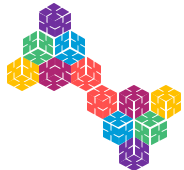# Hertfordshire and West Essex Neighbourhood Pack

North Hertfordshire

2025-2026
PHM Team

Working together
for a healthier future

Key messages

The North Hertfordshire population profile has a higher proportion of the population aged 65+ compared to East & North Hertfordshire and the ICB. The overall area profile is more affluent than the place profile with a lower proportion of the North Hertfordshire population living in the most deprived quintiles.

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 have shorter life expectancy. Further detail can be found in the [Overview of the Population](#)

The population of North Hertfordshire is growing alongside demographic shifts, with an ageing population that will grow more rapidly compared to the overall population.

North Hertfordshire data shows a higher prevalence of behavioural risk factors, including alcohol abuse, obesity, insufficient physical activity and smoking compared to ENH. Income deprivation affecting children index (IDACI) 2019, shows ENH at 12.4% and England at 17.1%. A lower percentage of children are living in income deprivation within North Hertfordshire (10.6%). Letchworth South East is shown as an area of high IDACI in North Hertfordshire.

Hertfordshire and West Essex Integrated Care System

Demographics, wider determinants and prevention

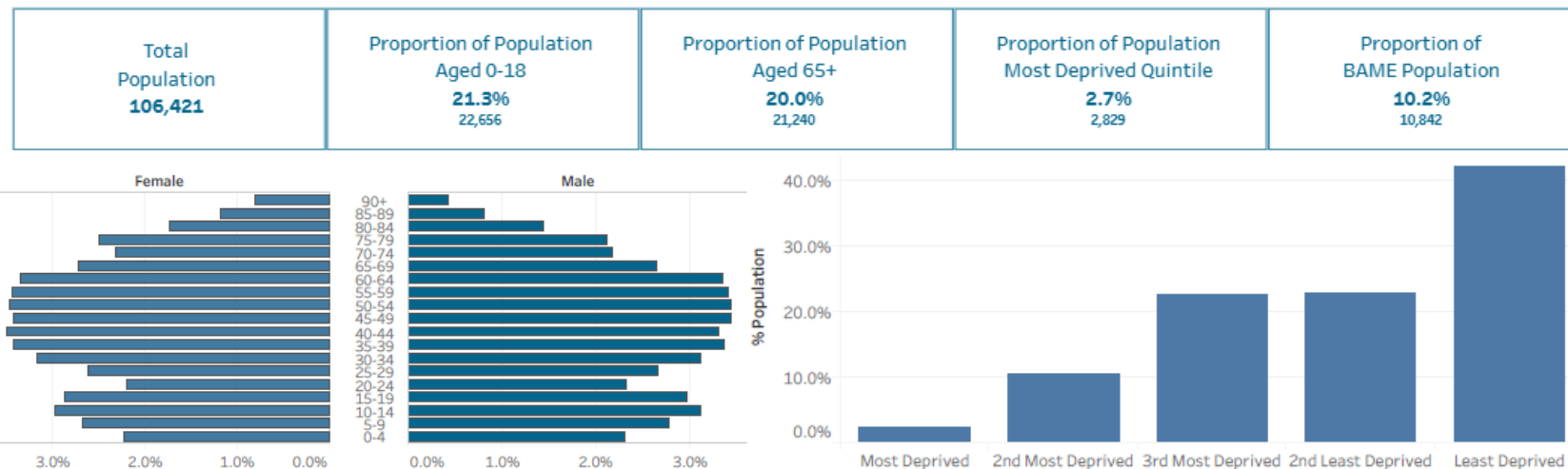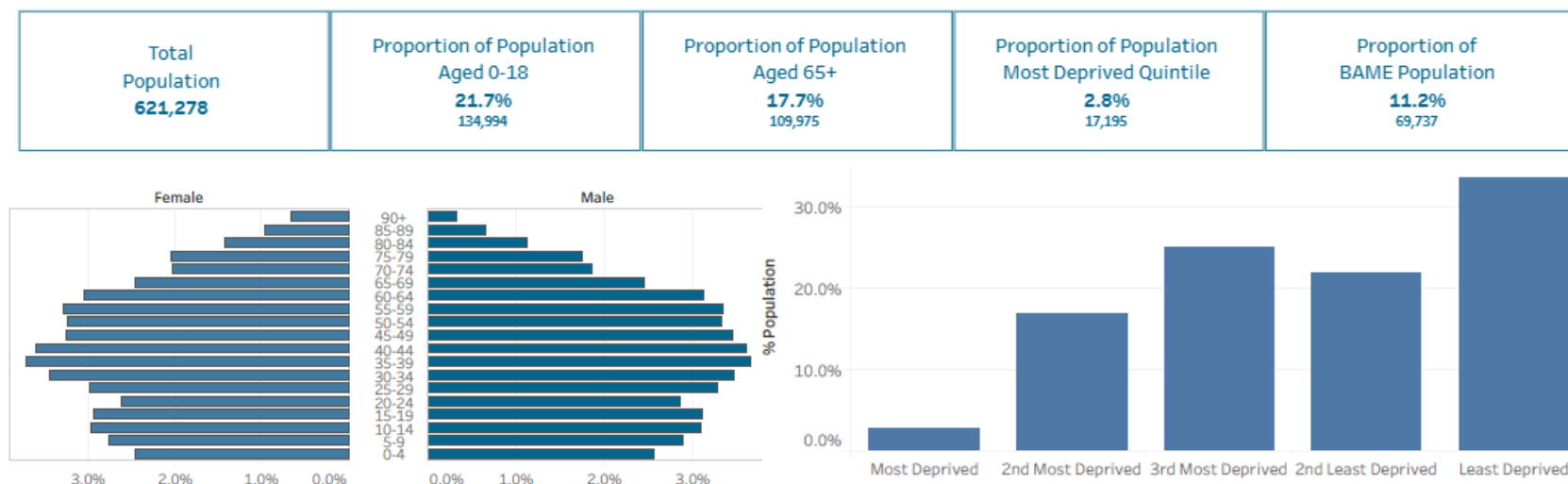**Working together**
for a healthier future

Population profile

- North Hertfordshire population profile shows a higher proportion of people over the age of 65 when compared with ENH place.

- A lower proportion of North Hertfordshire population lives in the 2 most deprived quintiles.

- 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.

North Hertfordshire

Total Population	Proportion of Population Aged 0-18	Proportion of Population Aged 65+	Proportion of Population Most Deprived Quintile	Proportion of BAME Population
106,421	**21.3%** 22,656	**20.0%** 21,240	**2.7%** 2,829	**10.2%** 10,842

ENH

| Total Population	Proportion of Population Aged 0-18	Proportion of Population Aged 65+	Proportion of Population Most Deprived Quintile	Proportion of BAME Population
621,278	**21.7%** 134,994	**17.7%** 109,975	**2.8%** 17,195	**11.2%** 69,737

Hertfordshire and West Essex Integrated Care System

Source: DELPPHI - Population Profile

Segmentation profile   Provisional Data

- The illustrations on the right shows the segmentation model for North Hertfordshire, ENH and the ICB. This is a snapshot from July 2025.

- North Hertfordshire's has a lower number of the population in the 'Generally Healthy' segment. This is linked to higher prevalence of Long-Term Conditions and an older population. 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

North Herts, ENH & ICB PHM Segmentation Profile
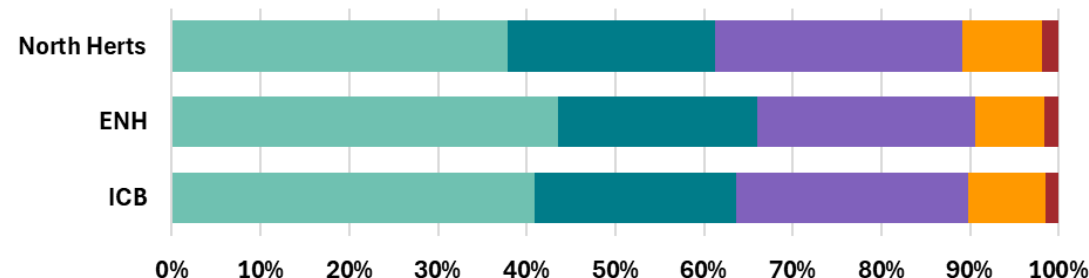
|	ICB	ENH	North Herts
1 - Generally Healthy	41.0%	43.6%	37.8%
2 - Living with Illness	22.7%	22.4%	23.5%
3 - Low Complexity	26.1%	24.5%	27.8%
4 - Advanced Disease & Complexity	8.8%	7.9%	9.0%
5 - EoL, Severe Frailty & Dementia	1.4%	1.6%	1.9%

Hertfordshire and West Essex Integrated Care System

Source: DELPPHI: HWE Segmentation model

Children and older people living in poverty

- Income Deprivation Affecting Children Index (IDACI) and Older people index (IDAOPI) 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 IDAOPI are illustrated on the maps. The darker the colour, the higher the level of deprivation.

Income Deprivation affecting children
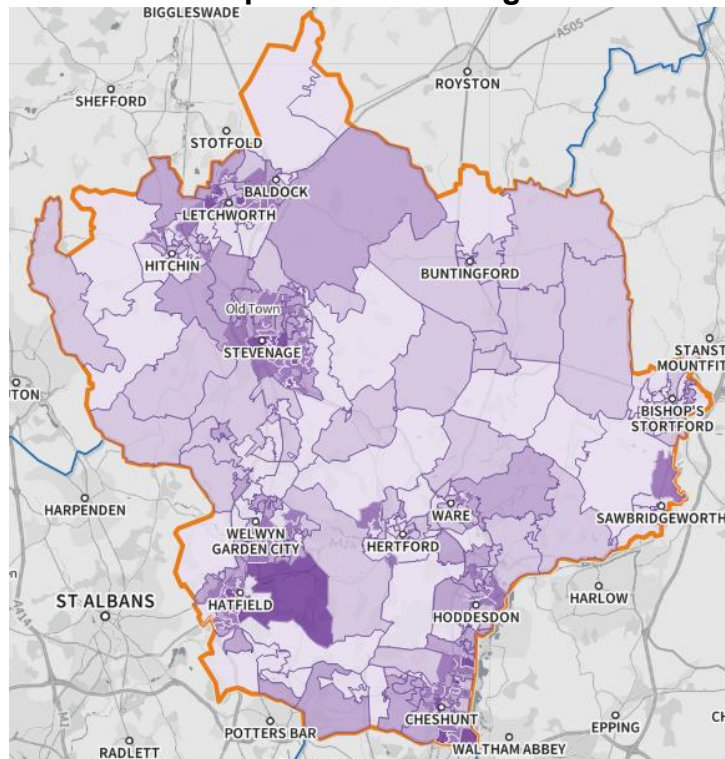
Income deprivation affecting children index (IDACI) 2019, shows ENH at 12.4% and England at 17.1%. The Fingertips localities within ENH, are Broxbourne (15.5%), East Hertfordshire (7.5%), Stevenage (17.3%), North Hertfordshire (10.6%) and Welwyn & Hatfield (13.3%). There are areas within these that have substantial deprivation, and can be identified using SHAPE.

Income deprivation affecting older people
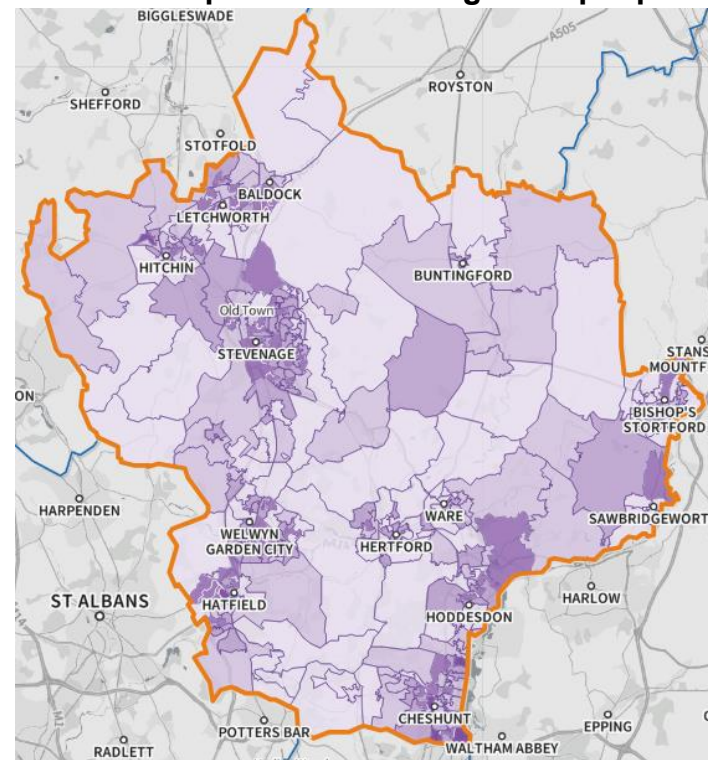
Income deprivation affecting older people index (IDAOPI) 2019, shows ENH at 10.4% and England at 14.2%. The Fingertips localities within ENH, are Broxbourne (12.3%), East Hertfordshire (8%), Stevenage (13.5%), North Hertfordshire (9.2%) and Welwyn & Hatfield (10.3%).

