

Aristotle Xi Live Release Notice – December 2022

Dear Colleague,

The CSU has recently produced and launched the following new and enhanced products in Aristotle Xi. If you have any questions or have any issues accessing Aristotle Xi, please contact MLCSU.aristotlesupport@nhs.net.

Contents

- **Quality & Performance Dashboard**
- **New Quality Section in Aristotle Xi**
- **GP Consultations Dashboard**
- **Cancer Exceptions Report**
- **Health Inequalities Dashboard**
- **NHS System Oversight Framework**

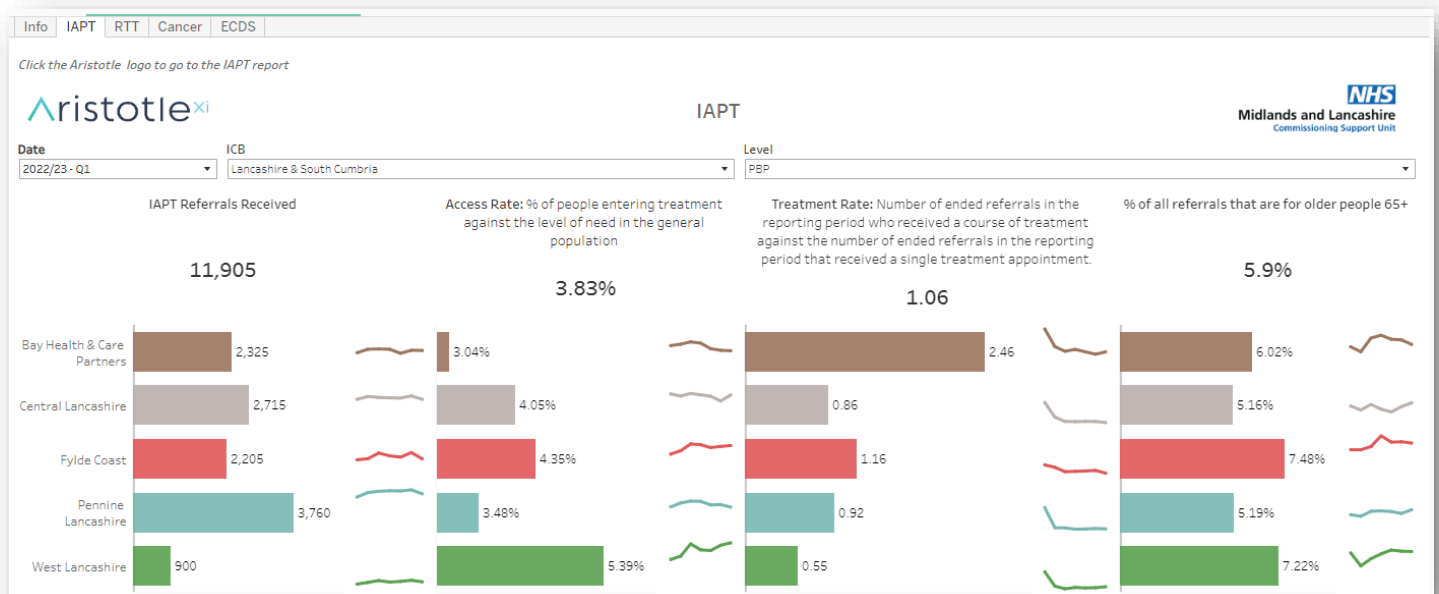
Quality >
NEW

Quality Themes Dashboard

This new Aristotle Xi dashboard has been produced to offer users an overview of the latest position alongside trend of how organisations are performing in four designated areas focussing on Quality related indicators.

- IAPT (Improving Access to Psychological Therapies)
- RTT (Referral to Treatment)
- Cancer Waits
- Urgent and Emergency Care (ECDS)

The report can be viewed at either PBP (Place Based Partnership), CCG or Provider Level (depending on the aggregation of the dataset)

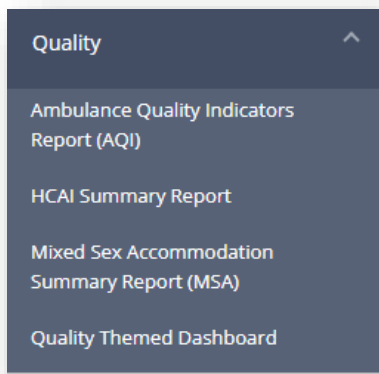


NEW

New Quality Section in Aristotle Xi

This new section in Aristotle Xi brings together a selection of products and reports centred around Quality focused metrics. The purpose is to allow our users to easily locate these particular products in a dedicated environment.

Products contained within this section include:



WHAT IS QUALITY?

SAFE: Avoiding harm from care that is intended to help people.

TIMELY: Reducing waits and sometimes harmful delays.

EFFECTIVE: Providing services based on evidence and which produce a clear benefit.

EFFICIENT: Avoiding waste.

