



Hertfordshire and
West Essex Integrated
Care System



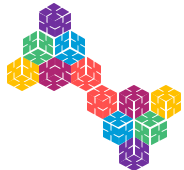
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Integrated Care Board

Hertfordshire and West Essex Neighbourhood Pack – Welwyn Hatfield

2025-2026
PHM Team

Working together
for a healthier future





Key messages

The Welwyn & Hatfield population profile has a higher proportion of the population aged between 19 - 64 years compared to East & North Hertfordshire and the ICB. The student population in Hatfield is likely to skew some of this analysis. A higher proportion of the population live in the two most deprived quintiles compared to the place. There are plans to identify this cohort to understand the picture for permanent residents within Welwyn and Hatfield.

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. Hatfield Town within Welwyn & Hatfield has the lowest disease-free life expectancy where men on average can expect to live for 63.7 years and women 64.2 years, disease free. [Overview of the Population](#)

Welwyn & Hatfield data shows a lower prevalence of behavioural risk factors, including alcohol abuse, obesity, insufficient physical activity and smoking compared to ENH, however this is dependent on the recording of this data. 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](#).

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



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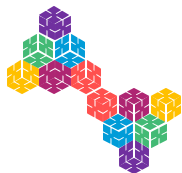


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**Demographics, wider determinants
and prevention**

**Working together
for a healthier future**

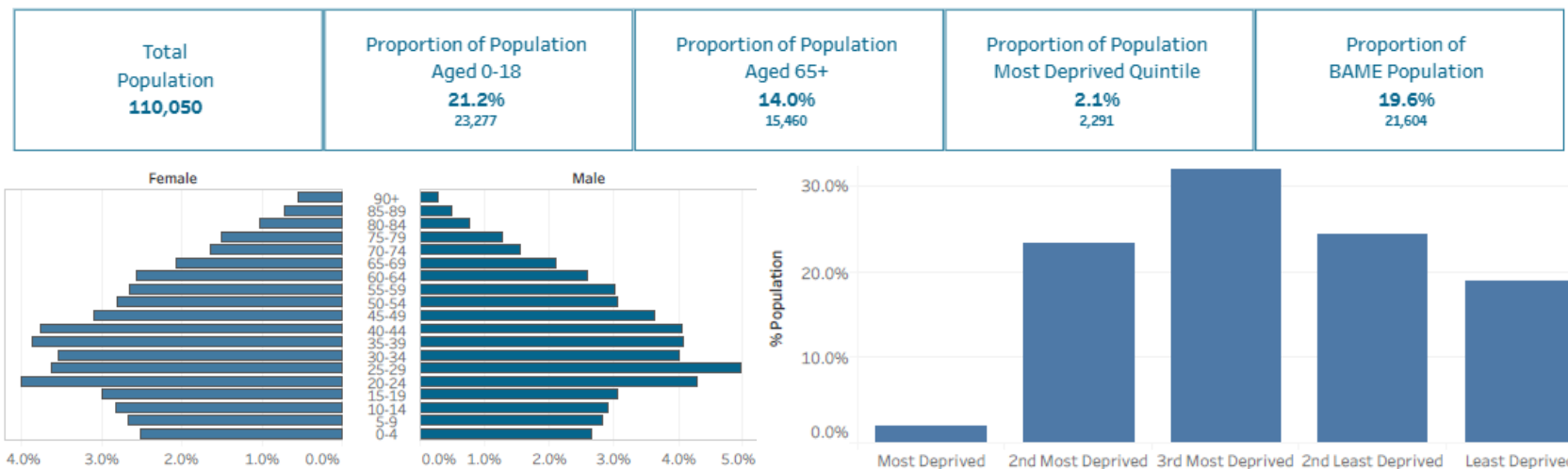




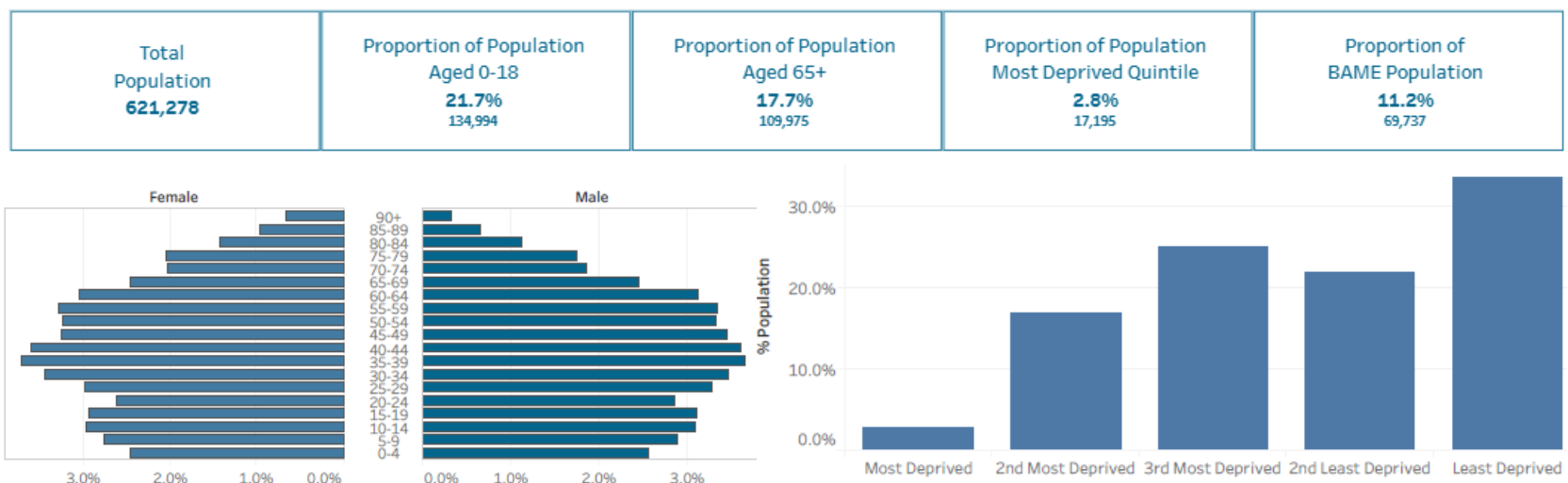
Population profile

- Welwyn & Hatfield has a higher proportion of the population aged between 19 - 64 years compared to ENH place. The University population will contribute to this higher proportion.
- Although a slightly lower proportion of the population live in the most deprived quintile, a higher proportion of people live 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.

Welwyn & Hatfield



ENH



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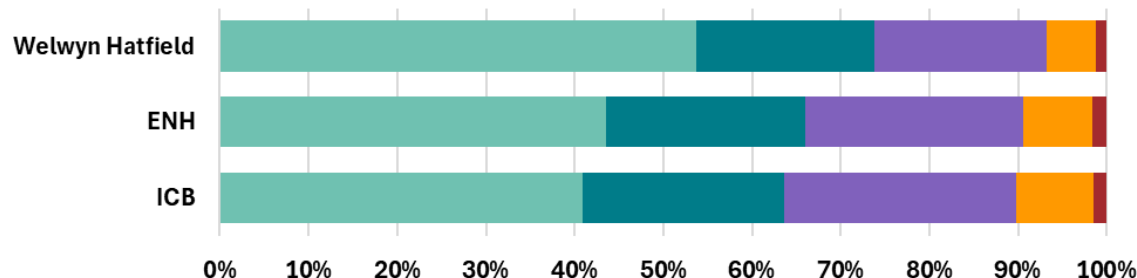
Source: [DELPPHI - Population Profile](#)



Segmentation profile Provisional Data

- The illustrations on the right shows the segmentation model for Welwyn & Hatfield, ENH and the ICB. This is a snapshot from July 2025.
- Welwyn & Hatfield's has a higher number of the population in the 'Generally Healthy' segment. This is linked to lower prevalence of [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. This will be influenced by the younger student population from the University of Hertfordshire.
- Further detail on the segmentation model can be found in the [glossary](#).

Welwyn Hatfield, ENH & ICB PHM Segmentation Profile



	ICB	ENH	Welwyn Hatfield
1 - Generally Healthy	41.0%	43.6%	53.8%
2 - Living with Illness	22.7%	22.4%	20.1%
3 - Low Complexity	26.1%	24.5%	19.3%
4 - Advanced Disease & Complexity	8.8%	7.9%	5.6%
5 - EoL, Severe Frailty & Dementia	1.4%	1.6%	1.2%



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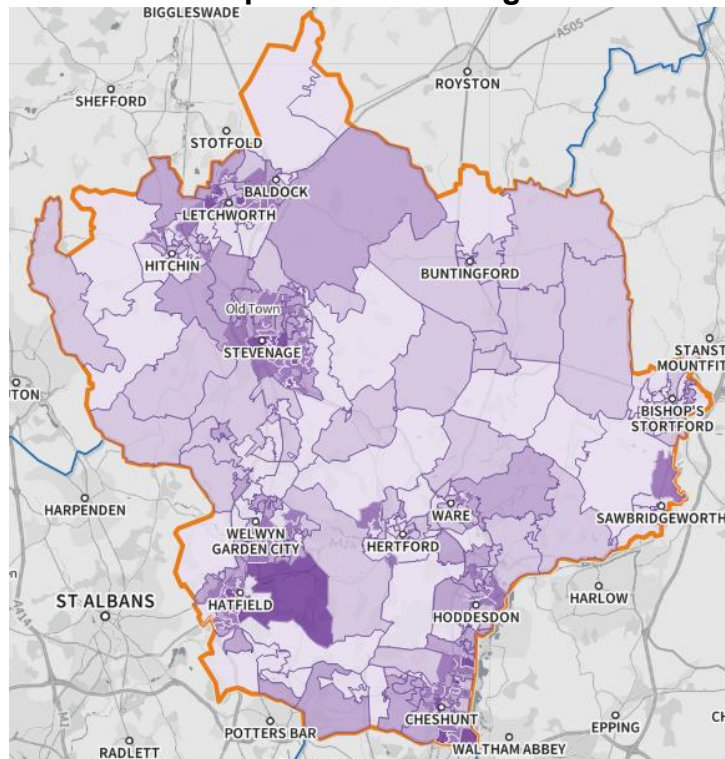
Source: DELPPHI: HWE Segmentation model



Children and older people living in poverty

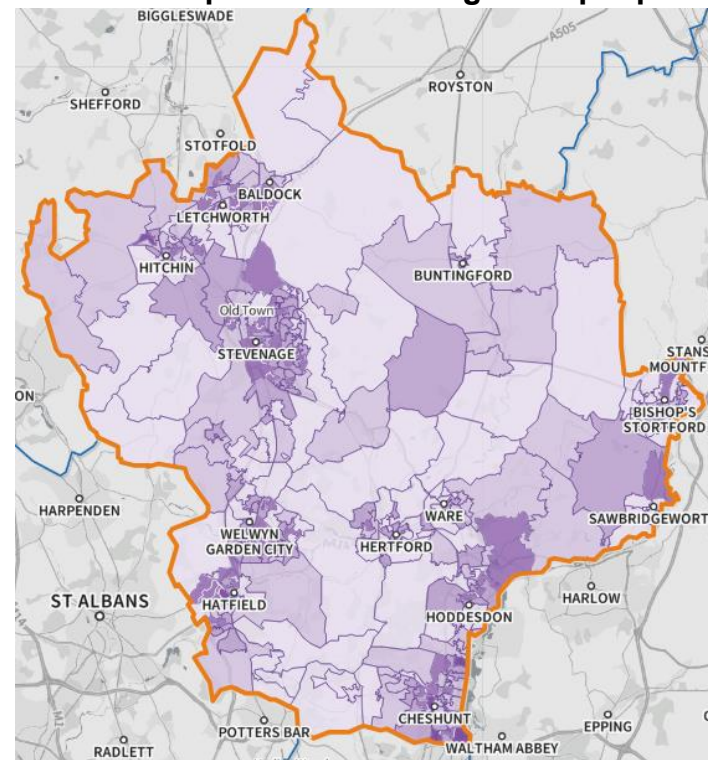
- Income Deprivation Affecting Children Index (IDACI) and Older people index (IDAOPi) measures the proportion of all children aged 0 to 15 and adults aged 60 or over, respectively who experience living in income deprived families or income deprivation.
- The IDACI and IDAOPi are illustrated on the maps.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



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



Behavioural risk factors

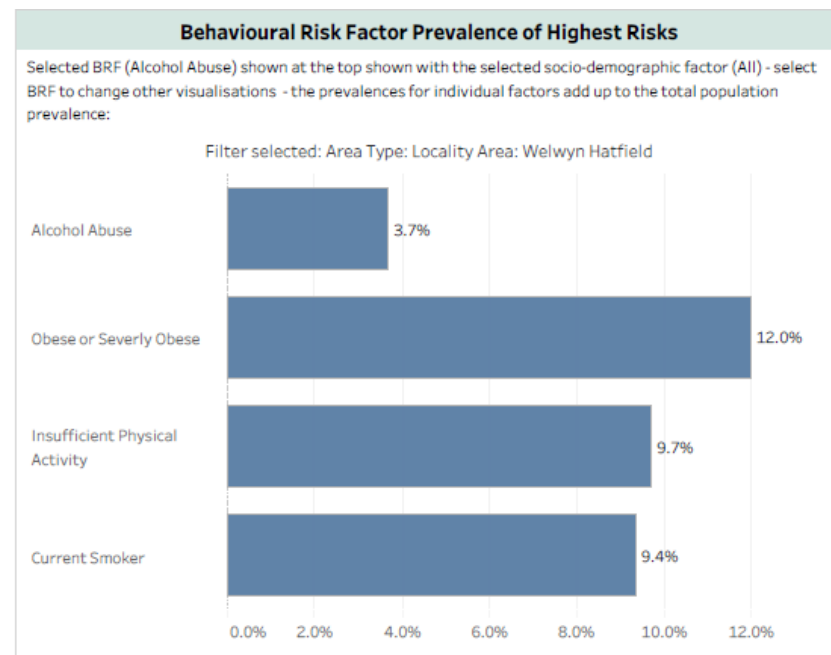
- Welwyn & Hatfield data shows a lower proportion of alcohol abuse, obesity, insufficient physical activity and smoking compared to ENH, this will be dependent on the recording of this data which may be under recorded..
- The student population is likely contributing to a higher proportion of the population being classified as 'generally healthy' in the segmentation model and will mask the true picture for permanent residents.
- 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](#).