Hertfordshire and West Essex Integrated Care System
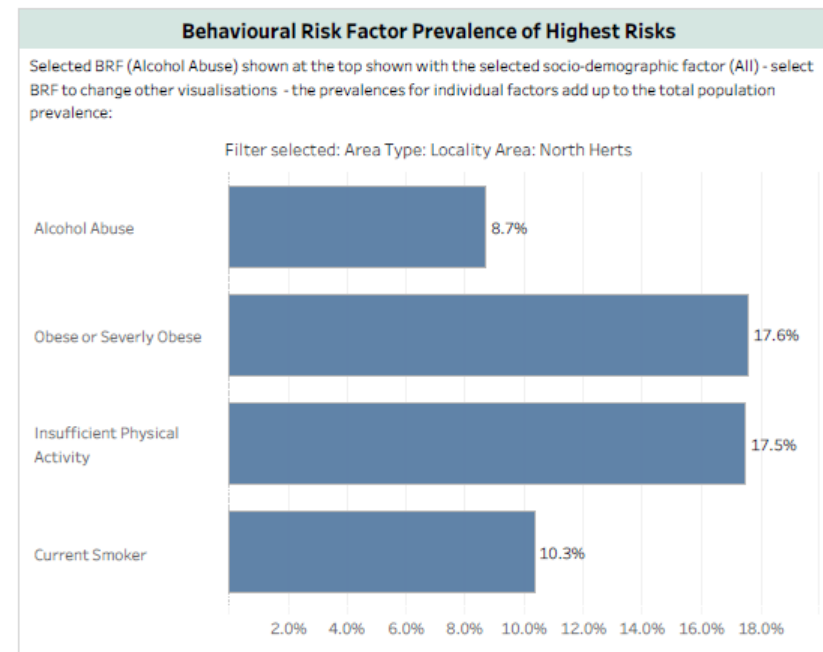
Behavioural risk factors

- North Hertfordshire data shows a higher proportion of alcohol abuse, obesity, insufficient physical activity and smoking compared to ENH. 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 contribute to a lower proportion of the population being classified as 'generally healthy' in the segmentation model compared to ENH, as these behaviours could lead to adverse health outcomes.

- Please use the following link for DELPPHI to review HWE, Place, 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.
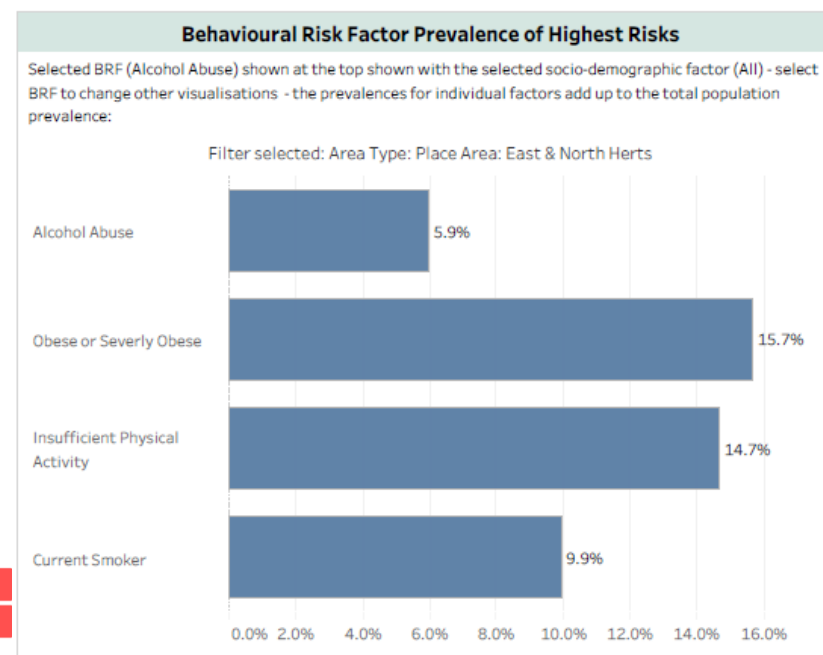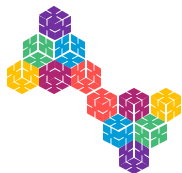
Hertfordshire and West Essex Integrated Care System

North Hertfordshire

Behavioural Risk Factor Prevalence of Highest Risks

Selected BRF (Alcohol Abuse) shown at the top shown with the selected socio-demographic factor (All) - select BRF to change other visualisations - the prevalences for individual factors add up to the total population prevalence:

Filter selected: Area Type: Locality Area: North Herts

Risk Factor	Prevalence
Alcohol Abuse	8.7%
Obese or Severly Obese	17.6%
Insufficient Physical Activity	17.5%
Current Smoker	10.3%

ENH

Behavioural Risk Factor Prevalence of Highest Risks

Selected BRF (Alcohol Abuse) shown at the top shown with the selected socio-demographic factor (All) - select BRF to change other visualisations - the prevalences for individual factors add up to the total population prevalence:

Filter selected: Area Type: Place Area: East & North Herts

Risk Factor	Prevalence
Alcohol Abuse	5.9%
Obese or Severly Obese	15.7%
Insufficient Physical Activity	14.7%
Current Smoker	9.9%

Source: DELPPHI - Population Profile

Immunisation

- North Hertfordshire's percentage of people immunised against Covid-19 is higher for doses received when comparing with ENH place and the ICB. The data shows for care home residents the percentage is lower than place and ICB.

- Seasonal influenza percentage achieved for all areas is above or similar to ENH and the ICB.

Condition Key Process Indicators for COVID-19, Achieved Percentages

Legend: North Herts % Achieved, E&N Herts % Achieved, ICB % Achieved
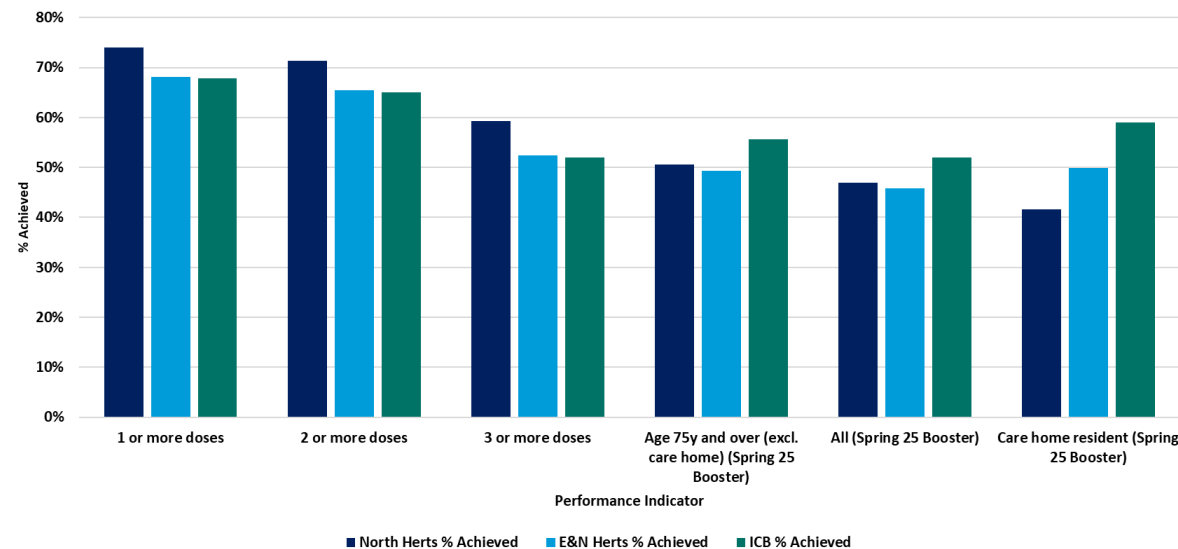
Condition Key Process Indicators for Seasonal Influenza, Achieved Percentages

Legend: North Herts % Achieved, E&N Herts % Achieved, ICB % Achieved
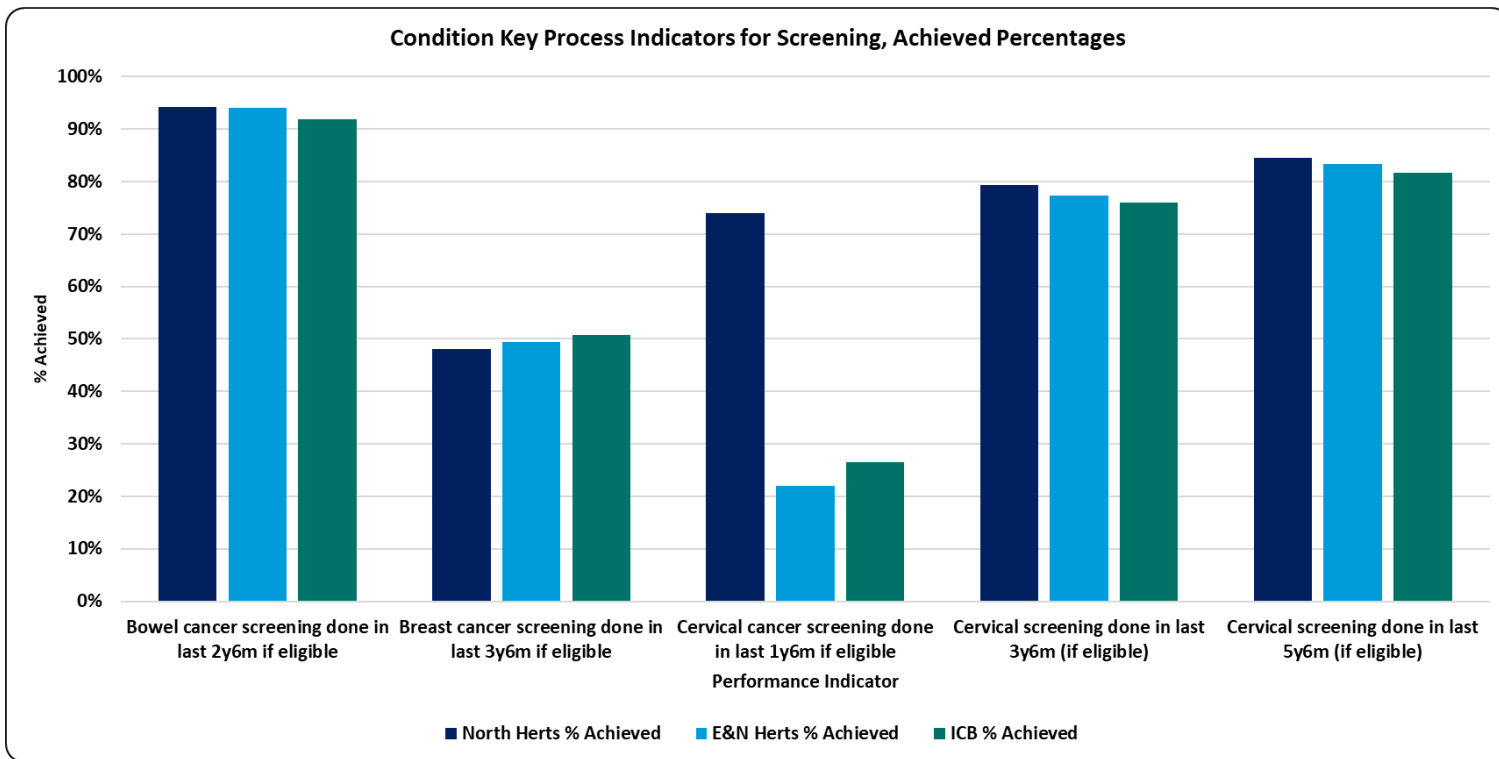
Source: Ardens Manager

Hertfordshire and West Essex Integrated Care System
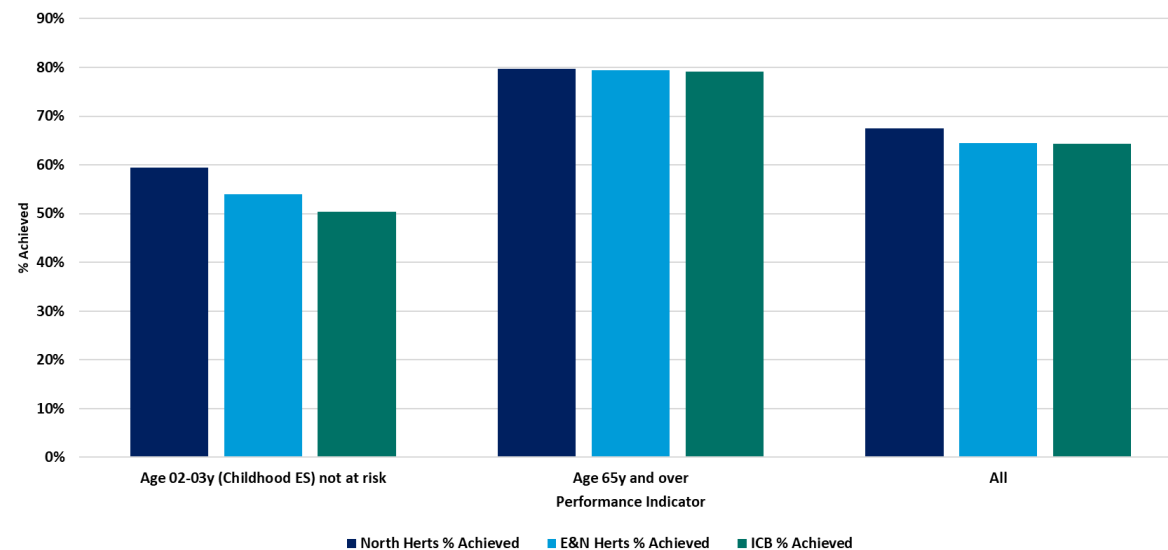
Screening

- 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.

