration

   Conditions: between 1st January and 31st December of the last 3 respective calendar years inclusive

   Rationale: Selecting those deaths registered during the relevant calendar years

Calculation

Denominator

Population-years (aggregated populations for the three years) for people of all ages, aggregated into quinary age bands (0-4, 5-9, …, 70-74).

Numerator

Number of deaths from respiratory diseases (classified by underlying cause of death recorded as ICD codes B15-B19, C22, I81, I85, K70-K77, T86.4) registered in the respective calendar years, in people aged under 75, aggregated into quinary age bands (0-4, 5-9,…, 70-74).

Presentation

Breakdowns

Gender

Age

Excel and CSV output

Column Name	Output
Age Group	quinary age bands (<1, 1-4, 5-9, …, 70-74)
ESP	European Standard population per Age Group
Deaths	Deaths per age group B15-B19, C22, I81, I85, K70-K77, T86.4
Population	2016 Census data per age group (for 3 years)
Age Specific	Age Specific death rate per age group
Age Standardised	Age standardised death rate per age group
Rate	Death rate per 100,000

1.4 Under 75 mortality rate from cancer

Overview

Indicator title

1.4 Under 75 mortality rate from cancer

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduce premature mortality from cancer.

Plain English description

A measure of the likelihood of dying of cancer under the age of 75, which allows for comparisons between populations with different age profiles and over time.

Technical description

Directly standardised mortality rate from cancer for people aged under 75.

Alignment with other Outcomes Frameworks

Shared with Public Health Outcomes Framework Indicator *4.05i - Age-standardised rate of mortality from all cancers in persons less than 75 years of age per 100,000 population*

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality Dataset

Construction

Introduction

Numerator data for each age band are divided by the denominator population data for each age band respectively to give age specific death rates for the area.

These age specific rates are multiplied by the standard population for each age group respectively and aggregated across all the age groups to give the age adjusted count of deaths for the area.

This age adjusted count of deaths is divided by the total standard population for the whole age range included in the indicator, and multiplied by 100,000 to give the age standardised mortality rate for the area.

Data fields

Age group

European Standard Population per age group

No. of deaths per age group

2016 Census population data per age group

Age-specific death rate per age group

Age-standardised death rate per age group

Death rate per 100,000

Lower Confidence Interval

Upper Confidence Interval

Data filters

1. Field name: Underlying Cause of Death Code

   Conditions: ICD Codes C00-C97

   Rationale: Selecting those whose underlying cause of death was coded on the death certificate as cancer

2. Field name: Age Group

   Conditions: <75

   Rationale: Capturing those under 75 years at time of death

3. Field name: Date of Registration

   Conditions: between 1st January and 31st December of the last 3 respective calendar years inclusive

Rationale: Selecting those deaths registered during the relevant calendar years

Calculation

Denominator

Population-years (aggregated populations for the three years) for people of all ages, aggregated into quinary age bands (0-4, 5-9, …, 70-74).

Numerator

Number of deaths from respiratory diseases (classified by underlying cause of death recorded as ICD codes C00-C97) registered in the respective calendar years, in people aged under 75, aggregated into quinary age bands (0-4, 5-9,…, 70-74).

Presentation

Breakdowns

Gender

Age

Excel and CSV output

Column Name	Output
Age Group	quinary age bands (<1, 1-4, 5-9, …, 70-74)
ESP	European Standard population per Age Group
Deaths	Deaths per age group (ICD codes C00-C97)
Population	2016 Census data per age group (for 3 years)
Age Specific	Age Specific death rate per age group
Age Standardised	Age standardised death rate per age group
Rate	Death rate per 100,000

1.6 Infant mortality

Overview

Indicator title

1.6 Infant mortality

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduced infant mortality.

Plain English description

The number of babies dying before the age of one for every 1,000 that were born alive.

Technical description

The number of deaths at ages under one year, per 1,000 live births.

Alignment with other Outcomes Frameworks

Shared with Public Health Outcomes Framework Indicator 4.01 - Infant mortality - Rate of deaths in infants aged under 1 year per 1,000 live births

Data sources

Denominator

Medway maternity

Numerator

Public Health Mortality Dataset

Construction

Introduction

Crude rate per 1,000 live births: The number of infant deaths is divided by the number of live births in the same area and multiplied by 1,000.

Data fields

Year

Births

Deaths

Infant Mortality Rate

Data filters

1. Field name: Deaths

   Conditions: All deaths <1 years

   Rationale: Selecting only those aged under 1 year old

Calculation

Denominator

The number of live births that occurred in the relevant period.

Numerator

The number of infant deaths aged under 1 year that were registered in the relevant period.

Presentation

Breakdowns

Gender

Time period

Excel and CSV output

Column Name	Output
Time period	3 Calendar years
Births	Number of live births
Deaths	Number of deaths aged <1
Mortality Rate	Infant mortality rate (Deaths/births*100)

1.7 Potential years of life lost (PYLL) from causes considered amenable to healthcare – Adults

Overview

Indicator title

1.7 Potential years of life lost (PYLL) from causes considered amenable to healthcare – adults

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduce premature mortality from causes amenable to healthcare.

Plain English description

The number of years of life lost by every 100,000 adults aged 20 and over dying from conditions which are usually treatable, measured in a way which allows for comparisons between populations with different age profiles and over time.

Technical description

Directly age-standardised potential years of life lost (PYLL) rate from amenable causes for adults.

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality Dataset

Construction

Introduction

The PYLL rate is calculated by weighting the number of 'amenable' deaths in a given year by the number of additional years the person who died might have been expected to live in the presence of timely and effective healthcare.
The average age-specific life expectancies for each five-year age band are used to weight the number of deaths in that age band to give the average number of years of life lost for that age band. The life expectancy for the 90+ age band is calculated as an average of the single-year life expectancies for ages 90 to 100. This is then applied to the number of deaths for people aged 90 or over.

Calculation

Denominator

2016 census data – those over 20 years

Numerator

Number of deaths, where the individual was aged 20 years and over, from causes considered amenable to healthcare multiplied by the age-specific life expectancy for the relevant age group and gender.

Presentation

Breakdowns

Gender

Time period

Excel and CSV output

Column Name	Output
Gender	Persons, male, female
Time Period	Calendar year
Value	Directly standardised rate
Lower CI	Lower limit of 95% confidence interval
Upper CI	Upper limit of 95% confidence interval

1.7.i Potential years of life lost (PYLL) from causes considered amenable to healthcare – children and young people

Overview

Indicator title

1.7.i Potential years of life lost (PYLL) from causes considered amenable to healthcare – children and young people

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To reduce premature mortality from causes amenable to healthcare.

Plain English description

The number of years of life lost by every 100,000 persons aged 0 to 19 dying from conditions which are usually treatable, measured in a way which allows for comparisons between populations with different age profiles and over time.

Technical description

Directly age-standardised potential years of life lost (PYLL) rate from amenable causes for children.