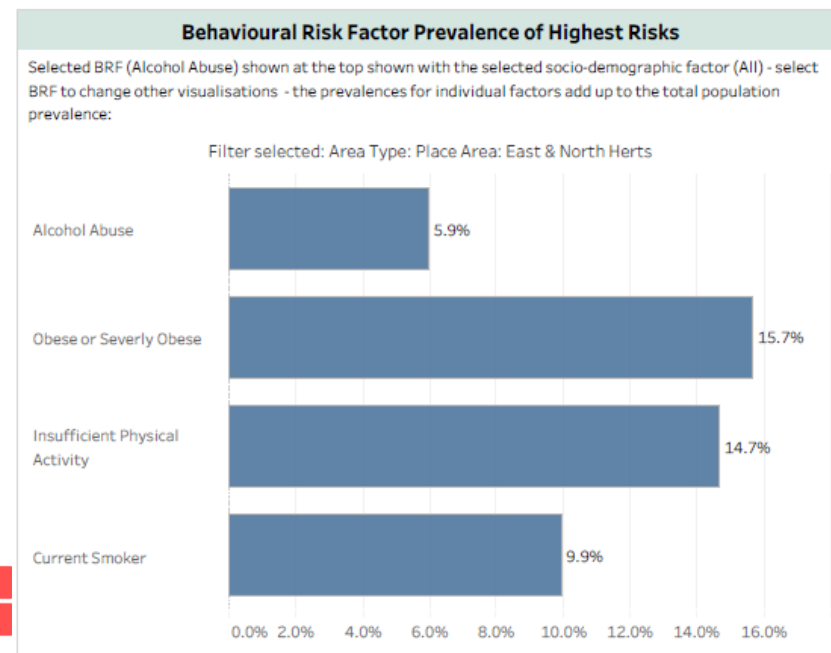
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Welwyn & Hatfield



ENH



Source: [DELPPHI - Population Profile](#)

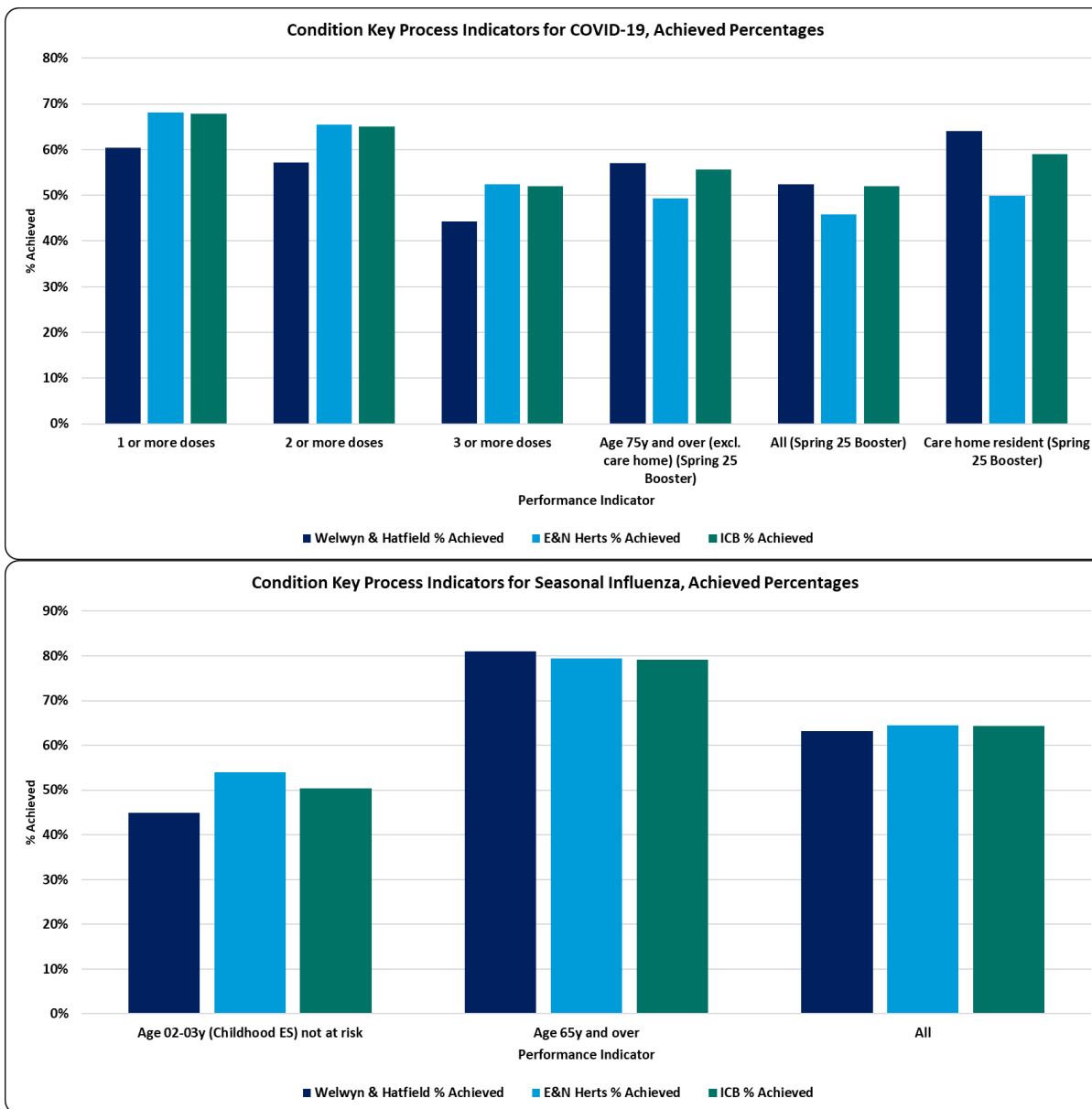


Immunisation

- Welwyn & Hatfield's percentage of people immunised against Covid-19 is above ENH and the ICB for the over 75s and those living in care homes.
- Seasonal influenza percentage achieved for most indicators is similar to ENH and the ICB.



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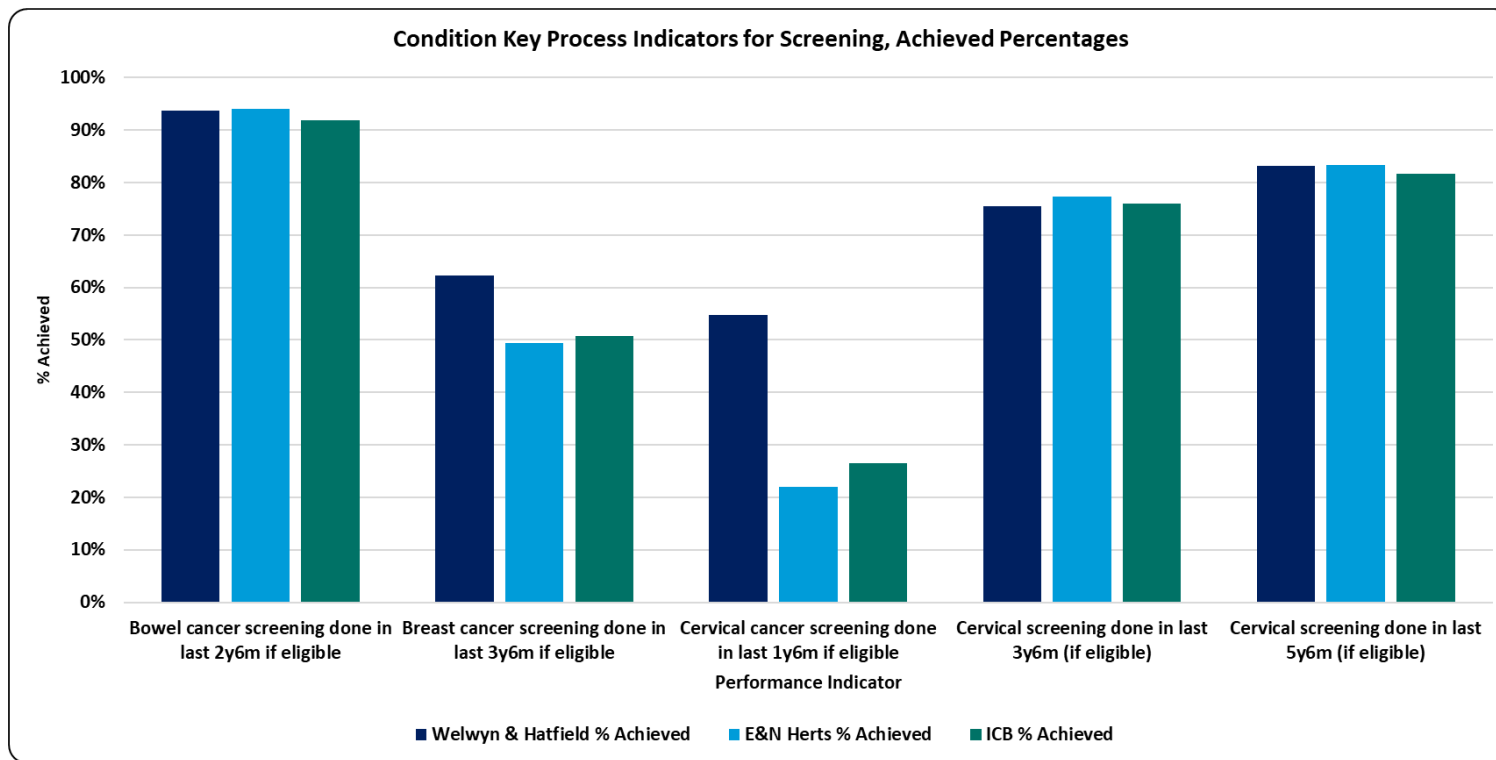


Source: [Ardens Manager](#)



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.
- Welwyn & Hatfield's percentage screening for most areas is higher or similar to ENH and the ICB.



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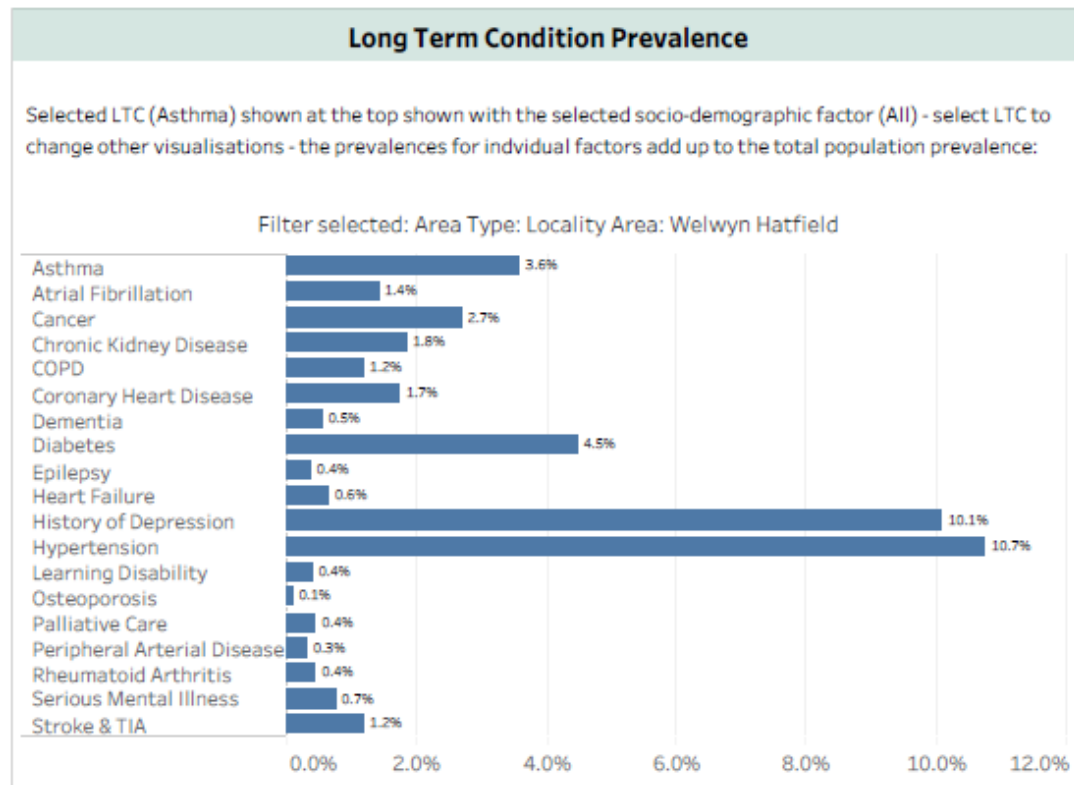


