



Hertfordshire and
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Care System



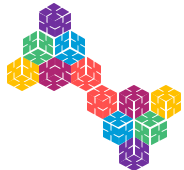
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Hertfordshire and West Essex Neighbourhood Pack – Loughton Buckhurst Hill & Chigwell PCN

2025-2026
PHM Team

Working together
for a healthier future





Key messages

The Loughton Buckhurst Hill & Chigwell population profile is similar to West Essex and the ICB. However, a higher proportion of the population live in the most deprived quintiles compared to the WE.

There is inequality between and within the locality, in particular there are areas of higher deprivation that are associated with poorer outcomes. People in these areas are more likely to live with long term conditions, require emergency care and die before the age of 75 years. Inequality of life expectancy for males is in the 2nd best quintile and female is in the middle quintile, for 2021-23 period. This illustrates that for males in the most deprived quintiles will live nearly 6.7 years less than the least deprived quintiles, in Epping Forest. For females, the gap is 5.8 years. More information can be found at a District level in the; [Overview of the Population](#)

Loughton Buckhurst Hill & Chigwell data shows a lower prevalence of behavioural risk factors, including, obesity, insufficient physical activity and smoking compared to WE. These trends are particularly pronounced among older adults (65+), individuals in the most deprived quintile and BAME populations. 12% of children in Epping Forest live in poverty compared with 13% for WE and 17% for England. The areas within Epping Forest with the highest child poverty are Loughton Roding (31%), Waltham Abbey North (26%) and Grange Hill (26%).

The population of Loughton Buckhurst Hill & Chigwell is growing alongside demographic shifts, with an ageing population that will grow more rapidly compared to the overall population.



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**Demographics, wider determinants
and prevention**

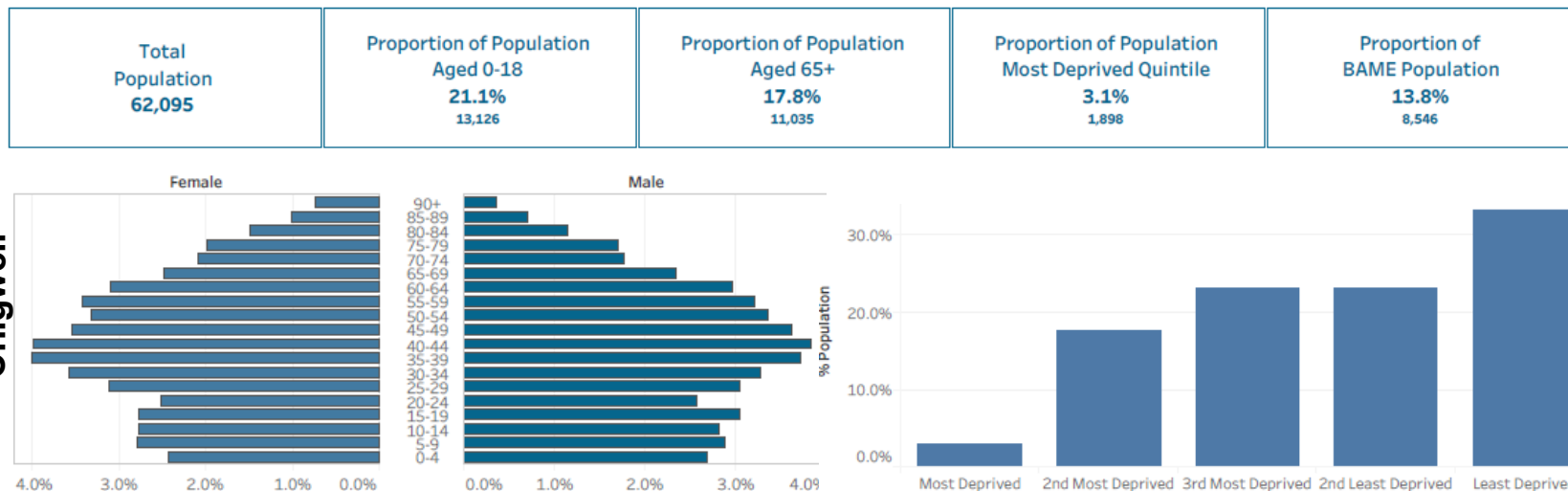
**Working together
for a healthier future**





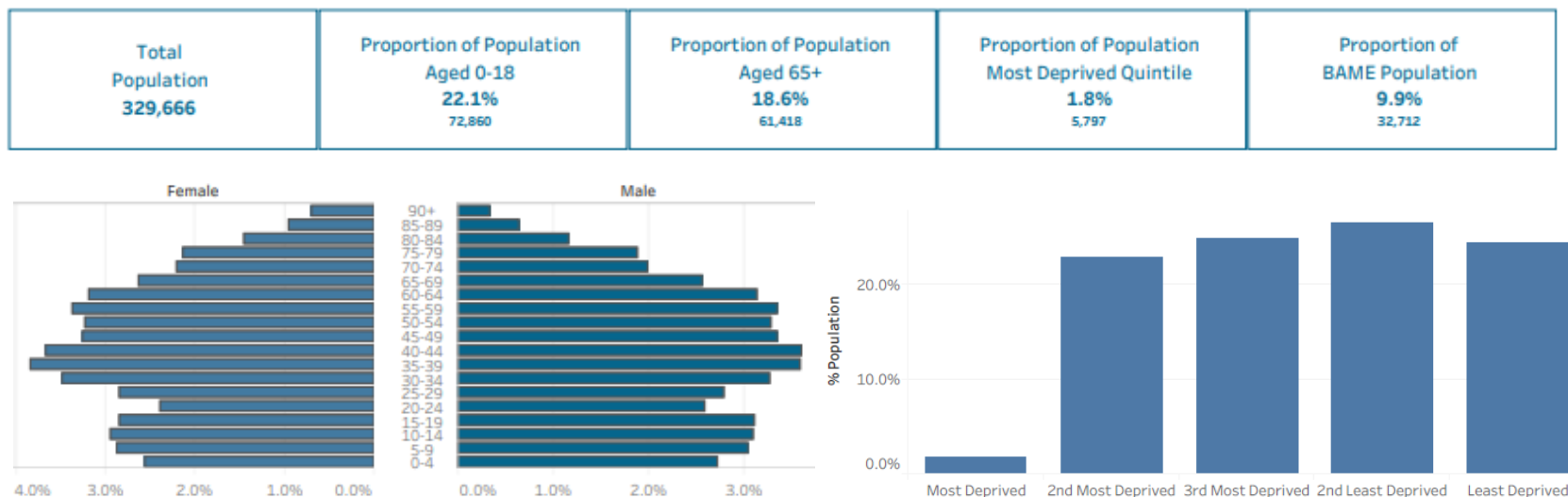
Population profile

Loughton Buckhurst Hill & Chigwell



- Loughton Buckhurst Hill & Chigwell population age groups in most cases mirrors WE, but a higher proportion lives in the most deprived quintile.
- Additional information is available on [DELPPHI](#) for age, deprivation, ethnicity, gender and main language at HCP, Locality, PCN, GP practice and Local authority lower tier population.

WE



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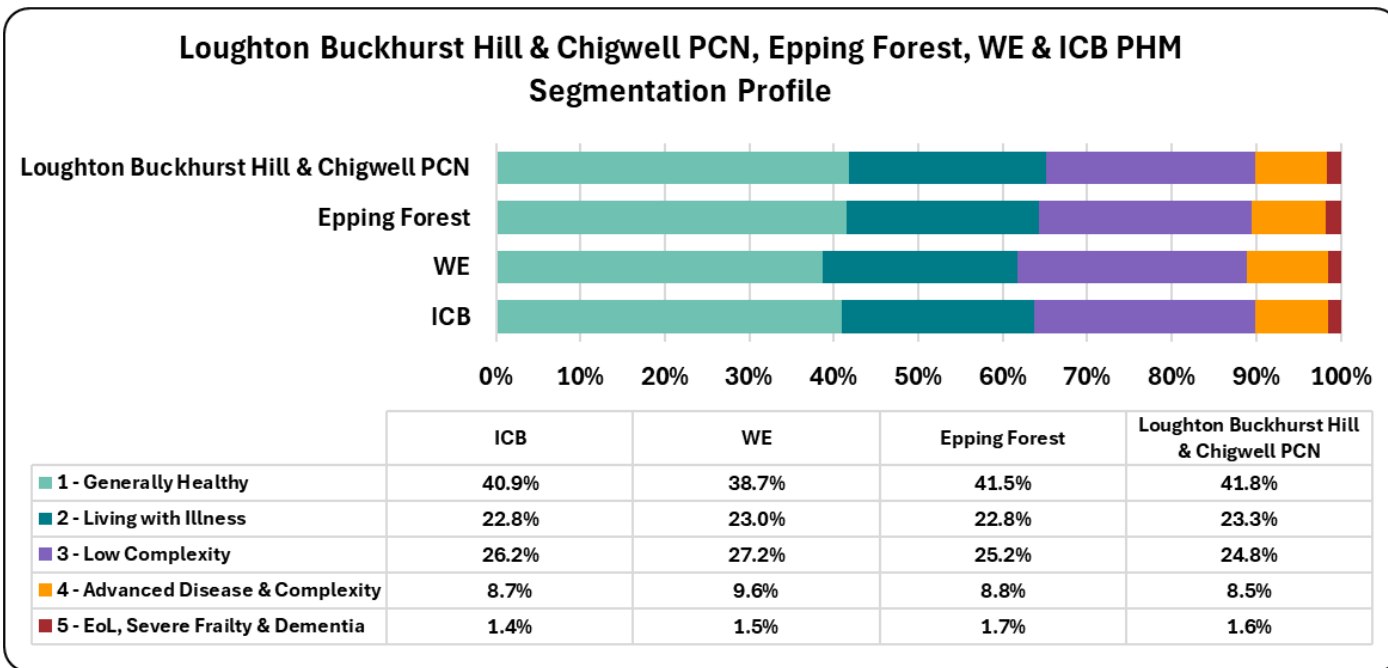


Source: [DELPPHI - Population Profile](#)



Segmentation profile Provisional Data

- The illustrations on the right shows the segmentation model for Loughton Buckhurst Hill & Chigwell PCN, Locality, WE and ICB. This is a snapshot from June 2025.
- Loughton Buckhurst Hill & Chigwell has a higher proportion of the population in the 'Generally Healthy' segment when compared to WE and the ICB. This is linked to lower prevalence of most [Long-Term Conditions](#). Higher prevalence of long term conditions can be driven by higher rates of risk factors ([behavioural risk factors](#) and deprivation), improved disease detection, or better coding and recording.
- Further detail on the segmentation model can be found in the [glossary](#).



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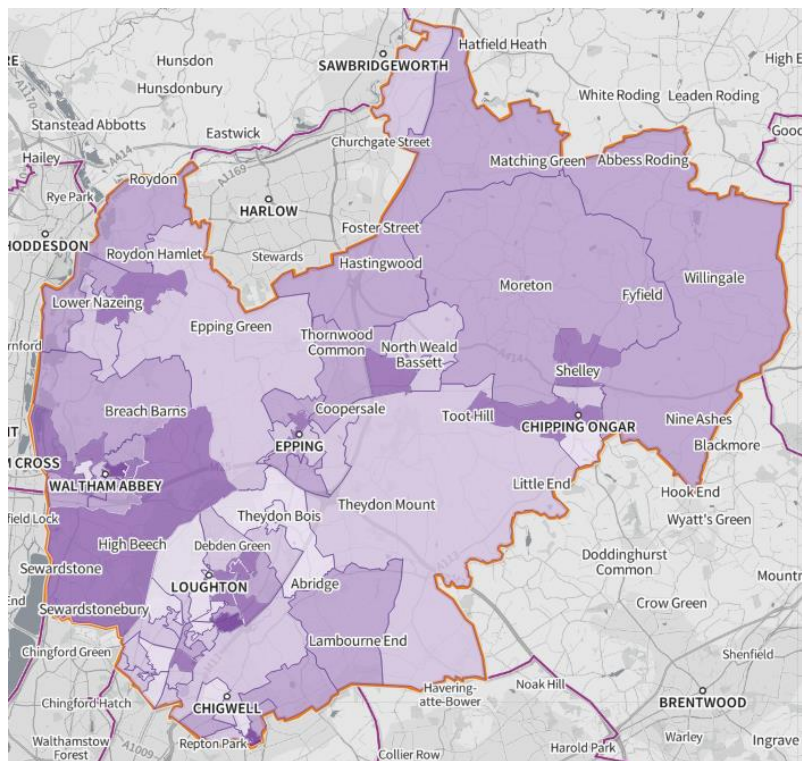
Source: DELPPHI: HWE Segmentation model



Children and older people living in poverty

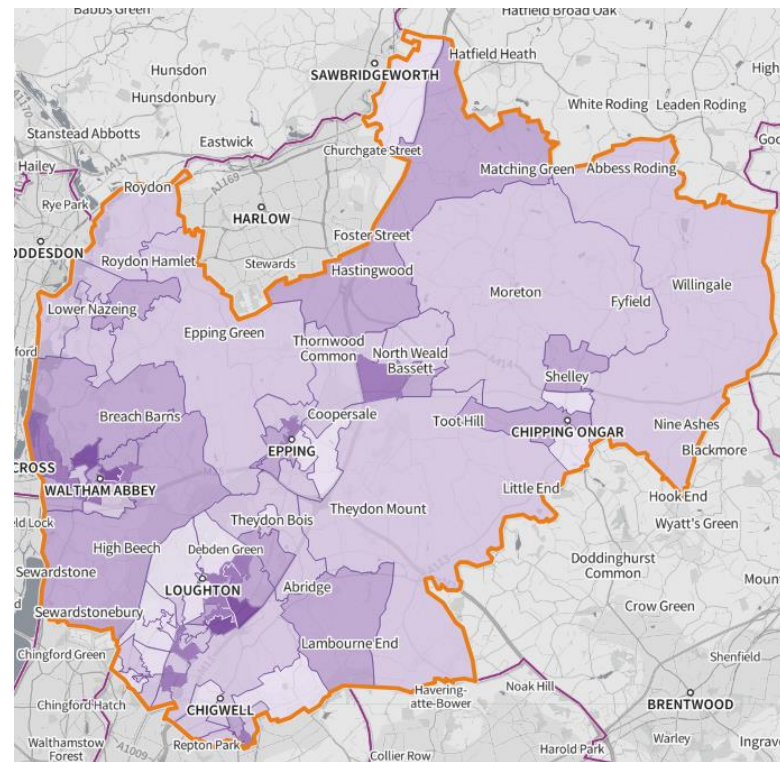
- Income Deprivation Affecting Children Index (IDACI) and Older people index (IDAOP) measures the proportion of all children aged 0 to 15 and adults aged 60 or over, respectively who experience living in income deprived families or income deprivation.
- The IDACI and IDAOP are illustrated on the maps. The darker the colour, the higher the level of deprivation.

Income Deprivation affecting children



- Income deprivation affecting children index (IDACI) 2019, shows Epping Forest at 12.4%, WE at 12.6% and England at 17.1%. The areas within Loughton Buckhurst Hill & Chigwell with the highest index are Loughton Roding (31%), Waltham Abbey North (26%) and Grange Hill (26%).

Income deprivation affecting older people



- Income deprivation affecting older people index (IDAOP) 2019, shows Epping Forest at 11.2%, WE at 11.1% and England at 14.2%.