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality dataset

Construction

Introduction

The PYLL rate is calculated by weighting the number of 'amenable' deaths in a given year by the number of additional years the person who died might have expected to live in the presence of timely and effective healthcare.
The average age-specific life expectancies for each five-year age band are used to weight the number of deaths in that age band to give the average number of years of life lost for that age band.

Calculation

Denominator

2016 census data – for those under 19 years.

Numerator

Number of deaths, where the individual was aged 19 years and under, from causes considered amenable to healthcare multiplied by the age-specific life expectancy for the relevant age group and gender.

Presentation

Breakdowns

Gender

Time periods

Excel and CSV output

Column Name	Output
Gender	Persons, male, female
Time Period	Calendar year
Value	Directly standardised rate
Lower CI	Lower limit of 95% confidence interval
Upper CI	Upper limit of 95% confidence interval

1.8 Life expectancy at age 75 for males and females

Overview

Indicator title

1.8 Life expectancy at age 75 for males and females

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

To increase life expectancy at age 75, for males and females.

Plain English description

The average number of additional years a man or woman aged 75 can be expected to live if they continue to live in the same place and the death rates in their area remain the same for the rest of their life.

Technical description

Period expectation of life at age 75.

Data sources

Denominator

Isle of Man Census data (2016)

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

Public Health Mortality Dataset

Construction

Introduction

The average number of years a person would expect to live based on contemporary mortality rates. For a particular area and time period, it is an estimate of the average number of years at age 75 a person would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life after that age.

Figures are calculated from deaths from all causes and mid-year population estimates, based on data aggregated over a three year period.

Figures reflect mortality among those living in an area in each time period, rather than what will be experienced throughout life among those born in the area. The figures are not therefore the number of years a baby born in the area could actually expect to live, both because the mortality rates of the area are likely to change in the future and because many of those born in the area will live elsewhere for at least some part of their lives.is calculated, where data is sourced)

Life tables are calculated for males and females separately. Combined tables are not calculated as the mortality experience is sufficiently different between genders.

Data fields

Age Group

Population Count

Death Registrations count

Expectation of Life

Lower CI

Upper CI

Calculation

Denominator

Census population data 2016 per age group

Numerator

Number of deaths registered in the respective calendar years in those aged 65 and over

Presentation

Breakdowns

Gender

Excel and CSV output

Column Name	Output
Gender	Male, female
Time Period	Financial year
Value	Period expectations of life (years)
Lower CI	Lower limit of 95% confidence interval
Upper CI	Upper limit of 95% confidence interval

1.9 Neonatal mortality and stillbirths

Overview

Indicator title

1.9 Neonatal mortality and stillbirths.

Indicator family name

DHSC Health Outcomes Framework: Domain 1 – Preventing people from dying prematurely.

Outcome sought

Reduced neonatal mortality and stillbirths.

Detailed Descriptor - Plain English description

The number of babies stillborn or dying before 28 days old for every 1,000 that were born alive or stillborn.

Technical description

The number of stillbirths and deaths under 28 days, per 1,000 live births and stillbirths.

Data sources

Denominator

The number of live births combined with the number of still births from the appropriate calendar year (1st January to 31st December).

Data is sourced from Medway maternity births reporting.

Numerator

The number of still births combined with the number of deaths within 28 days of birth.

Data on stillbirths is sourced from Medway maternity births reporting and the deaths within 28 days of birth is sourced from Public Health and based on death registration data.

Construction

All births and registered deaths meeting the date range criteria are included in the calculation.

Presentation

Time periods

Data is published for each calendar year from 2017.

Disclosure Control

Excel and CSV output

Column Name	Output
Year	The year of coverage
Period of coverage	The exact dates of coverage
Indicator value	Neonatal mortality and stillbirth rate per 1,000 live births
Live births	The number of live births in the time period
Stillbirths	The number of stillbirths in the time period
Neonatal deaths	The number of neonatal deaths in the time period

Domain 2: Enhancing quality of life for people with long-term conditions

2.1 Proportion of people feeling supported to manage their condition

Overview

Indicator title

2.1 Proportion of people feeling supported to manage their condition

Indicator family name

DHSC Health Outcomes Framework: Domain 2 – Enhancing quality of life for people with long-term conditions.

Outcome sought

To support people with long-term conditions to manage their condition.

Detailed Descriptor

Plain English description

This indicator measures the degree to which people with health conditions that are expected to last for a significant period of time feel they have had sufficient support from relevant services and organisations to manage their condition. Patients are encouraged to consider all services and organisations, which support them in managing their condition, and not just health services.

Technical description

The directly standardised proportion of people with a long-term health condition who report having had enough support from local services or organisations to help manage their condition, in the last six months. Patients are asked to consider all services and organisations, not just health services. This is expressed as a percentage.

Data sources

The GP Patient Survey from Ipsos MORI (*link to follow*)

Construction

Introduction

Indicator 2.1 measures the percentage of people with long-term conditions who feel supported to manage their condition. The indicator is based on a survey of adults registered with a GP Practice in the Isle of Man. The GP Patient Survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI.

Data filters

Data are filtered based on questions from the GP Patient Survey, to isolate those who report one or more long-term conditions. Respondents are identified as having a long-term condition if they answer 'Yes' to the following question:

Do you have a long-standing health condition?

- Yes
- No
- Don't know/can't say

Respondents are also asked:

Which, if any, of the following medical conditions do you have? Please x all the boxes that apply to you

- Alzheimer's disease or dementia
- Angina or long-term heart problem
- Arthritis or long-term joint problem
- Asthma or long-term chest problem
- Blindness or severe visual impairment
- Cancer in the last 5 years
- Deafness or severe hearing impairment
- Diabetes
- Epilepsy
- High blood pressure
- Kidney or liver disease
- Long-term back problem
- Long-term mental health problem
- Long-term neurological problem
- Another long-term condition
- None of these conditions
- I would prefer not to say

Calculation

Denominator

The numerator is based on answers to the following question from the GP Patient Survey:

In the last 6 months, have you had enough support from local services or organisations to help you to manage your long-term health condition(s)? Please think about all services and organisations, not just health services.

The possible responses to the question are:

- Yes, definitely
- Yes, to some extent
- No
- I have not needed such support
- Don't know/can't say

Respondents who answer 'Yes, to some extent' are deemed to feel half as supported as respondents who answer 'Yes, definitely'. Therefore, this group of responses is weighted by 0.5 when calculating the numerator.

Given the data filter above, the numerator is therefore calculated as: $\Sigma i\ (wt\_new_i \times 1) + \Sigma \text{j}\ (wt\_new_j \times 0.5)$

where *i* = 1, …, *m* are respondents with a long-term condition who answer 'Yes, definitely';

and *j* = 1, …, *n* are respondents with a long-term condition who answer Yes, to some extent'.