Source: [Ardens Manager](#)

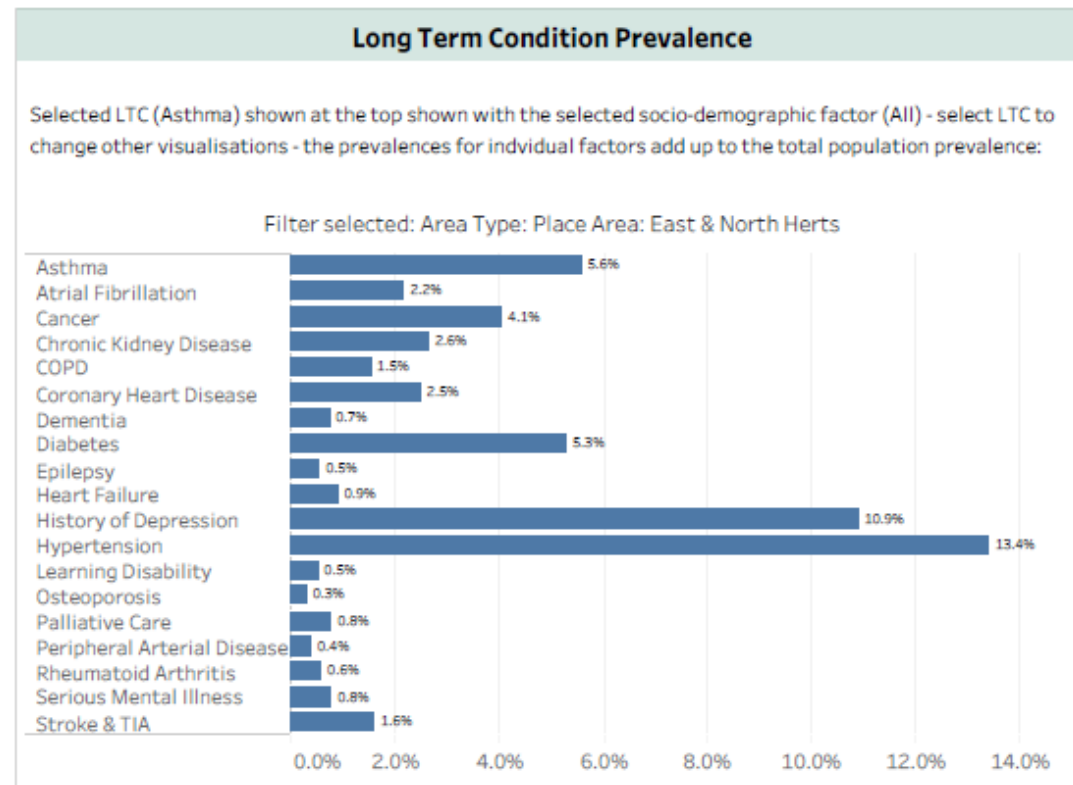


Prevalence of Disease Registers

Welwyn & Hatfield



ENH



- The above charts show that Welwyn & Hatfield has lower recordings for most LTC compared to ENH which will be influenced by a younger population. 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.



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Source: [DELPPHI - Population Profile](#)



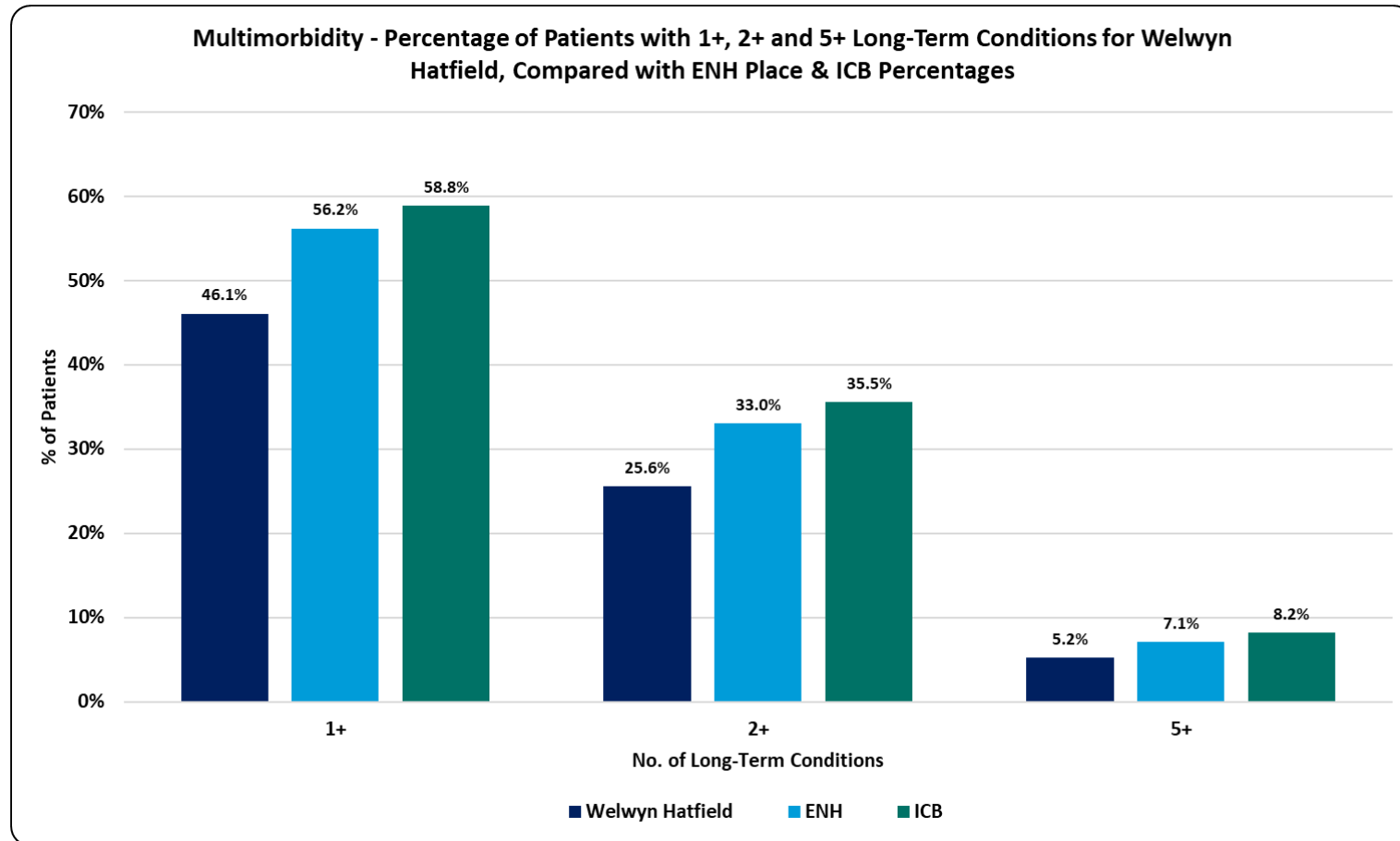
Prevalence of Multimorbidity

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 Welwyn & Hatfield Locality, the prevalence for those with 2 or more LTCs is 6.4% and 9.9% lower than Place and the ICB, respectively.
- For those Patients with 5+ LTCs, Welwyn & Hatfield is 1.9% and 3% lower than the ENH and ICB, respectively.
- Welwyn & Hatfield's segmentation profile, characterised by a lower proportion of the population with LTCs and BRFs may be contributing to the lower proportions observed compared to ENH 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
 - 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.

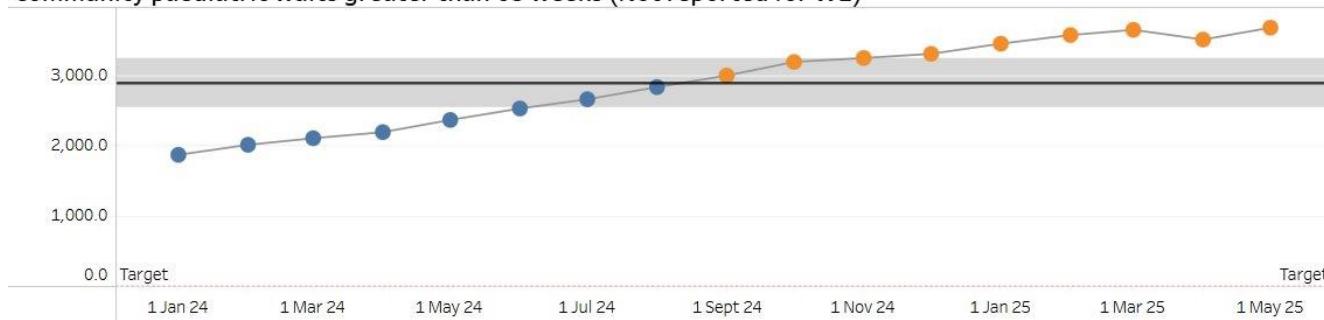


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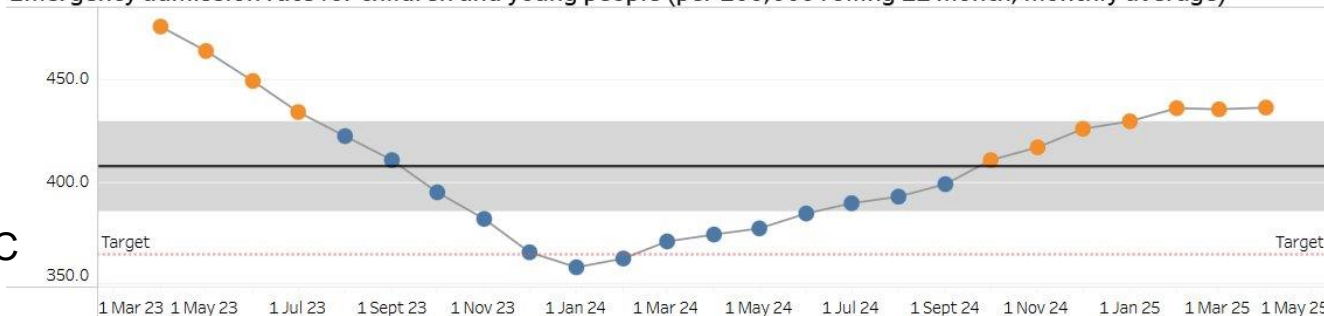


ENH

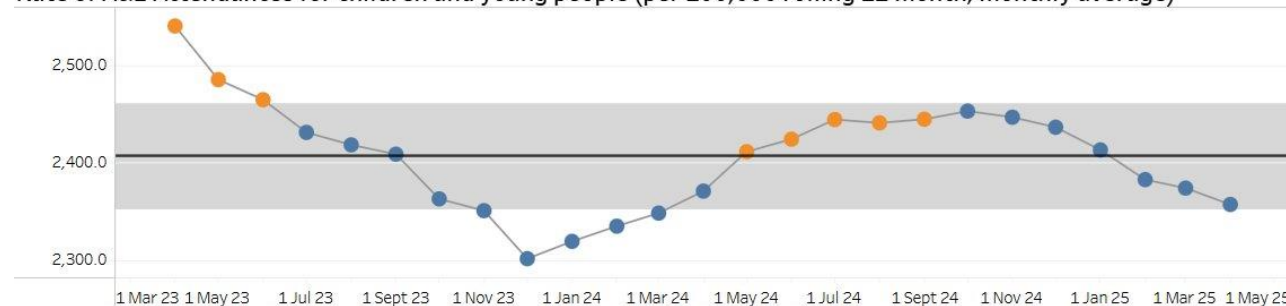
Community paediatric waits greater than 65 weeks (Not reported for WE)



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)



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 Welwyn & Hatfield Locality from the [Outcomes Framework](#)
- There has been an decrease in overall emergency admissions for 0–17-year-olds, however there has been an increase in associated costs.