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Source: [Fingertips](#) | [Department of Health and Social Care](#) and [SHAPE](#)



Behavioural risk factors

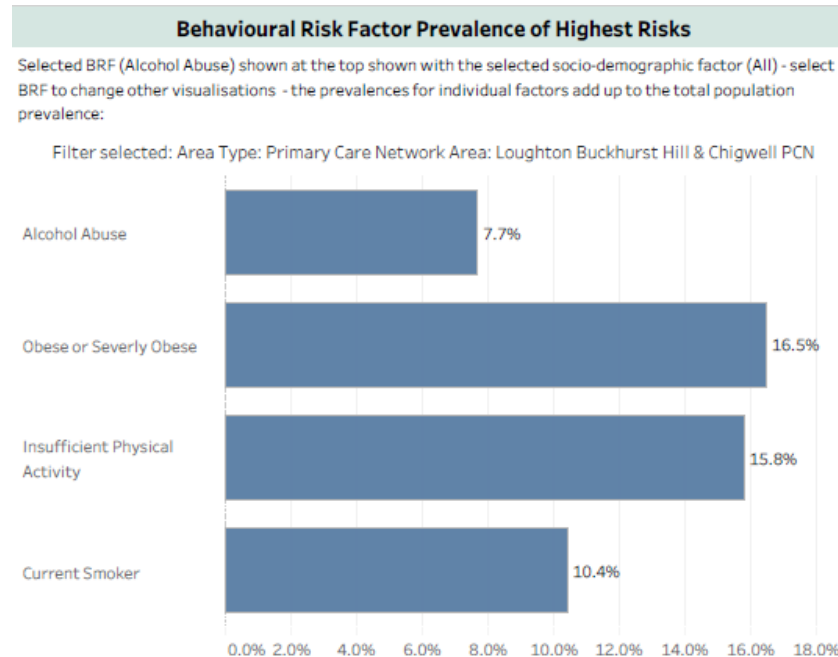
- Loughton Buckhurst Hill & Chigwell data shows a similar proportion of alcohol abuse but lower obesity, insufficient physical activity and smoking compared to WE. These trends are particularly pronounced among older adults (65+), individuals in the most deprived quintile and BAME populations, for alcohol abuse.
- These behavioural risk factors, that are lower than WE are likely contributing to a higher proportion of the population being classified as 'generally healthy' in the segmentation model compared to WE, as these behaviours could lead to adverse health outcomes.
- Please use the following [link](#) for DELPPHI to review HWE, WE, Locality, PCN, GP practice and Local authority lower tier population demographic profiles by age, deprivation, ethnicity, gender and main language, in greater detail.
- For additional information on childhood obesity please review the [CYP insights](#) (Feb 2025) and for smoking and pregnancy review [Fingertips | Department of Health and Social Care](#).



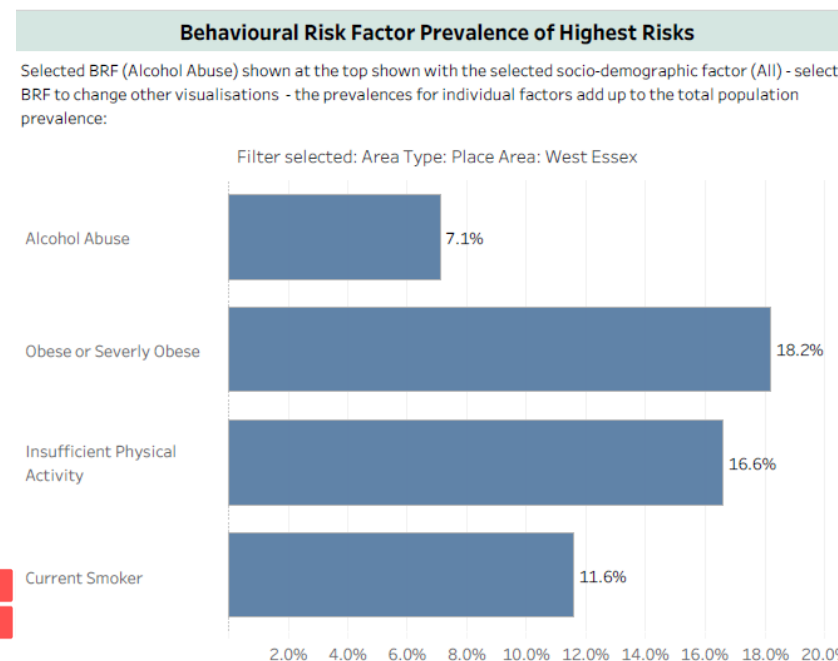
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Loughton Buckhurst Hill &
Chigwell



WE



Source: [DELPPHI - Population Profile](#)

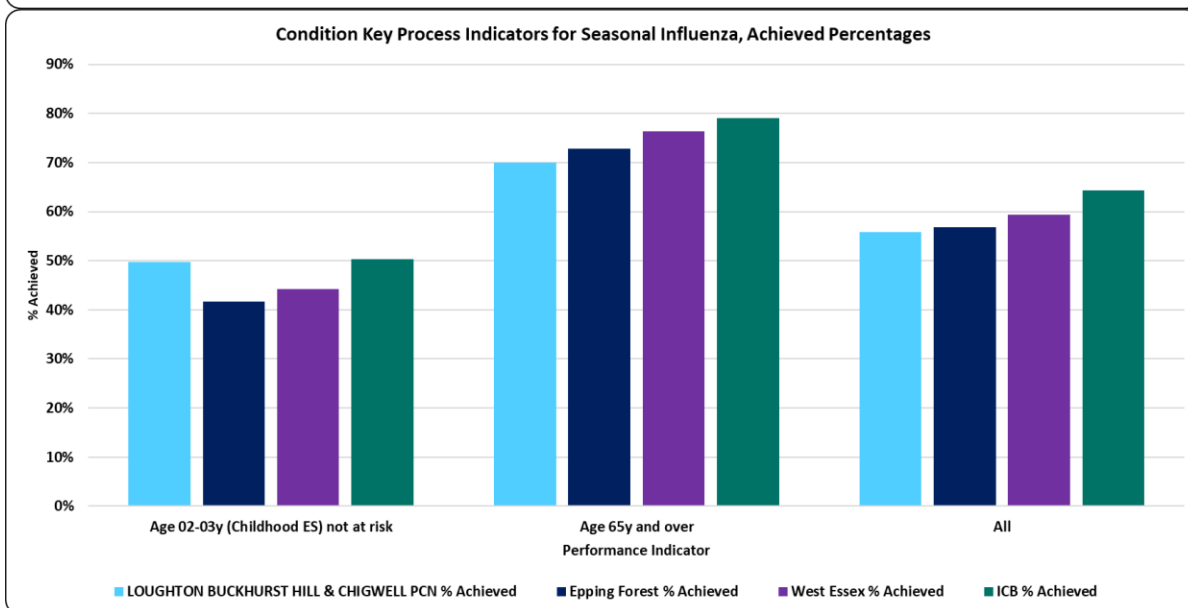
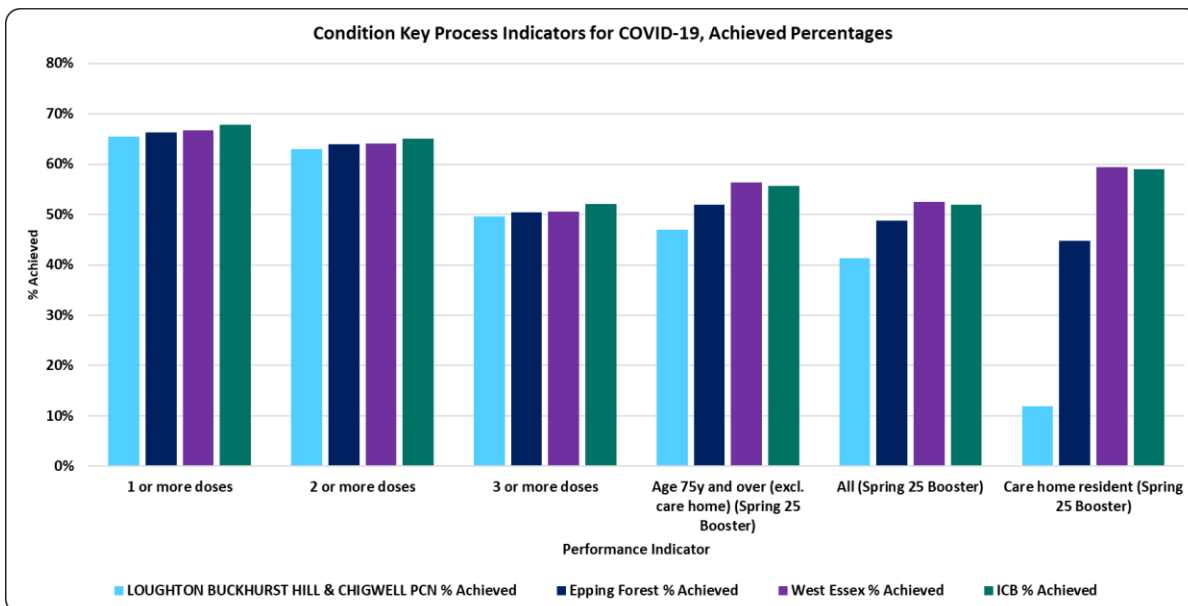


Immunisation

- Loughton Buckhurst Hill & Chigwell's percentage of people immunised against Covid-19 is below or similar to WE and the below the ICB.
- Seasonal influenza percentage achieved for most areas is below WE and the ICB.



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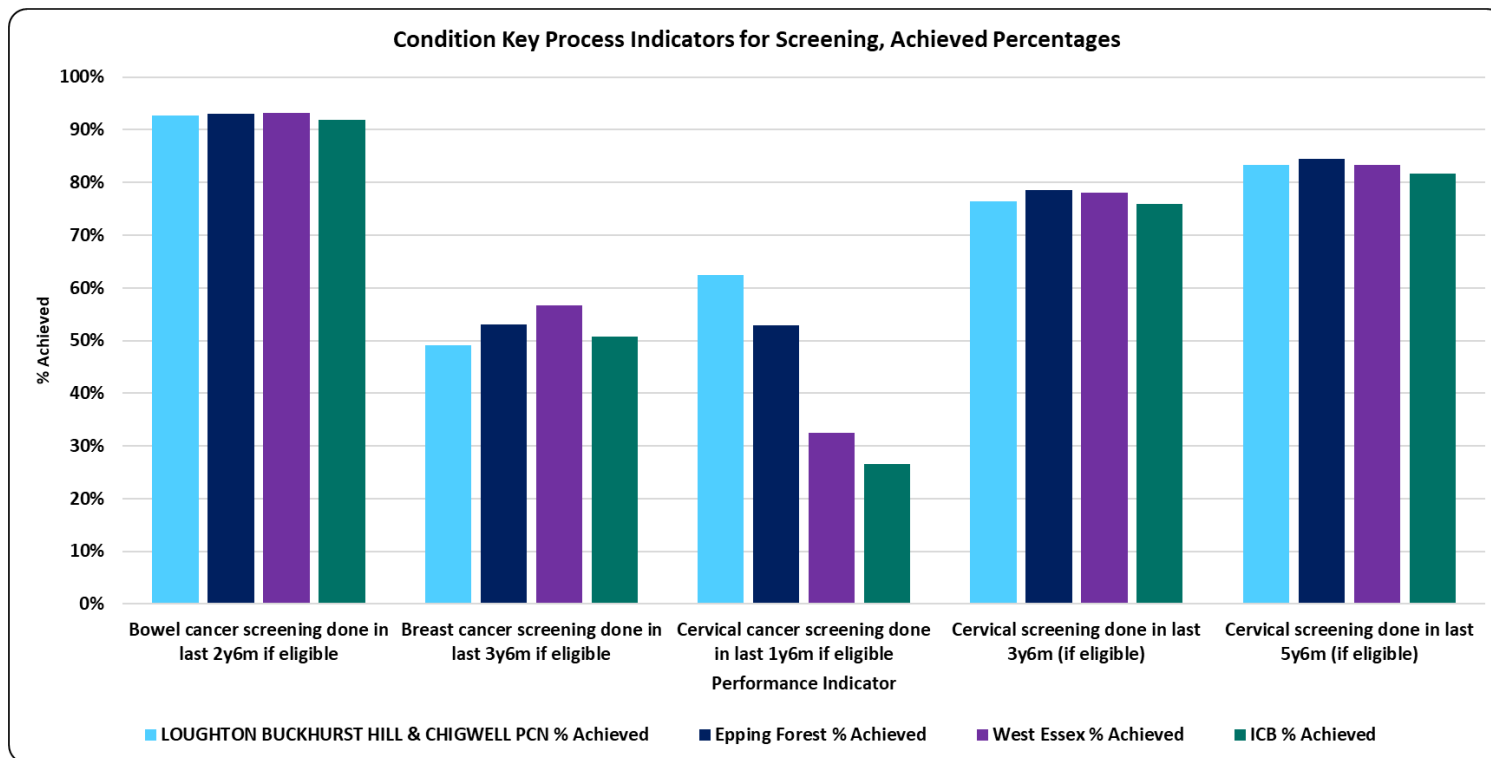


Source: [Ardens Manager](#)



Screening

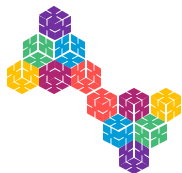
- Better outcomes are achieved through earlier diagnosis of cancer. The national target is for 75% of cancer diagnosis to be at early stage (stage 1 or 2). Uptake of cancer screening programmes are a core enabler for early detection of cancer.
- The chart on the right shows the percentage of people screened by cancer type.
- Loughton Buckhurst Hill & Chigwell 's percentage screening for most areas is similar to WE and the ICB.



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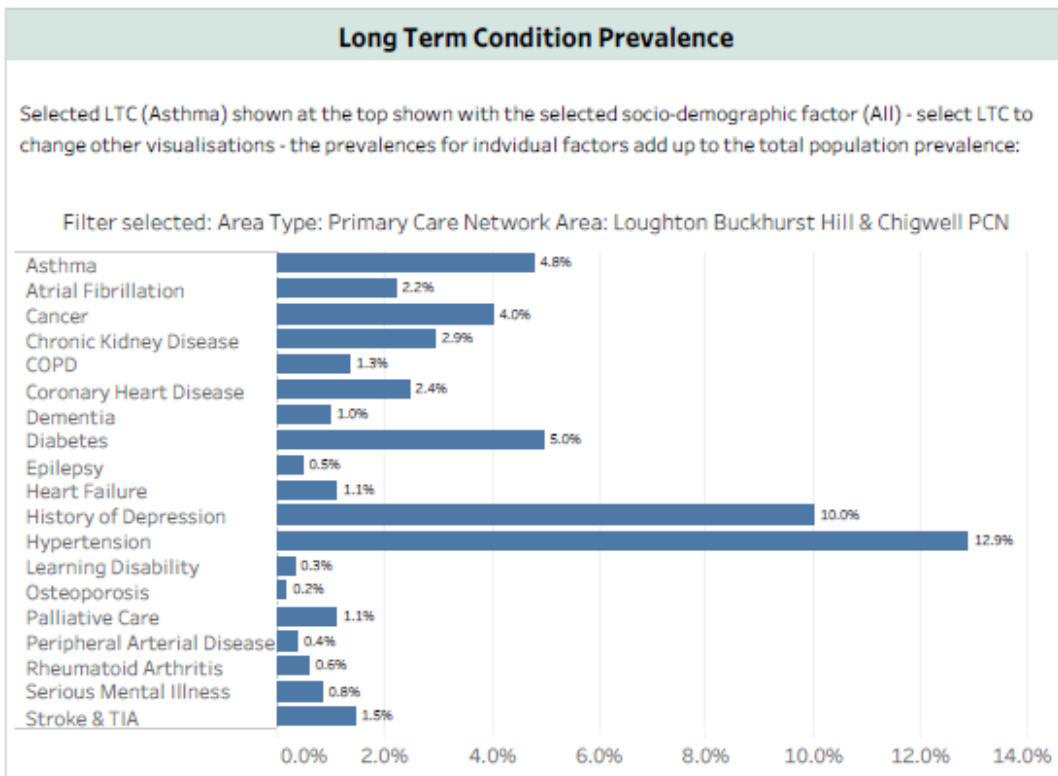


Source: [Ardens Manager](#)

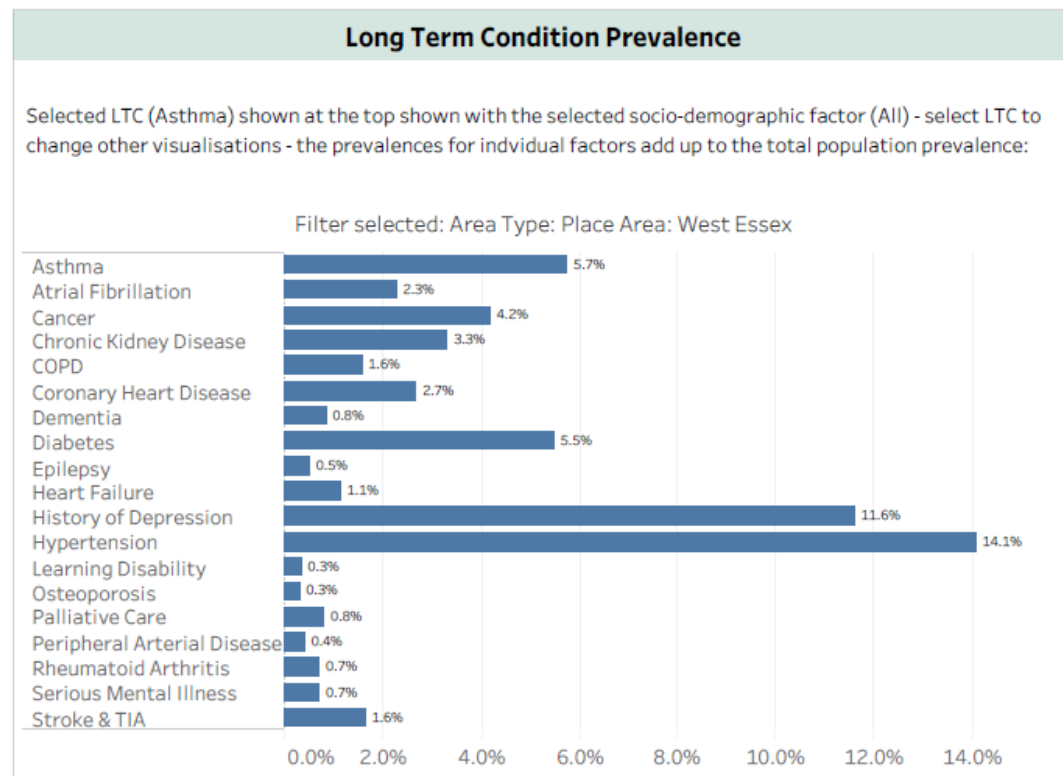


Prevalence of Disease Registers

Loughton Buckhurst Hill & Chigwell



WE



- The above charts show that Loughton Buckhurst Hill & Chigwell has lower recording for most LTC compared to WE. Please note these charts will not reconcile to QOF as a wider set of codes looking at all settings data is used.
- Additional information is available in [DELPPHI](#) to review inequalities age, deprivation, ethnicity, gender and main language and compared to HCP, Locality, PCN, GP practice and Local authority lower tier.