- North Hertfordshire's percentage screening for most areas is similar or higher than ENH and the ICB.

Condition Key Process Indicators for Screening, Achieved Percentages

Legend: North Herts % Achieved, E&N Herts % Achieved, ICB % Achieved

Source: Ardens Manager

Prevalence of Disease Registers

North Hertfordshire

Long Term Condition Prevalence

Selected LTC (Asthma) shown at the top shown with the selected socio-demographic factor (All) - select LTC to change other visualisations - the prevalences for indvidual factors add up to the total population prevalence:

Filter selected: Area Type: Locality Area: North Herts

Condition	Prevalence
Asthma	6.3%
Atrial Fibrillation	2.5%
Cancer	4.4%
Chronic Kidney Disease	2.5%
COPD	1.7%
Coronary Heart Disease	2.7%
Dementia	1.0%
Diabetes	5.6%
Epilepsy	0.6%
Heart Failure	0.9%
History of Depression	10.7%
Hypertension	13.9%
Learning Disability	0.6%
Osteoporosis	0.2%
Palliative Care	1.0%
Peripheral Arterial Disease	0.4%
Rheumatoid Arthritis	0.6%
Serious Mental Illness	1.0%
Stroke & TIA	1.8%

ENH

Long Term Condition Prevalence

Selected LTC (Asthma) shown at the top shown with the selected socio-demographic factor (All) - select LTC to change other visualisations - the prevalences for indvidual factors add up to the total population prevalence:

Filter selected: Area Type: Place Area: East & North Herts

Condition	Prevalence
Asthma	5.6%
Atrial Fibrillation	2.2%
Cancer	4.1%
Chronic Kidney Disease	2.6%
COPD	1.5%
Coronary Heart Disease	2.5%
Dementia	0.7%
Diabetes	5.3%
Epilepsy	0.5%
Heart Failure	0.9%
History of Depression	10.9%
Hypertension	13.4%
Learning Disability	0.5%
Osteoporosis	0.3%
Palliative Care	0.8%
Peripheral Arterial Disease	0.4%
Rheumatoid Arthritis	0.6%
Serious Mental Illness	0.8%
Stroke & TIA	1.6%

- The above charts show that North Hertfordshire has higher recording across many long term conditions compared to ENH. 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 compare to HCP, Locality, PCN, GP practice and Local authority lower tier.

Hertfordshire and West Essex Integrated Care System
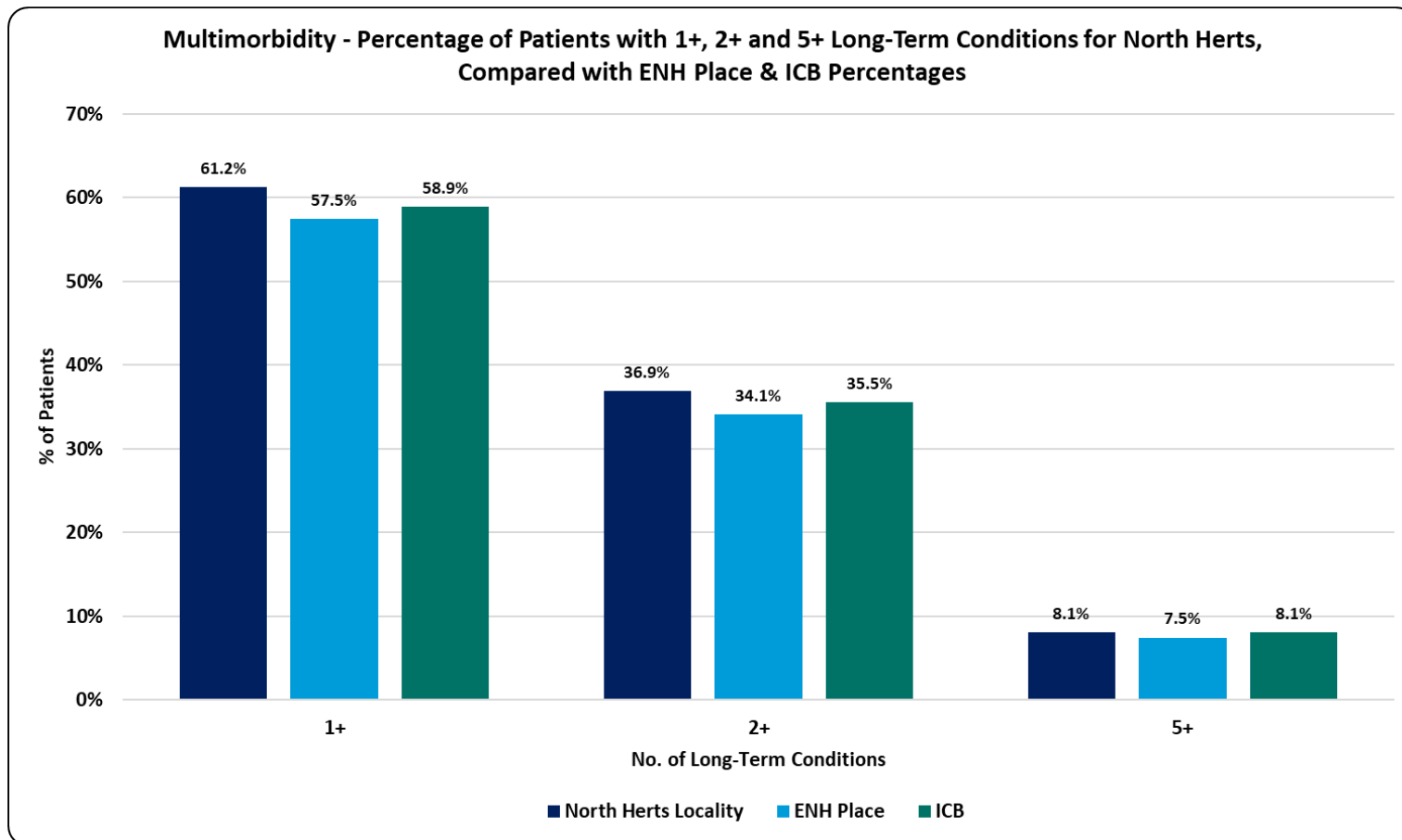
Source: DELPPHI - Population Profile

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 North Hertfordshire Locality, the prevalence for those with 2 or more LTCs is higher than both Place and the ICB.

- North Hertfordshire's segmentation profile, characterised by a higher proportion of the population with LTCs and BRFs, may be contributing to the higher proportions observed compared to ENH and the ICB.

Multimorbidity - Percentage of Patients with 1+, 2+ and 5+ Long-Term Conditions for North Herts, Compared with ENH Place & ICB Percentages

No. of Long-Term Conditions	North Herts Locality	ENH Place	ICB
1+	61.2%	57.5%	58.9%
2+	36.9%	34.1%	35.5%
5+	8.1%	7.5%	8.1%

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
  - Emergency admission rates
  - A&E attendance rates

- Recent data shows a slightly increasing trend in emergency admissions, whilst the A&E attendances trend is slightly decreasing.

- 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.

Community paediatric waits greater than 65 weeks (Not reported for WE)
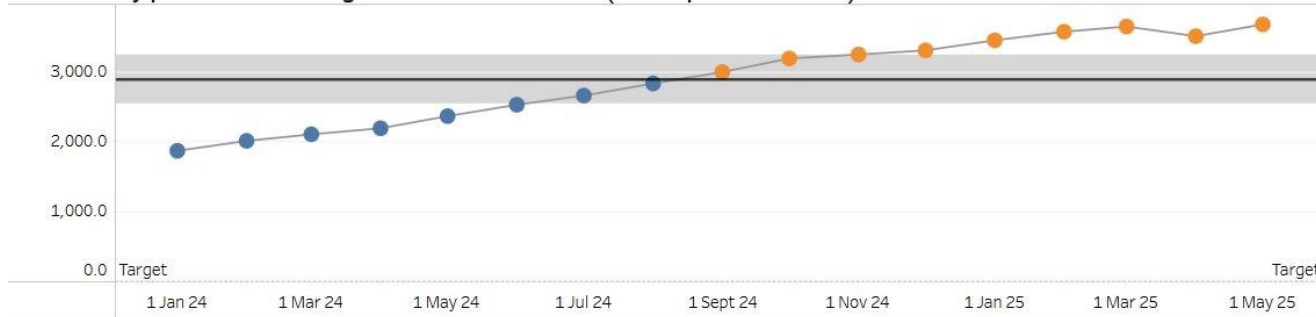
Emergency admission rate for children and young people (per 100,000 rolling 12 month, monthly average)
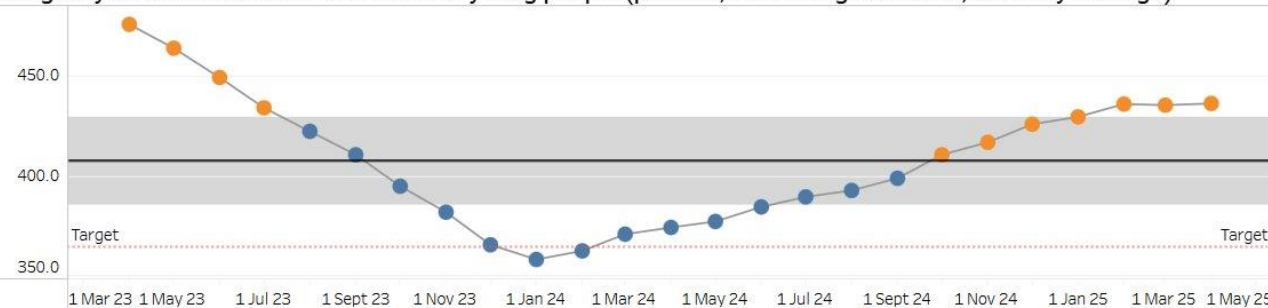
Rate of A&E Attendances for children and young people (per 100,000 rolling 12 month, monthly average)
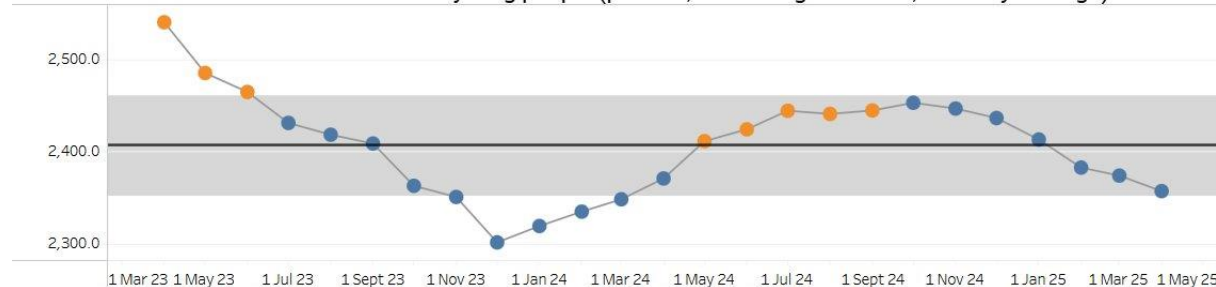
Hertfordshire and West Essex Integrated Care System

Source: DELPPHI - HWE Mid Term Plan Dashboard

Children and Young People: Programme outcomes

- HWE programme outcomes shows the end point health outcomes that we aim to improve for our population through delivering best practice and evidenced interventions.

- The table on the right shows CYP outcomes for North Hertfordshire Locality from the Outcomes Framework

- There has been a decrease in overall emergency admissions for 0–17-year-olds.

- However emergency admissions for 0–4-year-olds have increased.

| Measure Cat	Measure	Current Period	Previous Period	Difference	% Difference
Whole System	Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, Crude Rate per 100,000, aged between 0-18	Supressed due to small numbers			
	Total Cost of Emergency Hospital Care, Crude Rate per 100,000, aged between 0-18	£1,240k £286k / 23,061	£1,090k £251k / 23,117	£150,576	13.8%
Programme	Mortality, Crude Rate per 100,000, aged between 1-17	Supressed due to small numbers			
	Emergency Admissions, Intentional Self-Harm, DSR per 100,000, aged between 10-24				
	Emergency Admissions LoS >0, Crude Rate per 100,000, aged between 0-17	210.9 46 / 21,814	245.8 54 / 21,965	-35.0	-14.2%
Workstream	Emergency Admissions, DSR per 100,000, aged between 0-4	1,043.8 52 / 4,982	819.2 42 / 5,127	224.6	27.4%
	Emergency Admissions, Asthma Diabetes and Epilepsy, Crude Rate per 100,000, aged between 0-18	Supressed 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 North Hertfordshire and ENH for children and young people aged 0-19.