		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	Supressed due to small numbers			
	Total Cost of Emergency Hospital Care, Crude Rate per 100,000, aged between 0-18	£1,272k £317k / 24,936	£1,220k £305k / 25,044	£52,138	4.3%
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	225.4 53 / 23,511	316.8 75 / 23,674	-91.4	-28.8%
Workstream	Emergency Admissions, DSR per 100,000, aged between 0-4	1,037.9 57 / 5,492	1,219.1 70 / 5,742	-181.2	-14.9%
	Emergency Admissions, Asthma Diabetes and Epilepsy, Crude Rate per 100,000, aged between 0-18	Supressed due to small numbers			



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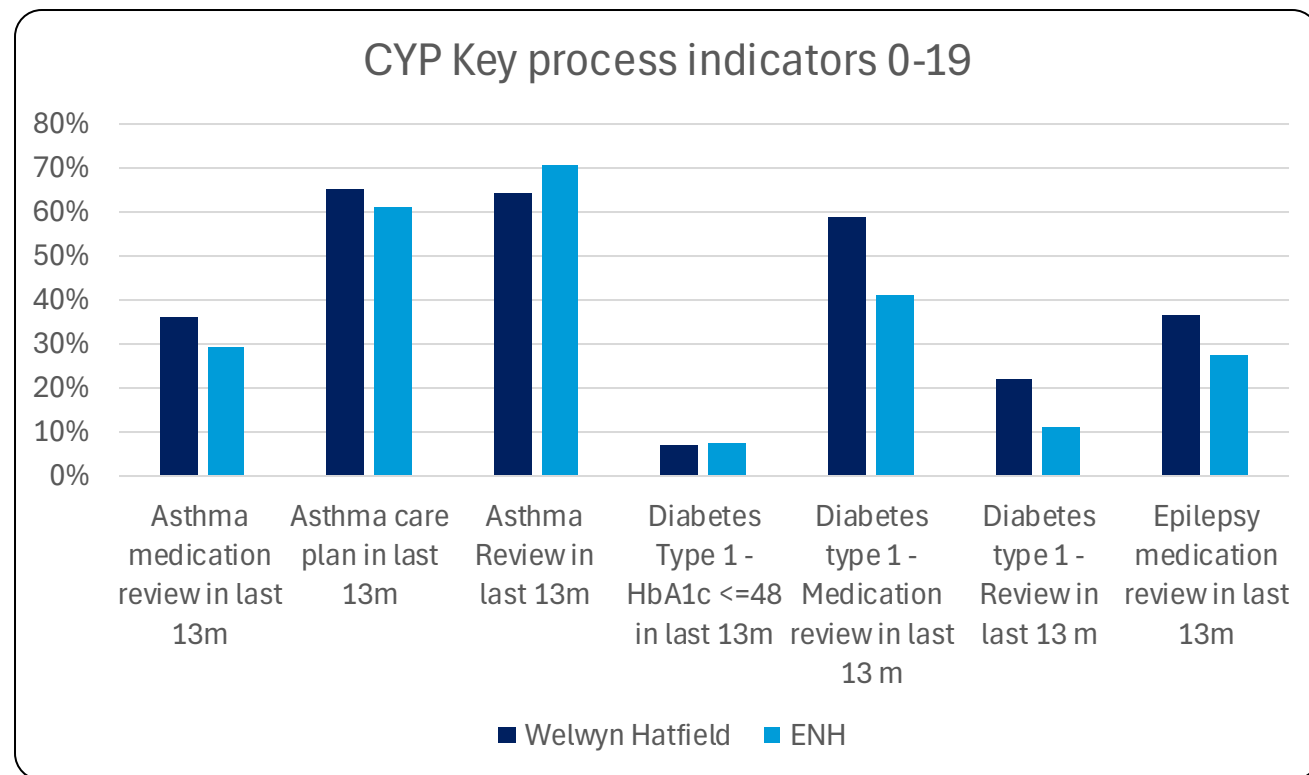


Source: [DELPPHI - HWE Outcomes Dashboard](#)



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 Welwyn & Hatfield and ENH for children and young people aged 0-19.
- Welwyn & Hatfield have recorded more medication reviews for Asthma, Diabetes, and Epilepsy compared to ENH.



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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/Place level.

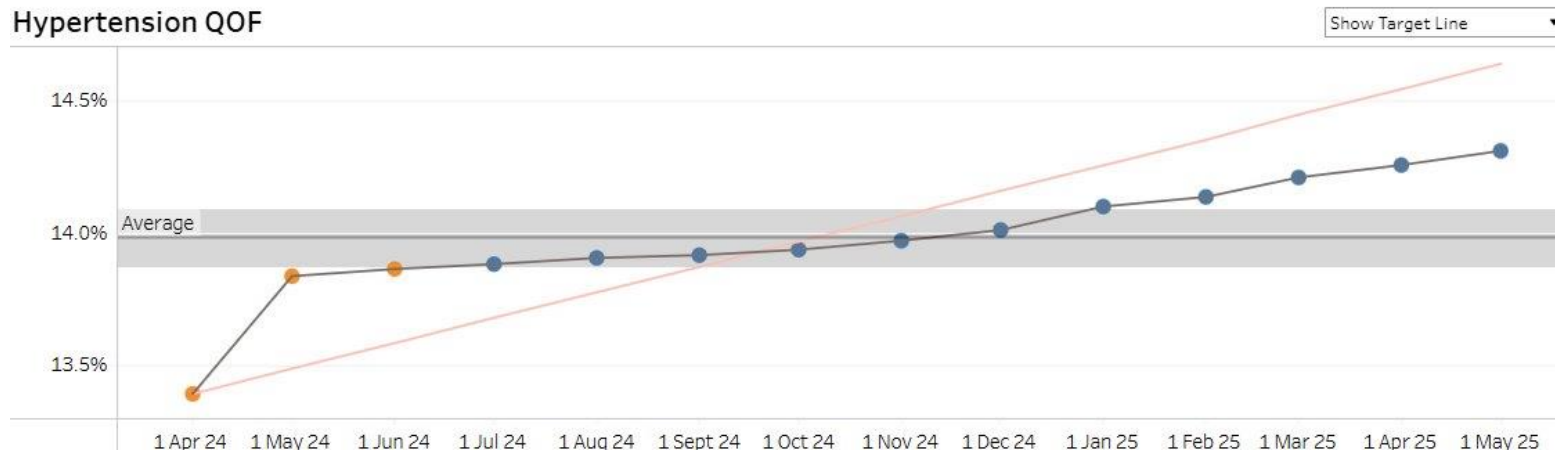
For Hypertension Medium Term Plan indicators, for the Place we can see:

- 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.

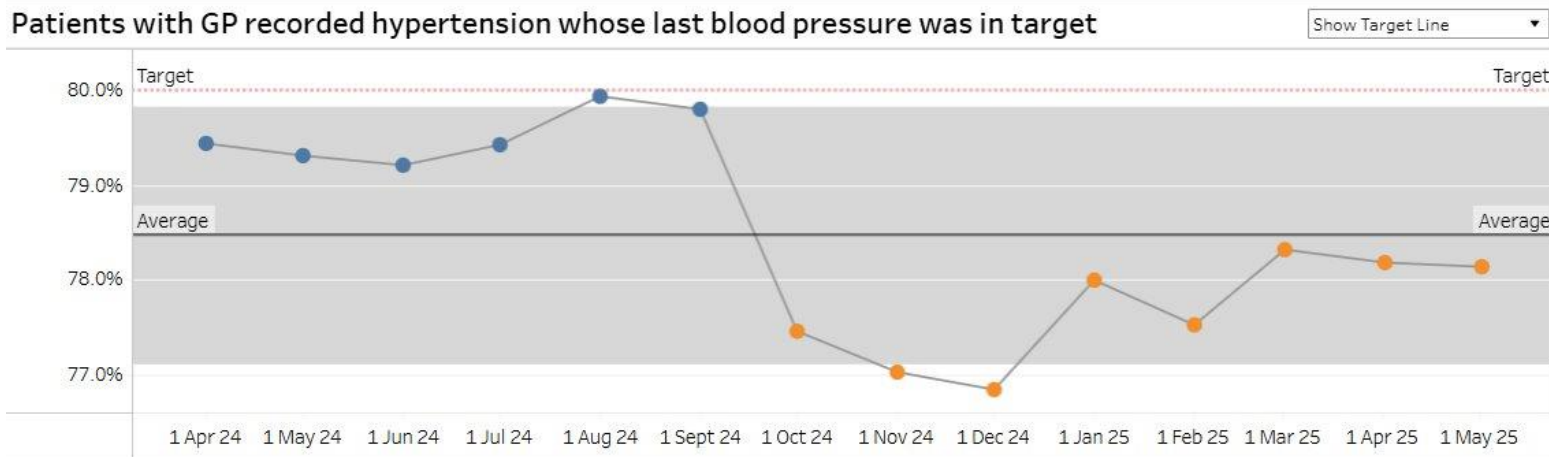
To review these indicators in more detail, please go the CVD & Hypertension page of the DELPPHI Medium Term Plan dashboard found [here](#).

ENH

Hypertension QOF



Patients with GP recorded hypertension whose last blood pressure was in target



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



Hypertension: QOF Indicators

- Reviewing the locality on their percentage achieved from the 2024/25 QOF, we can see that:
 - Welwyn & Hatfield locality is showing below the place value for one of the Hypertension review indicators.
 - Hatfield PCN is showing their percentage achieved as below average in both indicators.
 - Whilst Welwyn Garden city PCN is showing their percentage achieved rate as the highest overall in the 2024/25 QOF.
 - 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%
Welwyn & Hatfield Locality	74.9%	84.0%
HATFIELD PCN	70.0%	81.3%
WELWYN GARDEN CITY A PCN	78.7%	85.9%





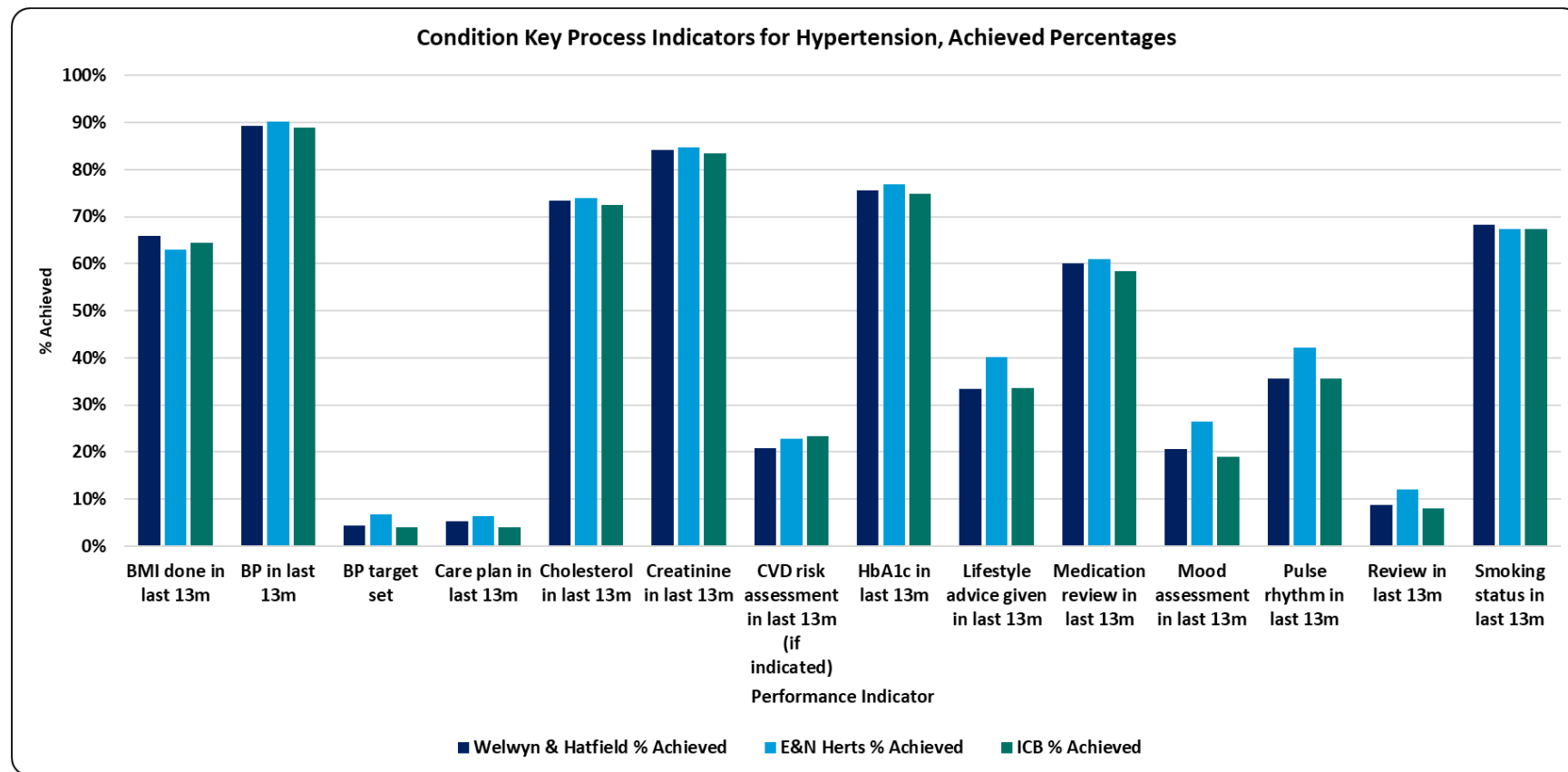
Hypertension: Key Care Process Indicators

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

- Welwyn & Hatfield achieves higher percentages than Place 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 locality are:

- CVD Risk Assessments
- Lifestyle Advice Given
- Mood Assessment
- Pulse Rhythm Assessments