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Source: [DELPPHI - Population Profile](#)



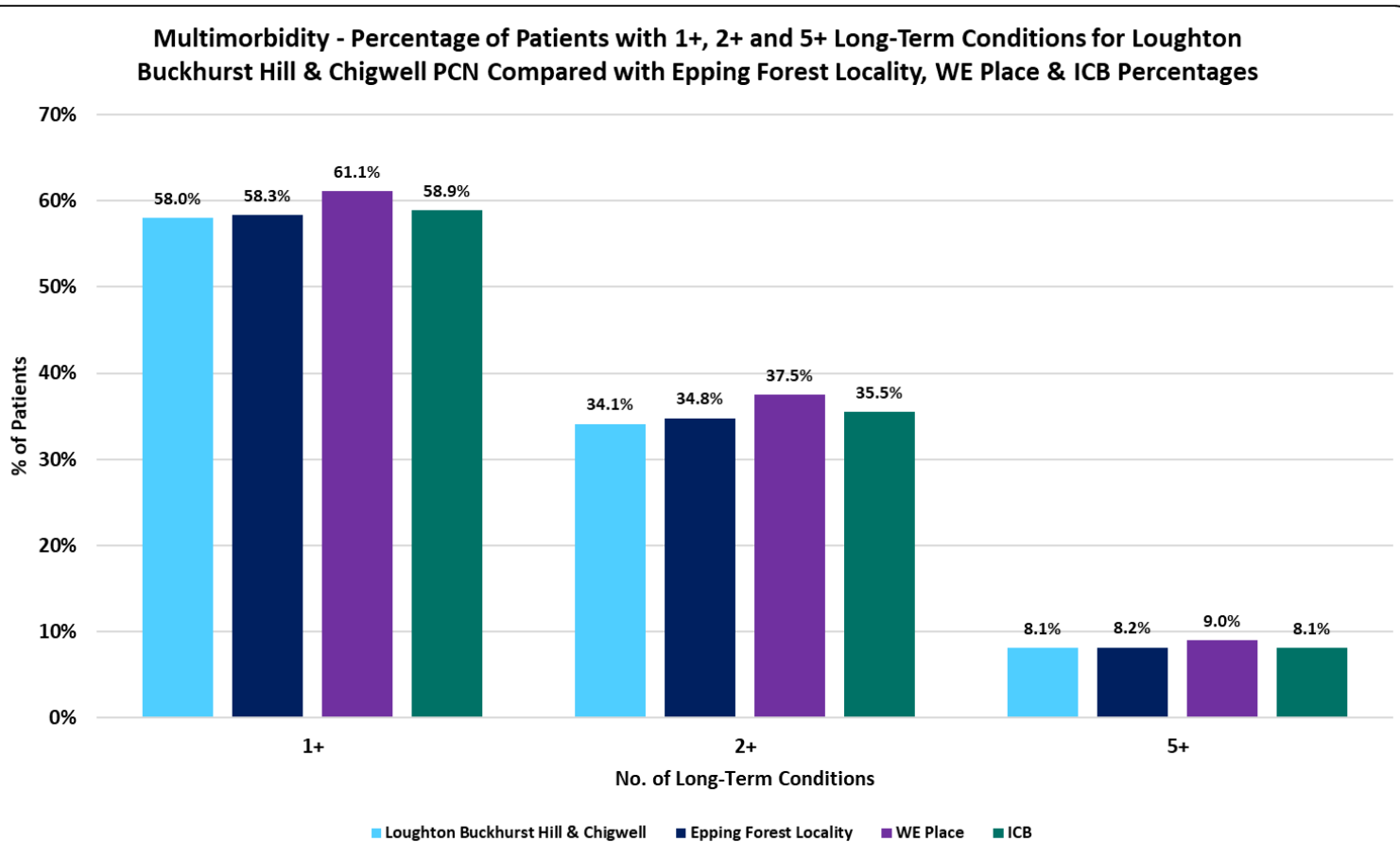
Prevalence of Multimorbidity

Provisional Data

The Long-Term Condition (LTC) count data for this page is based on the ICB Segmentation model.

For the Multimorbidity prevalence we can see:

- That in Loughton Buckhurst Hill & Chigwell, the prevalence for those with 2 or more LTCs is lower than WE and slightly lower than the ICB.
- For those Patients with 5+ LTCs, Loughton Buckhurst Hill & Chigwell is slightly lower than the WE and equal to the ICB.
- Loughton Buckhurst Hill & Chigwell's segmentation profile, characterised by a lower proportion of the population with LTCs, BRFs, may be contributing to the lower proportions observed compared to WE and the ICB.



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Source: : DELPPHI: HWE Segmentation model



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Children & Young People Management and outcomes

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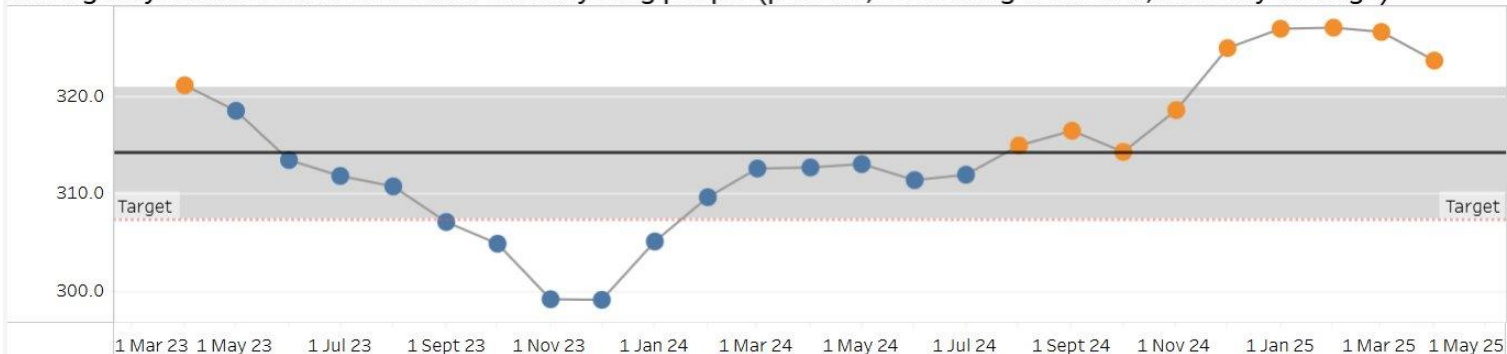


Children's Care: Medium Term Plan Indicators

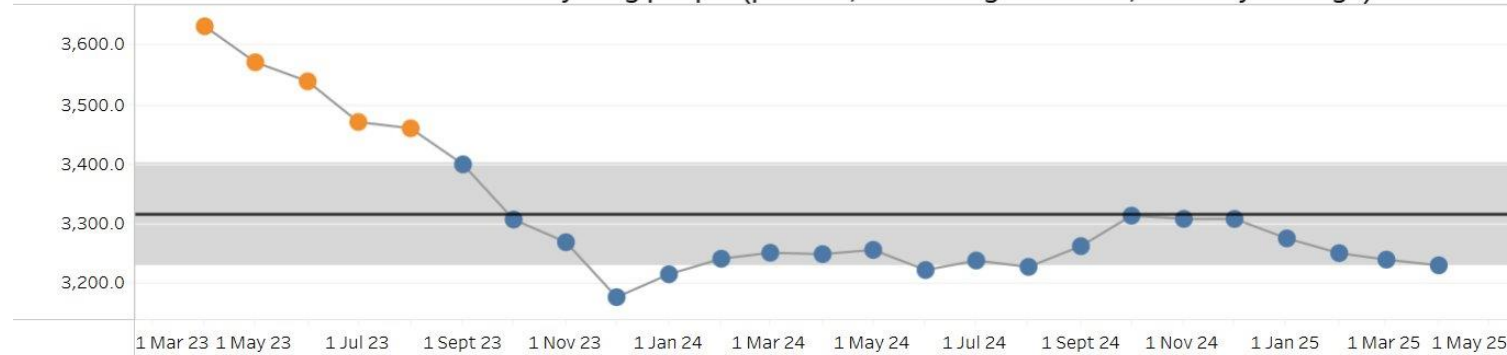
- The Medium Term Plan dashboard on DELPPHI tracks key indicators for children and young people under 18, using data from SUS and community providers. It focuses on three main measures:
 - Community paediatric waits over 65 weeks (not reported for WE)
 - Emergency admission rates
 - A&E attendance rates
- Recent data shows a slight decrease in emergency admissions to 323.7, down from 326.6 the previous month, while A&E attendances have also slightly decreased to 3229.7 from 3239.3.
- Note: From November '24, PAH and ENHT changed how SDEC is coded, significantly reducing emergency admission counts. This affects West Essex, East and North Herts, and the ICB overall. Measures referencing emergency admissions will appear lower and should be interpreted with caution.

WE

Emergency admission rate for children and young people (per 100,000 rolling 12 month, monthly average)



Rate of A&E Attendances for children and young people (per 100,000 rolling 12 month, monthly average)



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Source: [DELPPHI - HWE Mid Term Plan Dashboard](#)



Children and Young People: Programme outcomes

- HWE programme outcomes provide an opportunity for our ICS to focus on the end point health outcomes that best practice and evidenced interventions will deliver to improve the health of our population.
- The table on the right shows CYP outcomes for Loughton, Buckhurst Hill and Chigwell PCN from the [Outcomes Framework](#)
- Emergency admission rates for self-harm in Loughton, Buckhurst Hill and Chigwell PCN have increased.
- Emergency admission rates for preventable chronic ACCS conditions have decreased, however the associated costs have increased.
- There has been a decrease in overall emergency admissions for 0–17-year-olds and for admissions related to asthma, diabetes, and epilepsy among 0–18-year-olds.
- However, emergency admission rates for 0–4-year-olds has increased.



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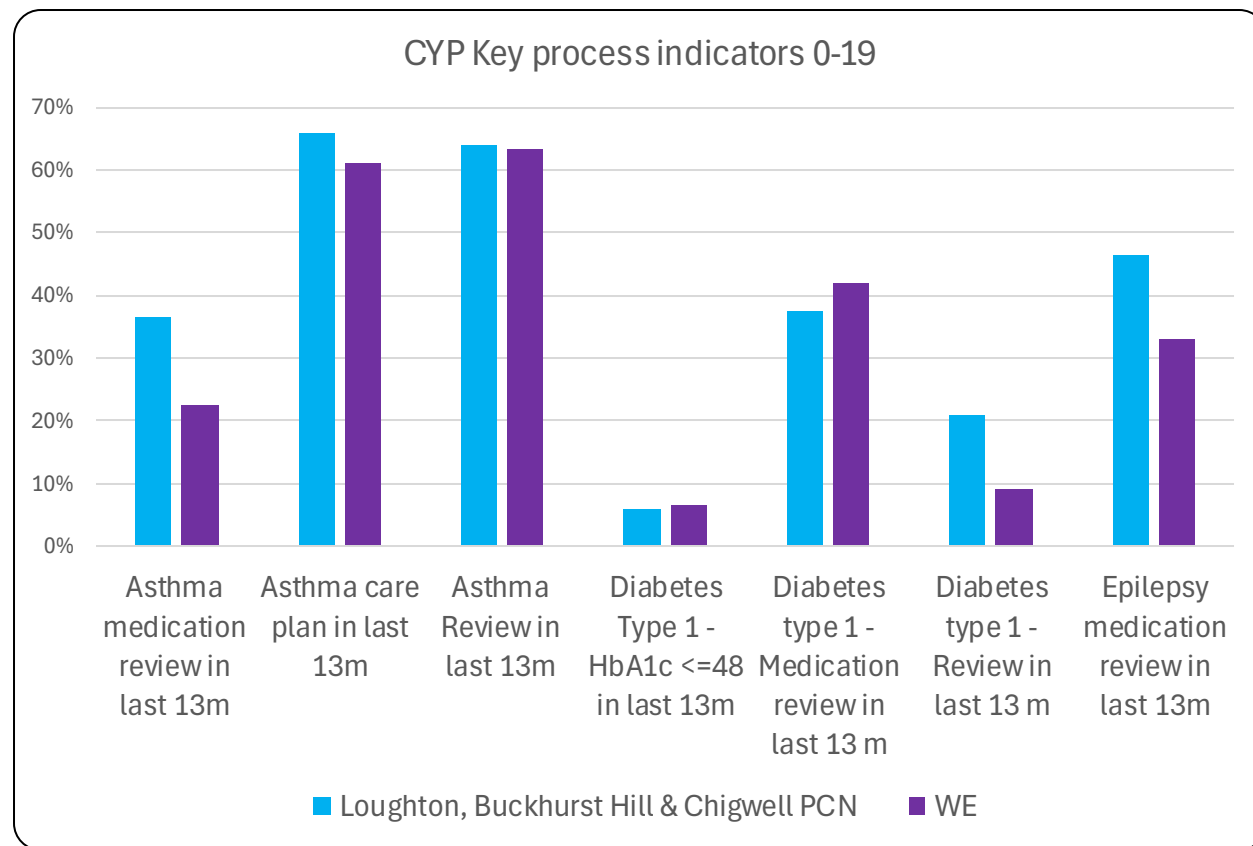
		Current Period	Previous Period	Difference	% Difference
Measure Cat	Measure				
Whole System	Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, Crude Rate per 100,000, aged between 0-18	Suppressed due to small numbers			
	Total Cost of Emergency Hospital Care, Crude Rate per 100,000, aged between 0-18	£901k £125k / 13,903	£748k £102k / 13,660	£152,843	20.4%
Programme	Mortality, Crude Rate per 100,000, aged between 1-17	Suppressed due to small numbers			
	Emergency Admissions, Intentional Self-Harm, DSR per 100,000, aged between 10-24	Suppressed due to small numbers			
	Emergency Admissions LoS >0, Crude Rate per 100,000, aged between 0-17	219.8 29 / 13,192	223.5 29 / 12,974	-3.7	-1.7%
Workstream	Emergency Admissions, DSR per 100,000, aged between 0-4	741.4 25 / 3,372	590.8 20 / 3,385	150.6	25.5%
	Emergency Admissions, Asthma Diabetes and Epilepsy, Crude Rate per 100,000, aged between 0-18	Suppressed due to small numbers			

Source: [DELPPHI - HWE Outcomes Dashboard](#)



Children and Young People: Key process indicators (0-19 years)

- Data provided by Ardens Manager highlights key process indicators for children and young people with Asthma, Diabetes and Epilepsy over the 13 months leading up to June 24, 2025.
- The graph compares these indicators between Loughton, Buckhurst Hill PCN and WE for children and young people aged 0-19.
- Asthma reviews and care plans completed in Loughton, Buckhurst Hill & Chigwell PCN were slightly higher to those in WE during this period.
- Loughton, Buckhurst Hill & Chigwell PCN has more medication reviews recorded for Asthma and Epilepsy compared to WE.