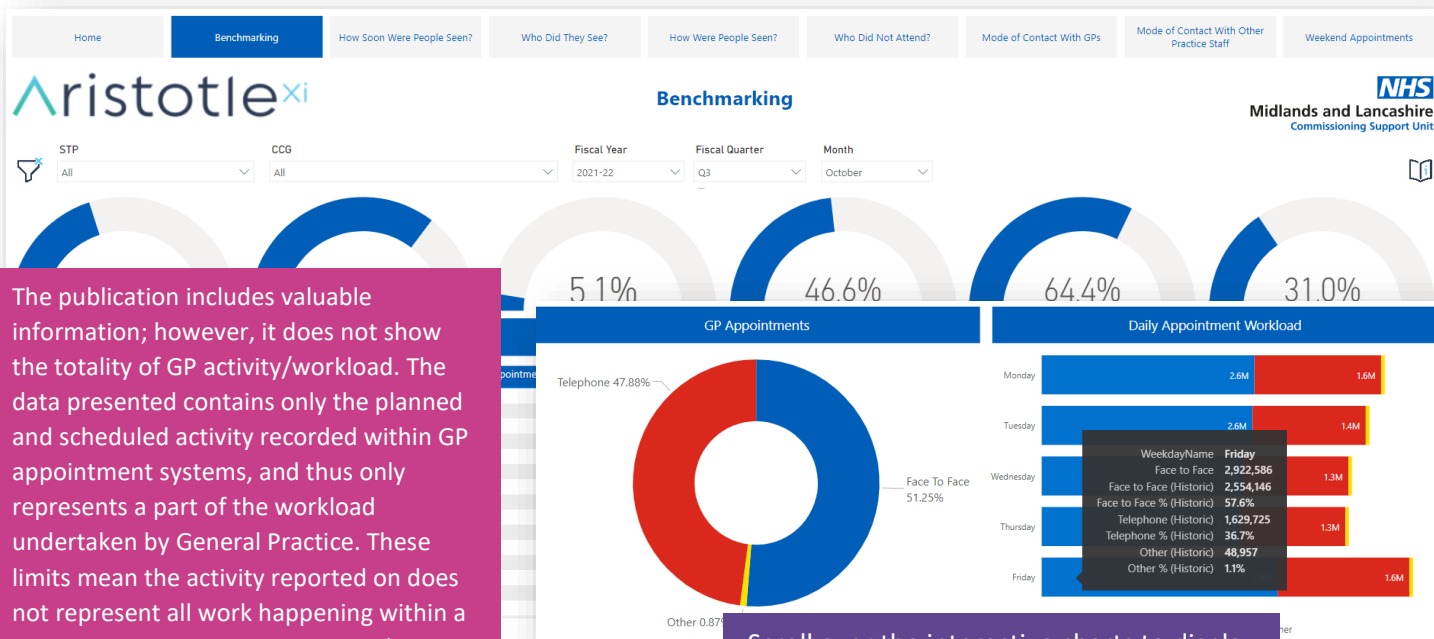
Primary Care >

NEW

GP Consultations Dashboard

The General Practice Consultations Dashboard is to inform users about activity and the historical usage of GP appointments and visualize how primary care is impacted by seasonal pressures, such as winter.

NHS Digital publishes this information to support winter preparedness and to provide information about some of the activity within primary care. The publication covers historic appointments marked as either attended or did not attend, aggregated at CCG level.



The publication includes valuable information; however, it does not show the totality of GP activity/workload. The data presented contains only the planned and scheduled activity recorded within GP appointment systems, and thus only represents a part of the workload undertaken by General Practice. These limits mean the activity reported on does not represent all work happening within a primary care setting nor assesses the complexity of any recorded activity.

Scroll over the interactive charts to display a breakdown of the data

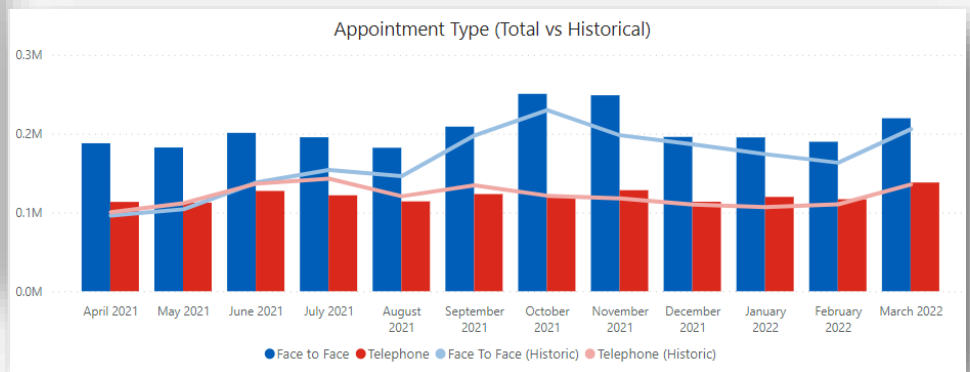
Additional tabs within the dashboard allow for greater drilldown and investigation:

- How soon were People seen?
- Who did they see?
- Who did not attend?
- Mode of Contact with GPs and other Practice staff
- Weekend appointments