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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 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 PCNs
 - There is opportunity to increase the percentage achieved for Coronary Heart disease, CVD and AF 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%
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%
Welwyn & Hatfield Locality	92.1%	20.6%	45.5%	34.8%	94.9%	96.0%	75.0%	100.0%	12.7%	95.9%	83.0%	88.4%
HATFIELD PCN	88.5%	11.8%	47.9%	31.6%	95.3%	95.7%	74.8%	100.0%	12.3%	95.3%	78.8%	88.1%
WELWYN GARDEN CITY A PCN	94.4%	26.5%	43.8%	37.0%	94.6%	96.3%	75.1%	100.0%	13.1%	96.4%	86.2%	88.6%



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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 the locality on percentage achieved from the 2024/25 ECF, 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 Heart Failure QOF indicators

	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%
Welwyn & Hatfield Locality	84.7%	49.1%	40.7%	1.5%	9.0%	93.6%	96.2%	92.3%
HATFIELD PCN	83.9%	47.4%	42.6%	2.5%	9.5%	92.3%	96.8%	91.4%
WELWYN GARDEN CITY A PCN	85.3%	50.1%	39.8%	0.6%	8.8%	94.5%	95.7%	93.0%



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Source: [Ardens Manager](#)

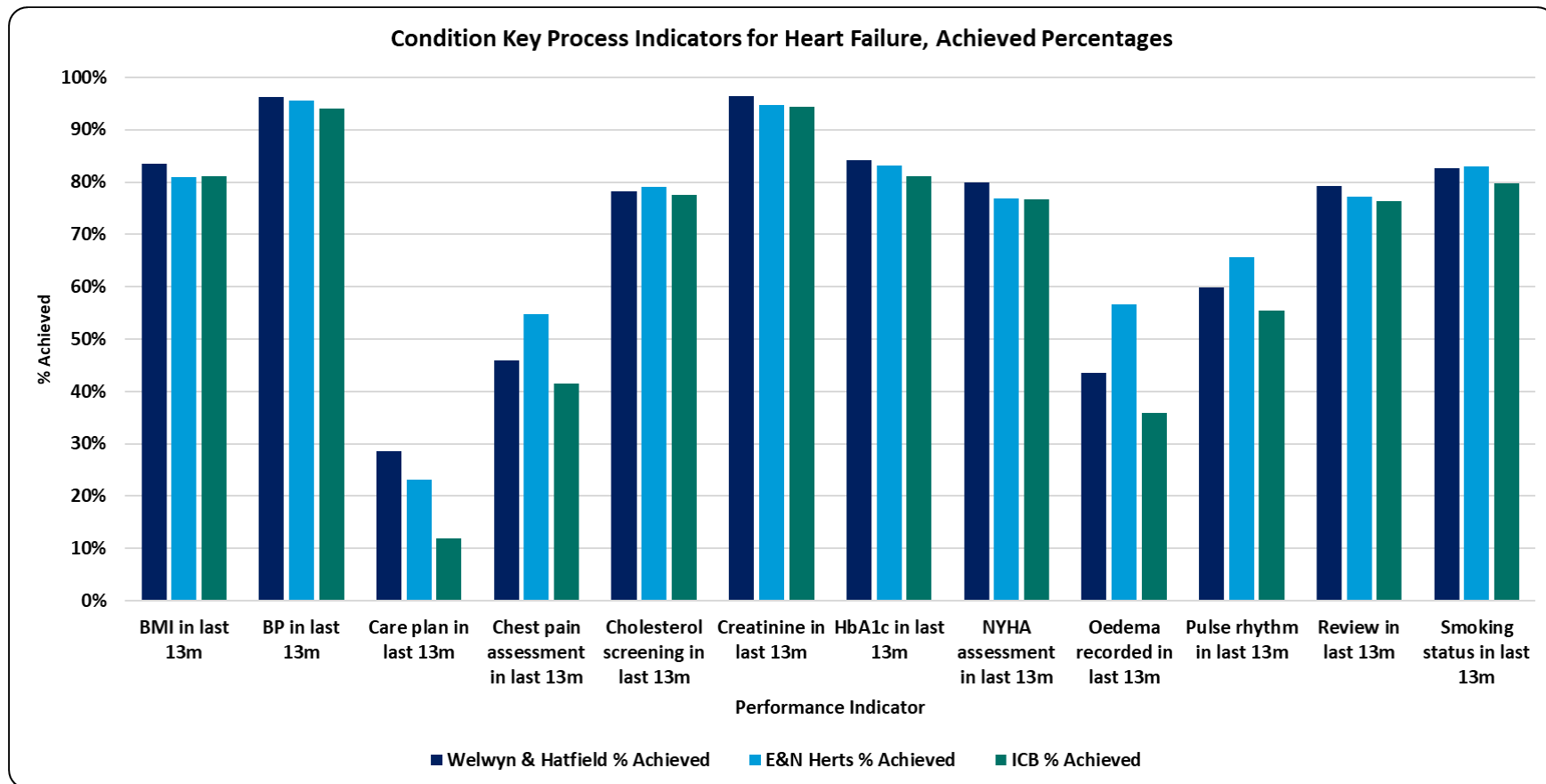


CVD & Other Long-Term Conditions: Key Heart Failure Care Processes

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](#).

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

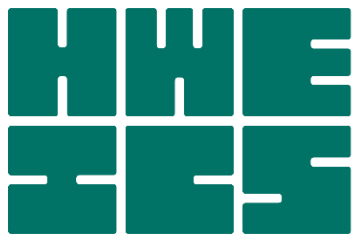
- Chest Pain
- Oedema Recordings
- Pulse Rhythms Tests



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Source: [Ardens Manager](#)



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Mental Health and Learning Disabilities

Management and Outcomes

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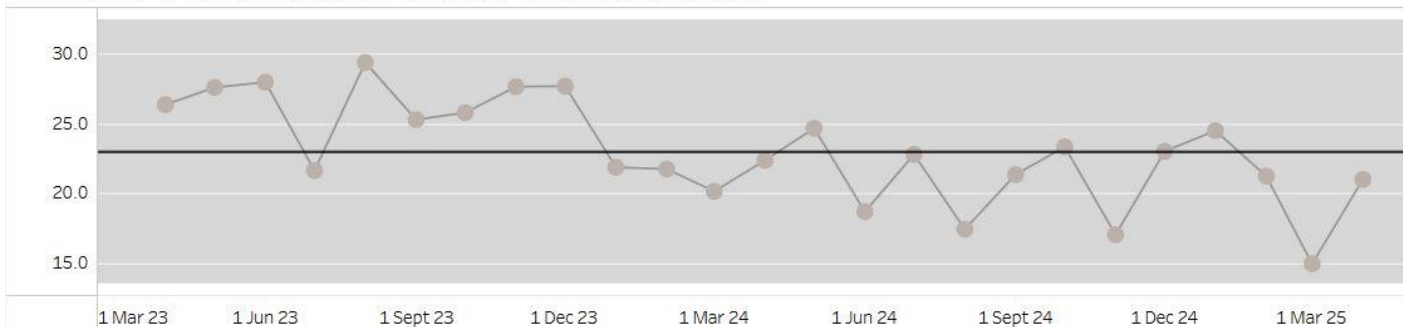


Better care for Mental Health Crisis: Medium Term Plan Indicators

- 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.

ENH

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



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

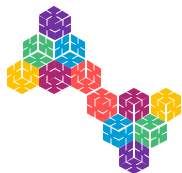


Mental health: Programme outcomes

- 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 table reports on population health indicators from DELPPHI for Welwyn & Hatfield locality to provide assurance that activities are delivering the required impact.
- Emergency admissions for preventable ACSC conditions have decreased compared to the previous period, however, there has been a rise in associated costs.

		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	37.4 38 / 122,888	63.4 60 / 120,944	-26.1	-41.1%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£3,279k £3,355k / 122,888	£2,813k £2,874k / 120,944	£466,404	16.6%
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				





Depression and SMI: QOF indicators

- Mental Health QOF metrics for 2024-25 show that Welwyn & Hatfield has a higher percentage of achievement levels for QOF for most SMI and depression 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. 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.

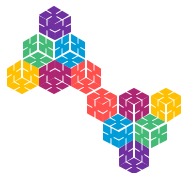
	Depression		Mental Health							
	Review		Review							
	DEP004 CURRENT: Reviewed 10-56d after diagnosis if >18y (2024- 25)	DEP004 PROTECTED: Reviewed 10-56d after diagnosis if >18y (2023- 24)	MH002: Care plan done in last 12m	MH003: BP done in last 12m	MH006: BMI done in last 12m	MH007: Alcohol consumptio n done in last 12m	MH011: Lipid profile in last 24m or 12m if antipsychoti cs/CVD/smo ker/overwei ght	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%
Welwyn & Hatfield Locality	80.1%	86.1%	93.1%	95.3%	96.4%	96.0%	91.8%	92.0%	65.7%	68.2%
HATFIELD PCN	71.2%	87.6%	93.1%	94.3%	95.8%	96.1%	87.0%	88.1%	70.0%	67.8%
WELWYN GARDEN CITY A PCN	90.0%	84.7%	93.0%	96.1%	96.8%	96.0%	95.1%	94.8%	63.1%	68.4%



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Source: [Ardens Manager](#)



SMI: ECF indicators

- The data shows that Welwyn & Hatfield has a lower percentage for most SMI ECF indicators when compared against place and the ICB.
- The data in the table on 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%
Welwyn & Hatfield Locality	7.6%	9.5%	22.0%	3.5%	6.8%	6.4%	50.9%	11.2%
HATFIELD PCN	3.4%	6.6%	17.2%	0.8%	2.9%	2.4%	54.4%	9.3%
WELWYN GARDEN CITY A PCN	10.4%	11.4%	25.2%	5.4%	9.5%	9.1%	48.5%	12.5%

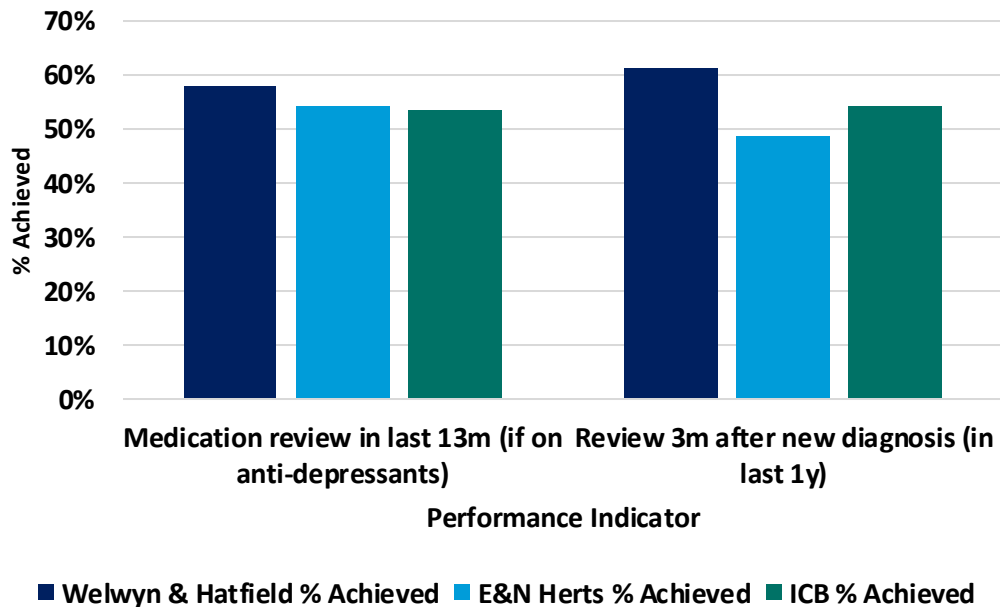




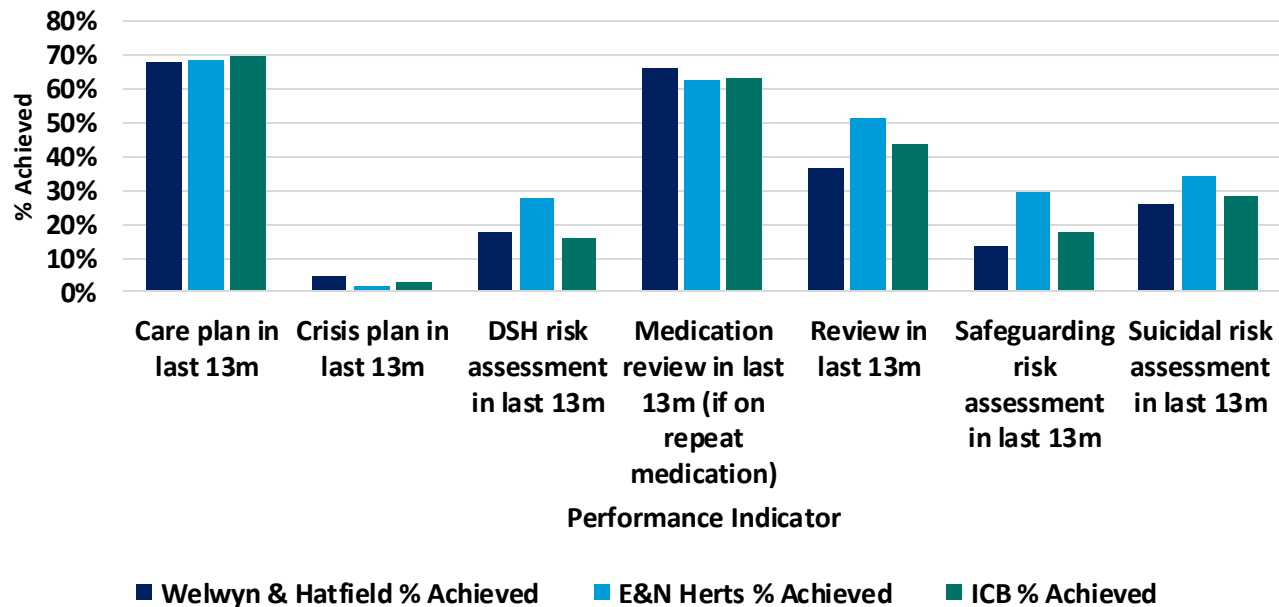
SMI and Depression: Key process indicators