Numerator

The denominator is the weighted count of respondents who answer 'Yes, definitely' OR 'Yes, to some extent' OR 'No' to the question in the numerator section:

$$\Sigma(wt\_new_k \times 1)$$

where *k* = 1, …, *p* are respondents with a long-term condition who answer 'Yes, definitely' OR 'Yes, to some extent' OR 'No'.

A weight has been applied to calculate this indicator in order to ensure that the age and gender distribution of the weighted responding sample matches that of the population of eligible patients in the Isle of Man

Presentation

Breakdowns

By age and gender.

Excel and CSV output

Column Name	Output
Period of coverage	year
Breakdown	Age and gender
Level	Level of Breakdown

Indicator Value	Weighted percentage of people who feel supported to manage their long-term condition
Numerator	Sum of weighted count of respondents with a long-term condition who answer "Yes, to some extent" to Q38 multiplied by 0.5 and sum of weighted count of respondents with a long-term condition who answer "Yes, definitely" to Q38 multiplied by 1
Denominator	Sum of weighted count of responses with a long-term condition who answer "Yes, definitely" or "Yes, to some extent" or "No" to Q38
Survey Response Rate	Unweighted percentage of surveys returned

2.2 Employment of people with long-term conditions

Overview

Indicator title

2.2 Employment of people with long-term conditions

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

Improved employment rates for people with long-term conditions.

Detailed Descriptor

Plain English Description

The indicator measures the difference between: a) the percentage of people in the general working age population who are in employment, and b) the percentage of people of working age with a long-term condition who are in employment.

Technical Description

The indicator measures the difference between: a) the percentage of people in the general working age population who are in employment, and b) the percentage of people of working age with a long-term condition who are in employment.

Alignment with other Outcome Frameworks

Shared with Public Health Outcomes Framework Indicator 1.08i

Data Sources

GP Patient Survey (GPPS) from Ipsos MORI

Isle of Man Labour Market Report (LMR), published by Economic Affairs of the Isle of Man Government Cabinet Office.

Construction

Introduction

Data for this indicators numerator and denominator is from the GP Patient Survey. This survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI. The survey aims to measure patient experiences of their local NHS primary care services. For example, questions are included that ask about the ease of making a GP appointment, the quality of care from practice nurses, and length of waiting times.

Patients are eligible for the survey if they meet the following inclusion criteria:

- they have a valid NHS number
- they have been registered with a GP on Island continuously for six months or longer before the questionnaire is received
- they are at least 16 years old six months before the questionnaire is received

The final stage of the indicator is constructed using the Isle of Man Labour Market Report (LMR), published by Economic Affairs of the Isle of Man Government Cabinet Office.

LMR data is released monthly by the Isle of Man Cabinet Office and the statistics used in calculating the indicator is the same month as the month the GP Survey is conducted. The data and methodology for the all releases can be found here: https://www.gov.im/about-the-government/departments/cabinet-office/economic-affairs-division/unemployment/

Data Filters

Data filters are applied on the following questions from the GP survey to identify those who are of working age. Respondents who gave answers that were between 18-64 years are included.

How old are you?

a. Under 16
b. 16 to 17
c. 18 to 24
d. 25 to 34
e. 35 to 44
f. 45 to 54
g. 55 to 64
h. 65 to 74
i. 75 to 84
j. 85 or over

Respondents are also filtered based on their answer to the next question: Which of these best describes what you are doing at present? If more than one of these applies to you, please put an x in the box next to the main one only. Respondents who answered A, B or G are included.

a. Full time paid work (30 hours or more each week)
b. Part-time paid work (under 30 hours or more each week)

c. Full time education at school, college or university
d. Unemployed
e. Permanently sick or disabled
f. Fully retired from work
g. Looking after the family and home
h. Doing something else

Respondents are also filtered based on their answer to the next questions: Do you have any long-term physical or mental health conditions, disabilities or illnesses? By long term, we mean anything lasting or expected to last for 12 months or more. Please include issues related to old age. Respondents who answered A are included.

a. Yes
b. No
c. Don't know/can't say
d. I would prefer not to say

Calculation

Of those that are between 18-64, are in employment and have a long-term condition, the weighted percentage difference between the employment rate of those with a long-term condition and the Isle of Man reported employment figure.

Three figures are reported:

1. The employment rate for all people*;

2. The employment rate for people with a long-term condition;

3. The gap in employment rates between those with a long-term condition and the total population (1 - 2). The indicator value is the last of these three figures.

Denominator

Number of people with a long-term condition of working age:

Respondent is of working age

Numerator

Respondent is of working age

AND

Respondent is either employee, self-employed, government employment & training programmes, or unpaid family worker

Employment rate for people with a long-term condition

Denominator

Number of people with a long-term condition of working age:The respondent has a health problem or disabilities that they expect will last for more than a year

AND

Respondent is either employee, self-employed, government employment & training programmes, or unpaid family worker

AND

Respondent is of working age

Difference between the employment rate of the general working age population and employment rate of people with a long-term condition

X-Y = Z

Where X = Employment rate of population

Y = Employment rate of people with a long-term condition

And Z = Difference between the employment rate of the general working age population and employment rate of people with a long term condition.

Breakdown variables

Presentation Breakdowns

Annual Data from 2019 onwards

Demographic Gender: Male and female from 2006 Age: 18-24 then 10-year age band from 25 to 34 to 55 to 64

Excel and CSV output

Column Name	Output
Period of Cover	Period of Cover
Breakdown	National, Gender, Age
Level	A further description of breakdown
Employment of people with long-term condition (%)	Employment of people with long-term conditions
Numerator	Number of people with long-term conditions, at working age and in employment
Denominator	Number of people with long-term conditions at working age
Lower CI	Lower CI of the employment of people with long-term conditions
Upper CI	Upper CI of the employment of people with long-term conditions

2.5 Proportion of adults in mental health services with employment status recorded

Overview

Indicator title

2.5 Enhancing quality of life for people with care and support needs

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve employment outcomes for adults with mental health problems.

Detailed Descriptor - Plain English description

This indicator initially measures the recording of employment outcomes for adults with mental health problems, with the view to report on employment status once this figure improves. Supporting someone to become and remain employed is a key part of the recovery process, reducing their risk of social exclusion and discrimination. Employment outcomes are a predictor of quality of life, and are indicative of whether care and support is personalised. Employment is a wider determinant of health and social inequalities

Technical description

The measure shows the percentage of adults aged 18 to 69 who had had an open referral to the Mental Health Service during the reporting period and have their employment status recorded on their record.

Data sources

IOM Mental Health Minimum Dataset

Construction

Introduction

Data for this indicator is from the Mental Health Minimum Dataset

Data Filters

Adults aged 18-69 who have had an open referral during the reporting period.

Calculation

(X/Y)*100

Where:

X; Number of working age adults (18-69) who have had an open referral during the reporting period and have their employment status recorded.

Source: Mental Health Services Data Set (MHSDS)

Y: Number of working age adults (18-69 years) who have an open referral during the reporting period.

Source: Mental Health Services Data Set (MHSDS)

Where X and Y are measured at the end of each month.