- Fewer medication reviews are recorded for Asthma, Diabetes, and Epilepsy in North Hertfordshire when compared to ENH Place.
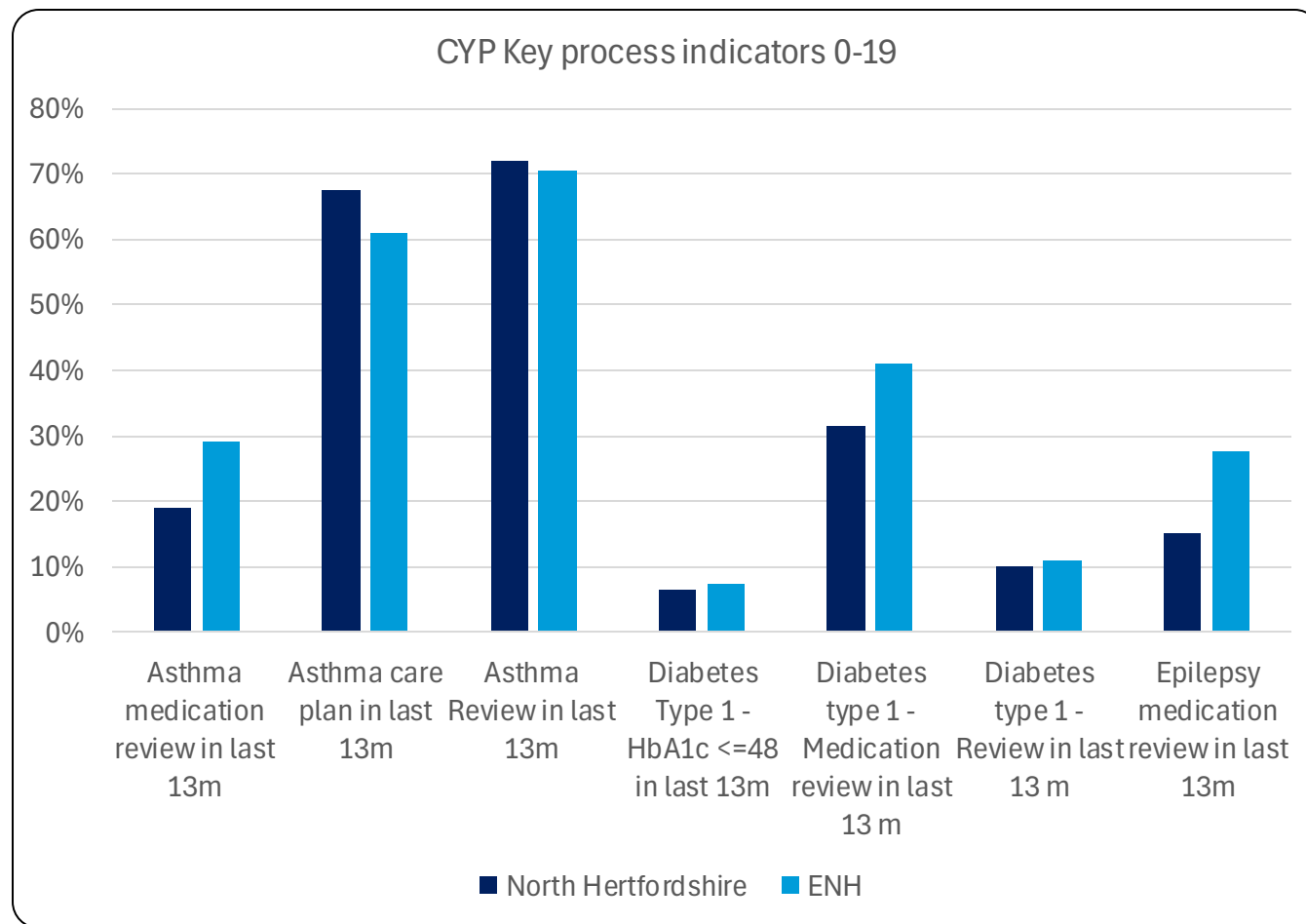
CYP Key process indicators 0-19

Legend: ■ North Hertfordshire ■ ENH

Hertfordshire and West Essex Integrated Care System

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/Place level.

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

- ENH 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 the latest data shows an increasing trend since December with the ENH recorded value comparable to the ICB rate.

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

ENH
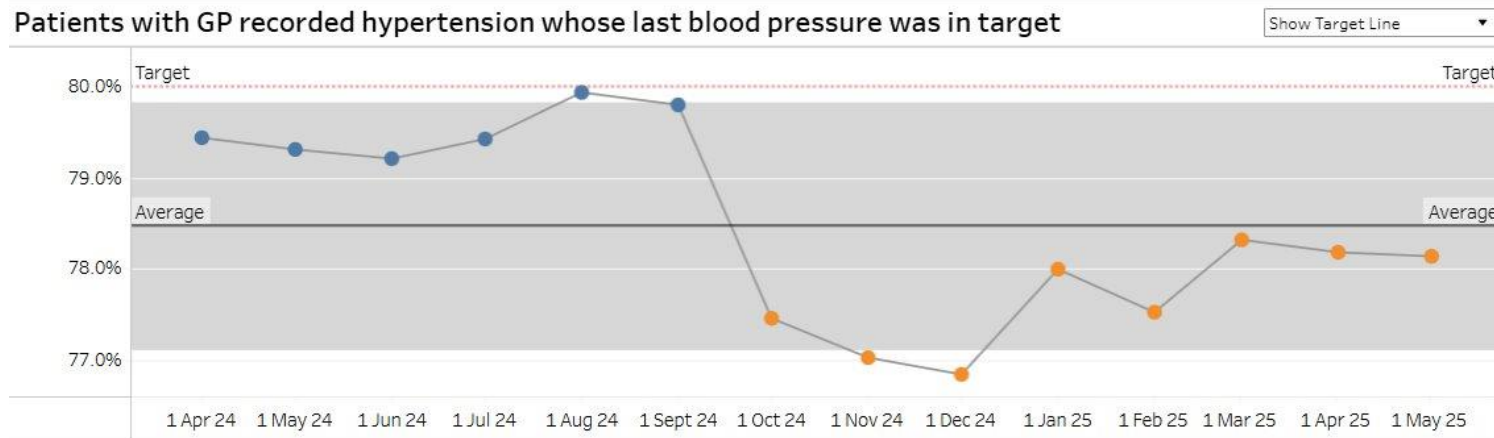
Hypertension: QOF Indicators

- Reviewing the percentage achieved for the locality from the 2024/25 QOF, we can see that:

  - North Hertfordshire locality is showing below the place 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%
E&N Herts Place	75.6%	83.7%
North Herts Locality	71.1%	80.3%
HITCHIN AND WHITWELL PCN	75.0%	80.5%
ICKNIELD PCN	68.1%	80.1%

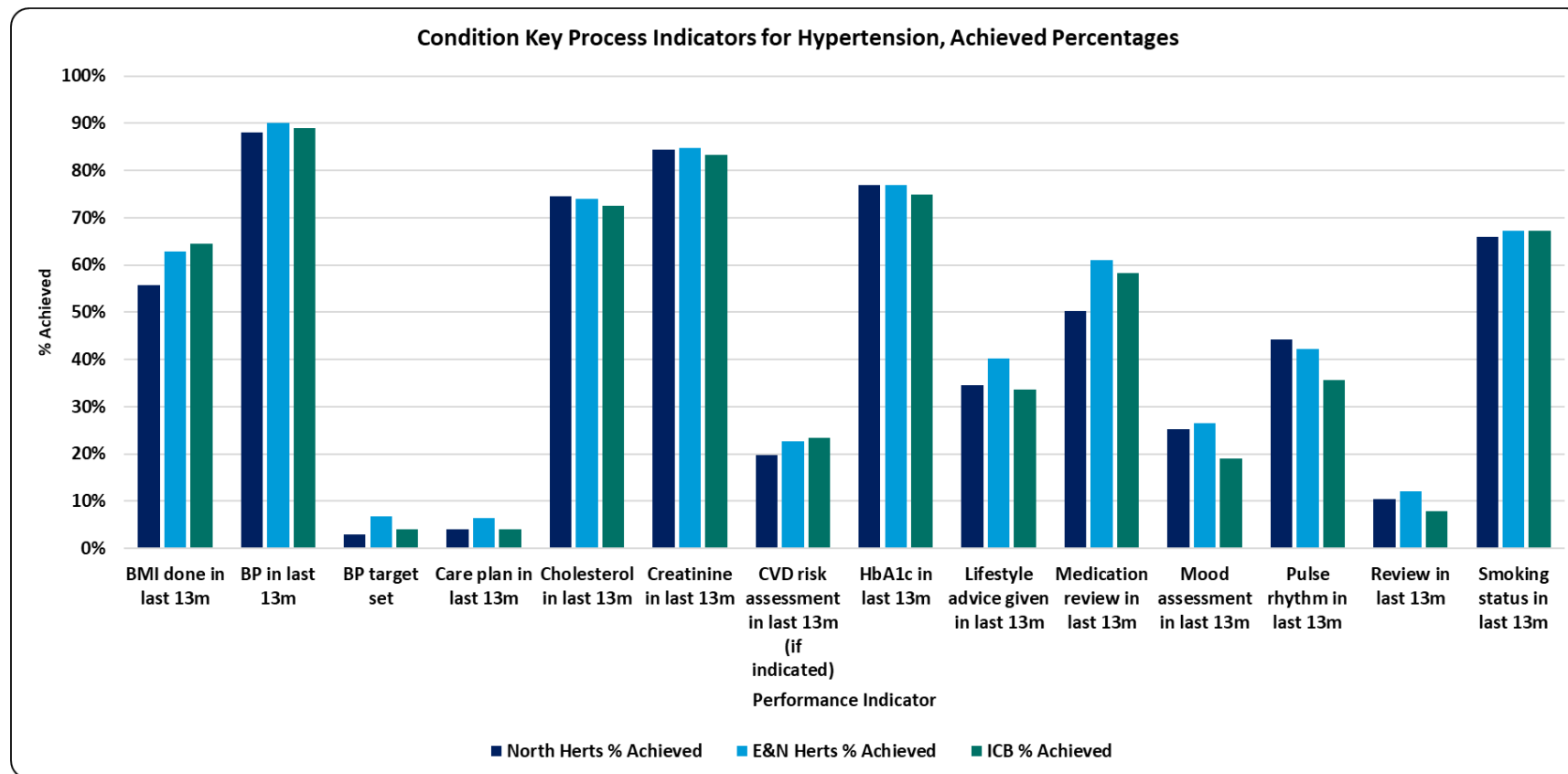Hertfordshire and West Essex Integrated Care System

Hypertension: Key Care Process Indicators

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

- North Hertfordshire achieves higher percentages than Place and ICB levels, in 3 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 locality are:
- BMI Checks
- Care Plans
- CVD Risk Assessments
- Lifestyle Advice Given
- Medication Reviews
- Patient Reviews

Condition Key Process Indicators for Hypertension, Achieved Percentages

Legend: North Herts % Achieved, E&N Herts % Achieved, ICB % Achieved

Source: Ardens Manager

Hertfordshire and West Essex Integrated Care System

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 the locality on their percentage achieved from the 2024/25 QOF, we can see that:
  - There is a varied mix of achievements across the indicators and locality
  - There is opportunity to increase the percentage achieved for Atrial Fibrillation and CHD indicators across the locality

| | 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, ezetemibe 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%
E&N Herts Place	91.1%	24.0%	40.6%	32.9%	96.6%	96.4%	74.6%	100.0%	13.5%	95.7%	82.8%	88.6%
North Herts Locality	88.7%	23.0%	34.4%	24.0%	97.6%	96.4%	74.7%	100.0%	14.6%	93.5%	77.5%	86.8%
HITCHIN AND WHITWELL PCN	90.7%	26.7%	46.2%	33.0%	97.8%	96.5%	77.2%	100.0%	15.6%	96.6%	82.2%	89.0%
ICKNIELD PCN	87.1%	19.9%	24.8%	16.6%	97.5%	96.4%	72.8%	100.0%	13.9%	91.5%	74.4%	85.0%

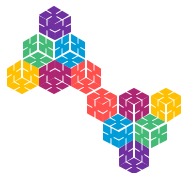**Hertfordshire and West Essex Integrated Care System**

Source: Ardens Manager

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

- The 2024/25 ECF CVD indicators are shown on this page; other ECF LTC indicators can be viewed via the Ardens Manager 2024/25 QOF pages here.