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Source: [Ardens Manager](#)



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Hypertension, Cardiovascular Disease and Long-Term Conditions

Management and Outcomes

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Hypertension: Medium Term Plan Indicators

Medium Term Plan indicators on DELPPHI highlight key priorities related to Hypertension diagnosis and management within the ICB. Information are currently reported at HCP/WE level.

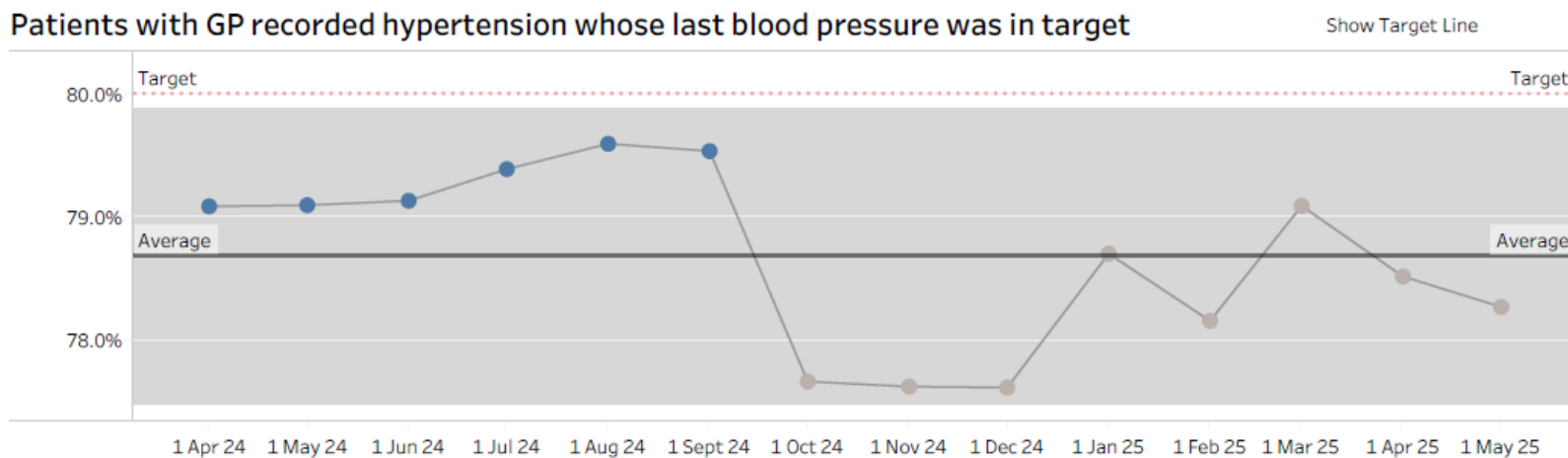
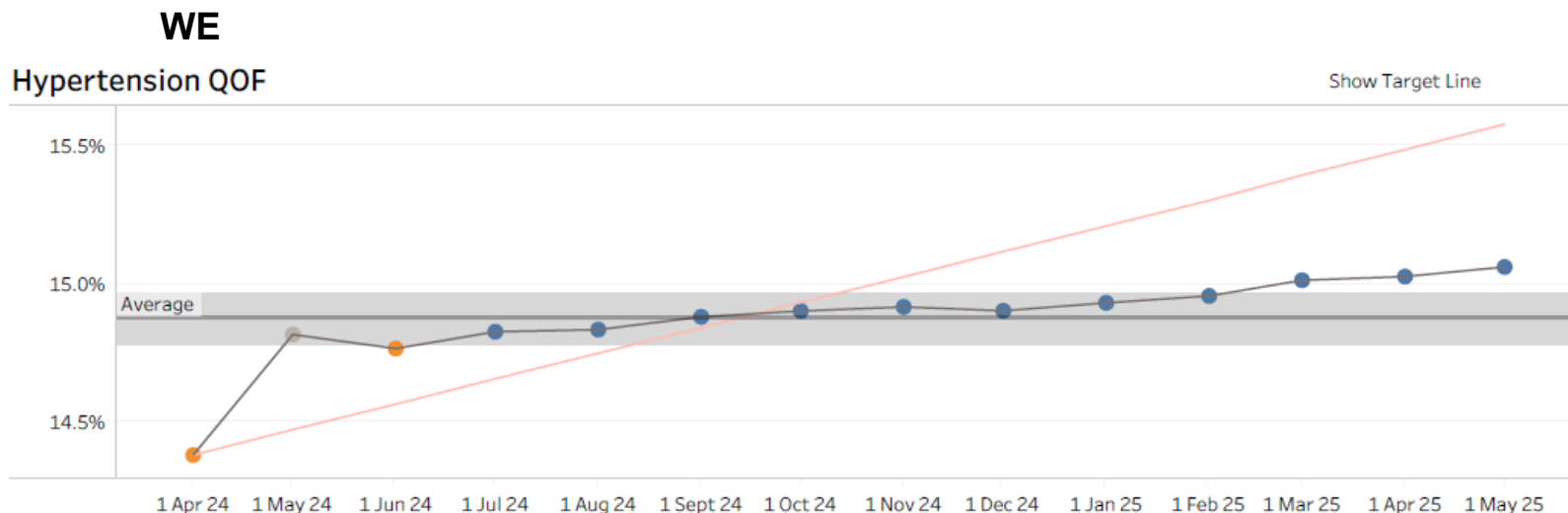
For Hypertension Medium Term Plan indicators, for the WE we can see:

- Compared to the ICB, WE Hypertension QOF prevalence continues to rise indicating improved identification of people living with hypertension
- For Patients with GP recorded hypertension whose last blood pressure was in target, we can see that the data shows a higher proportion for West Essex compared to the ICB's rate. In the most recent month, the trend shows a decrease for the area which follows that of the ICB's trend.

To review these indicators in more detail, please go the CVD & Hypertension page of the DELPPHI Medium Term Plan dashboard found [here](#).



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Source: [DELPPHI - HWE Mid Term Plan Dashboard](#)



Hypertension: QOF Indicators

- Reviewing the PCN on their percentage achieved from the 2024/25 QOF, we can see that:
 - Loughton Buckhurst Hill & Chigwell PCN is showing above the WE value for both Hypertension review indicators.
 - In the ICB as of April 2025, 87% of people aged 45+ have had a BP done in the last 5 years.
- For a further detailed review of all the QOF indicators for 2024/25, please visit the Ardens Manager pages [here](#).

	Hypertension	
	Review	
	HYP008: Latest BP 140/90 or less (or equivalent home value) in last 12m if 79y or under	HYP009: Latest BP 150/90 or less in last 12m if 80y or over
ICB	77.0%	85.0%
West Essex Place	77.0%	85.0%
Epping Forest Locality	76.3%	84.1%
EPPING FOREST NORTH PCN	75.1%	82.8%
LOUGHTON BUCKHURST HILL &	78.0%	85.8%



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Source: [Ardens Manager](#)



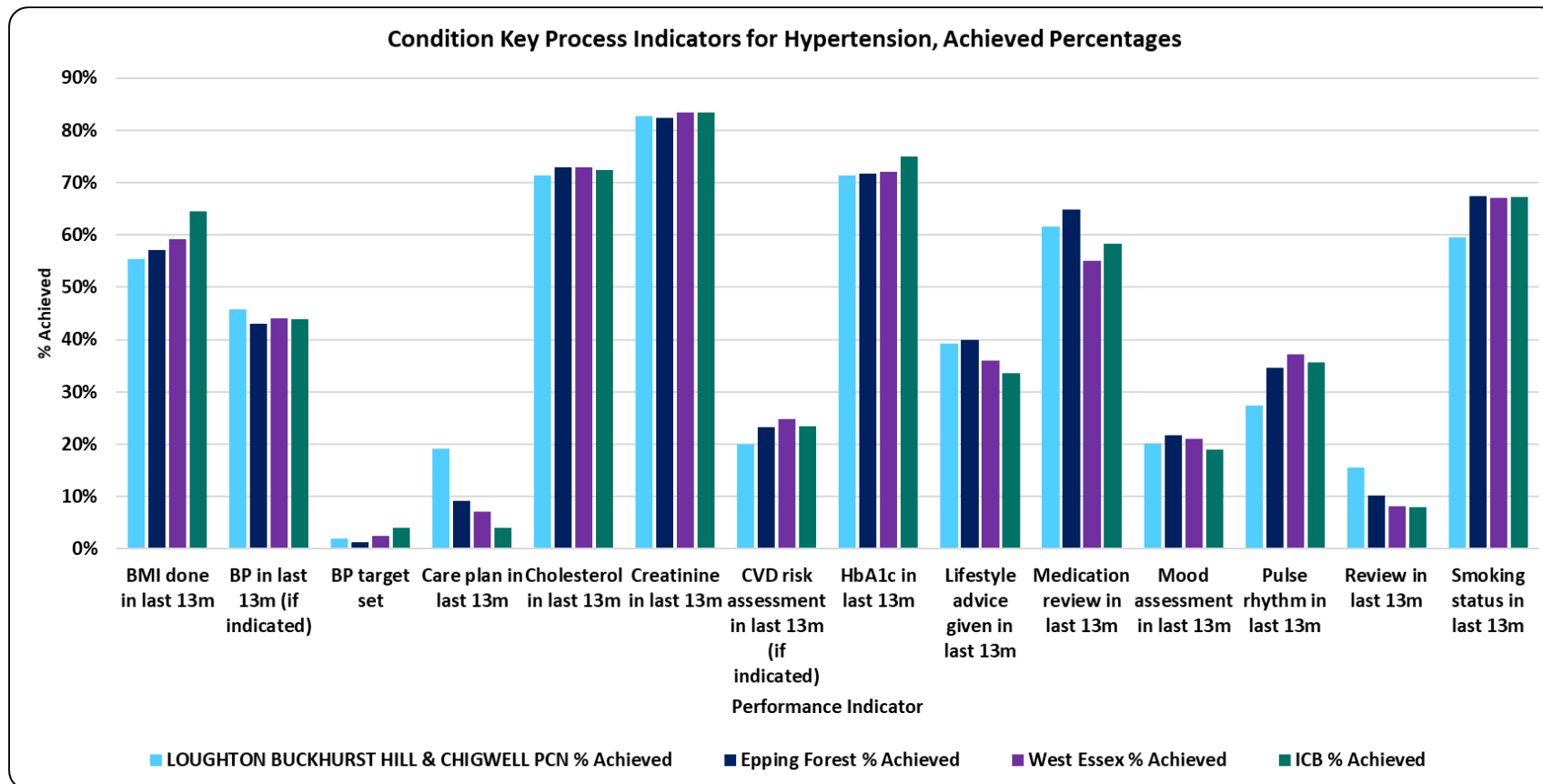
Hypertension: Key Care Process Indicators

For the Hypertension key process review indicators, we can see that for the locality:

- Loughton Buckhurst Hill & Chigwell PCN achieves higher percentages than WE and ICB levels, in 4 out of the 14 process indicators shown
- To review these, and other indicators in detail, please go to the Hypertension pages in Ardens Manager [here](#).

Areas of opportunity for the PCN are:

- BMI checks
- CVD Risk Assessments
- HbA1c checks
- Mood Assessments
- Pulse Rhythm Assessments
- Smoking status checks



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Source: [Ardens Manager](#)



Cardiovascular Disease (CVD) & Other Long-Term Conditions (LTC): ECF & QOF Indicators

- The 2024/25 QOF CVD indicators are shown on this page; other QOF LTC indicators can be viewed via Ardens Manager [here](#).
- Reviewing Loughton Buckhurst Hill & Chigwell PCN on their percentage achieved from the 2024/25 QOF, we can see that:
 - There is a varied mix of achievements across the indicators
 - There is opportunity to increase the percentage achieved for Coronary Heart Disease, CVD and AF indicators across the indicators

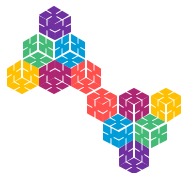
	Atrial Fibrillation				Atrial Fibrillation		CVD Secondary Prevention			Coronary Heart Disease		
	ECF				QOF		ECF			QOF		
	BP done	Chest pain assessment done	ORBIT score done	Review done	AF006: CHA2DS2-VASc recorded in last 12m	AF008: On DOAC or Vitamin K antagonist if CHA2DS2-VASc >= 2	On high-intensity statin, ezetimibe or LLT max tol/ci/dec	All (CHD, CVA/TIA or PAD)	Target met (LDL-cholesterol <=2.0 or Non-HDL cholesterol <=2.6)	CHD005: Anti-platelet or anti-coagulant in last 12m	CHD015: Latest BP 140/90 or less in last 12m if 79y or under	CHD016: Latest BP 150/90 or less in last 12m if 80y or over
ICB	90.2%	20.1%	39.9%	34.3%	97.0%	96.3%	75.3%	100.0%	12.8%	96.5%	83.5%	89.5%
West Essex Place	89.1%	26.1%	38.3%	33.7%	97.3%	95.8%	75.5%	100.0%	10.4%	96.6%	83.9%	89.9%
Epping Forest Locality	89.0%	30.0%	37.0%	32.5%	97.0%	95.8%	75.4%	100.0%	10.6%	95.9%	83.8%	90.9%
EPPING FOREST NORTH PCN	90.4%	29.8%	36.5%	30.0%	98.0%	96.1%	76.5%	100.0%	10.6%	96.0%	82.8%	89.6%
LOUGHTON BUCKHURST HILL & CHIGWELL PCN	87.2%	30.4%	37.8%	35.7%	95.5%	95.3%	74.0%	100.0%	10.5%	95.7%	85.2%	92.5%



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Source: [Ardens Manager](#)



CVD & Other Long-Term Conditions: ECF & QOF Indicators

- The 2024/25 ECF CVD indicators are shown on this page; however, all the other ECF LTC indicators can be viewed via the Ardens Manager 2024/25 QOF pages [here](#).
- Reviewing Loughton, Buckhurst Hill & Chigwell PCN on percentage achieved from the 2024/25 ECF, we can see that:
 - There is a varied mix of achievements across the PCN
 - There is opportunity to increase the percentage achieved for ECF Heart Failure indicators across the PCN

	Heart Failure					Heart Failure		
	ECF					QOF		
	Ejection fraction recorded (ever)	NYHA classification done	On SGL2i or issued in last 3m (if preserved ejection fraction)	Palliative care referral (or declined) (if NYHA Stage III or IV)	Social prescribing/IAPT referral done (or declined)	HF003: LVD + on ACEi/ARB	HF006: LVD + on beta-blocker	HF007: Review + assessment of functional capacity
ICB	80.1%	46.4%	31.5%	1.4%	13.4%	95.6%	97.0%	91.9%
West Essex Place	78.9%	48.3%	27.3%	0.6%	14.1%	96.3%	97.2%	91.8%
Epping Forest Locality	78.3%	48.0%	24.3%	0.2%	14.5%	96.5%	97.4%	91.8%
EPPING FOREST NORTH PCN	76.1%	48.1%	22.6%	0.0%	13.6%	96.3%	97.0%	90.2%
LOUGHTON BUCKHURST HILL & CHIGWELL PCN	82.0%	47.8%	27.1%	0.5%	15.9%	96.9%	98.0%	94.7%



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Source: [Ardens Manager](#)