Presentation

Breakdowns

National level reported quarterly and annually

Excel and CSV output

Column Name	Output
Time Frame	Quarter Year
Indicator Value	Percentage figure

2.6 Estimated diagnosis rate for people with dementia

Overview

Indicator title

2.6 Estimated diagnosis rate for people with dementia

Indicator family name

DHSC Health Outcomes Framework: Domain 2 – Enhancing quality of life for people with long-term conditions.

Outcome sought

To enhance quality of life for people with dementia.

Detailed Descriptor

Plain English description

Not all people who have dementia are diagnosed with the condition. This indicator measures the number of people that have been diagnosed with dementia as a percentage of the number who are estimated to have the condition.

Technical description

Estimated diagnosis rate for dementia. The estimate of the number of people with dementia is based on published research.

Data sources

Denominator

Dementia prevalence rates - Estimated person-level prevalence rates for dementia for those aged 40 and above, by 5-year ages bands, sourced from the Dementia UK report 2007.

Isle of Man population estimates - taken form the census data.

Numerator

A report is run from our primary care system to count the number of people diagnosed with dementia, as recorded on the GP's dementia register. People are likely to enter the dementia register after a secondary care episode or as a result of their GP's clinical judgement. It is possible however; that a patient has a clinical diagnosis of dementia but this has not been captured in the condition register.

Calculation

Denominator

$\Sigma(\%\ Prevalence\ rate_j * Population\ estimate_j)$

Where *j* = 40-44, 45-49, 50-54, …, 90-94, 95+ is the age group

Numerator

$\Sigma(Number\ of\ entries\ on\ dementia\ register_i)$

Where *i* = 1,…. is the GP Practice

Presentation

Breakdowns

Time periods - Annual data from 2007/08 for the Isle of Man

Excel and CSV output

Column Name	Output
Year	Year of coverage
Breakdown	National level only
Indicator value	Estimated diagnosis rate

Domain 3: Helping people to recover from episodes of ill health or following injury

3.3 Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation service

Overview Indicator title

Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation service

Indicator family name

NHS Outcomes Framework – Domain 3: Helping people to recover from episodes of ill health or following injury
Improvement area – Helping older people to recover their independence after illness or injury

Outcome sought

Helping older people to recover their independence after illness or injury.

Detailed Descriptor Plain English description

This indicator measures the proportion, expressed as a percentage, of older people aged 65 and over who, after a period of reablement/rehabilitation, maintain their independence by remaining or returning to their home or previous residence 91 days after leaving hospital. Reablement/rehabilitation services are focused on improving people's health, well-being, confidence and independence after an acute episode of ill health, injury or a gradual decline in functioning in the community. They include all episodes of support provided that are intended to be time limited and aim at maximising the independence of the individual and reducing/eliminating their need for on-going support.

Technical description

The proportion, expressed as a percentage, of older people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care NHS Outcomes Framework: 3.6.i – Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation service housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting), who are at home or in extra care housing or an adult placement scheme setting 91 days after the date of their discharge from hospital.

Construction

Calculation methodology

Introduction

Data for this indicator is from a report ran from the Hospital System. It shows the discharges of patients over 65 who had been discharged from the hospital between the months of October and December.

This indicator measures the benefit to individuals from reablement, intermediate care and rehabilitation following a hospital episode, by determining whether an individual remains living at home 91 days following discharge – the key outcome for many people using reablement services.

This is a two-part measure which reflects both the effectiveness of reablement services (part 1; HOF 3.3), and the coverage of the service (part 2; HOF 3.3i).

The two parts of the indicator are:

i) the percentage of older people (65 and over) who were still at home 91 days after discharge from hospital into rehabilitation services and,
ii) the percentage of older people aged 65 and over offered rehabilitation services following discharge from acute or community hospital.

The first part of the measure refers to the proportion, expressed as a percentage, of people aged 65 and over discharged from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting) who are at home (or in extra care housing or an adult placement scheme setting) three months after the date of their discharge from hospital.

Calculation

(X/Y)*100

X: Number of older people discharged from hospitals to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting), who are at home or in extra care housing or an adult placement scheme setting 91 days after the date of their discharge from hospital. This should only include the outcome for those cases referred to in the denominator

Y: Number of older people discharged from acute or community hospitals from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting).

Presentation

Breakdowns

Time periods

Annual data for Isle of Man (financial year) from 2019/2020 onward (data is October – December)

Demographic

All persons, males and females aged 65 and over

Excel and CSV output

Column Name	Output
Indicator Name	Title of indicator
Area	All of IOM
Sex	All genders
Age	Those 65+
Time Period	Financial Year (Oct, Nov, Dec)
Value	Number of older people (aged 65 and over) discharged from acute or community hospitals from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with the clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting) as a percentage of the total number of people (aged 65 and over) discharged alive from hospitals in England.

3.3i Proportion offered rehabilitation following discharge from acute or community hospital

Overview

Indicator title

3.3ii Proportion offered rehabilitation following discharge from acute or community hospital

Indicator family name

DHSC Health Outcomes Framework – Domain 3: Helping people to recover from episodes of ill health or following injury Improvement area – Helping older people to recover their independence after illness or injury

Outcome sought

Helping older people to recover their independence after illness or injury.

Detailed Descriptor

Plain English description

This indicator measures the proportion, expressed as a percentage, of older people aged 65 and over who are offered reablement services when they leave hospital. Reablement/rehabilitation services are focused on improving people's health, well-being, confidence and independence after an acute episode of ill health, injury or a gradual decline in functioning in the community. They include all episodes of support provided that are intended to be time limited and aim at maximising the independence of the individual and reducing/eliminating their need for on-going support.

Technical description

The proportion, expressed as a percentage, of older people aged 65 and over offered reablement services following discharge from hospital.

Construction Calculation methodology

Introduction

Data for this indicator is from a report ran from the Hospital System. It shows the discharges of patients over 65 who had been discharged from the hospital between the months of October and December.

This indicator measures the coverage of reablement services following a hospital episode, by determining the proportion of older people aged 65 and over who were offered rehabilitation services following discharge from acute or community hospital.

This is a two-part measure which reflects both the effectiveness of reablement services (part 1; DHSC OF 3.3), and the coverage of the service (part 2; DHSC 3.3.i).

The two parts of the indicator are:

i)the percentage of older people (65 and over) who were still at home 91 days after discharge from hospital into rehabilitation services and,

ii) the percentage of older people (aged 65 and over) offered rehabilitation services following discharge from acute or community hospital. The second part of the measure refers to the proportion expressed as a percentage, of people aged 65 and over who were offered rehabilitation services following discharge from acute or community hospital.

Calculation

(X/Y)*100

X: Number of older people discharged from acute or community hospitals from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with a clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting).

Y: Total number of people, aged 65 and over, discharged alive from hospitals in England between 1 October and 31 December. This includes all specialities and zero-length stays.