- Reviewing the locality on percentage achieved from the 2024/25 ECF, we can see that:
  - There is a varied mix of achievements across the locality
  - There is opportunity to increase the percentage achieved for Heart Failure indicators across the locality

	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%
E&N Herts Place	77.2%	46.1%	36.9%	1.2%	17.1%	95.6%	96.9%	91.1%
North Herts Locality	69.2%	42.4%	40.9%	1.0%	12.2%	97.0%	97.0%	80.6%
HITCHIN AND WHITWELL PCN	78.0%	46.2%	37.2%	1.1%	13.9%	97.0%	97.6%	92.7%
ICKNIELD PCN	61.9%	39.2%	44.9%	0.9%	10.8%	97.0%	96.3%	69.3%

Hertfordshire and West Essex Integrated Care System
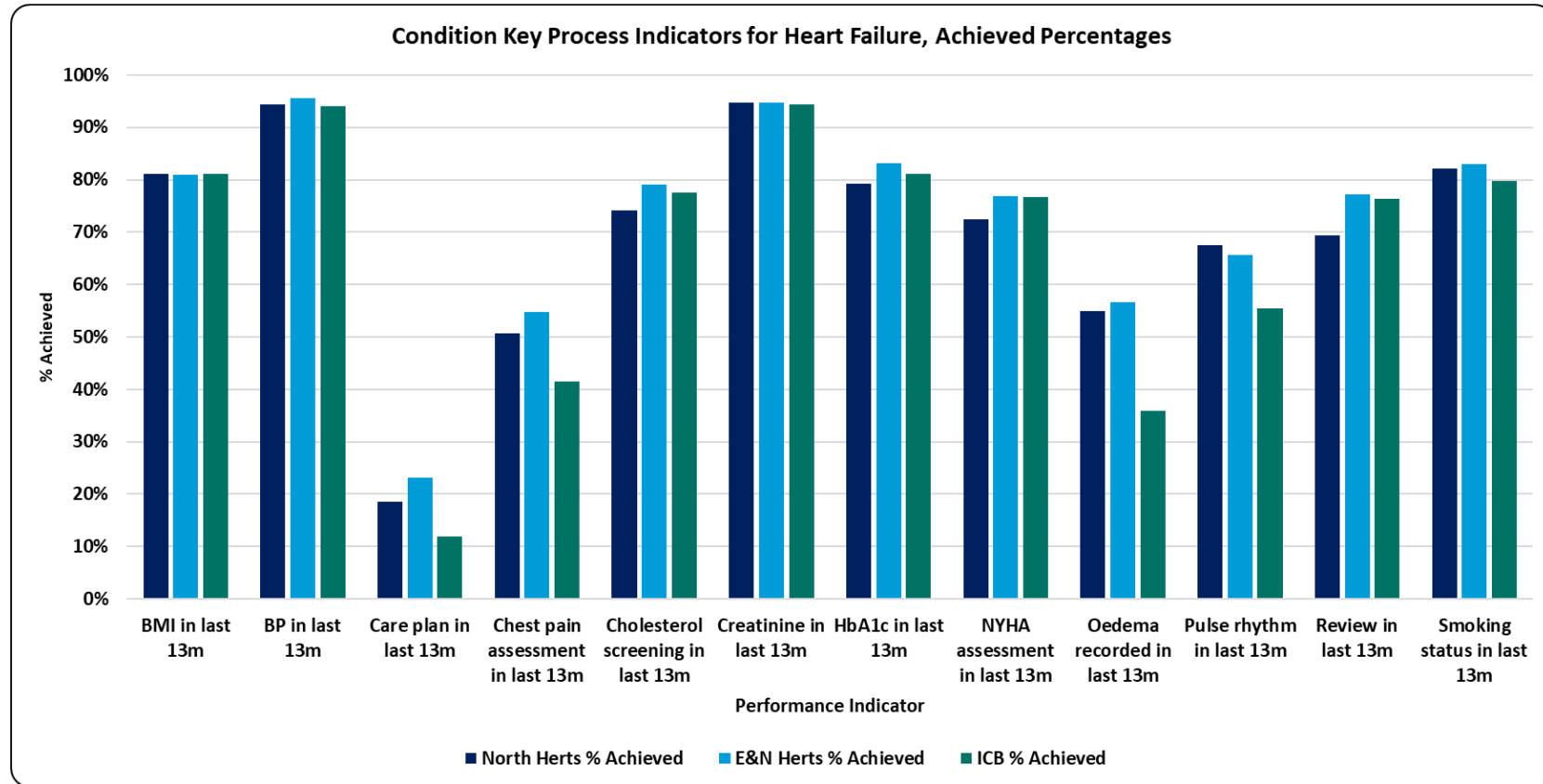
Source: Ardens Manager

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.

The Heart Failure key process indicators, where the data shows opportunity for the Locality are:

- Care Plans
- Chest Pain
- Cholesterol screening
- Creatine screening
- HbA1c
- NYHA Assessments
- Patient Reviews
- Smoking status recorded

Condition Key Process Indicators for Heart Failure, Achieved Percentages

Legend: North Herts % Achieved | E&N Herts % Achieved | ICB % Achieved

Hertfordshire and West Essex Integrated Care System

Source: Ardens Manager

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.
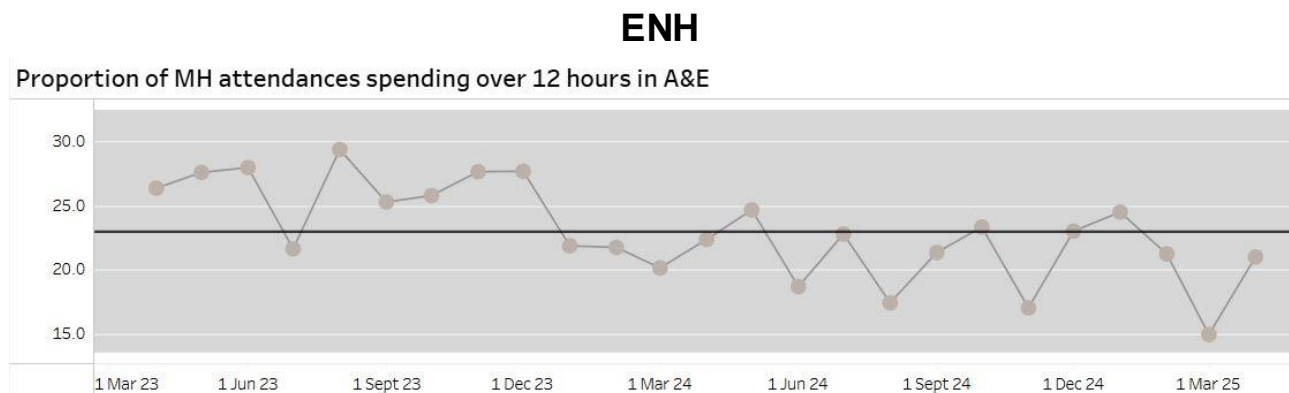
ENH

Proportion of MH attendances spending over 12 hours in A&E

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 table reports on population health indicators from DELPPHI for North Hertfordshire locality to provide assurance that activities are delivering the required impact.

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	38.4 46 / 109,238	30.1 35 / 108,645	8.3	27.7%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£2,723k £3,155k / 109,238	£2,160k £2,483k / 108,645	£563,110	26.1%
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	6.9 7 / 109,238	10.9 12 / 108,645	-4.0	-36.6%
Workstream	Mortality, Dementia / Alzheimer'S Disease, DSR per 100,000, aged between 0-120	12.0 16 / 109,238	11.9 15 / 108,645	0.1	0.8%

- Emergency admissions for preventable ACSC conditions have increased compared to the previous period, with a corresponding rise in associated costs.

Source: DELPPHI - HWE Outcomes Dashboard

Depression and SMI: QOF indicators

- Mental Health QOF metrics for 2024-25 show that North Hertfordshire has a lower percentage of achievement levels for most SMI and depression QOF indicators when compared with ICB and place.

- Within this there is variation between the PCNs. The individual practices can be viewed within the QOF data in Ardens using the link on the bottom right.

- Ardens searches are available to practices to identify those people with SMI without a care plan or recording of monitoring.

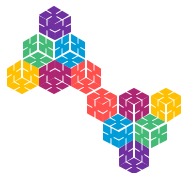|	Depression		Mental Health							
	Review		Review							
	DEP004 CURRENT: Reviewed 10-56d after diagnosis if >18y (2024-25)	DEP004 PROTECTED: Reviewed 10-56d after diagnosis if >18y (2023-24)	MH002: Care plan done in last 12m	MH003: BP done in last 12m	MH006: BMI done in last 12m	MH007: Alcohol consumption 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%
E&N Herts Place	76.6%	82.6%	87.7%	94.8%	94.7%	94.2%	91.1%	91.4%	72.9%	71.6%
North Herts Locality	46.8%	86.8%	72.7%	92.6%	91.3%	88.9%	86.7%	87.4%	68.1%	71.2%
HITCHIN AND WHITWELL PCN	73.8%	79.0%	85.3%	95.5%	95.4%	93.0%	89.5%	89.5%	72.3%	72.9%
ICKNIELD PCN	35.6%	94.0%	64.0%	90.6%	88.4%	86.1%	84.9%	86.1%	65.4%	69.9%

Hertfordshire and West Essex Integrated Care System

Source: Ardens Manager

SMI: ECF indicators

- The data shows that North Hertfordshire has a higher percentage for several SMI ECF indicators when compared against place and the ICB.

- However, the locality percentage for the proportion of people with SMI who have had a care plan completed in the last 12 months, have had their waist circumference checked and who have had PHC checks completed are lower than place and the ICB.

- The data in the table to the right covers the period from April 2024 to March 2025. The most current information is available at Ardens Manager.

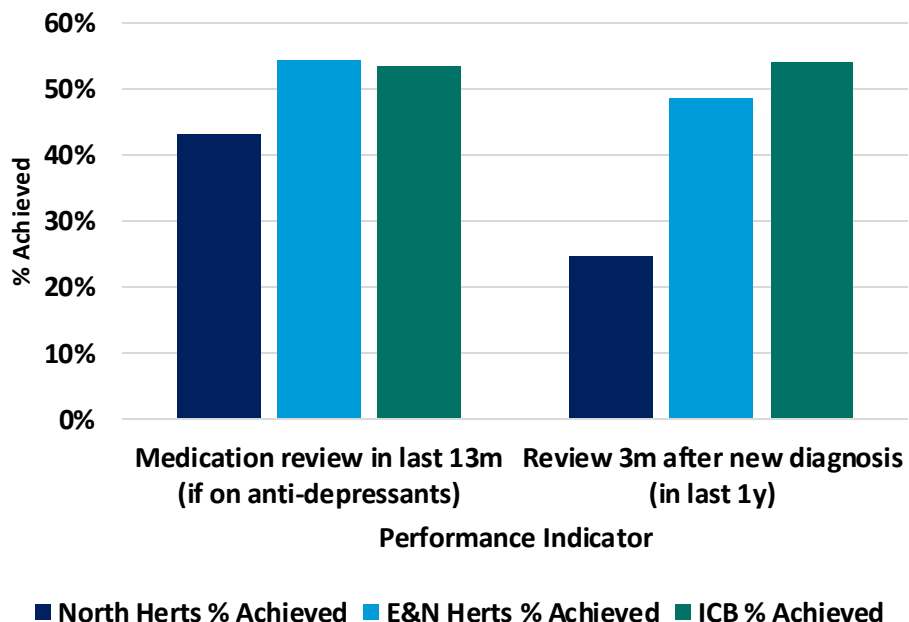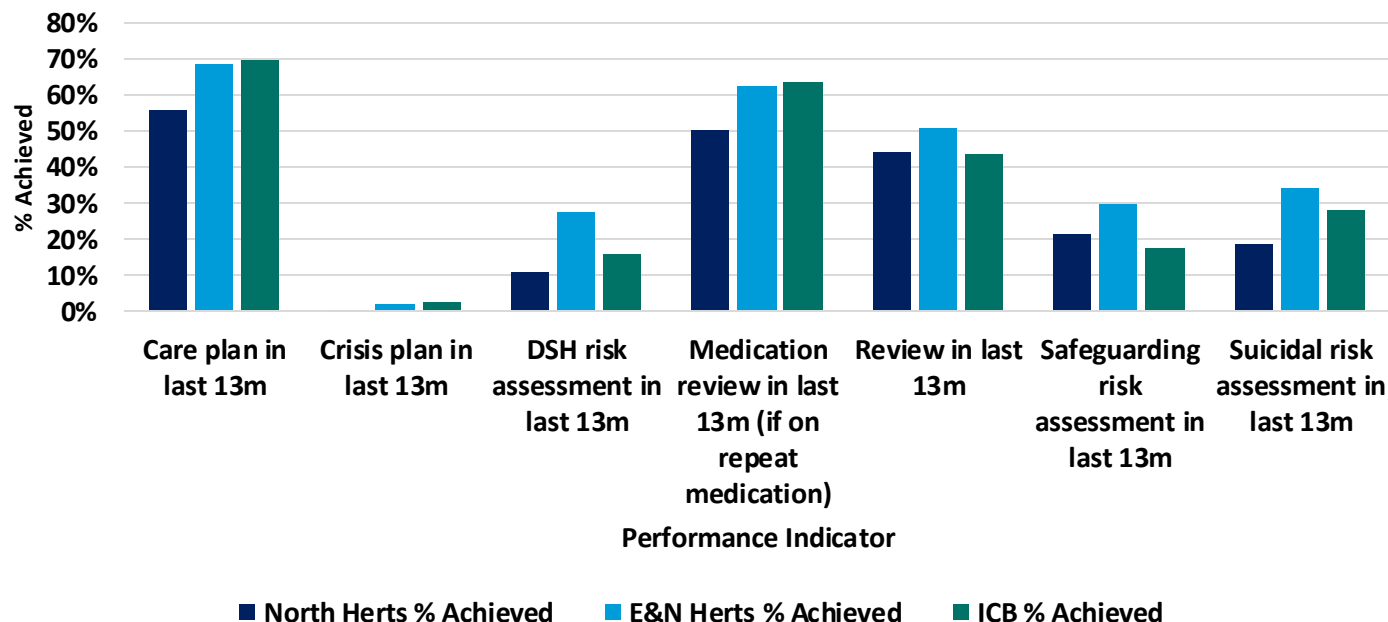| | Severe Mental Illness | | | | | | | |
| | Extra | | | Local | | Review | | |
	7. Nutrition/diet + level of physical activity done or exception in L12M	8. Use of illicit substance/non prescribed done or exception in L12M	9. Medication reconciliation/ review	1. Waist circumference done or exception 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%
E&N Herts Place	10.2%	9.5%	19.7%	4.0%	9.0%	8.1%	59.1%	9.2%
North Herts Locality	14.0%	12.3%	21.5%	2.2%	12.6%	11.0%	51.1%	7.6%
HITCHIN AND WHITWELL PCN	6.3%	4.2%	22.5%	0.8%	5.0%	2.6%	56.0%	3.4%
ICKNIELD PCN	19.7%	18.3%	20.7%	3.2%	18.3%	17.3%	47.5%	10.8%

Source: Ardens Manager

SMI and Depression: Key process indicators

- In the past year, North Hertfordshire recorded lower rates of depression reviews conducted three months after diagnosis as well as medication reviews, compared to ENH and the ICB.