CVD & Other Long-Term Conditions: Key Heart Failure Care Processes

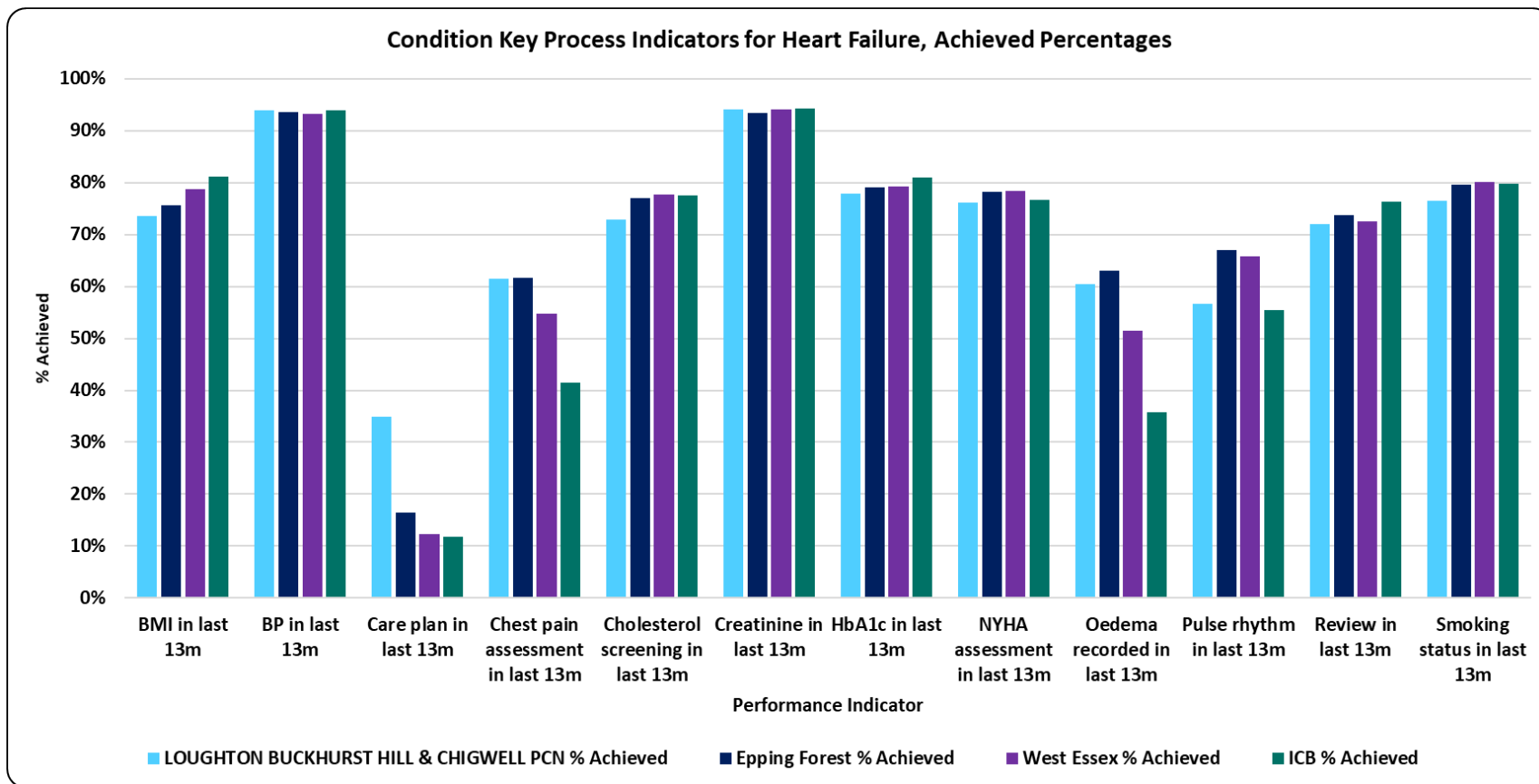
Current CVD key care review process indicators are shown on this page for Heart Failure only due to limitations of space; however, all the other many CVD and other Long-Term Condition indicators can be viewed in detail via the Ardens Manager pages [here](#).

For the Heart Failure key process indicators, we can see for Loughton Buckhurst Hill & Chigwell PCN:

- Higher levels of achievement than WE and ICB levels, in 6 out of the 12 process indicators shown

Areas of opportunity for the PCN are:

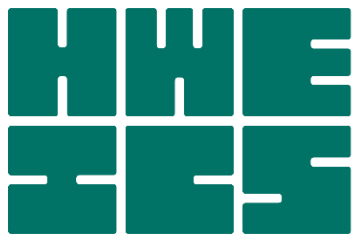
- BMI checks
- Cholesterol checks
- HbA1c checks
- NYHA Assessments
- Pulse Rhythms Tests
- Smoking status checks



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Source: [Ardens Manager](#)



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Mental Health and Learning Disabilities

Management and Outcomes

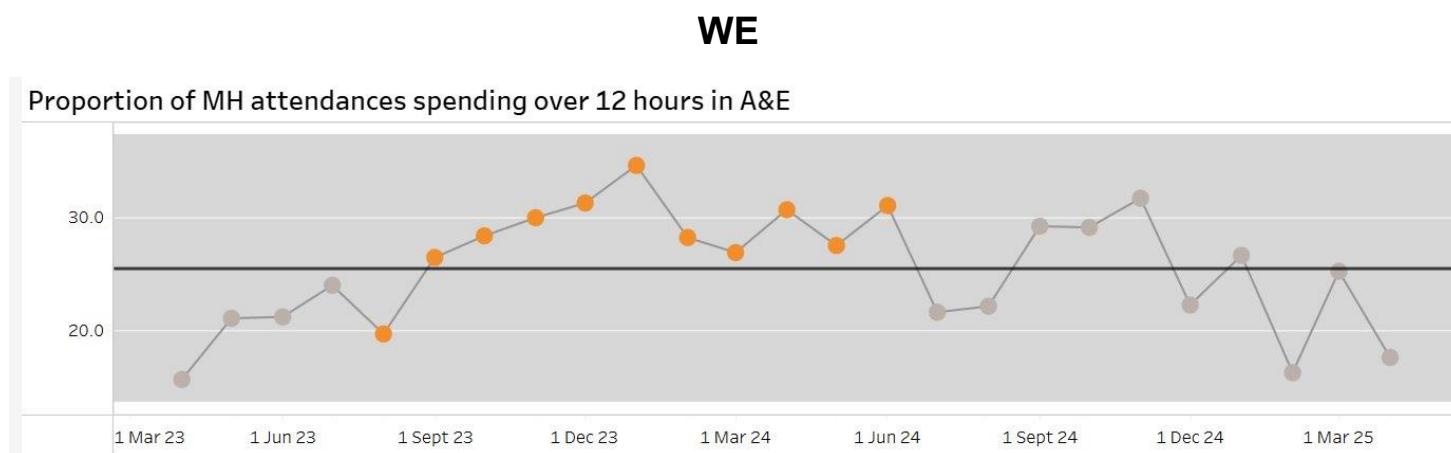
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Better care for Mental Health Crisis: Medium Term Plan Indicators

- MH measures developed within the MTP dashboard for Out of Area placement and Community Crisis Service are currently only available on an ICB footprint.
- The graph on the right shows the proportion of mental health attendances at A&E spending over 12 hours in A&E. Recent months data shows a slight decrease in the proportion of MH attendances spending over 12 hours in A&E.
- Note: PAH & ENHT have changed the way in which SDEC is being coded resulting in much lower emergency admissions counts from November '24 onwards.



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Source: [DELPPHI - HWE Mid Term Plan Dashboard](#)



Mental health: Programme outcomes

- HWE programme outcomes provide an opportunity for our ICS to focus on the end point health outcomes that best practice and evidenced interventions will deliver to improve the health of our population.
- The graph below illustrates a coreset of population health indicators from DELPPHI which have been broken down at PCN level to provide assurance that activities are delivering the required impact.
- Emergency admissions for preventable ACSC conditions have decreased compared to the previous period, although the associated costs have increased.
- In contrast, emergency admissions for intentional self-harm have increased, figures suppressed due to small numbers.
- Suicide mortality figures have been suppressed due to small numbers.

		Current Period	Previous Period	Difference	% Difference
Measure Cat	Measure				
Whole System	Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 0-120	38.5 24 / 64,518	44.0 27 / 63,363	-5.5	-12.6%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£2,426k £1,566k / 64,518	£2,386k £1,519k / 63,363	£40,345	1.7%
Programme	Mortality, Suicide, DSR per 100,000, aged between 10-120	Supressed due to small numbers			
	Emergency Admissions, Intentional Self-Harm, DSR per 100,000, aged between 0-120	Supressed due to small numbers			
Workstream	Mortality, Dementia / Alzheimer'S Disease, DSR per 100,000, aged between 0-120	Supressed due to small numbers			



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Source: [DELPPHI - HWE Outcomes Dashboard](#)



Depression and SMI: QOF indicators

- Mental Health QOF metrics for 2024-25 show that Loughton, Buckhurst Hill & Chigwell PCN has a lower percentage of achievement levels for QOF for all depression and most SMI indicators when compared with ICB and WE.
- The individual practices can be viewed within the QOF data.
- Ardens searches are available to practices to identify those people with SMI without a care plan or recording of monitoring.

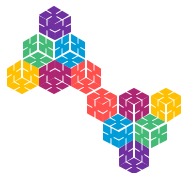
	Depression		Mental Health							
	Review		Review							
	DEP004 CURRENT: Reviewed 10-56d after diagnosis if >18y (2024-25)	DEP004 PROTECTED: Reviewed 10-56d after diagnosis if >18y (2023-24)	MH002: Care plan done in last 12m	MH003: BP done in last 12m	MH006: BMI done in last 12m	MH007: Alcohol consumption done in last 12m	MH011: Lipid profile in last 24m or 12m if antipsychotics/CVD/smoker/overweight	MH012: HbA1c or blood glucose done in last 12m	MH021 CURRENT: All 6 core physical health checks complete (2024-25)	MH021 PROTECTED: All 6 core physical health checks complete (2023-24)
ICB	79.6%	85.4%	89.8%	95.4%	95.4%	95.2%	93.0%	92.8%	74.7%	75.9%
West Essex WE	82.3%	85.4%	90.7%	96.9%	96.6%	97.1%	93.8%	93.8%	76.9%	75.1%
Epping Forest Locality	83.3%	83.3%	89.5%	96.8%	96.5%	96.9%	92.1%	92.6%	78.4%	74.6%
Loughton Buckhurst Hill & Chigwell PCN	84.1%	85.9%	93.2%	97.1%	95.4%	96.7%	91.9%	92.6%	83.8%	81.3%
LOUGHTON BUCKHURST HILL & CHIGWELL PCN	82.3%	80.2%	84.7%	96.3%	97.9%	97.1%	92.4%	92.6%	71.4%	66.7%



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Source: [Ardens Manager](#)

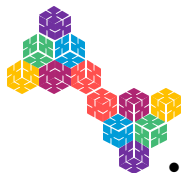


SMI: ECF indicators

- The data shows that Loughton, Buckhurst Hill & Chigwell PCN has a lower percentage for most SMI ECF indicators when compared against WE and the ICB.
- However, the percentage for medication reviews for people with SMI is above Epping Forest locality, WE and the ICB.
- The data in the table below covers the period from April 2024 to March 2025. The most current information is available at [Ardens Manager](#).

	Severe Mental Illness							
	Extra			Local		Review		
	7. Nutrition/diet + level of physical activity done or exception in L12M	8. Use of illicit substance/non prescribed done or exception in L12M	9. Medication reconciliation/review	1. Waist circumference done or exception in L12M	Oral health recorded in last 12m	>=3 PHC items done or exception in L12M	>=4 PHC items done (in last 12m)	Care plan in L12M
ICB	8.4%	8.2%	17.1%	3.4%	8.9%	6.8%	61.0%	8.4%
West Essex WE	8.6%	7.5%	13.0%	2.4%	7.0%	6.1%	54.4%	9.0%
Epping Forest Locality	5.6%	4.9%	14.8%	1.4%	4.2%	3.7%	49.3%	5.6%
Loughton Buckhurst Hill & Chigwell PCN	8.3%	6.7%	12.9%	1.9%	5.6%	5.0%	57.6%	7.3%
LOUGHTON BUCKHURST HILL & CHIGWELL PCN	2.9%	3.1%	16.7%	0.8%	2.7%	2.5%	40.7%	4.0%

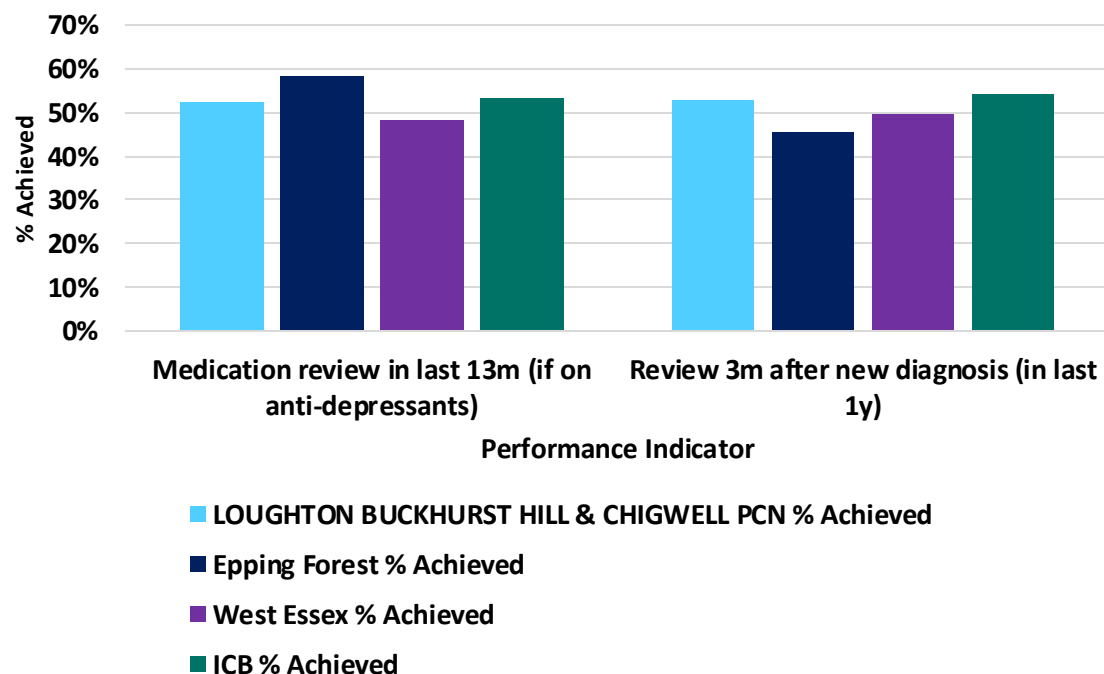




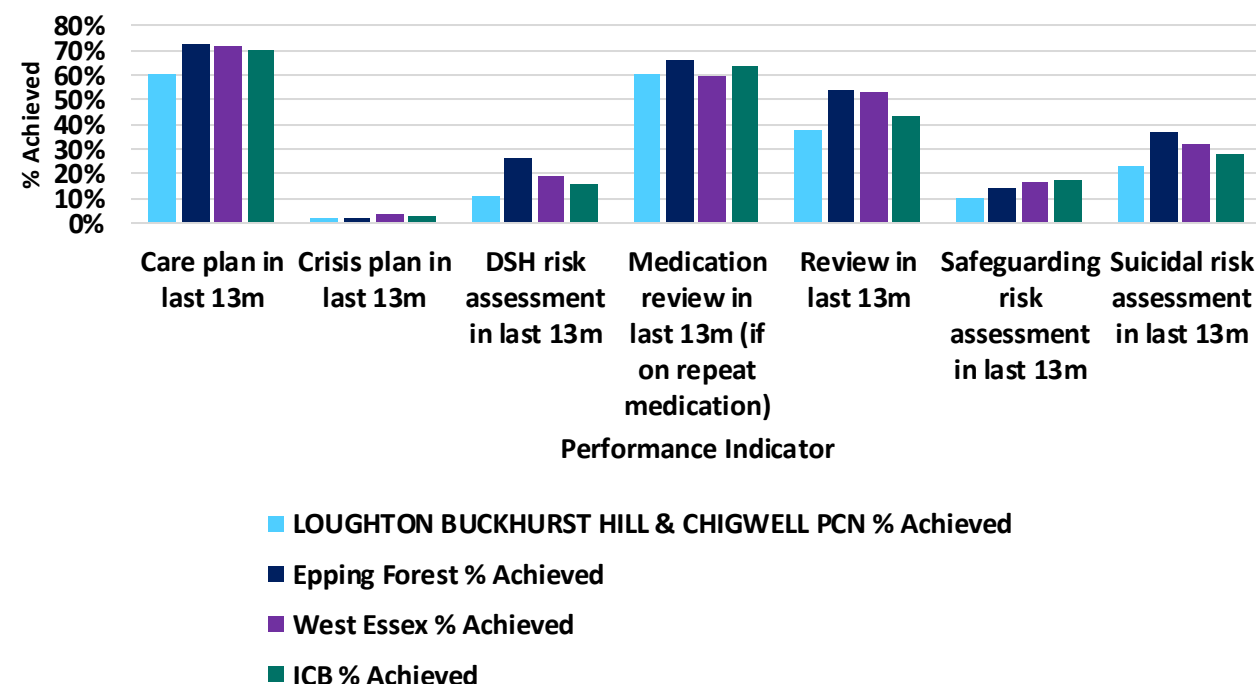
SMI and Depression: Key process indicators

- In the past year, Loughton, Buckhurst Hill & Chigwell PCN recorded the highest rate of depression reviews conducted three months after diagnosis, compared to WE and the ICB.
- Loughton, Buckhurst Hill & Chigwell PCN is achieving slightly lower with all key process indicators for SMI patients in comparison to WE and the ICB. All other reviews can be found in [Ardens Manager](#).