Presentation Breakdowns

Time periods

Annual data for Isle of Man (financial year)

Demographic

All persons, males and females aged 65 and over

Excel and CSV output

Column Name	Output
Indicator Name	Title of indicator
Area	All of IOM
Sex	All genders

Age	Those 65+
Time Period	Financial Year (Oct, Nov, Dec)
Value	Number of older people (aged 65 and over) discharged from acute or community hospitals from hospital to their own home or to a residential or nursing care home or extra care housing for rehabilitation, with the clear intention that they will move on/back to their own home (including a place in extra care housing or an adult placement scheme setting) as a percentage of the total number of people (aged 65 and over) discharged alive from hospitals in England between 1 October and 31 December. This includes all specialties and zero-length stays.

3.4 Tooth extractions due to decay for children admitted as inpatients to hospital, aged 10 years and under

Overview

Indicator title

3.4 Tooth extractions due to decay for children admitted as inpatients to hospital aged 10 years and under.

Indicator family name

DHSC Health Outcomes Framework: Domain 3 – Helping people to recover from episodes of ill health or following injury.

Outcome sought

Reduced hospital admissions for children aged 10 years and under for tooth extractions due to tooth decay.

Detailed Descriptor - Plain English description

The level of hospital inpatient periods of care where a child age 10 years or under had one or more tooth extracted, due to tooth decay.

Technical description

The crude rate of the number of finished consultant episodes (FCEs) where a tooth extraction was performed on a child aged 10 years or under at the start of the episode of care, due to tooth decay, per 100,000 resident population.

Data sources

Denominator

Medway Business Intelligence reporting developed by the Hospital Performance team.

Numerator

The corresponding Isle of Man Census population data available here - https://www.gov.im/census/

Construction

Introduction

This indicator measures the rate of FCE per 100,000 population for children aged 10 and under with a primary diagnosis of dental caries (tooth decay).

Data filters

3. Field name: CODING_MAIN_CODE (this is a field from the DIM_CODING table which is linked on the DIM_CODING_PRIMDIAG_ID field from the FACT_IP_EPISODES table)

   Conditions: Is equal to any of the following diagnosis coding relating to dental caries:

   - K021 -- Caries of dentine
   - K025 -- Caries with pulp exposure
   - K028 -- Other dental caries
   - K029 -- Dental caries, unspecified
   - K040 -- Pulpitis
   - K045 -- Chronic apical periodontitis
   - K046 -- Periapical abscess with sinus
   - K047 -- Periapical abscess without sinus

   Rationale: This gives the primary diagnosis of the patient.

4. Calculated field name: Admission age

   Conditions: The date difference between the patients' date of birth and the admission date divided by 365 is less than or equal to 10.

Rationale: Medway does not have an age at admission field and so a calculated condition is used to make sure that we are only including admissions for children (10 or less).

5. Field name: CODING_MAIN_CODE (this is a field from the DIM_CODING table which is linked on the DIM_CODING_PRIMPROC_ID field from the FACT_IP_EPISODES table)

   Conditions: Is equal to any of the following procedure coding relating to the surgical / simple removal of a tooth:

   - F101 -- Full dental clearance
   - F102 -- Upper dental clearance
   - F103 -- Lower dental clearance
   - F104 -- Extraction of multiple teeth NEC
   - F108 -- Simple extraction of tooth other specified
   - F109 -- Simple extraction of tooth unspecified
   - F091 -- Surgical removal of impacted wisdom tooth
   - F092 -- Surgical removal of impacted tooth NEC
   - F093 -- Surgical removal of wisdom tooth NEC
   - F094 -- Surgical removal of tooth NEC
   - F095 -- Surgical removal of retained root of tooth
   - F096 -- Coronectomy NEC
   - F098 -- Surgical removal of tooth other specified
   - F099 -- Surgical removal of tooth unspecified

   Rationale: This identifies records where an extraction has taken place (the NHSIC indicator refers to F09 or F10 which are not OPCS4 codes and so the more specific coding has been used locally to identify an extraction).

6. Field name: EPI_END_DTTM

   Conditions: Field does not contain a NULL value.

   Rationale: This limits the data set to only include finished episodes

7. Field name: SEX_NHSCODE

   Conditions: Is equal to either 1 or 2

   Rationale: Data are shown for males and females separately. Data for persons are the sum of males and females and excludes the small number of records where SEX_NHSCODE is “Not set”, “Not Known”, “Indeterminate” or “Unknown”.

8. Field name: DIM_LOOKUP_PATCL_ID

   Conditions: Is equal to any of: 306, 307, 308

   Rationale: We have a local variation of the NHS ID’s used for the patient classification which are outlined below:

   306 – Inpatient (NHS ID = 1)

   307 – Day case (NHS ID = 2)

308 – Mother and baby using delivery facilities only (NHS ID = 5)

Calculation

Denominator

The corresponding Isle of Man Census population data

https://www.gov.im/categories/home-and-neighbourhood/census/

Numerator

The number of finished consultant episodes for extraction of tooth where the primary diagnosis is dental caries and the patient is aged 10 years or under.

Crude rate per 100,000 population

The indicator value is presented as a crude rate per 100,000 population:

$r = 100{,}000 \times O / n$

Where:

r = Crude rate per 100,000 population

O = Number of Finished Consultant Episodes where an extraction was performed

n = Population

Presentation

Breakdowns

Time periods

Annual data from 2011/12 for all breakdowns

Demographic

Gender – Male and female

Age – Person

Disclosure Control

There are currently no disclosure controls in place for this indicator as the values are not considered small but should individual identification within the numbers be possible it is not considered this would cause any damage or distress to the individual.

Excel and CSV output

Column Name	Output
Financial Year	The financial year
Period	Actual time period the data covers
Breakdown	Isle of Man, Gender, Age band
Level	Detailed breakdown of each split
Indicator value	Crude rate per 100,000 population
Lower CI	Lower 95% confidence interval
Upper CI	Upper 95% confidence interval
Numerator	The number of FCE's where an extraction was performed, with a primary diagnosis of caries
Denominator	Census population count
Other tooth extractions	The number of FCE's where an extraction was performed, without a primary diagnosis of caries

Domain 4: Ensuring people have a positive experience of care

4.2 Responsiveness to inpatients personal needs

Overview

Indicator title

4.2 Responsiveness to inpatients personal needs

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve hospitals responsiveness to inpatients' personal needs

Plain English description

This indicator measures patient experience of inpatient care based on a selection of questions from our Patient Experience Survey.

Technical description

This indicator measures patient experience by scoring the results of a selection of questions from our Patient Experience Survey.

Data sources

The Patient Experience Survey utilises questions is from the UK's Care and Quality Commissions (CQC) - National Audit. Further information about the Patient Experience Survey can be found at the below link.

https://www.gov.im/categories/health-and-wellbeing/hospitals-and-emergency-treatment/nobles-hospital/patient-experience-feedback-data/

Construction

Introduction

Data for this indicator is from our Patient Experience Survey, from which we calculate overall patient experience measures on a quarterly and annual basis.