- North Hertfordshire is achieving lower for all key process indicators for SMI patients in comparison to ENH and the ICB. Further detail can be found in Ardens Manager.

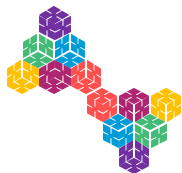Condition Key Process Indicators for Depression, Achieved Percentages

Condition Key Process Indicators for Severe Mental Illness, Achieved Percentages

Learning Disability: ECF indicators

- The data shows that North Hertfordshire has a lower percentage for all learning disability ECF indicators when compared against place and the ICB.

- The data in the table 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%
E&N Herts Place	49.0%	49.8%	21.5%	7.2%	6.0%	48.7%	4.8%
North Herts Locality	45.4%	46.7%	18.7%	1.9%	2.6%	44.9%	1.2%
HITCHIN AND WHITWELL PCN	47.9%	50.2%	18.1%	4.1%	5.8%	47.0%	0.9%
ICKNIELD PCN	43.8%	44.5%	19.0%	0.4%	0.6%	43.6%	1.4%

Hertfordshire and West Essex Integrated Care System

# Learning Disability: Key process indicators

- North Hertfordshire is achieving a lower percentage completeness against ENH and the ICB in several key learning disability processes, including the production of action plans and reviews over the past 13 months.

- All other reviews can be found in Ardens Manager.
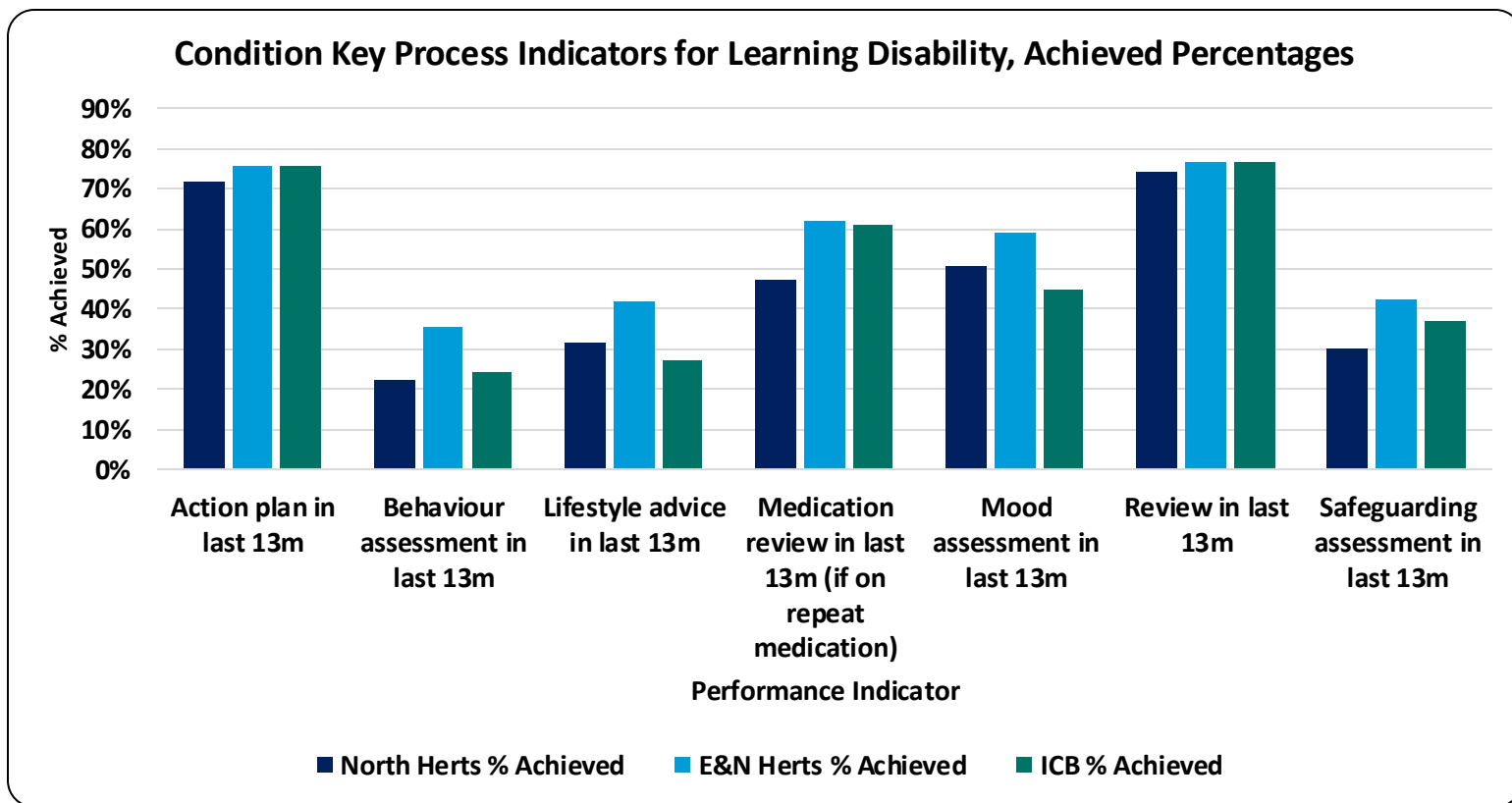
Condition Key Process Indicators for Learning Disability, Achieved Percentages
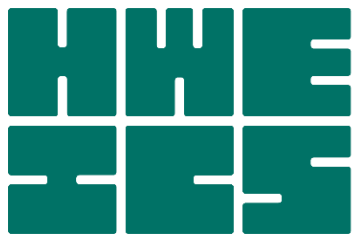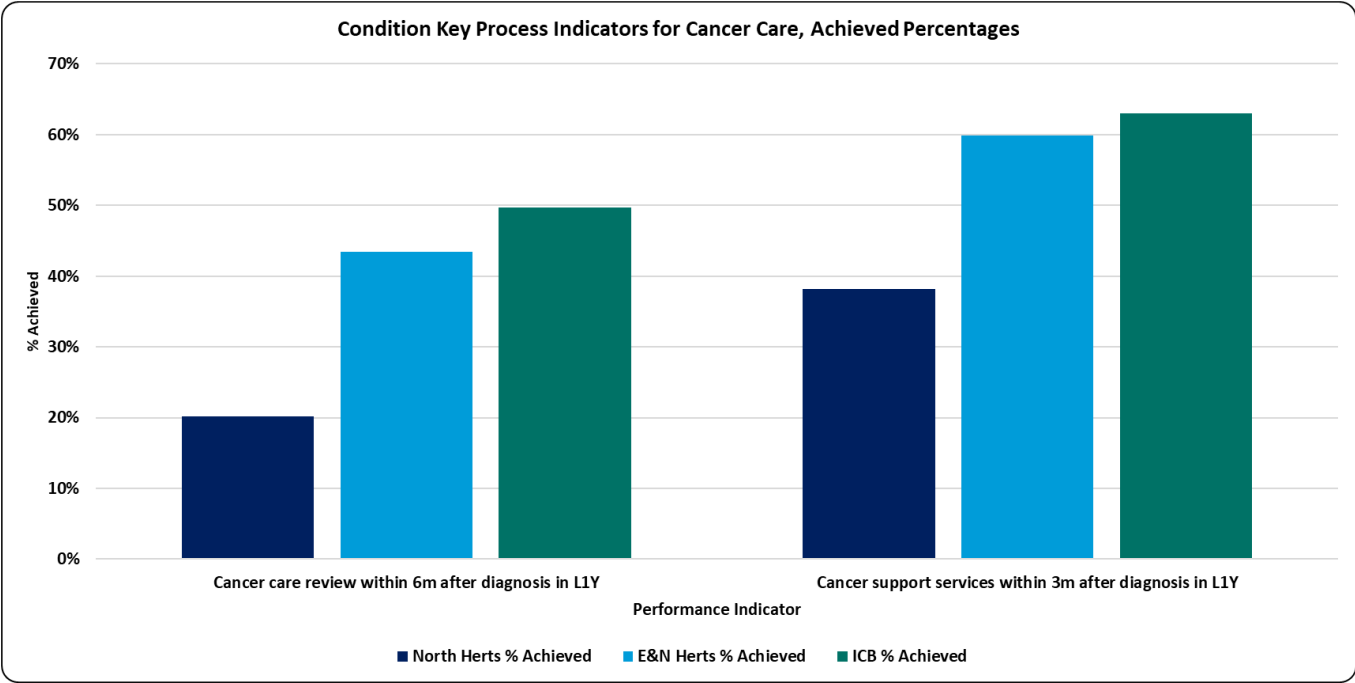
Cancer and Planned Care

Management and outcomes

Working together
for a healthier future
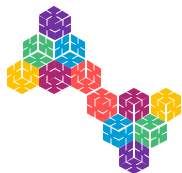
Cancer: QOF and Key processes indicators

- The data shows that North Hertfordshire has a lower percentage when compared to the Place and higher than the ICB for 2024/25.

- North Hertfordshire's cancer care processes are lower than the Place and ICB, which was found to be the opposite to the screening of cancer.

- The latest position for this table below, can be found at Ardens Manager.

Condition Key Process Indicators for Cancer Care, Achieved Percentages

	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%
E&N Herts Place	89.1%	94.3%	80.9%	86.4%
North Herts Locality	63.0%	89.0%	60.1%	73.6%
HITCHIN AND WHITWELL PCN	65.2%	94.3%	47.0%	86.5%
ICKNIELD PCN	61.3%	82.9%	73.9%	63.2%

Source: Ardens Manager

Hertfordshire and West Essex Integrated Care System

Frailty and End of Life care

Management and outcomes

Working together
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# Frailty and EOL: Medium Term Plan Indicators

ENH

- The trend charts indicates the ENH 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.
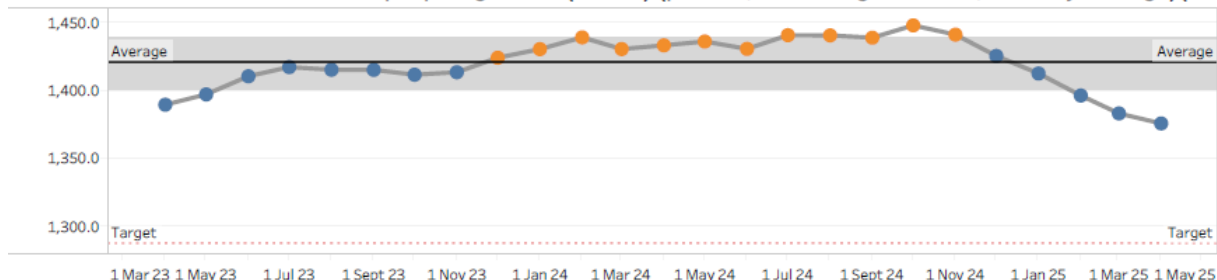

Deaths with 3 or more emergency admissions in the last 90 days of life (all ages)(Rolling 12 months)
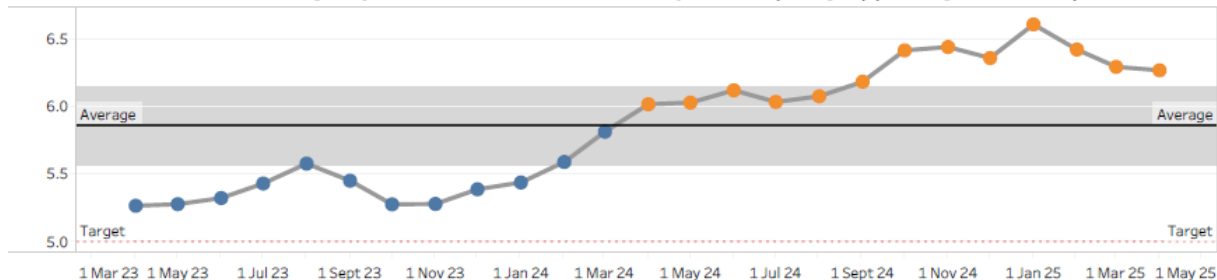
Rate of non-elective admissions for falls within the community for people aged 65+ (LoS > 0) (per 100,000 Rolli..
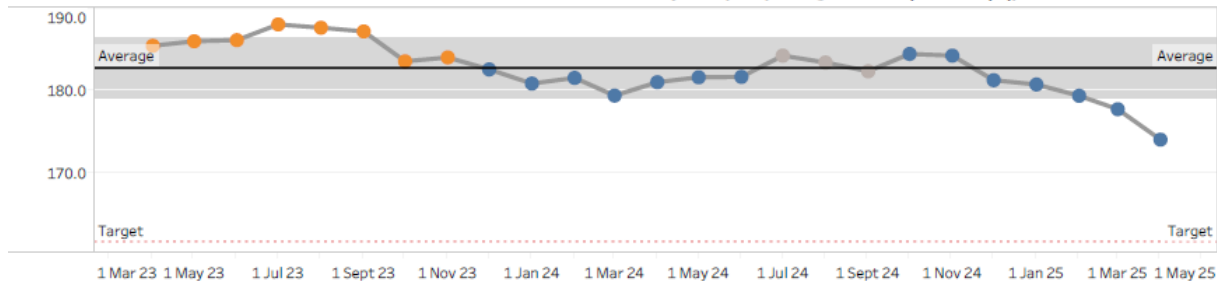
Rate of non-elective admissions in people aged 65+ (LoS >0) (per 100,000 rolling 12 month, monthly average)(C..