Condition Key Process Indicators for Depression, Achieved Percentages



Condition Key Process Indicators for Severe Mental Illness, Achieved Percentages



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Source: [Ardens Manager](#)



Learning Disability: ECF indicators

- The data shows that Loughton, Buckhurst Hill & Chigwell PCN has a higher percentage for most of the learning disability ECF indicators when compared against WE and the ICB.
- However, the PCN percentage for the proportion of people with a learning disability who have had reasonable adjustments recorded or reviewed is above WE.
- The data in the table below covers the period from April 2024 to March 2025. The most current information is available at [Ardens Manager](#).

	Learning Disability						
	Review			Local		Review	
	Action plan done or declined (if LD + >=14y)	Annual health check done or declined (if LD + >=14y)	BP done or exception + >=14y	Communication needs + reasonable adjustments recorded (if LD or Autism + >=14y)	Communication status + reasonable adjustments recorded (if LD + >=14y)	Health check done (or declined) + action plan done (or declined) (if LD + >=14y)	Reasonable Adjustments: recorded or reviewed
ICB	47.9%	48.8%	18.9%	11.8%	13.8%	47.6%	4.5%
West Essex WE	48.4%	49.1%	18.7%	8.4%	11.4%	47.7%	3.4%
Epping Forest Locality	49.4%	50.3%	21.7%	7.6%	11.6%	49.1%	4.9%
Loughton Buckhurst Hill & Chigwell PCN	49.0%	49.9%	20.3%	8.3%	13.5%	48.5%	4.5%
LOUGHTON BUCKHURST HILL & CHIGWELL PCN	50.0%	50.8%	23.4%	6.8%	9.5%	49.7%	5.3%



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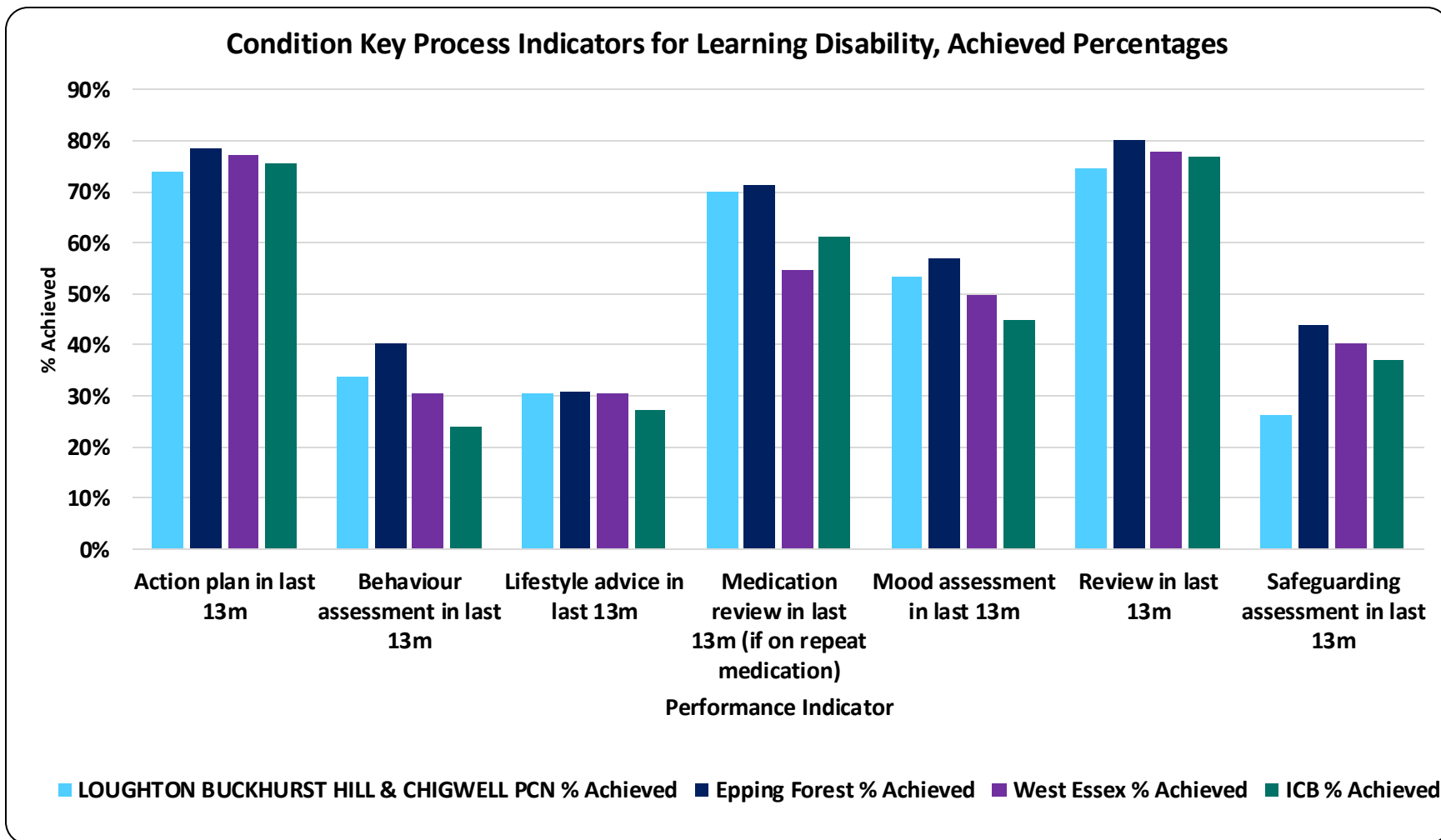


Source: [Ardens Manager](#)



Learning Disability: Key process indicators

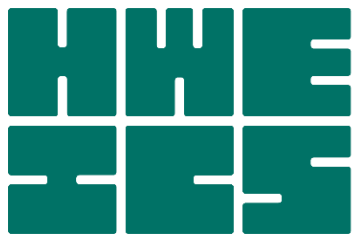
- Loughton, Buckhurst Hill & Chigwell PCN is achieving lower percentage completeness against WE and the ICB in all key learning disability processes.
- All other reviews can be found in [Ardens Manager](#).



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Source: [Ardens Manager](#)



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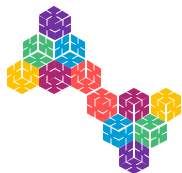


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Cancer and Planned Care Management and outcomes

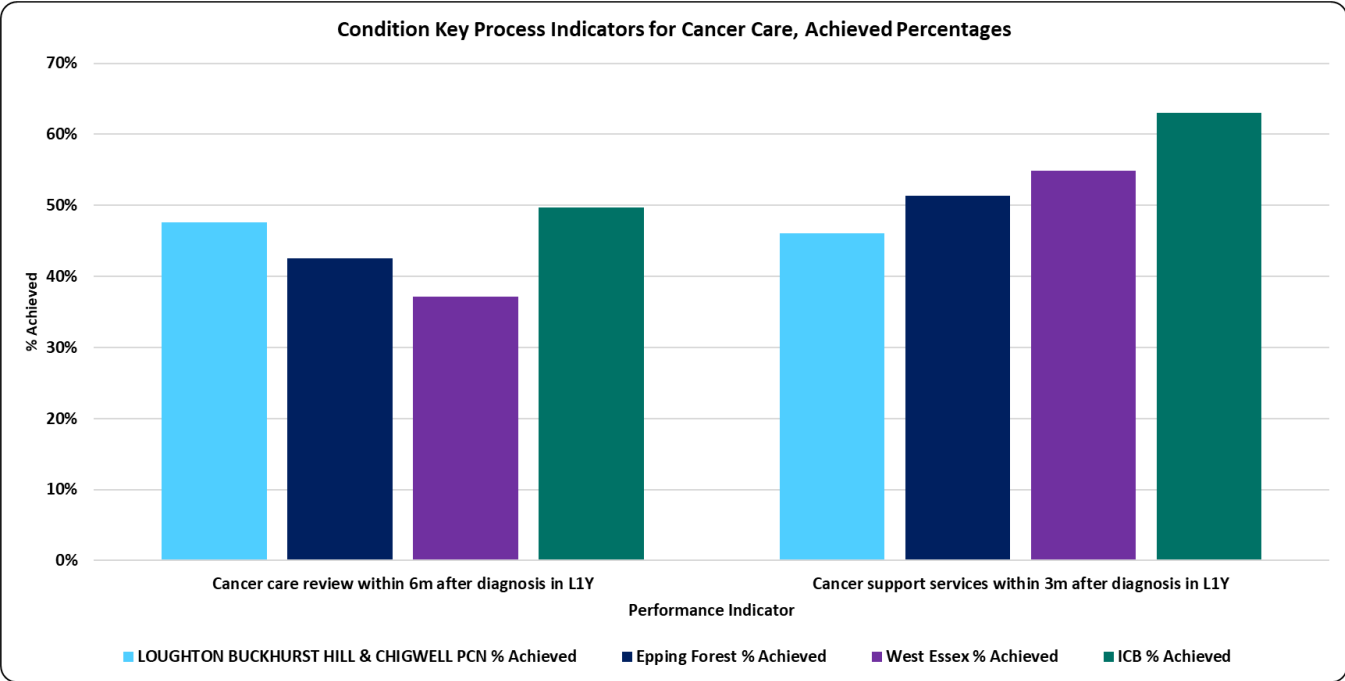
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Cancer: QOF and Key processes indicators

- The QOF data shows that Loughton Buckhurst Hill & Chigwell has a lower percentage when compared to the WE and the ICB for 2024/25.
- Loughton Buckhurst Hill & Chigwell 's cancer care processes are mixed against WE and lower than the ICB, which is opposite in screening of cancer.
- The latest position for this table below, can be found at [Ardens Manager](#).



	Cancer			
	Review			
	CAN004 CURRENT: Cancer care review within 12m of diagnosis (2024- 25)	CAN004 PROTECTED: Cancer care review within 12m of diagnosis (2023- 24)	CAN005 CURRENT: Support information given within 3m of diagnosis (2024-25)	CAN005 PROTECTED: Support information given within 3m of diagnosis (2023-24)
ICB	92.1%	94.9%	84.9%	87.8%
West Essex Place	88.2%	91.0%	78.7%	80.0%
Epping Forest Locality	83.8%	86.1%	70.0%	66.6%
EPPING FOREST NORTH PCN	88.5%	89.7%	76.6%	73.8%
LOUGHTON BUCKHURST HILL &	79.4%	81.6%	62.2%	58.3%



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Source: [Ardens Manager](#)



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Frailty and End of Life care Management and outcomes

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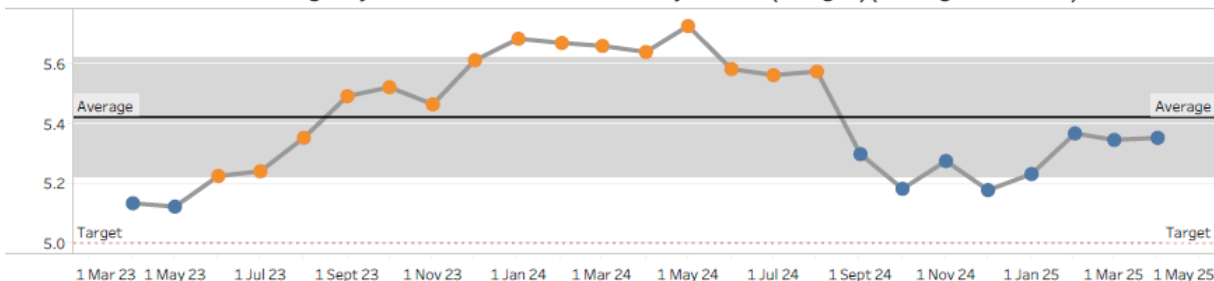


Frailty and EOL: Medium Term Plan Indicators

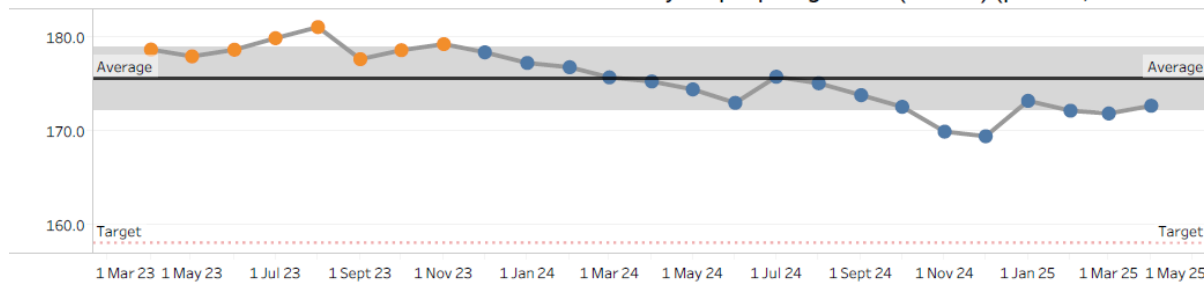
- The trend charts indicates the WE targets and what their current trajectory is for the relevant measure.
- PAH & ENHT have changed the way in which SDEC is being coded resulting in much lower emergency admissions counts from Nov-24 onwards. Measures which reference emergency admissions will show lower due to this coding change. This affects West Essex and East and North Herts and the ICB as a whole. Emergency admission data should be treated with caution

WE

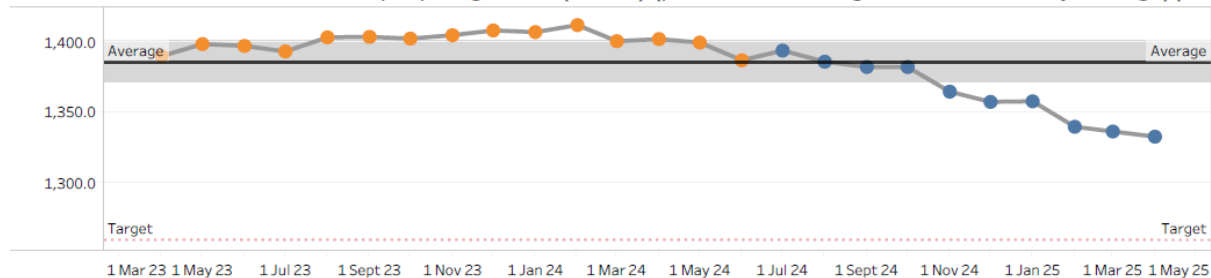
Deaths with 3 or more emergency admissions in the last 90 days of life (all ages)(Rolling 12 months)



Rate of non-elective admissions for falls within the community for people aged 65+ (LoS > 0) (per 100,000 Rolli..