Calculation

Individual questions are scored according to a pre-defined scoring regime that awards scores between 0 and 10. These scores are then multiplied by 10 to give a score out of 100. Therefore, this indicator takes values between 0 and 100, where 0 is the worst score and 100 is the best score.

The indicator is a composite, calculated as the average of the following survey questions from the Patient Experience survey:

Q1: Were you involved as much as you wanted to be in decisions about your care and treatment?

Q2: Did you find someone on the hospital staff to talk to about your worries and fears?

Q3: Were you given enough privacy when discussing your condition or treatment?

A breakdown of responses to all questions within the survey is published each month, this can be found from the link in the data sources section.

Figures are not currently weighted but we are currently looking into the possibility of collecting the demographic information needed to weight by age and gender.

Presentation

Excel and CSV output

Column Name	Output
Year	Financial Year
Quarter	Financial Quarter

Value	Average score of the questions relating to responsiveness to inpatient's personal needs (score out of 100)

4.4 Access to GP services

Overview

Indicator title

4.4 Access to GP services

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve patients' access to GP services.

Detailed Descriptor

Plain English description

This indicator measures the weighted percentage of people who report their experience of making a GP appointment as 'fairly good' or 'very good'.

Technical description

The weighted percentage of GP patient survey respondents who said they had a good experience of making an appointment. The percentage of respondents who answered the relevant question is also presented.

Data sources

GP Patient Survey (GPPS) from Ipsos MORI

Construction

Introduction

Data for this indicator is from the GP Patient Survey. This survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI. The survey aims to measure patient

experiences of their local NHS primary care services. For example, questions are included that ask about the ease of making a GP appointment, the quality of care from practice nurses, and length of waiting times.

Patients are eligible for the survey if they meet the following inclusion criteria:

- they have a valid NHS number
- they have been registered with a GP on Island continuously for six months or longer before the questionnaire is received
- they are at least 16 years old six months before the questionnaire is received

Data filters

Data are filtered based on the following question from the GP Patient Survey, to identify those who report a ‘fairly good’ or ‘very good’ experience of making an appointment with their GP :

Overall, how would you describe your experience of making an appointment?

- Very good
- Fairly good
- Neither good nor poor
- Fairly poor
- Very poor

Calculation

Denominator

Weighted percentage of people reporting a ‘very good’ or ‘fairly good’ experience of making an appointment.

Numerator

The numerator is the weighted number of people reporting a ‘fairly good’ or ‘very good’ experience of making an appointment. This is expressed as

$\Sigma k\ (wt\_new)$

where k = 1, …, p which are the respondents described above.

A weight is applied to construct the indicator

Presentation

Breakdowns

By GP Practice

Excel and CSV output

Column Name	Output
Period of coverage	year
Breakdown	Practice
Level	Level of breakdown
Indicator Value	

4.5 Access to NHS dental services

Overview

Indicator title

4.5 Access to NHS dental services

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve patients' access to NHS dental services

Detailed Descriptor

Plain English description

This indicator measures the weighted percentage of people who successfully obtained an NHS dental appointment out of those who tried in the last two years.

Technical description

Patient experience of access to NHS dental services, measured by scoring the results of two questions from the GP Patient Survey.

Data sources

GP Patient Survey (GPPS) from Ipsos MORI

Construction

Introduction

Data for this indicator is from the GP Patient Survey. This survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI. The survey aims to measure patient experiences of their local NHS primary care services. For example, questions are included that ask about the ease of making a GP appointment, the quality of care from practice nurses, and length of waiting times.

Patients are eligible for the survey if they meet the following inclusion criteria:

- they have a valid NHS number
- they have been registered with a GP in England continuously for six months or longer before the questionnaire is received
- they are at least 16 years old six months before the questionnaire is received
- they have not received a GP Patient Survey in the last 12 months

Data filters

Data are filtered on the following question from the GP Patient Survey to identify those who had tried to get an NHS dental appointment for themselves in the past two years. Respondents who gave answers a) to d) are included.

When did you last try to get an NHS dental appointment for yourself?

a) In the last 3 months

b) Between 3 and 6 months ago

c) Between 6 months and a year ago

d) Between 1 and 2 years ago

e) More than 2 years ago

f) I have never tried to get an NHS dental appointment

Respondents are then filtered based on their answer to the next question: Were you successful in getting an NHS dental appointment?

a) Yes

b) No

c) Can’t remember

Calculation

Of those who tried in the last two years, the weighted percentage of respondents who successfully obtained an NHS dental appointment.

Denominator

The weighted number of respondents who tried to get an appointment in the last 2 years and answered either ‘Yes’ or ‘No’ to the question 'Were you successful in getting an NHS dental appointment?'.

This is expressed as

$$\Sigma k\ (wt\_new)$$

where k = 1, …, p which are the respondents described above.

Numerator

The weighted number of respondents who tried to get an appointment in the last 2 years and were successful in getting an NHS dental appointment. This is expressed as

$$\Sigma k\ (wt\_new)$$

where k = 1, …, p which are the respondents described above.

A weight is applied to construct the indicator

Presentation

Breakdowns

By Age and Gender

Excel and CSV output

Column Name	Output
Period of coverage	year
Breakdown	Age and gender
Level	Level of breakdown
Indicator Value	

4.8 Patient experience of GP services

Overview

Indicator title

4.8 Patient experience of GP services

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve patients' experiences of GP services.

Detailed Descriptor

Plain English description

This indicator measures the weighted percentage of people who report their overall experience of GP services as 'fairly good' or 'very good'.

Technical description

Patient experience of GP services, measured by scoring the results of one question from the GP Patient Survey.

Data sources

GP Patient Survey (GPPS) from Ipsos MORI

Construction

Introduction

Data for this indicator is from the GP Patient Survey. This survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI. The survey aims to measure patient experiences of their local NHS primary care services. For example, questions are included that ask about the ease of making a GP appointment, the quality of care from practice nurses, and length of waiting times.

Patients are eligible for the survey if they meet the following inclusion criteria:

- they have a valid NHS number
- they have been registered with a GP on Island continuously for six months or longer before the questionnaire is received
- they are at least 18 years old six months before the questionnaire is received
- they have not received a GP Patient Survey in the last 12 months

Data filters

Data are filtered based on the following question from the GP Patient Survey, to identify those who report a 'fairly good' or 'very good' experience of their GP surgery:

Overall, how would you describe your experience of your GP surgery?

- Very good
- Fairly good
- Neither good nor poor
- Fairly poor
- Very poor

Calculation

The weighted percentage of people reporting an overall good experience of their GP surgery.

Numerator

The numerator is the weighted number of people reporting a 'fairly good' or 'very good' experience of their GP surgery.

This is expressed as $\Sigma(wt\_new_k)$

where $k = 1, \ldots, p$ which are the respondents described above.