Total Appointments	Fiscal Year	October	Total
	2021-22	537,866	537,866
	2020-21	486,541	486,541
	2019-20	544,153	544,153

Face To Face DNA	Fiscal Year	October	Total
	2021-22	16,823	16,823
	2020-21	14,461	14,461
	2019-20	23,346	23,346

Telephone DNA	Fiscal Year	October	Total
	2021-22	902	902
	2020-21	554	554
	2019-20	436	436



Performance > Spotlight Reports NHS Constitution >

NEW

Cancer Exceptions Report

The Cancer Exceptions report displays, for any given month or date range, the total number of breaches broken down by relevant key Cancer metrics. Currently the performance metrics can be viewed at and STP or CCG level and the report includes an interactive metric selection to allow for further trend analysis.

Metric	Admitted	Non-admitted	Not Applicable
Seen Within 2 Weeks of Referral (Exceptions) 6.3			1,036
Seen Within 2 Weeks of Referral – Breast Symptoms (Exceptions) 6.4			115
28 Day FDS two week wait referral (Exceptions) 18.1			1,534
28 Day FDS two week wait breast symptomatic referral (Exceptions) 18.2			19
28 Day FDS screening referral (Exceptions) 18.3			181
Patients Receiving Definitive Treatment (31 Days) (Exceptions) 7.4	25	1	
Patients Waiting No More Than 31 Days For Subsequent Treatment – By Treatment Group (Exceptions) 7.11	9	3	
Patients Waiting No More Than 62 Days From Urgent GP Referrals To First Definitive treatment (Exceptions) 8.4	59	37	
Patients Waiting No More Than 62 Days From Referral From An NHS Screening Service To First Definitive Treatment (Exceptions) 9.4	19	2	
Patients Waiting No More Than 62 Days For First Definitive Treatment Following A Consultants Decision To Upgrade (Exceptions) 10.4	11	15	

Health Inequalities >

ENHANCEMENT

Health Inequalities Dashboard

There have been enhancements made to this dashboard to ensure consistency of metrics across both the Ward and Local Authority levels.

New nationally published metrics have been included to provide more insight into the issues faced by local populations down to ward level, and existing metrics have been updated to the latest data and the latest ward boundaries.

Deaths from all cancer, under 75 years, standardised mortality ratio (SMR)	107.7	143.2	133.3
Deaths from all causes, under 75 years, standardised mortality ratio	109.3	201.5	157.9
Deaths from causes considered preventable, under 75 years, standardised mortality ratio	96.6	251.3	161.3
Deaths from circulatory disease, under 75 years, standardised mortality ratio	101.9	204.7	149.6
Emergency hospital admissions for all causes, all ages, standardised admission ratio	106.0	168.2	158.7
Emergency hospital admissions for Chronic Obstructive Pulmonary Disease (COPD), standardised admission ratio	63.2	205.6	236.3
Emergency hospital admissions for coronary heart disease, standardised admission ratio	101.2	148.7	138.1
Emergency hospital admissions for hip fracture in persons 65 years and over, standardised admission ratio	95.3	135.7	141.2
Emergency hospital admissions for injuries in 15 to 24 years old, crude rate	130.9	230.6	259.6
Emergency hospital admissions for injuries in under 15 years old, crude rate	98.5	142.9	123.6
Emergency hospital admissions for injuries in under 5 years old, crude rate	108.1	173.3	135.7
Emergency hospital admissions for intentional self harm, standardised admission ratio	93.2	184.5	166.6
Emergency hospital admissions for Myocardial Infarction (heart attack), standardised admission ratio	87.9	136.7	110.1
Emergency hospital admissions for stroke, standardised admission ratio	84.4	119.0	130.9
Emergency hospital admissions in under 5 years old, crude rate	146.7	161.8	163.8
Hospital admissions for alcohol attributable conditions, (Broad definition)	95.1	195.2	146.5
Hospital admissions for alcohol attributable conditions, (Narrow definition)	84.3	203.0	137.2
Incidence of all cancers, standardised incidence ratio	102.9	115.9	121.4
Index of Multiple Deprivation (IMD) Score	22.5	63.8	48.8
Child Poverty, Income deprivation affecting children index (IDACI)	14.5	42.9	31.2
Older people in poverty: Income deprivation affecting older people Index (IDAOI)	14.8	31.3	38.0
Unemployment (Percentage of the working age population claiming out of work)	3.9	12.7	8.1
Long-Term Unemployment- rate per 1,000 working age population	3.1	4.8	6.1
Population density, people per square kilometre	2,134.4	6,590.6	3,147.7
Households with overcrowding based on overall room occupancy levels	4.1	7.2	5.9
Deliveries to teenage mothers		0.9	1.2
Low birth weight of live babies, five year pooled	6.4	8.4	8.7

Performance >

ENHANCEMENT

NHS System Oversight Framework

The System Oversight Framework dashboard has now been updated with the **2022/23** metrics published by NHS Futures. A number of new metrics have been added, and others have been retired. The dashboard currently includes ICB, Provider and Place (Sub ICB) metric data.