- In the past year, Welwyn & Hatfield recorded the highest rate of depression reviews conducted three months after diagnosis, compared to ENH and the ICB.
- Welwyn & Hatfield is achieving slightly higher with the number of crisis plans produced for SMI patients in comparison to ENH 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 Welwyn & Hatfield has a lower percentage for most of the learning disability ECF indicators when compared against place and the ICB.
- The data in the table on the right 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%
Welwyn & Hatfield Locality	47.1%	47.3%	21.1%	12.2%	15.9%	46.9%	2.3%
HATFIELD PCN	46.1%	46.5%	20.2%	15.8%	20.2%	45.9%	4.0%
WELWYN GARDEN CITY A PCN	47.8%	47.9%	21.7%	9.6%	12.8%	47.6%	1.2%



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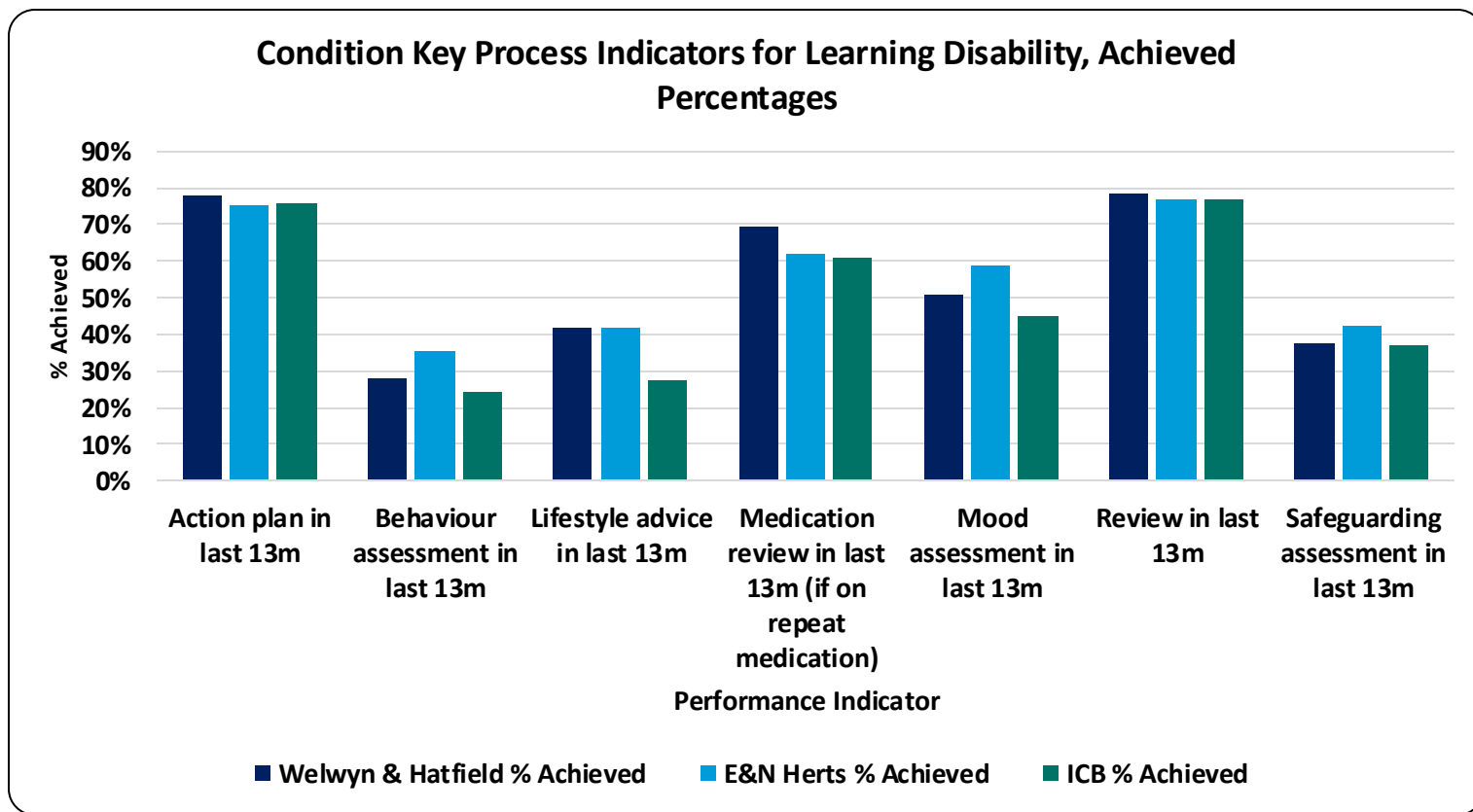


Source: [Ardens Manager](#)



Learning Disability: Key process indicators

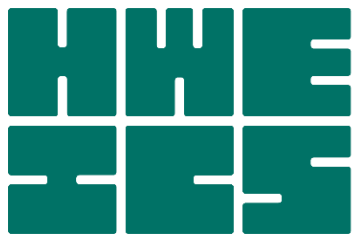
- Welwyn & Hatfield is achieving higher percentage completeness against ENH and the ICB in several key learning disability processes, including the production of action plans and reviews over the past 13 months.
- All other reviews can be found in [Ardens Manager](#).



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Source: [Ardens Manager](#)



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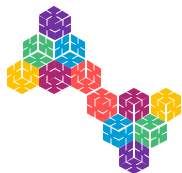


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Cancer and Planned Care Management and outcomes

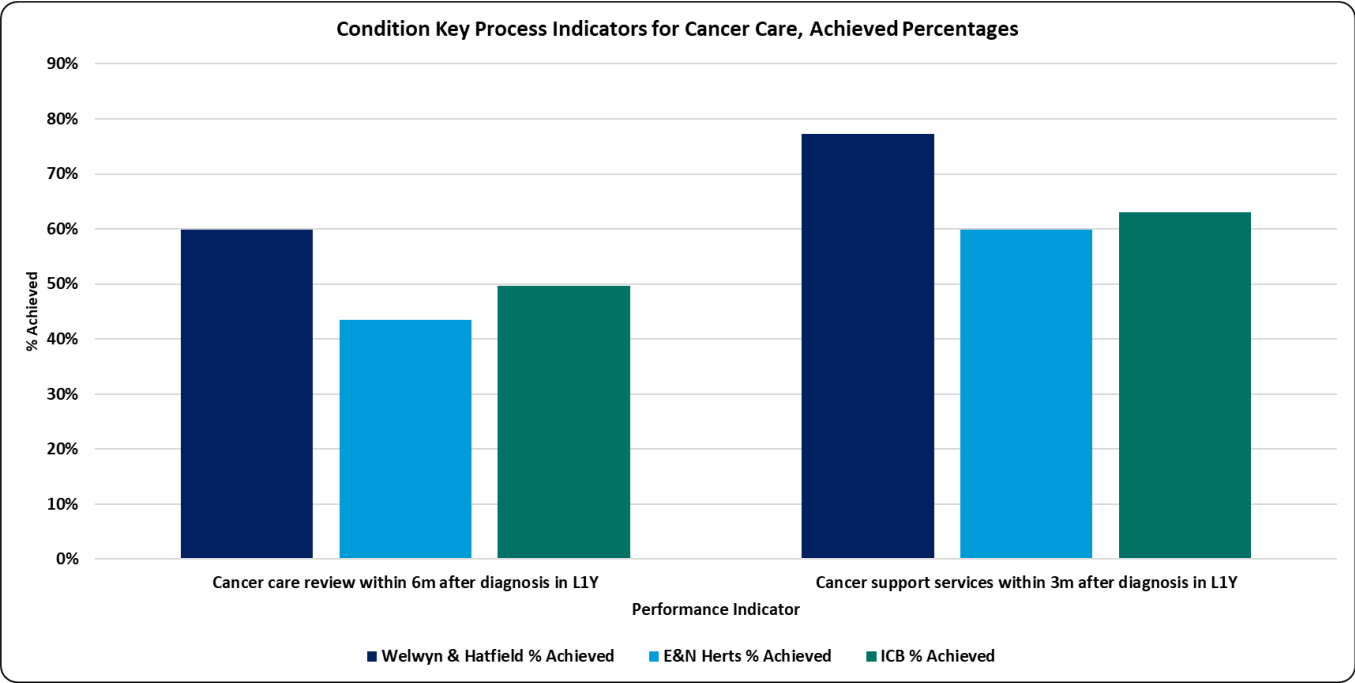
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Cancer: QOF and Key processes indicators

- More people in Welwyn and Hatfield have received a care review within 6 months of diagnosis or offered support services when compared with place and ICB.
- Welwyn & Hatfield’s cancer care processes are higher than Place and the ICB.
- 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%
E&N Herts Place	89.1%	94.3%	80.9%	86.4%
Welwyn & Hatfield Locality	95.8%	96.8%	90.4%	89.6%
HATFIELD PCN	96.6%	97.4%	94.1%	90.4%
WELWYN GARDEN CITY A PCN	95.0%	96.3%	86.9%	89.0%



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Source: [Ardens Manager](#)



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Frailty and End of Life care Management and outcomes

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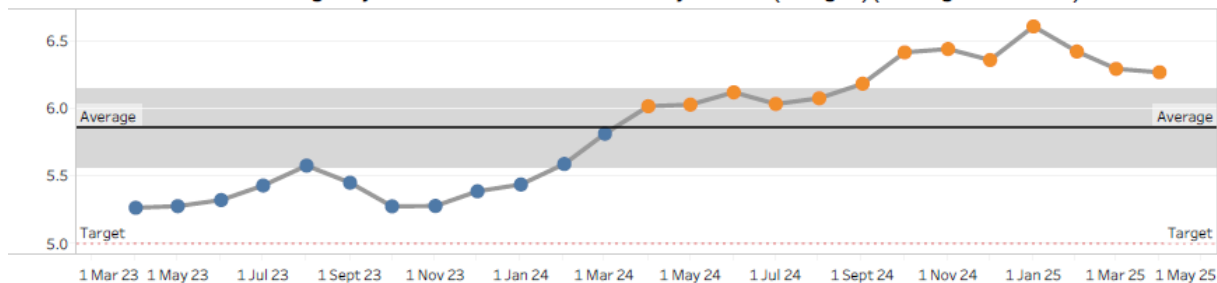


Frailty and EOL: Medium Term Plan Indicators

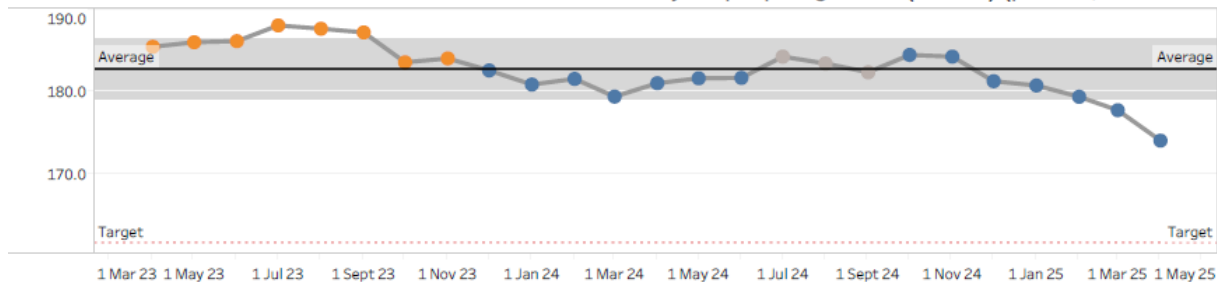
- The trend charts indicates the ENH targets and what their current trajectory is for the relevant measure.
- PAH & ENHT have changed the way in which SDEC is being coded resulting in much lower emergency admissions counts from Nov-24 onwards. Measures which reference emergency admissions will show lower 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

ENH

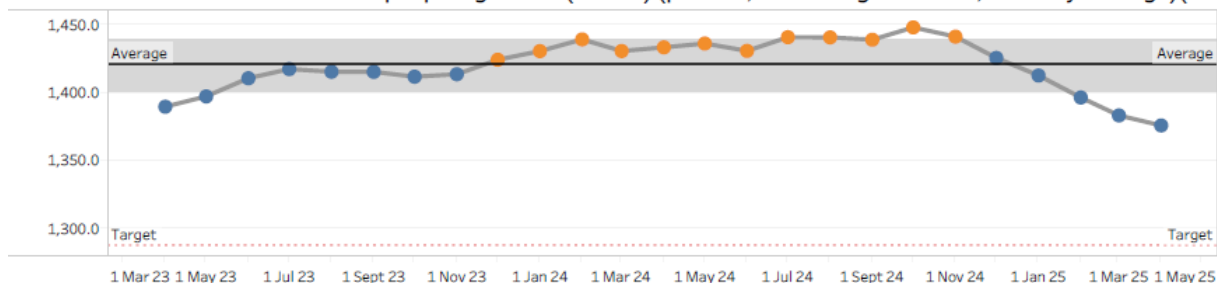
Deaths with 3 or more emergency admissions in the last 90 days of life (all ages)(Rolling 12 months)



Rate of non-elective admissions for falls within the community for people aged 65+ (LoS > 0) (per 100,000 Rolling 12 months)



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.