Denominator

The denominator is the total weighted number of people who answered the GP surgery experience question:

This is expressed as $\Sigma(wt\_new_k)$

where *k* = 1, …, *p* which are the respondents described above.

Presentation

Breakdowns

By GP Practice

Disclosure Control

Excel and CSV output

Column Name	Output
Period of coverage	year
Breakdown	Practice
Level	Level of breakdown
Indicator Value	

4.8.i Patient experience of GP out-of-hours services

Overview

Indicator title

4.8.i Patient experience of GP out-of-hours services

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve patients' experiences of GP out-of-hours services.

Detailed Descriptor

Plain English description

This indicator measures the weighted percentage of people who report their overall experience of GP out-of-hours services as 'very good' or fairly good'.

Technical description

Patient experience of GP out-of-hours services, measured by scoring the results of one question from the GP Patient Survey.

Data sources

GP Patient Survey (GPPS) from Ipsos MORI

Construction

Introduction

Data for this indicator is from the GP Patient Survey. This survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI. The survey aims to measure patient experiences of their local NHS primary care services. For example, questions are included that ask about the ease of making a GP appointment, the quality of care from practice nurses, and length of waiting times.

Patients are eligible for the survey if they meet the following inclusion criteria:

- they have a valid NHS number
- they have been registered with a GP on Island continuously for six months or longer before the questionnaire is received
- they are at least 18 years old six months before the questionnaire is received
- they have not received a GP Patient Survey in the last 12 months

Data filters

Data are filtered based on two questions from the GP Patient Survey. Respondents are included if they said they had tried to call an out-of-hours GP service in the past six months, either for themselves or for somebody else, and also said they had a 'fairly good' or 'very good' experience of out-of-hours GP services.

Calculation

The weighted percentage of people reporting an overall good experience of GP out-of-hours services.

Denominator

The denominator is the weighted number of respondents who said they had used GP out-of-hours services. This is expressed as

$$\Sigma k\ (wt\_new)$$

where k = 1, …, p which are the respondents described above.

Numerator

The numerator is the weighted number of people who rated GP out-of-hours services as

'fairly good' or 'very good'.

This is expressed as

$$\Sigma k\ (wt\_newk)$$

where k = 1, …, p which are the respondents described above.

A weight is applied to construct the indicator.

Presentation

Breakdowns

By age and gender

Excel and CSV output

Column Name	Output
Period of coverage	year
Breakdown	Age and gender
Level	Level of breakdown
Indicator Value	

4.8.ii Patient experience of NHS dental services

Overview

Indicator title

4.8.ii Patient experience of NHS dental services

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve patients' experiences of NHS dental services.

Detailed Descriptor

Plain English description

This indicator measures the weighted percentage of people who report their overall experience of NHS dental services as 'very good' or 'fairly good'.

Technical description

Patient experience of NHS dental services, measured by scoring the results of one question from the GP Patient Survey.

Data sources

GP Patient Survey (GPPS) from Ipsos MORI

Construction

Introduction

Data for this indicator is from the GP Patient Survey. This survey is commissioned by the DHSC and is conducted by the independent survey organisation Ipsos MORI. The survey aims to measure patient experiences of their local NHS primary care services. For example, questions are included that ask

about the ease of making a GP appointment, the quality of care from practice nurses, and length of waiting times.

Patients are eligible for the survey if they meet the following inclusion criteria:

- they have a valid NHS number
- they have been registered with a GP in England continuously for six months or longer before the questionnaire is received
- they are at least 16 years old six months before the questionnaire is received

Data filters

Data are filtered based on two questions from the GP Patient Survey. Respondents are included if they said they had tried to get an NHS dental appointment for themselves in the last two years and also said they had a 'fairly good' or 'very good' experience of NHS dental *services.*

Calculation

Denominator

The denominator is the total weighted number of people who used NHS dental services in the last two years.

This is expressed as Σk

(wt_newk)

where k = 1, …, p which are the respondents described above.

Numerator

The numerator is the weighted number of people said they had tried to get an NHS dental appointment for themselves in the last two years and also said they had a 'fairly good' or 'very good' experience of NHS dental services.

This is expressed as Σk

(wt_newk)

where k = 1, …, p which are the respondents described above.

Presentation

Breakdowns

By age and gender

Excel and CSV output

Column Name	Output
Period of coverage	year
Breakdown	Age and gender
Level	Level of breakdown
Indicator Value	

4.8.iii Patient experience of hospital care

Overview

Indicator title

4.8.iii Patient experience of hospital care

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

To improve patients' experiences of hospital care.

Plain English description

This indicator measures patient experience of inpatient care based on a selection of questions from our Patient Experience Survey.

Technical description

This indicator measures patient experience by scoring the results of a selection of questions from our Patient Experience Survey.

Data sources

The Patient Experience Survey utilises questions is from the UK's Care and Quality Commissions (CQC) - National Audit. Survey results are published monthly. Further information about the Patient Experience Survey can be found at the below link.

https://www.gov.im/categories/health-and-wellbeing/hospitals-and-emergency-treatment/nobles-hospital/patient-experience-feedback-data/

Construction

Introduction

Data for this indicator is from our Patient Experience Survey, from which we calculate overall patient experience measures on a quarterly and annual basis.

Calculation

Individual questions are scored according to a pre-defined scoring regime that awards scores between 0 and 10. These scores are then multiplied by 10 to give a score out of 100. Therefore, this indicator takes values between 0 and 100, where 0 is the worst score and 100 is the best score.

The indicator is a composite, calculated as the average of the following survey questions from the Patient Experience survey:

Q1: Were you involved as much as you wanted to be in decisions about your care and treatment?

Q2: When you had important questions to ask a doctor, did you get answers that you could understand?

Q3: When you had important questions to ask a nurse, did you get answers that could understand?

Q4: In your opinion, how clean was the hospital room or ward that you were in?

Q5: Were you given enough privacy when discussing your condition or treatment?

Q6: Do you think the hospital staff did everything they could to help control your pain?

Q7: Overall, did you feel you were treated with respect and dignity while you were in the hospital?

Q8: Did you get enough help from staff to eat your meals?

Q9: Overall, how would you rate your experience in hospital?

A breakdown of responses to all questions within the survey is published each month; this can be found from the link in the data sources section.

Figures are not currently weighted but we are currently looking into the possibility of collecting the demographic information needed to weight by age and gender.

Presentation

Excel and CSV output

Column Name	Output
Year	Financial Year
Quarter	Financial Quarter

Value	Average score from the questions relating to responsiveness to inpatient's personal needs (score out of 100)

4.9 Women's experiences of maternity services

Overview

Indicator title

4.9 Women's experiences of maternity services

Indicator family name

DHSC Health Outcomes Framework: Domain 4 – Ensuring people have a positive experience of care.

Outcome sought

Improve women's and their families' experience of maternity services.

Plain English description

This indicator measures women's experiences of maternity services based on a selection of questions from the Maternity Services Patient Experience Survey.