Rate of non-elective admissions in people aged 65+ (LoS > 0) (per 100,000 rolling 12 month, monthly average)(C..



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Source: [DELPPHI - HWE Mid Term Plan Dashboard](#)



Frailty and EOL: Programme outcomes

- This data is for a rolling 12 months, and the percentage difference in red indicates that the current period, has deteriorated against the previous period.
- The 7 interventions dashboards has further detail of underlying metrics for community falls and FRAT scores completed. [7 interventions](#).
- Please use the following [link](#) for DELPPHI to review HWE, WE, PCN and GP practice measures, demographics and INT.

Loughton Buckhurst Hill & Chigwell

Measure Cat	Measure	Current Period	Previous Period	Difference	% Difference
Whole System	Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 65-120	159.6 19 / 11,431	176.0 21 / 11,161	-16.3	-9.3%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 65-120	£8,587k £1,073k / 11,431	£7,844k £965k / 11,161	£742,874	9.5%
Programme	Emergency Admissions, Stay Under 24 hours, DSR per 100,000, aged between 65-120	290.3 36 / 11,431	406.8 47 / 11,161	-116.5	-28.6%
	Emergency Admissions LoS >0, Moderate/ Severe Frail at Admission (GP SUBMITTING PRACTICES ONLY), DSR per 100,000, aged between 65-120	Suppressed due to small numbers			
	Emergency Admissions LoS >0, DSR per 100,000, aged between 65-120	1,065.8 130 / 11,431	1,133.7 138 / 11,161	-67.9	-6.0%
	Emergency Admissions LoS >0, Falls Within the Community, DSR per 100,000, aged between 65-120	162.3 20 / 11,431	163.9 20 / 11,161	-1.6	-1.0%
	Percentage of Mortality, 3 or More Emergency Admissions in Last 90 Days Of Life, Percentage of All Deaths Over 28 Days, aged between 65-120	Suppressed due to small numbers			
Workstream	Emergency Admissions LoS >0, Hip Fractures, DSR per 100,000, aged between 65-120	Suppressed due to small numbers			
	Percentage of Emergency Admissions LoS >0, Falls Within the Community, Discharge to Usual Place of Residence, aged between 65-120	80.0% 16 / 20	70.0% 14 / 20	10.0%	14.3%
	Percentage of Emergency Admissions LoS >0, EM Pathways, Readmissions within 7 Days, aged between 65-120	Suppressed due to small numbers			
	Percentage of Emergency Admissions LoS >0, EM Pathways, Readmissions within 30 Days, aged between 65-120	Suppressed due to small numbers			



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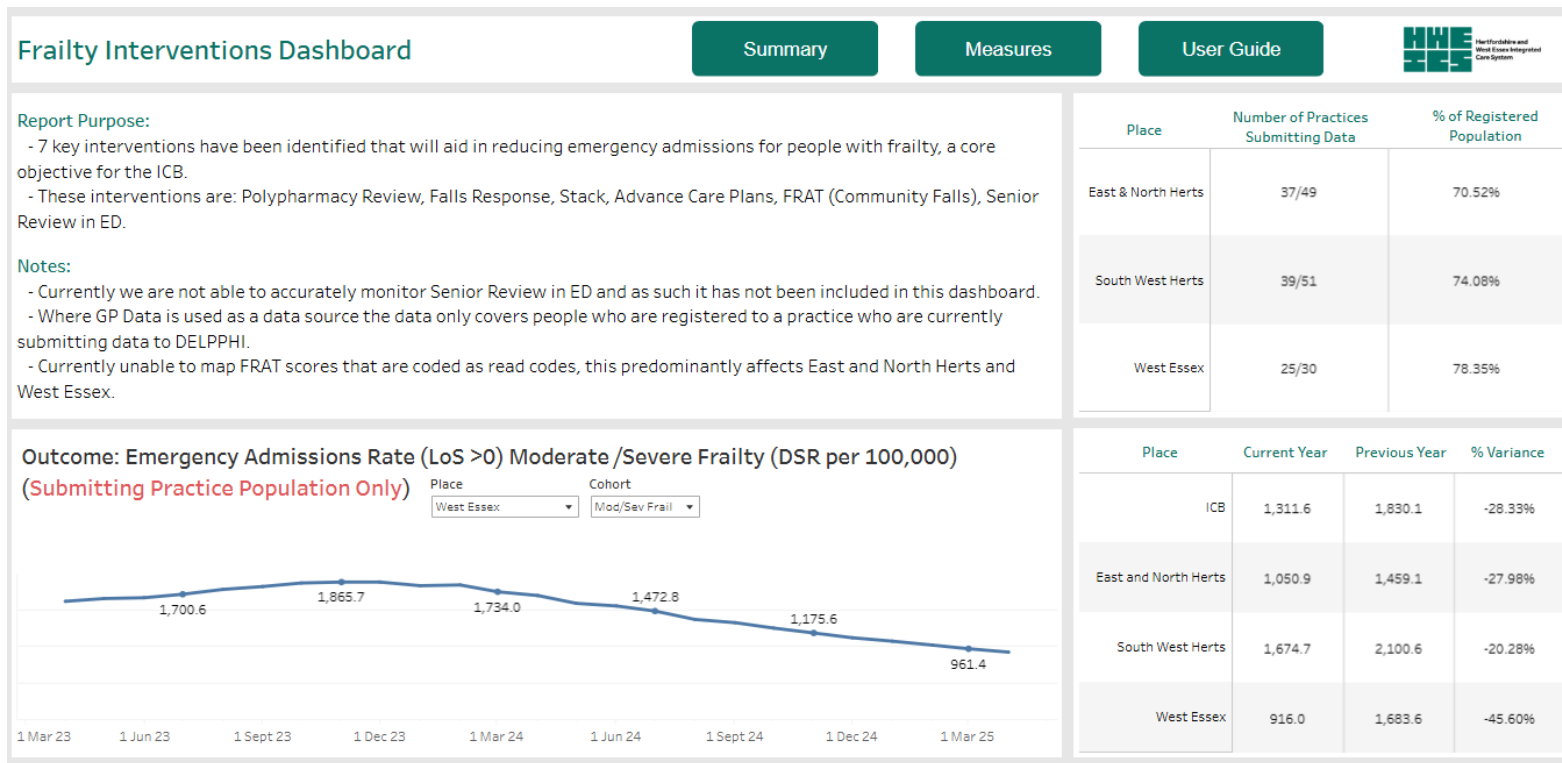


Source: [DELPPHI - HWE Outcomes Dashboard](#)



Frailty and EOL: Indicators from the 7 interventions dashboard

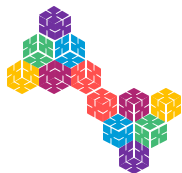
- This dashboard has been designed in DELPPHI to support 7 interventions that have been identified in aiding in the reduction of Emergency admissions for people with frailty.
- The dashboard is currently available by ICB and Place.
- Emergency Admission rate for people identified with moderate/ severe frailty (from the primary care record) has seen a decrease over the last 2 years
- To gain maximum benefit from this dashboard, please click on this [link](#).



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Source: [DELPPHI - Frailty Intervention Dashboard](#)



Frailty and EOL: ECF indicators

- The data shows that Loughton Buckhurst Hill & Chigwell has a higher percentage for most EOL and Frailty indicators, when compared to the WE and the ICB for 2024/25.
- The latest position for this table below, can be found at [Ardens Manager](#).

	End of Life								Frailty						
	Review								Review						
	ACP shared	ACP, ReSPECT or EOL care plan done or declined	Anticipatory medicines issued (or exception) (if GSF red/yellow)	GSF prognostic indicator recorded	Preferred place of care recorded	Preferred place of care, death and resus stated recorded	Preferred place of death recorded	Resus status recorded (or currently DNACPR)	Carer status recorded (if moderate/se vere frailty)	Depression screening done (if moderate/se vere frailty)	Frailty status recorded (if moderate/se vere frailty)	Loneliness assessment done (if moderate/se vere frailty)	Mod/Sev + carer status recorded (excl care home + GSF red)	Mod/Sev + falls FRAT score done	Mod/Sev + falls FRAT score done (excl care home + GSF red)
ICB	1.5%	40.1%	61.3%	49.0%	69.4%	14.1%	67.4%	74.1%	67.8%	33.8%	77.0%	61.5%	13.9%	64.8%	12.2%
West Essex Place	2.7%	33.4%	62.1%	49.3%	68.1%	12.9%	66.4%	70.9%	68.7%	48.1%	72.6%	61.8%	10.5%	64.5%	10.8%
Epping Forest Locality	0.0%	32.0%	58.0%	53.9%	65.7%	11.2%	63.0%	70.3%	69.5%	51.0%	77.3%	63.1%	8.4%	65.4%	8.2%
EPPING FOREST NORTH PCN	0.0%	25.9%	48.1%	56.0%	55.5%	12.2%	54.1%	61.3%	64.9%	53.9%	73.9%	58.0%	8.4%	61.2%	8.1%
LOUGHTON BUCKHURST HILL &	0.0%	36.7%	67.9%	52.4%	73.8%	10.5%	70.1%	77.5%	78.5%	45.3%	83.8%	72.9%	8.3%	73.4%	8.3%



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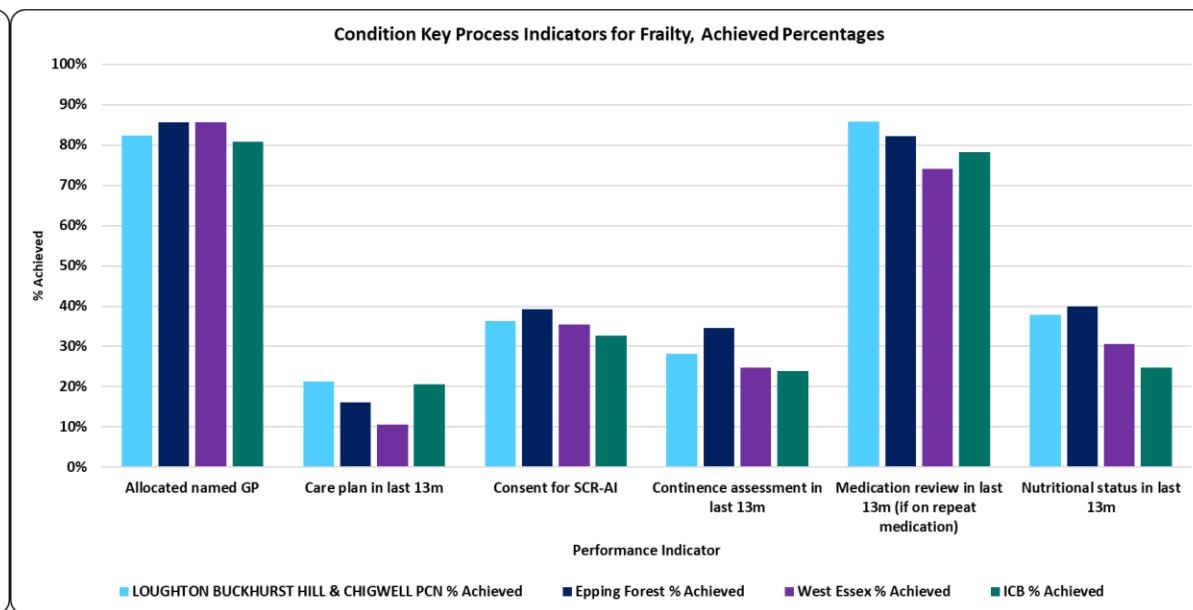
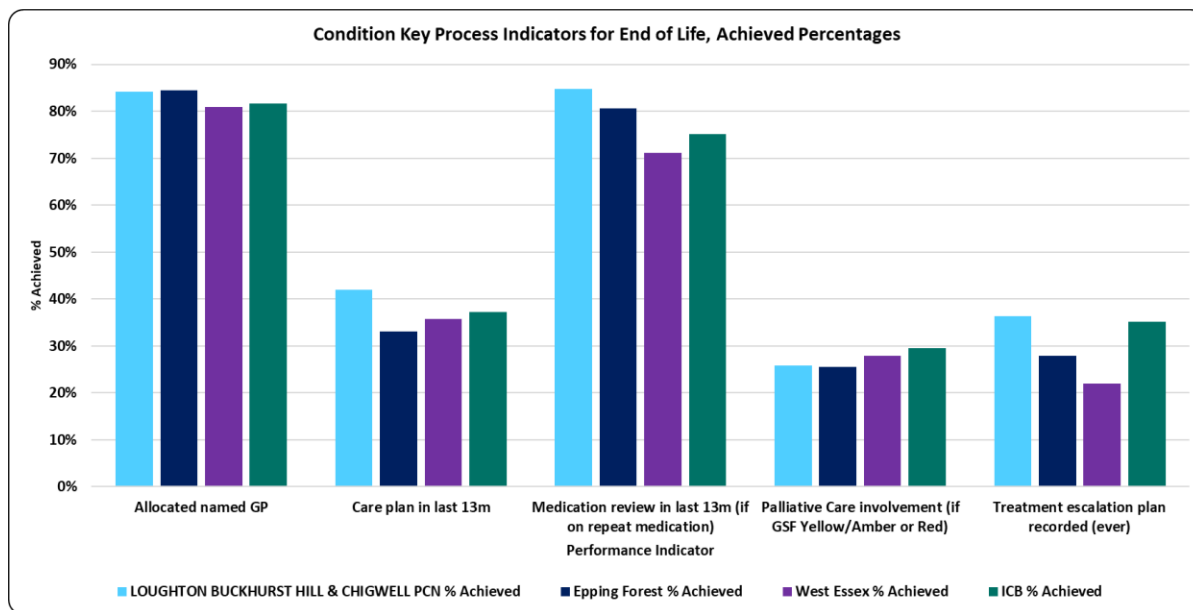


Source: [Ardens Manager](#)



Frailty and EOL: Key processes indicators

- Loughton Buckhurst Hill & Chigwell has opportunities to increase the number of recorded care plan reviews for both Frailty and EoL, as well as other areas.
- Arden's searches are available to practices to identify those people on frailty and EOL register and what processes have and still need to be completed.



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Source: [Ardens Manager](#)



Dementia: Programme outcomes

- HWE programme outcomes provide an opportunity for our ICB to focus on the end point health outcomes that best practice and evidenced interventions will deliver to improve the health of our population.
- The graph below illustrates a coreset of population health indicators from DELPPHI which have been broken down at PCN level to provide assurance that activities are delivering the required impact.
- Mortality from dementia and Alzheimer's disease has decreased compared to the previous period.