Welwyn & Hatfield

		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 65-120	136.0 23 / 16,915	231.9 40 / 16,428	-95.9	-41.3%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 65-120	£10,048k £1,744k / 16,915	£8,603k £1,513k / 16,428	£1,445,155	16.8%
Programme	Emergency Admissions, Stay Under 24 hours, DSR per 100,000, aged between 65-120	374.2 65 / 16,915	519.2 91 / 16,428	-145.0	-27.9%
	Emergency Admissions LoS >0, Moderate/ Severe Frail at Admission (GP SUBMITTING PRACTICES ONLY), DSR per 100,000, aged between 65-120	Supressed due to small numbers			
	Emergency Admissions LoS >0, DSR per 100,000, aged between 65-120	1,420.3 247 / 16,915	1,606.0 281 / 16,428	-185.7	-11.6%
	Emergency Admissions LoS >0, Falls Within the Community, DSR per 100,000, aged between 65-120	134.5 24 / 16,915	215.5 39 / 16,428	-81.0	-37.6%
	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	Supressed due to small numbers			
	Percentage of Emergency Admissions LoS >0, Falls Within the Community, Discharge to Usual Place of Residence, aged between 65-120	87.5% 21 / 24	84.6% 33 / 39	2.9%	3.4%
	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	10.7% 16 / 149	11.4% 22 / 193	-0.7%	-5.8%



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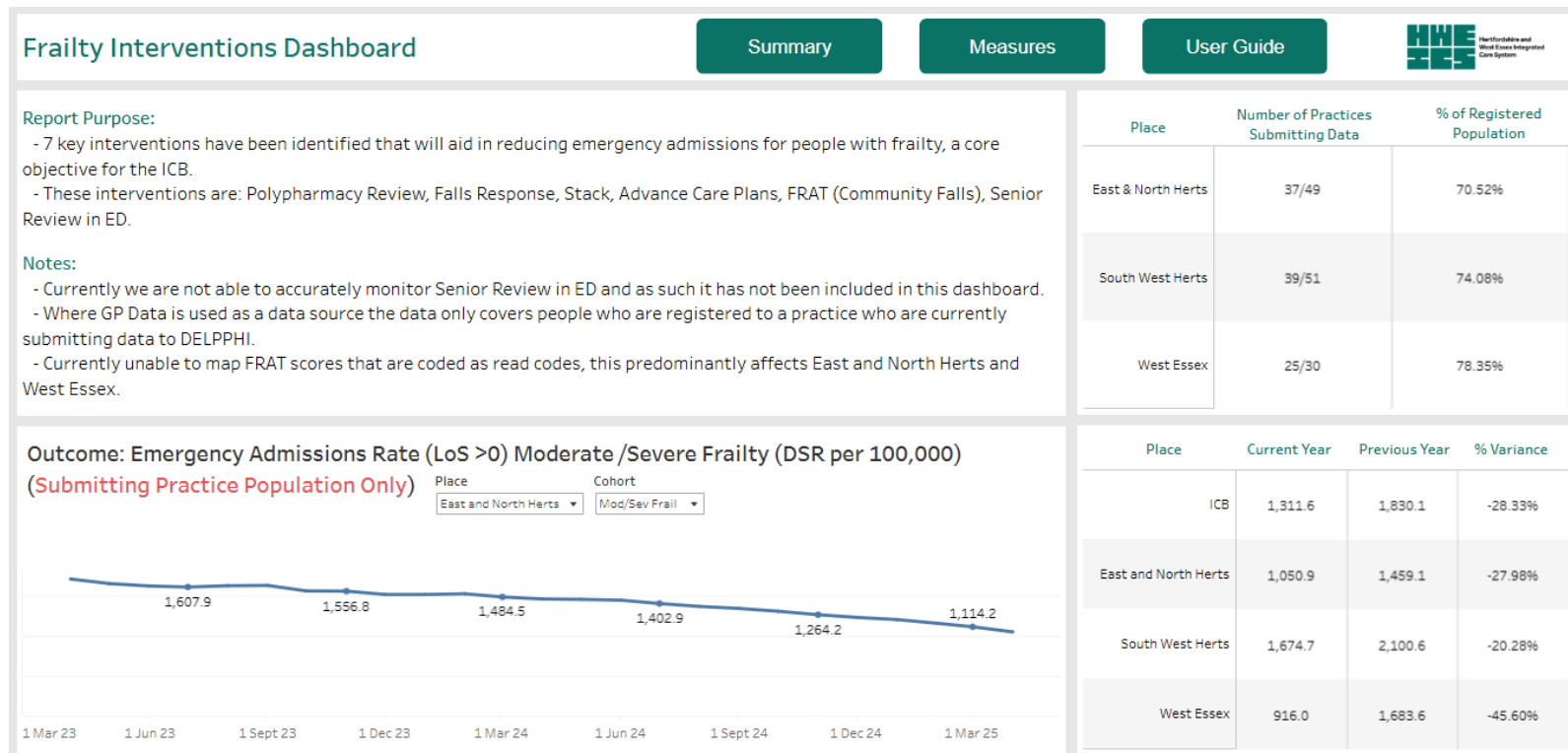


Source: [DELPPHI - HWE Outcomes Dashboard](#)



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 Welwyn & Hatfield has a higher percentage for 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/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%
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%
Welwyn & Hatfield Locality	2.1%	40.7%	56.8%	48.3%	85.2%	13.0%	83.9%	81.0%	68.3%	37.7%	84.4%	62.2%	19.3%	66.5%	14.3%
HATFIELD PCN	3.1%	43.0%	56.0%	41.9%	75.2%	15.4%	73.9%	72.0%	69.3%	37.6%	93.8%	65.0%	24.3%	68.0%	16.1%
WELWYN GARDEN CITY A PCN	1.5%	39.3%	57.9%	52.2%	91.3%	11.5%	90.0%	86.5%	67.2%	37.7%	74.7%	59.3%	14.0%	65.0%	12.4%



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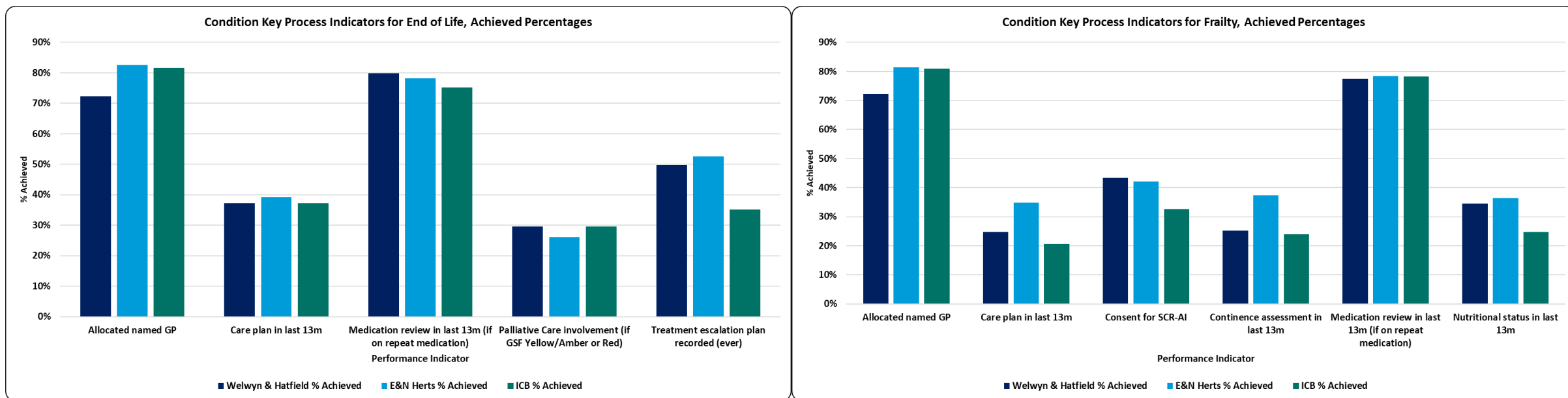


Source: [Ardens Manager](#)



Frailty and EOL: Key processes indicators

- Welwyn & Hatfield has opportunities to increase the number of recorded care plans for both Frailty and EoL.
- 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.



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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 table below shows a core set of population health indicators from DELPPHI which have been broken down at GP practice level to reflect the Welwyn & Hatfield locality to provide assurance that activities are delivering the required impact.
- Mortality from dementia and Alzheimer’s disease has been supressed due to small numbers. The link below can be followed to access the data where permitted.

		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	37.4 38 / 122,888	63.4 60 / 120,944	-26.1	-41.1%
	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£3,279k £3,355k / 122,888	£2,813k £2,874k / 120,944	£466,404	16.6%
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				



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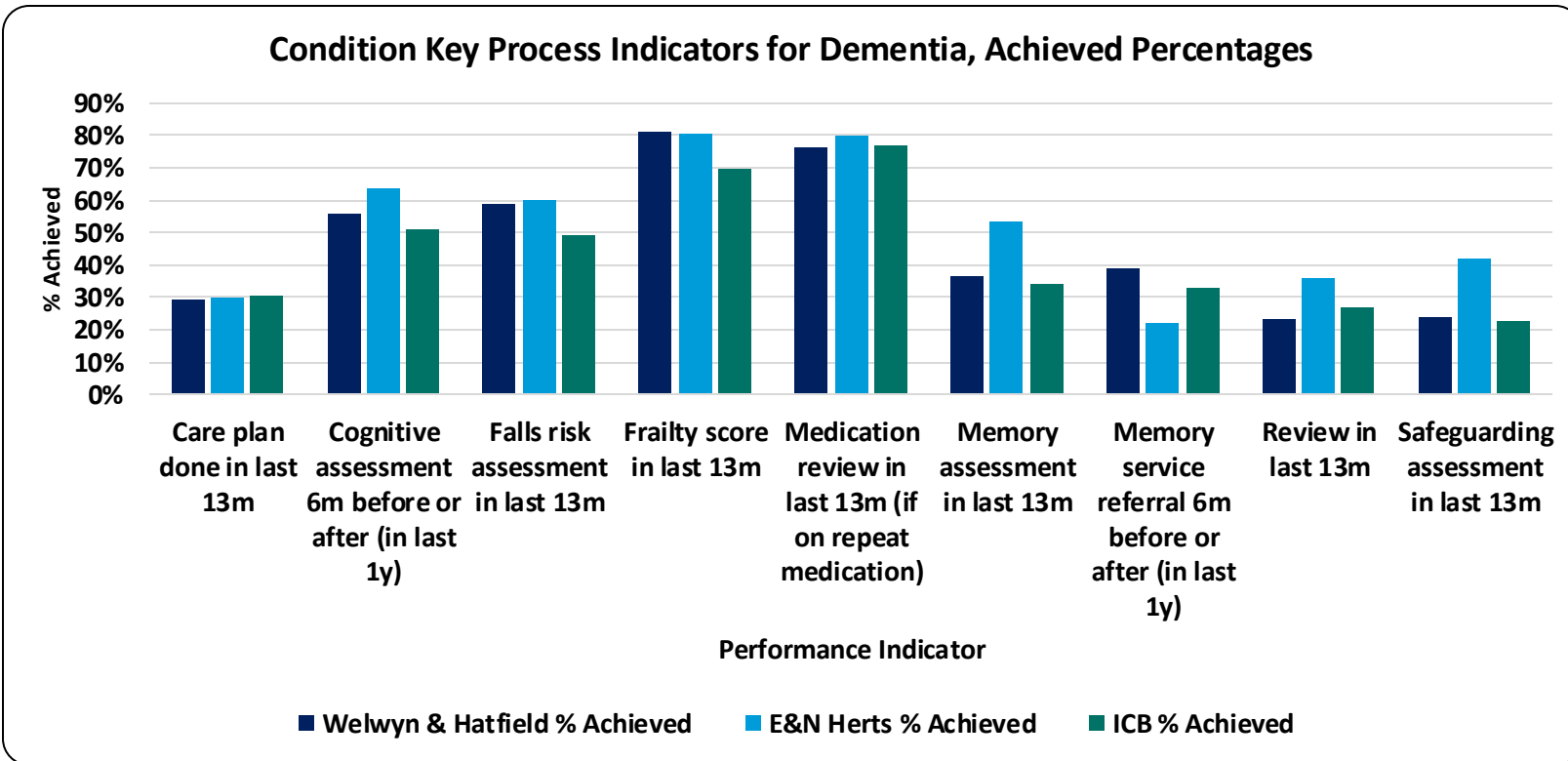
Source: [DELPPHI - HWE Outcomes Dashboard](#)