Frailty and EOL: Programme outcomes

North Hertfordshire

- 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 data for locality shows a decrease in the admissions for those living with moderate and severe frailty.

- The 7 interventions dashboards has further detail of underlying metrics for community falls and FRAT scores completed.

- Please use the following link for DELPPHI to review HWE, Place, PCN and GP practice measures, demographics and INT.

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	160.7 38 / 21,689	129.4 30 / 21,279	31.2	24.1%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 65-120	£8,210k £1,935k / 21,689	£6,953k £1,605k / 21,279	£1,256,630	18.1%
Programme	Emergency Admissions, Stay Under 24 hours, DSR per 100,000, aged between 65-120	280.7 66 / 21,689	367.9 85 / 21,279	-87.2	-23.7%
	Emergency Admissions LoS >0, Moderate/ Severe Frail at Admission (GP SUBMITTING PRACTICES ONLY), DSR per 100,000, aged between 65-120	692.8 12 / 1,512	1,358.8 35 / 1,701	-666.0	-49.0%
	Emergency Admissions LoS >0, DSR per 100,000, aged between 65-120	1,301.5 304 / 21,689	1,362.7 314 / 21,279	-61.2	-4.5%
	Emergency Admissions LoS >0, Falls Within the Community, DSR per 100,000, aged between 65-120	88.5 22 / 21,689	211.6 51 / 21,279	-123.1	-58.2%
	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	Supressed due to small numbers			
Workstream	Emergency Admissions LoS >0, Hip Fractures, DSR per 100,000, aged between 65-120	49.7 12 / 21,689	42.1 10 / 21,279	7.6	17.9%
	Percentage of Emergency Admissions LoS >0, Falls Within the Community, Discharge to Usual Place of Residence, aged between 65-120	95.5% 21 / 22	98.0% 50 / 51	-2.6%	-2.6%
	Percentage of Emergency Admissions LoS >0, EM Pathways, Readmissions within 7 Days, aged between 65-120	Supressed due to small numbers			
	Percentage of Emergency Admissions LoS >0, EM Pathways, Readmissions within 30 Days, aged between 65-120	11.0% 19 / 172	18.3% 38 / 208	-7.2%	-39.5%

Source: DELPPHI - HWE Outcomes Dashboard

Hertfordshire and West Essex Integrated Care System

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.

Frailty Interventions Dashboard | Summary | Measures | User Guide

Report Purpose:
- 7 key interventions have been identified that will aid in reducing emergency admissions for people with frailty, a core objective for the ICB.
- These interventions are: Polypharmacy Review, Falls Response, Stack, Advance Care Plans, FRAT (Community Falls), Senior Review in ED.

Notes:
- Currently we are not able to accurately monitor Senior Review in ED and as such it has not been included in this dashboard.
- Where GP Data is used as a data source the data only covers people who are registered to a practice who are currently submitting data to DELPPHI.
- Currently unable to map FRAT scores that are coded as read codes, this predominantly affects East and North Herts and West Essex.

Place	Number of Practices Submitting Data	% of Registered Population
East & North Herts	37/49	70.52%
South West Herts	39/51	74.08%
West Essex	25/30	78.35%

Outcome: Emergency Admissions Rate (LoS >0) Moderate /Severe Frailty (DSR per 100,000)
(Submitting Practice Population Only)

Place: East and North Herts   Cohort: Mod/Sev Frail

Values: 1,607.9 | 1,556.8 | 1,484.5 | 1,402.9 | 1,264.2 | 1,114.2

Dates: 1 Mar 23 | 1 Jun 23 | 1 Sept 23 | 1 Dec 23 | 1 Mar 24 | 1 Jun 24 | 1 Sept 24 | 1 Dec 24 | 1 Mar 25

Place	Current Year	Previous Year	% Variance
ICB	1,311.6	1,830.1	-28.33%
East and North Herts	1,050.9	1,459.1	-27.98%
South West Herts	1,674.7	2,100.6	-20.28%
West Essex	916.0	1,683.6	-45.60%

Hertfordshire and West Essex Integrated Care System

Frailty and EOL: ECF indicators

- The data shows that North Hertfordshire recording lower percentage achievement across most EOL and Frailty indicators, when compared to the Place 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/severe frailty)	Depression screening done (if moderate/severe frailty)	Frailty status recorded (if moderate/severe frailty)	Loneliness assessment done (if moderate/severe 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%
E&N Herts Place	0.4%	40.0%	64.4%	48.1%	70.2%	17.9%	67.4%	75.2%	68.1%	45.1%	78.2%	58.5%	17.4%	65.1%	14.1%
North Herts Locality	0.0%	37.4%	64.6%	42.5%	54.6%	16.0%	51.0%	59.5%	63.7%	40.8%	69.0%	38.5%	15.7%	59.4%	11.8%
HITCHIN AND WHITWELL PCN	0.0%	34.1%	51.7%	45.6%	52.9%	13.9%	50.8%	55.8%	74.4%	62.9%	79.0%	48.5%	18.6%	72.7%	14.1%
ICKNIELD PCN	0.0%	42.9%	72.0%	37.3%	57.2%	20.0%	51.3%	65.0%	55.9%	24.8%	61.7%	31.3%	13.2%	49.7%	9.8%

Hertfordshire and West Essex Integrated Care System

Source: Ardens Manager

Frailty and EOL: Key processes indicators

- North Hertfordshire process indicators for End of Life and Frailty are similar and better than both Place and ICB for many indicators. The data shows an opportunity for increased palliative care involvement.

- Ardens searches are available to practices to identify those people on frailty and EOL register and what processes have and still need to be completed.
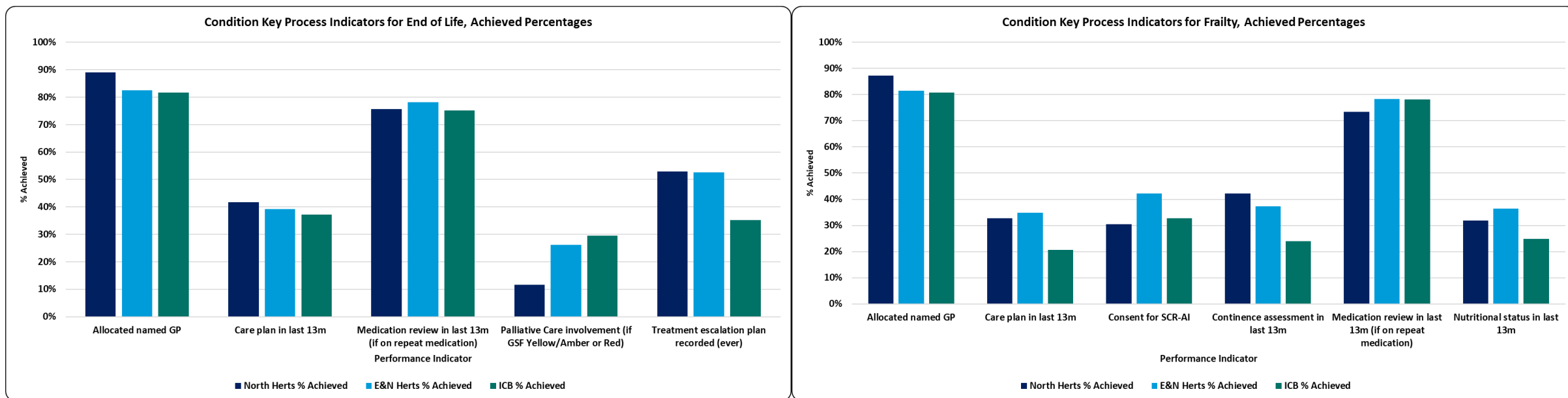
Dementia: Programme outcomes

- 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 table below shows a core set of population health indicators from DELPPHI which have been broken down at GP practice level to reflect the North Hertfordshire locality to provide assurance that activities are delivering the required impact.

| 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	38.4 46 / 109,238	30.1 35 / 108,645	8.3	27.7%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£2,723k £3,155k / 109,238	£2,160k £2,483k / 108,645	£563,110	26.1%
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				
Workstream	Mortality, Dementia / Alzheimer'S Disease, DSR per 100,000, aged between 0-120	12.0 16 / 109,238	11.9 15 / 108,645	0.1	0.8%

Hertfordshire and West Essex Integrated Care System
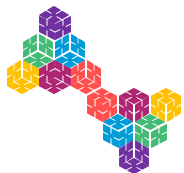
Dementia: QOF and key process indicators

- Dementia QOF metrics for 2024-25 show that North Hertfordshire has a higher percentage of achievement across many indicators when compared with ICB and place. The data shows opportunity to increase referrals to memory services.

- The individual practices can be viewed within the QOF data.Ardens 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%
E&N Herts Place	82.3%
North Herts Locality	84.3%
HITCHIN AND WHITWELL PCN	87.9%
ICKNIELD PCN	81.7%
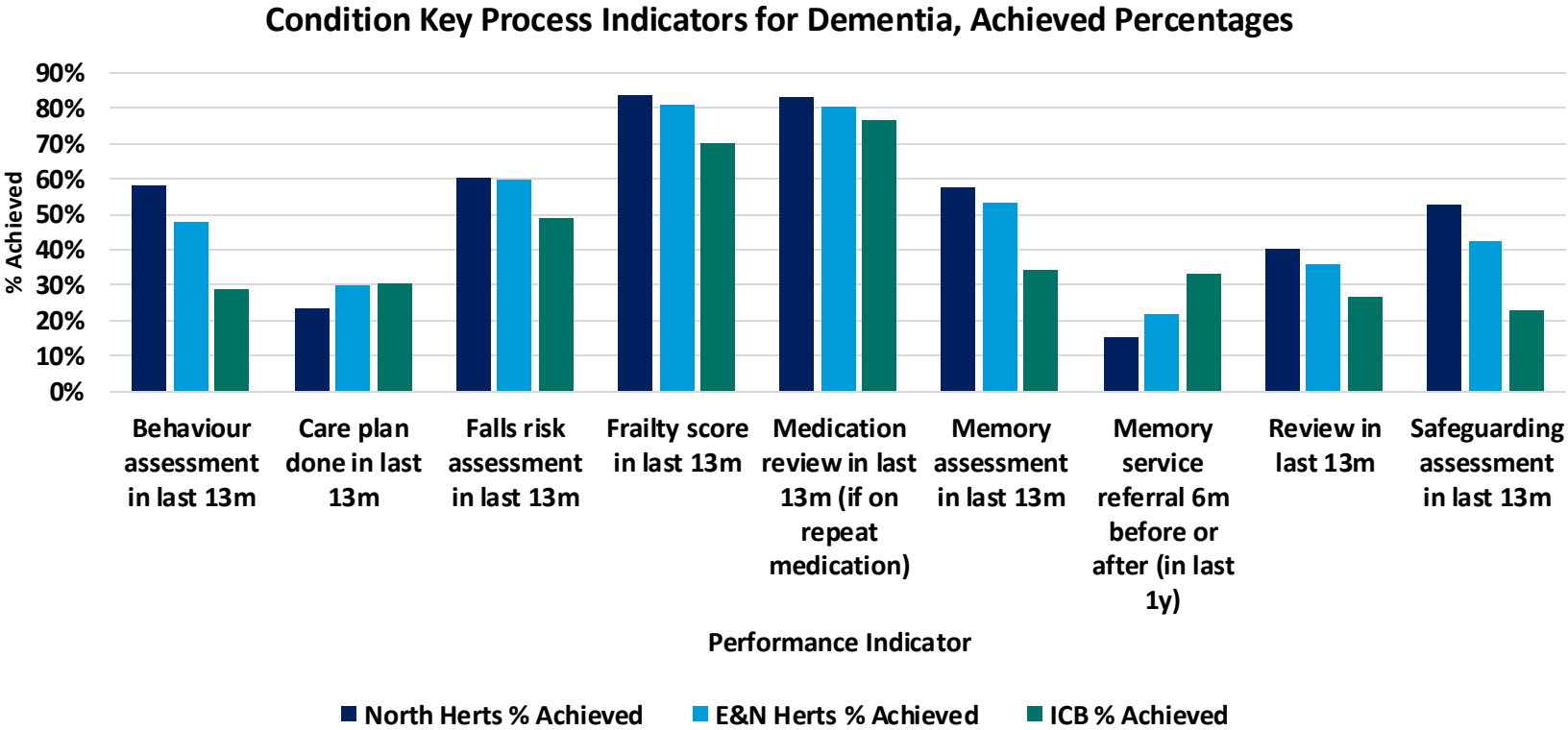
Condition Key Process Indicators for Dementia, Achieved Percentages