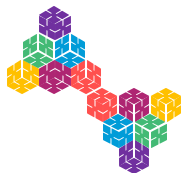
		Current Period	Previous Period	Difference	% Difference
Measure Cat	Measure				
Whole System	Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 0-120	38.5 24 / 64,518	44.0 27 / 63,363	-5.5	-12.6%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£2,426k £1,566k / 64,518	£2,386k £1,519k / 63,363	£40,345	1.7%
Programme	Mortality, Suicide, DSR per 100,000, aged between 10-120	Supressed due to small numbers			
	Emergency Admissions, Intentional Self-Harm, DSR per 100,000, aged between 0-120	Supressed due to small numbers			
Workstream	Mortality, Dementia / Alzheimer'S Disease, DSR per 100,000, aged between 0-120	Supressed due to small numbers			



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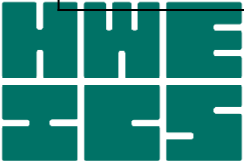
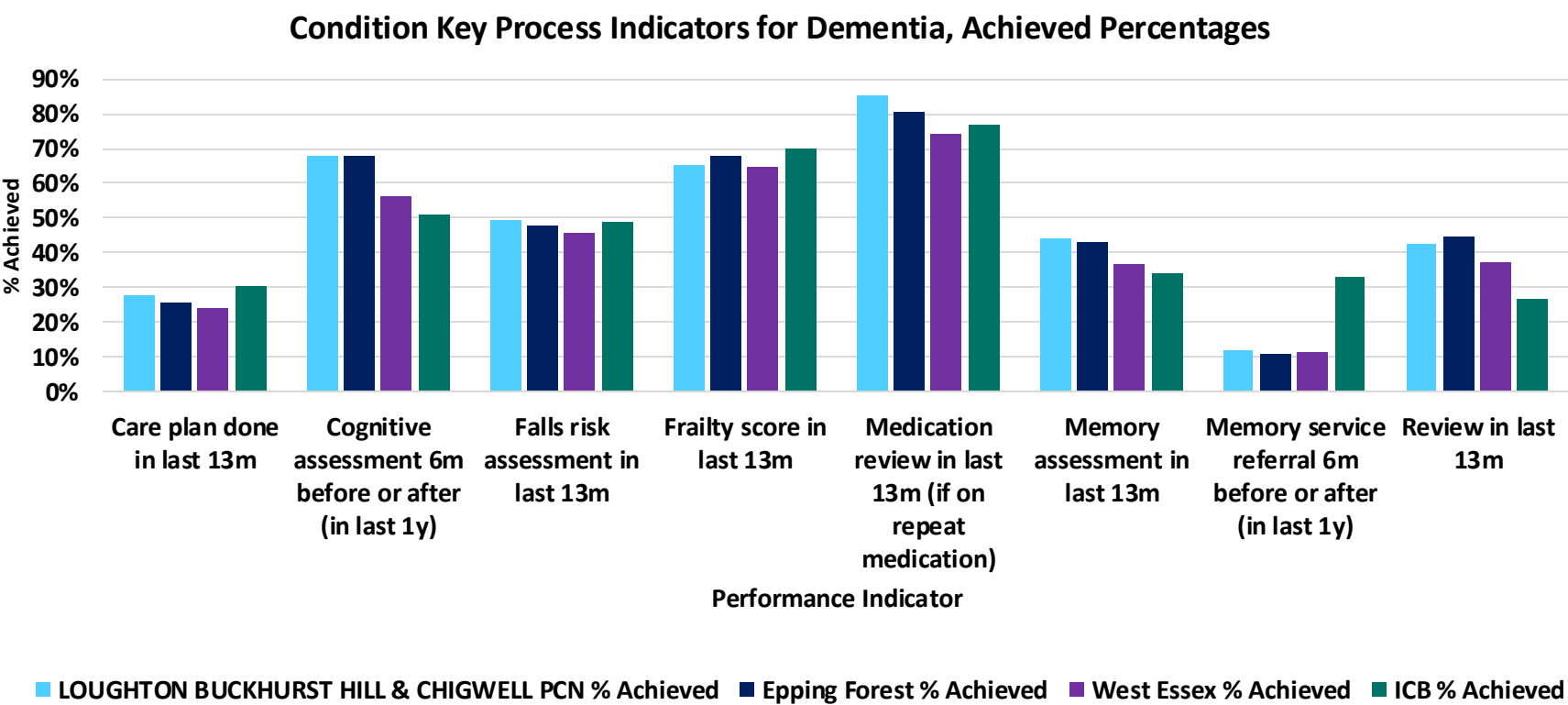
Source: [DELPPHI - HWE Outcomes Dashboard](#)



Dementia: QOF and key process indicators

- Dementia QOF metrics for 2024-25 show that Loughton, Buckhurst Hill & Chigwell PCN has a higher percentage of achievement levels for Care plans reviewed in the last 12 months when compared with ICB and WE.
- Within this there is variation between the PCNs. The individual practices can be viewed within the QOF data. Arden's searches are available to practices to identify those people with dementia without a care plan.

	Dementia
	Review
	DEM004: Care plan reviewed in last 12m
ICB	80.8%
West Essex WE	78.5%
Epping Forest Locality	77.1%
Loughton Buckhurst Hill & Chigwell PCN	73.0%
LOUGHTON BUCKHURST HILL & CHIGWELL PCN	82.3%



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Other key outcomes

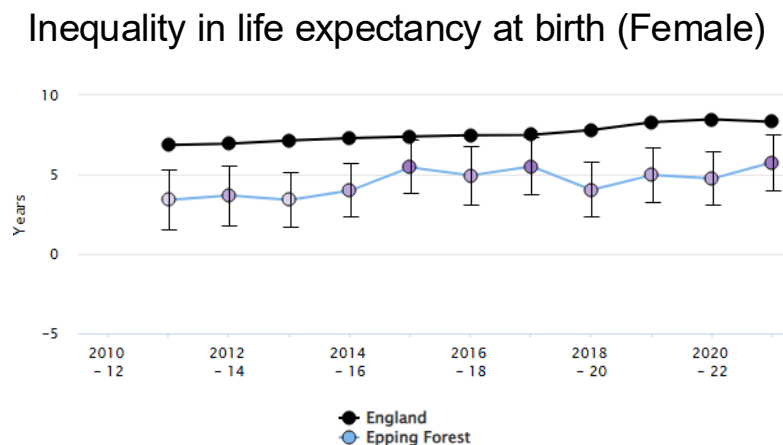
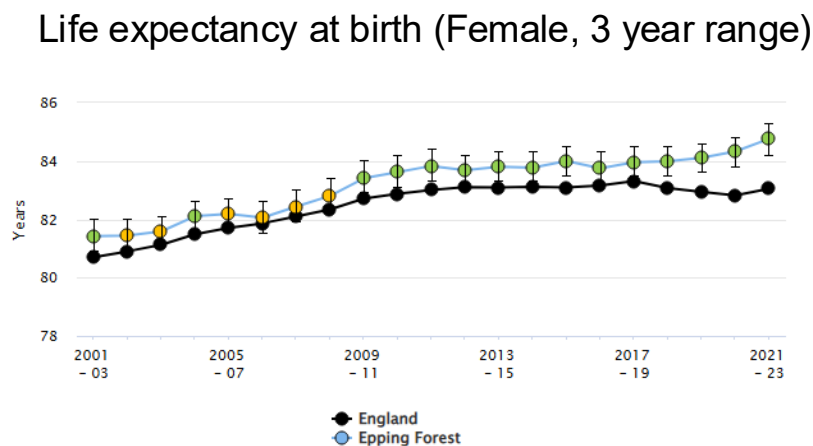
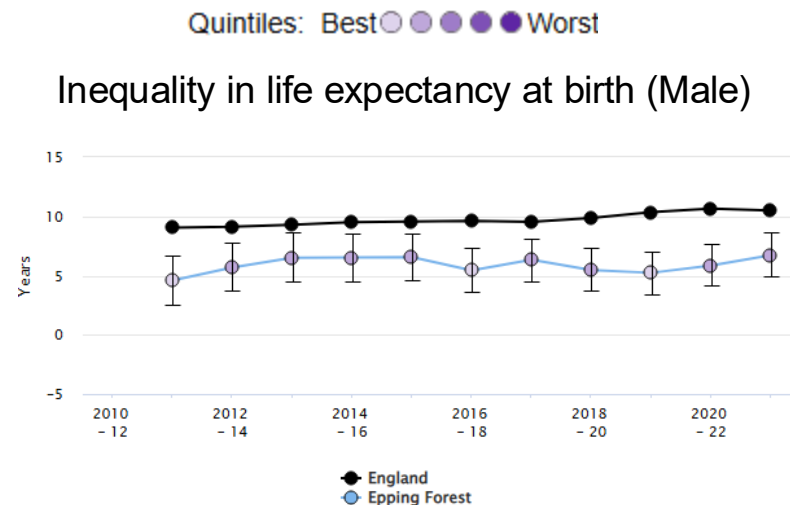
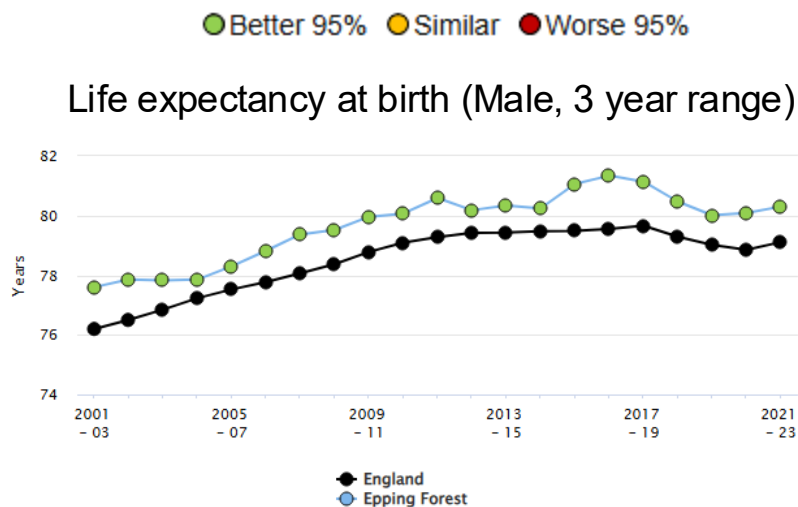
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Life Expectancy and Inequality in Life Expectancy at Birth

- Epping Forest life expectancy for both male and female has remained consistently above EoE and England.
- Inequality of life expectancy for males is in the 2nd best quintile and female is in the middle quintile, for 2021-23 period. This illustrates that for males in the most deprived quintiles will live nearly 6.7 years less than the least deprived quintiles, in Epping Forest. For females, the gap is 5.8 years.



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Source: [Fingertips | Department of Health and Social Care](#)



Emergency Admission Rates for Ambulatory Care Sensitive Conditions (ACSC)

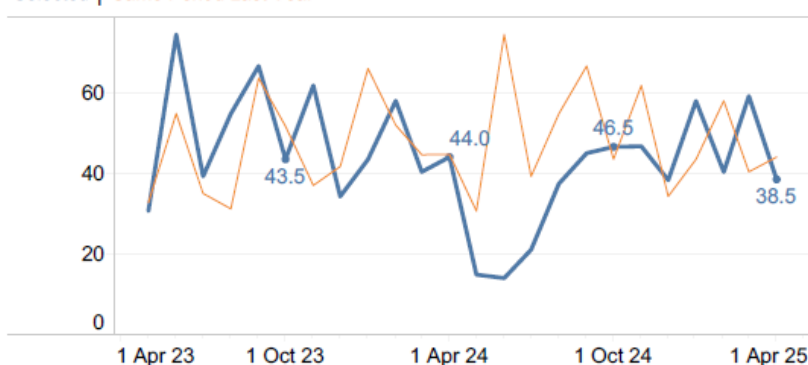
- For ACSC condition emergency admissions, the rate has declined over the last 3 years.
- Monthly analysis indicates that current period and same period last year seems to be out of sync. The current month's rate in below WE.
- The list of Chronic Ambulatory Care Sensitive Conditions can be found via the [NHS Outcomes Framework Indicators](#) and Indicator Specification as found through the link [here](#).
- Please use the following [link](#) for DELPPHI to review HWE, WE, PCN and GP practice measures, demographics and INT.

Loughton Buckhurst Hill & Chigwell

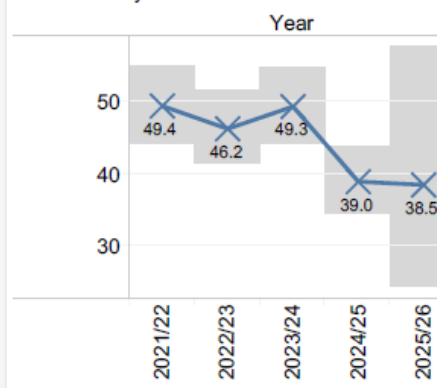
Measure Cat	Measure	Current Period	Previous Period	Difference	% Difference
Whole System	Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 0-120	38.5 24 / 64,518	44.0 27 / 63,363	-5.5	-12.6%

Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 0-120

Monthly Analysis
Selected | Same Period Last Year



Annual Analysis



Place Summary

YTD | Same Period Last Year | 95% Confidence Interval



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Source: [DELPPHI - HWE Outcomes Dashboard](#)



Total cost of Emergency hospital care for Loughton Buckhurst Hill & Chigwell

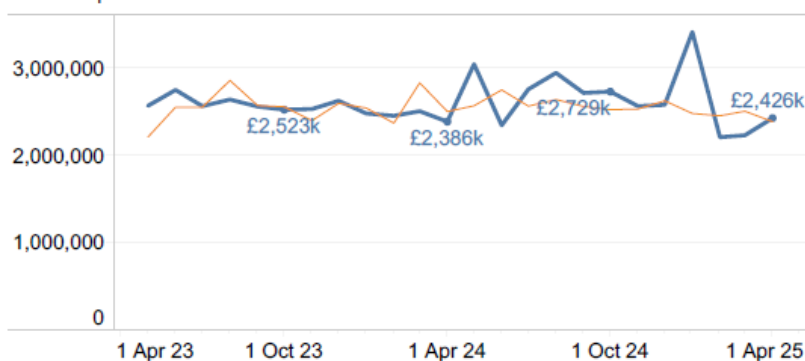
- The PCN total cost for emergency hospital care has increased in the preceding 4 years but in the current year it is decreasing, in line with decreased demand for emergency care.
- Please use the following [link](#) for DELPPHI to review HWE, WE, PCN and GP practice measures, demographics and INT.
- PAH & ENHT have changed the way in which SDEC is being coded resulting in much lower emergency admissions counts from Nov-24 onwards. Measures which reference emergency admissions will show lower due to this coding change. This affects West Essex and East and North Herts and the ICB as a whole. Emergency admission data should be treated with caution

Measure..	Measure	Current Period	Previous Period	Difference	% Difference
Whole System	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£2,426k £1,566k / 64,518	£2,386k £1,519k / 63,363	£40,345	1.7%

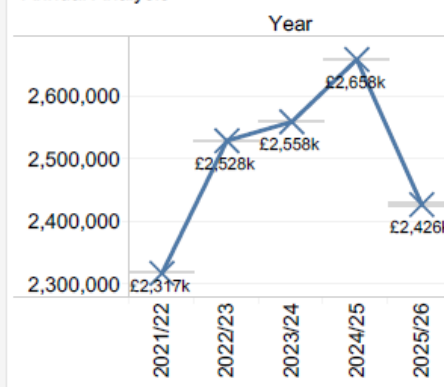
Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120

Monthly Analysis

Selected | Same Period Last Year

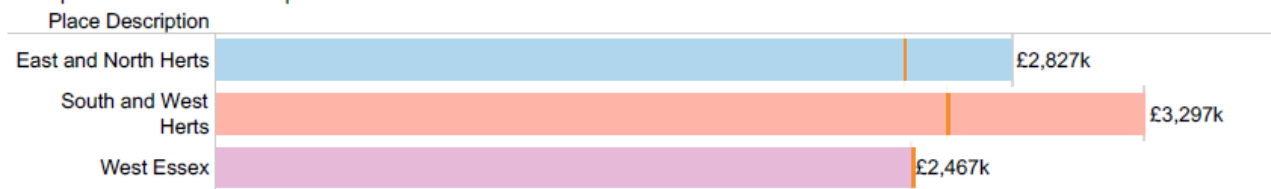


Annual Analysis



Place Summary

YTD | Same Period Last Year | 95% Confidence Interval



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Source: [DELPPHI - HWE Outcomes Dashboard](#)



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Glossary

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Glossary

Segmentation Model

- Our segmentation model combines primary and acute care data with wider determinants and community, mental health and social care data where available. The segmentation model provides the foundations for advanced population health management analytics that goes beyond patient level risk stratification.
- The ICB Segmentation model is based on patient data flowing from GP practices that have agreed to share their data with the ICB, at the time of this Pack production currently 72.8% of total ICB GP data is available, therefore any Segmentation data shown is likely to possibly change the percentages in all segments. Coding is also an important factor to ensure data quality and consistency.

Coding

- As with all information reported in this pack, the quality of the reports is determined by the completeness and quality of data recording for example if codes are not completed then less patients will be identified with a particular condition.
- Long Term Conditions (LTC)
- Behavioural Risk Factors (BRF)



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Practices currently flowing data to DELPPHI as at 8th July 25

PCN	Practice Name	Flowing data
Loughton, Buckhurst Hill & Chigwell	Forest Practice	✓
	Kings Medical Centre	✓
	Loughton Health Centre	✓
	Palmerston Road Surgery	✓
	The Loughton Surgery	✓
	The River Surgery	✓
	Chigwell Medical Centre	✗

Source: [DELPPHI - HWE Outcomes Dashboard](#)