Dementia: QOF and key process indicators

- Dementia QOF metrics for 2024-25 show that Welwyn & Hatfield has a lower percentage of achievement across most 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. 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%
Welwyn & Hatfield Locality	80.3%
HATFIELD PCN	78.4%
WELWYN GARDEN CITY A PCN	81.7%



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Source: [Ardens Manager](#)



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Other key outcomes

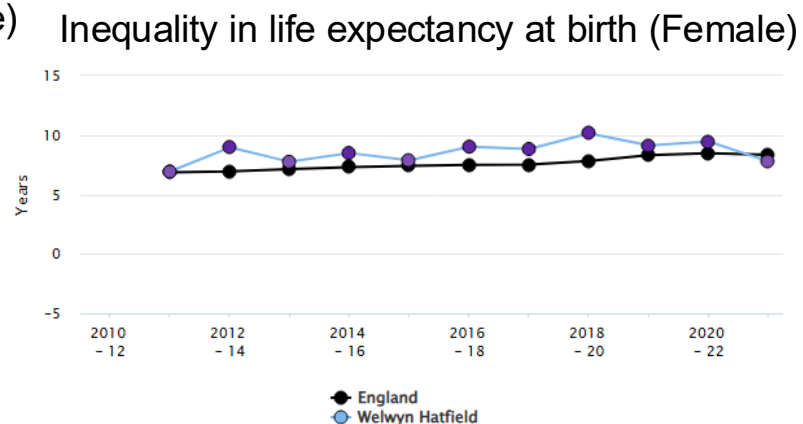
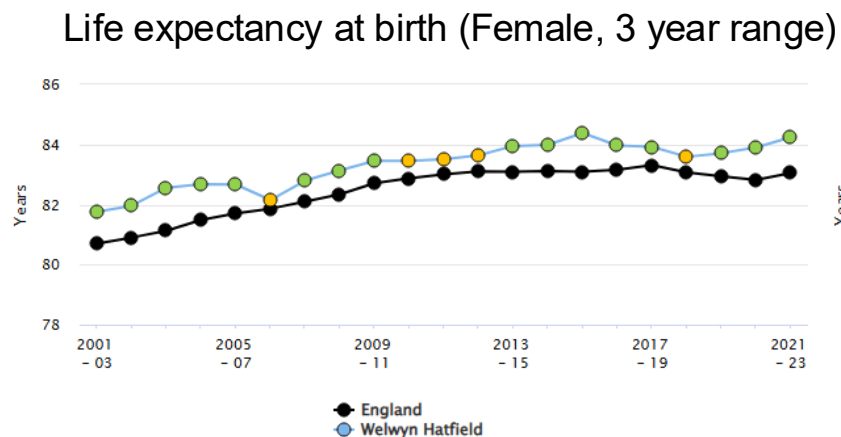
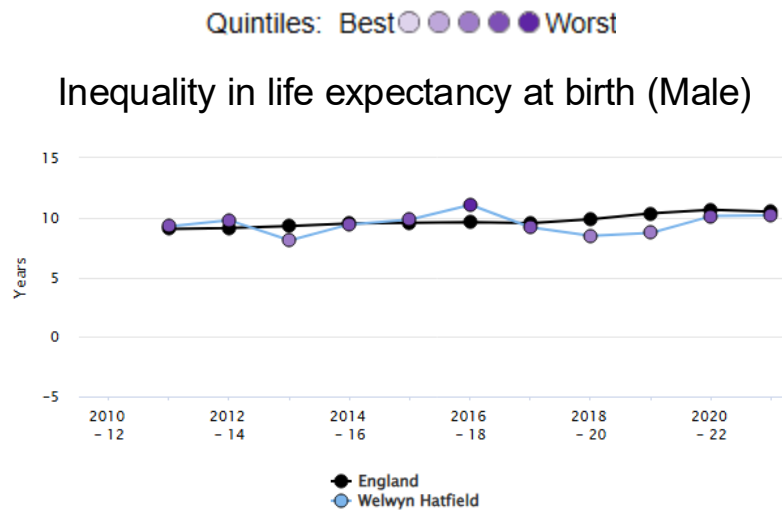
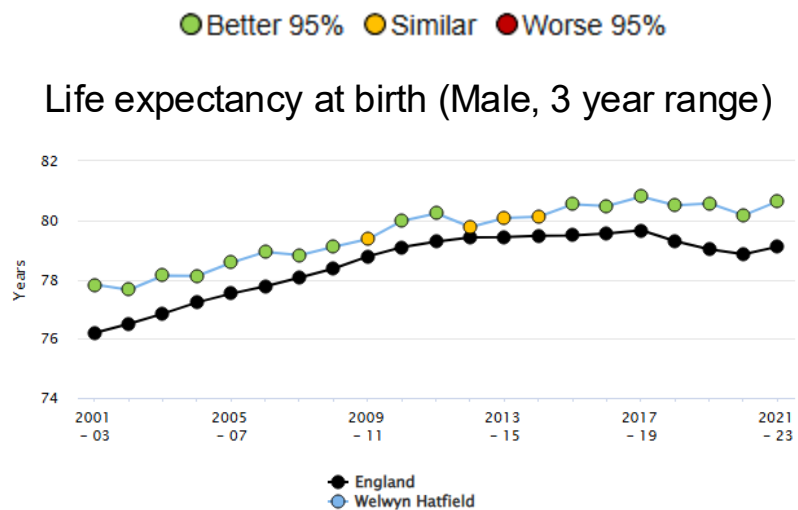
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Life Expectancy and Inequality in Life Expectancy at Birth

- Welwyn & Hatfield's life expectancy for both male and female has remained consistently above EoE and England.
- Inequality of life expectancy for both male and female is in the 2nd worst quintile, for 2021-23 period. The data shows that males in the most deprived quintiles will live nearly 10 years less than those living in the least deprived quintiles, in Welwyn & Hatfield. For females, the gap is 7.8 years.



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



Emergency Admission Rates for Ambulatory Care Sensitive Conditions (ACSC)

Welwyn & Hatfield

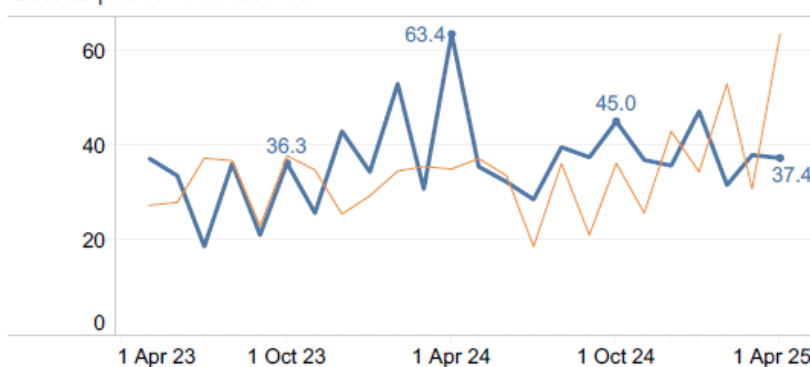
- For ACSC condition emergency admissions, the rate has increasing since the end of the official Covid period in March 2021, but is now declining in this year.
- The list of Chronic Ambulatory Care Sensitive Conditions can be found via the [NHS Outcomes Framework Indicators](#) and Indicator Specification 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	37.4 38 / 122,888	63.4 60 / 120,944	-26.1	-41.1%

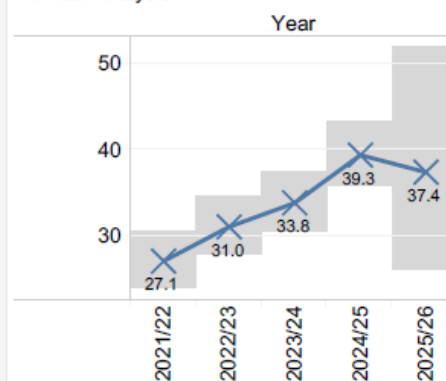
Emergency Admissions, Preventable Chronic Ambulatory Care Sensitive Conditions, DSR per 100,000, aged between 0-120

Monthly Analysis

Selected | Same Period Last Year

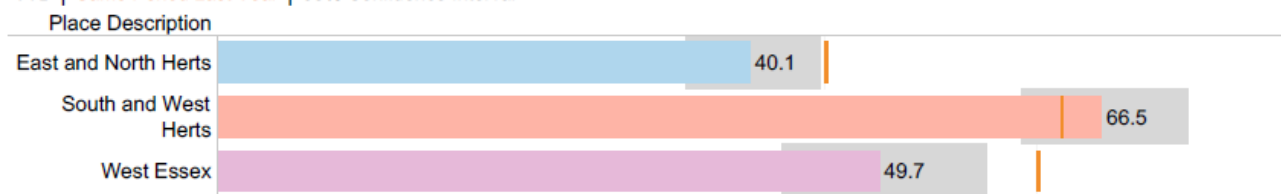


Annual Analysis



Place Summary

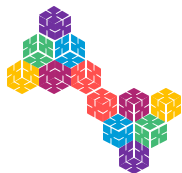
YTD | Same Period Last Year | 95% Confidence Interval



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

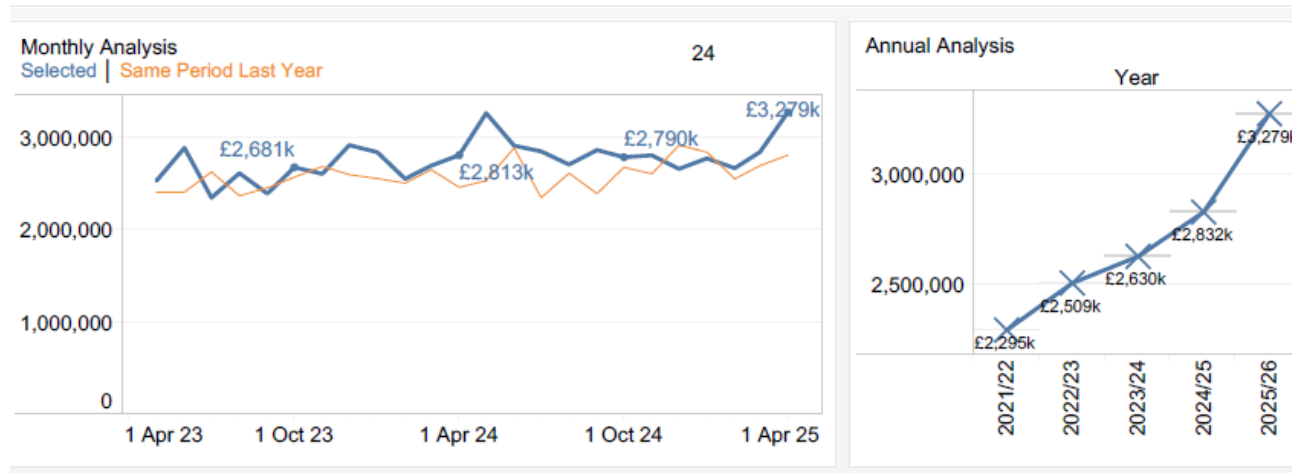


Total cost of Emergency hospital care for Welwyn & Hatfield

- The locality continues to see an increase in demand for emergency hospital care since Covid.
- 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.

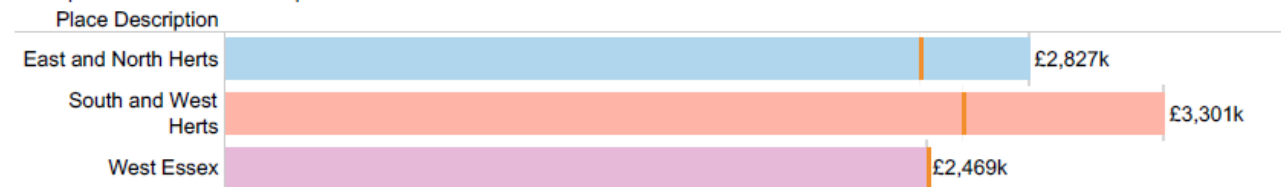
Measure..	Measure	Current Period	Previous Period	Difference	% Difference
Whole System	Total Cost of Emergency Hospital Care, DSR per 100,000, aged between 0-120	£3,279k £3,355k / 122,888	£2,813k £2,874k / 120,944	£466,404	16.6%

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



Place Summary

YTD | Same Period Last Year | 95% Confidence Interval



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



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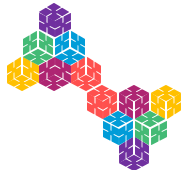


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Glossary

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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 4th August 25

Locality	Practice Name	Flowing data
WelHat	The Garden City Practice	✓
	Wrafton House Surgery	✓
	Burvill House Surgery	✓
	Potterells Medical Centre	✓
	Spring House Medical Centre	✓
	Hall Grove Group Practice	✗
	Lister House Surgery	✗
	Peartree Lane Surgery	✗

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