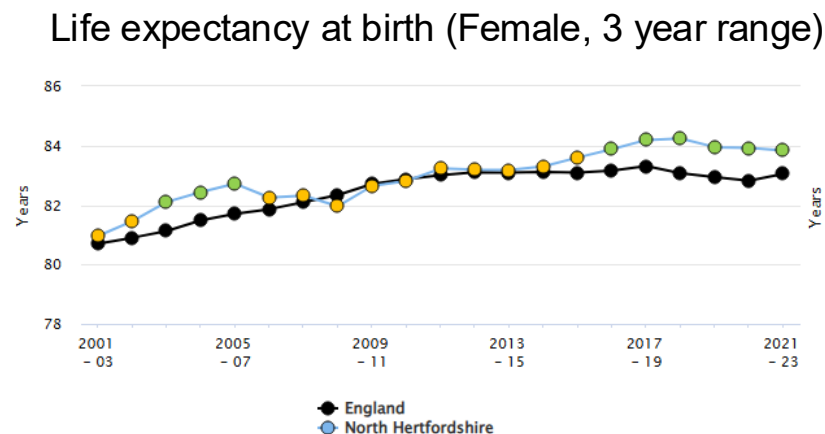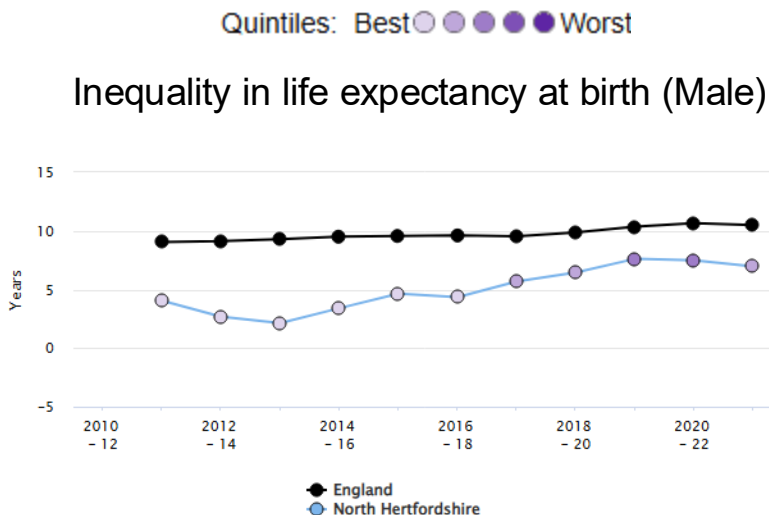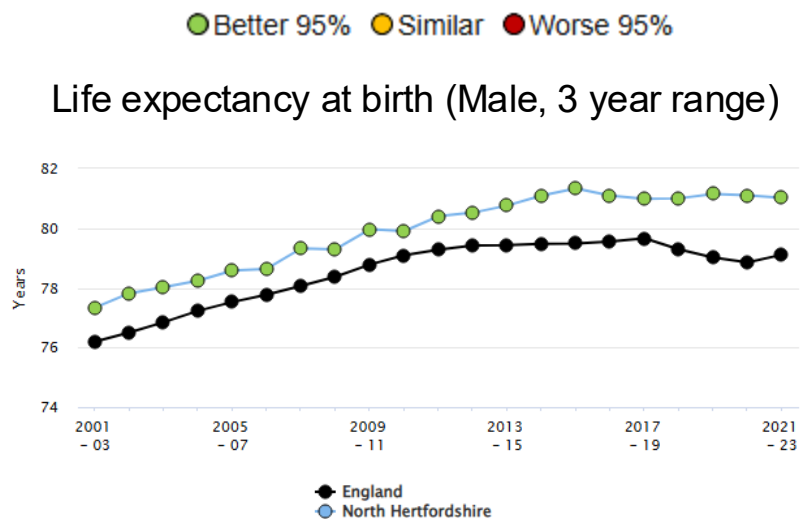Hertfordshire and West Essex Integrated Care System

Other key outcomes

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for a healthier future

Life Expectancy and Inequality in Life Expectancy at Birth

- North Hertfordshire's life expectancy for both male and female has remained consistently above EoE and England.

- There is a 7 year age gap between males in the most deprived quintile and those living in the most affluent quintiles, in North Hertfordshire. For females, the gap is 4.9 years.

○ Better 95% ○ Similar ● Worse 95%   Quintiles: Best ○ ○ ● ● Worst

Life expectancy at birth (Male, 3 year range)

Inequality in life expectancy at birth (Male)

Life expectancy at birth (Female, 3 year range)

Inequality in life expectancy at birth (Female)
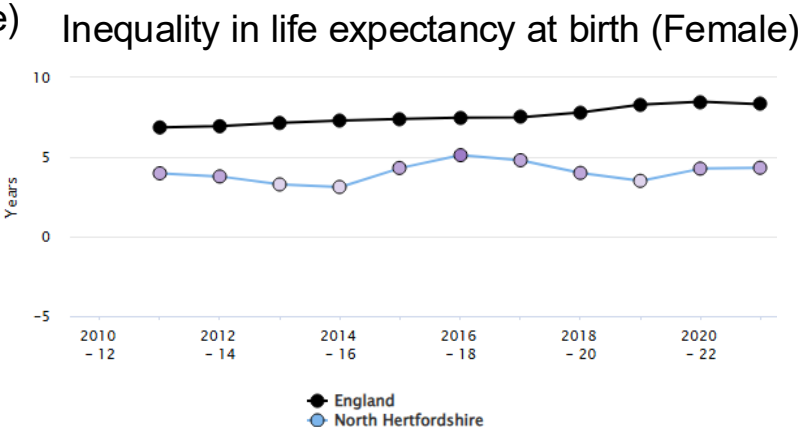
Source: Fingertips | Department of Health and Social Care

Emergency Admission Rates for Ambulatory Care Sensitive Conditions (ACSC)

North Hertfordshire

- For ACSC condition emergency admissions, the rate has been increasing for the last three years.

- 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, Place, PCN and GP practice measures, demographics and INT; the relevant GP Practices have been selected to find the overall Locality metrics.

Measure..	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	38.4 46 / 109,238	30.1 35 / 108,645	8.3	27.7%

Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 0-120
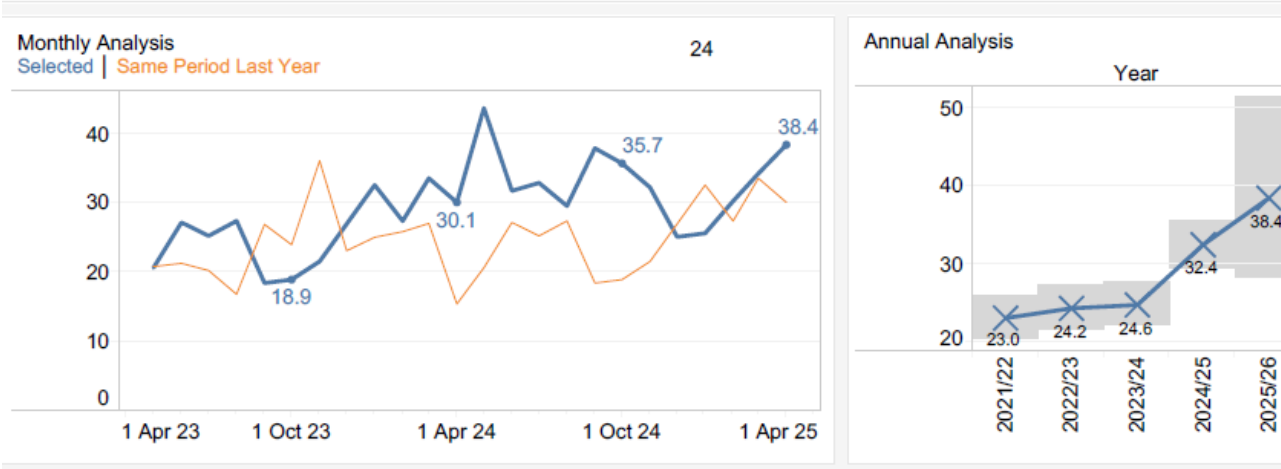
Source: DELPPHI - HWE Outcomes Dashboard

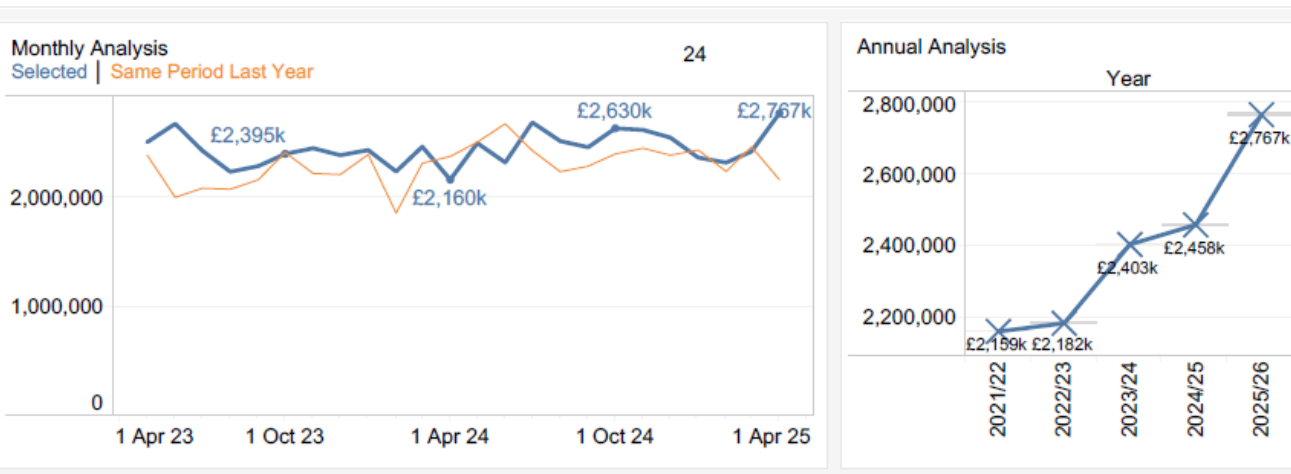**Hertfordshire and West Essex Integrated Care System**

# Total cost of Emergency hospital care for North Hertfordshire

- The locality continues to see an increase in cost for emergency hospital care in recent years.

- Please use the following link for DELPPHI to review HWE, Place, PCN and GP practice measures, demographics and INT; the relevant GP Practices have been selected to find the overall Locality metrics.

Measure..	Measure	Current Period	Previous Period	Difference	% Difference
Whole System	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£2,767k £3,200k / 109,238	£2,160k £2,483k / 108,645	£607,328	28.1%

Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120
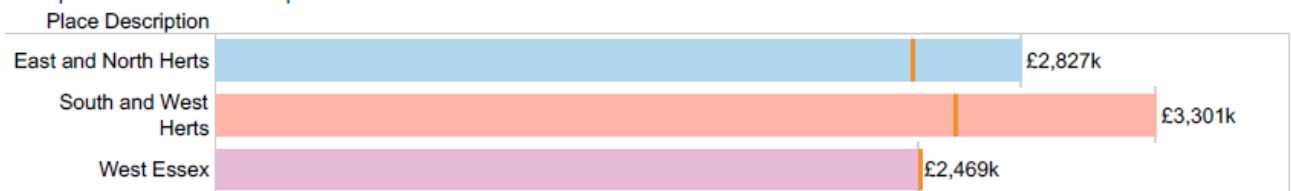
Source: DELPPHI - HWE Outcomes Dashboard

Hertfordshire and West Essex Integrated Care System

Glossary

Working together
for a healthier future

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)

Practices currently flowing data to DELPPHI as at 4th August 25

Locality	Practice Name	Flowing data
North Herts	The Baldock Surgery	✓
	The Garden City Surgery	✓
	The Nevells Road Surgery	✓
	Ashwell Surgery	✓
	Bancroft Medical Centre	✓
	Birchwood Surgery	✓
	Bridge Cottage Surgery	✓
	Regal Chambers Surgery	✓
	The Portmill Surgery	✗
	Whitwell Surgery	✗

Hertfordshire and West Essex Integrated Care System

Source: DELPPHI - HWE Outcomes Dashboard