Technical description

This indicator measures patient experience by scoring the results of a selection of questions from the Maternity Services Patient Experience Survey.

Data sources

The Patient Experience Maternity Services Patient Experience Survey which utilises questions is from the UK's Care and Quality Commissions (CQC) - National Audit.
Survey results are published monthly. Further information about the Patient Experience Surveys can be found at the below link.

https://www.gov.im/categories/health-and-wellbeing/hospitals-and-emergency-treatment/nobles-hospital/patient-experience-feedback-data/

Construction

Introduction

Data for this indicator is from the Maternity Services Patient Experience Survey, from which we calculate overall patient experience measures on a quarterly and annual basis.

Calculation

Individual questions are scored according to a pre-defined scoring regime that awards scores between 0 and 100. Therefore, this indicator will also take values between 0 and 100, where 0 is the worst score and 100 is the best score.

The indicator is a composite value, calculated as the average of six survey questions from the Maternity Survey. The questions cover experience across the whole maternity pathway: antenatal, intrapartum and postnatal:

Antenatal

Thinking about your antenatal care, were you involved enough in decisions about your care?

Intrapartum (labour and delivery)

Were you (and/or your partner or a companion) left alone by midwives or doctors at a time when it worried you?

Thinking about your care during labour and birth, were you involved enough in decisions about your care?

Postnatal

Thinking about the care you received in hospital after the birth of your baby, were you treated with kindness and understanding?

Did you feel that midwives and other carers gave you active support and encouragement about feeding your baby?

A breakdown of responses to all questions within the survey is published each month; this can be found from the link in the data sources section.

Figures are not currently weighted but we are currently looking into the possibility of collecting the demographic information needed to weight by age and gender.

Presentation

Excel and CSV output

Column Name	Output
Year	Financial Year
Quarter	Financial Quarter
Value	Average score out of five questions relating to responsiveness to inpatient's personal needs (score out of 100)

Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm

5. 1 Deaths from venous thromboembolism (VTE) related events within 90 days post discharge from hospital

Overview

Indicator title

5.1 Deaths from venous thromboembolism (VTE) related events within 90 days post discharge from hospital

Indicator family name

DHSC Health Outcomes Framework: Domain 5 - Treating and caring for people in a safe environment and protecting them from avoidable harm.

Outcome sought

To reduce harm from failure to prevent VTE in a healthcare setting.

Detailed Descriptor - Plain English description

The indicator measures the number of patients who have been admitted to hospital with any cause and die within 90 days of their last discharge from a VTE related cause expressed as a rate per 100,000 adult hospital admissions.

Technical description

The indicator is a national mortality rate from a VTE related cause that occurred within 90 days of a patient's last discharge from hospital where they were treated for any cause, per 100,000 adult hospital admissions.

Data sources

Denominator

A report from the hospital system (Medway) to establish the number of adult hospital admissions on the Isle of Man (both Nobles and Ramsey) for any cause for a given financial year.

Numerator

Public Health Mortality Dataset

Construction

Data filters

Denominator filters

1. Calculated field: Admission age
   Conditions: The date difference between the patients' date of birth and the admission date divided by 365 is greater than 18.
   Rationale: Medway does not have an age at admissions field and so a calculated condition is used to make sure that we are only including admissions for adults (older than 18).

2. Field name: ADMIT_DTTM
   Conditions: Limited to hospital admissions within the respective financial year
   Rationale: Data are presented by financial year with an admission date within the year of interest.

3. Field name: SEX_NHSCODE
   Conditions: Is equal to either: 1 or 2
   Rationale: Data are shown for males and females combined. Date excludes the small number of records where SEX_NHSCODE is "Not set", "Not Known", "Indeterminate" or "Unknown".

4. Field name: DIM_LOOKUP_PATCL_ID
   Conditions: Is equal to any of: 306, 307, 308, 309
   Rationale: We have a local variation of the NHS ID's used for the patient classification and which relate as below:

- 306 – Inpatient (NHS ID = 1)
- 307 – Day case (NHS ID = 2)
- 308 – Mother and baby using delivery facilities only (NHS ID = 5)
- 309 – Not applicable (NHS ID = 8) – this is a temporary ID used until the system determines the classification based on set criteria (usually when the patient is discharged).

5. Field name: ADM_EPI_FLAG
   Conditions: Is equal to Y
   Rationale: This restricts the data to the first (admission episode) in a hospital spell.

6. Field name: ARCHV_FLAG
   Conditions: Is equal to N
   Rationale: This restricts the data to live records (excluding deleted episodes).

7. Field name: DIM_LOOKUP_ADCAT_ID
   Conditions: Is NOT equal to 675
   Rationale: This removes "Private patient" admissions from the data set

Denominator filters

The total number of deaths for a given financial year, where the cause of death is VTE related. A VTE related death is defined when:

• At least one of the listed VTE related ICD-10 codes appears as a cause of death on the death certificate; and
• The VTE related death is associated with a hospital discharge with any diagnosis within 90 days of death

Calculation

The rate is a crude rate at national (England) level per 100,000 adult admissions. This is calculated as the sum of all deaths from a VTE related event within 90 days post discharge from hospital in a financial year divided by the sum of all hospital admissions in the financial year. This is then multiplied by 100,000 as the indicator is expressed per 100,000 admissions.

5.2 Incidence of healthcare associated infection (HCAI) – MRSA

Overview

Indicator title

5.2. Incidence of healthcare associated infection (HCAI) – MRSA

Indicator family name

DHSC Health Outcomes Framework: Domain 5 - Treating and caring for people in a safe environment and protecting them from avoidable harm.

Outcome sought

To reduce the incidence of healthcare associated infections (HCAI).

Detailed Descriptor

Plain English description

The number of Meticillin-resistant Staphylococcus aureus (MRSA) infections reported.

Technical description

The number of Meticillin-resistant Staphylococcus aureus (MRSA) infections reported.

Data sources

A report run that counts of the number of MRSA infections recorded.

Calculation

Crude count of all reported cases of MRSA delivered at national level.

Presentation

Breakdowns

Annual data

Excel and CSV output

Column Name	Output
Year	Financial Year
Value	Count of MRSA infections

5.2.i Incidence of healthcare associated infection (HCAI) – C. difficile

Overview

Indicator title

5.2.i Incidence of healthcare associated infection (HCAI) – C. difficile

Indicator family name

DHSC Health Outcomes Framework: Domain 5 - Treating and caring for people in a safe environment and protecting them from avoidable harm.

Outcome sought

To reduce the incidence of healthcare associated infections (HCAI).

Plain English description

The number of *Clostridium difficile* infections reported.

Data sources

A report run that counts of the number of *Clostridium difficile* infections recorded.

Construction

Crude count of all reported cases of *Clostridium difficile* delivered at national level.

Calculation

Count of cases reported

Presentation

Breakdowns

Annual data

Excel and CSV output

Column Name	Output
Year	Financial Year
Value	Count of *C. difficile* infections