

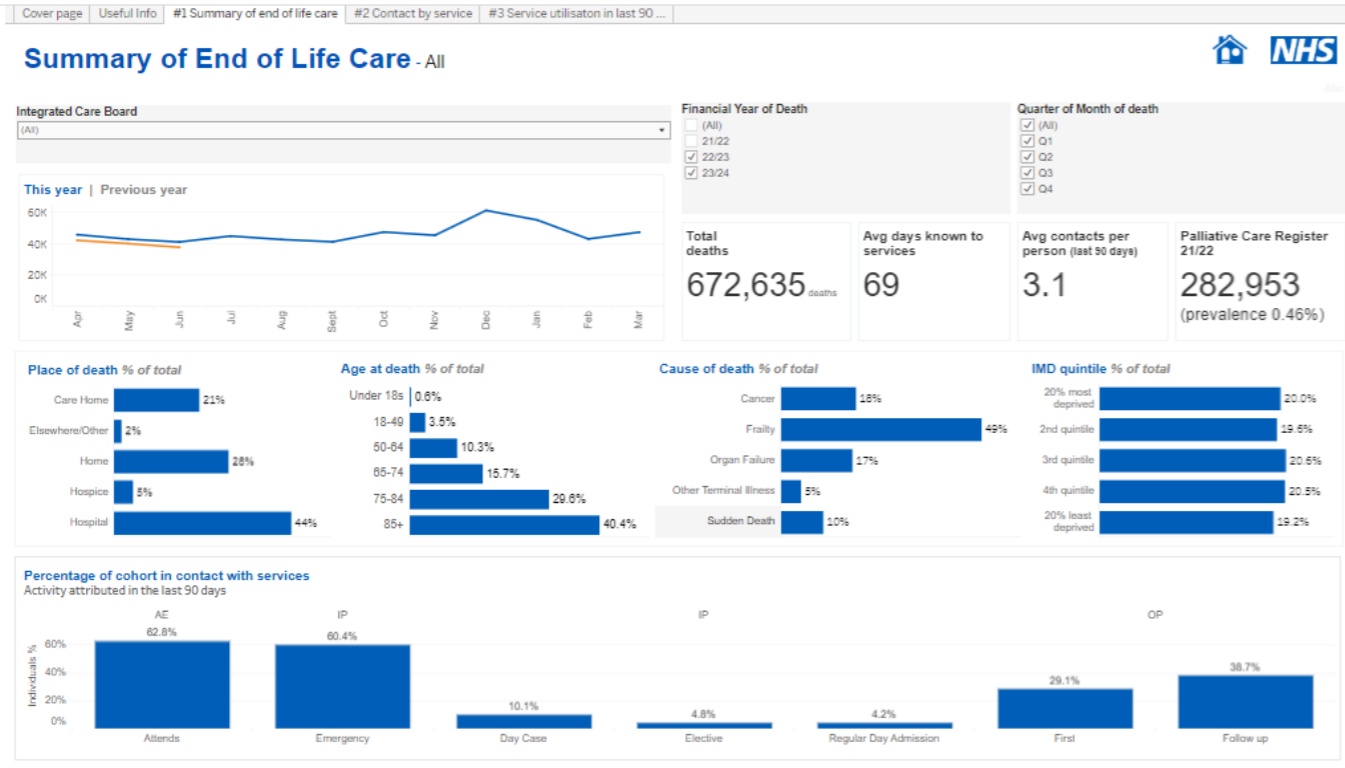
# Vital Signs

-

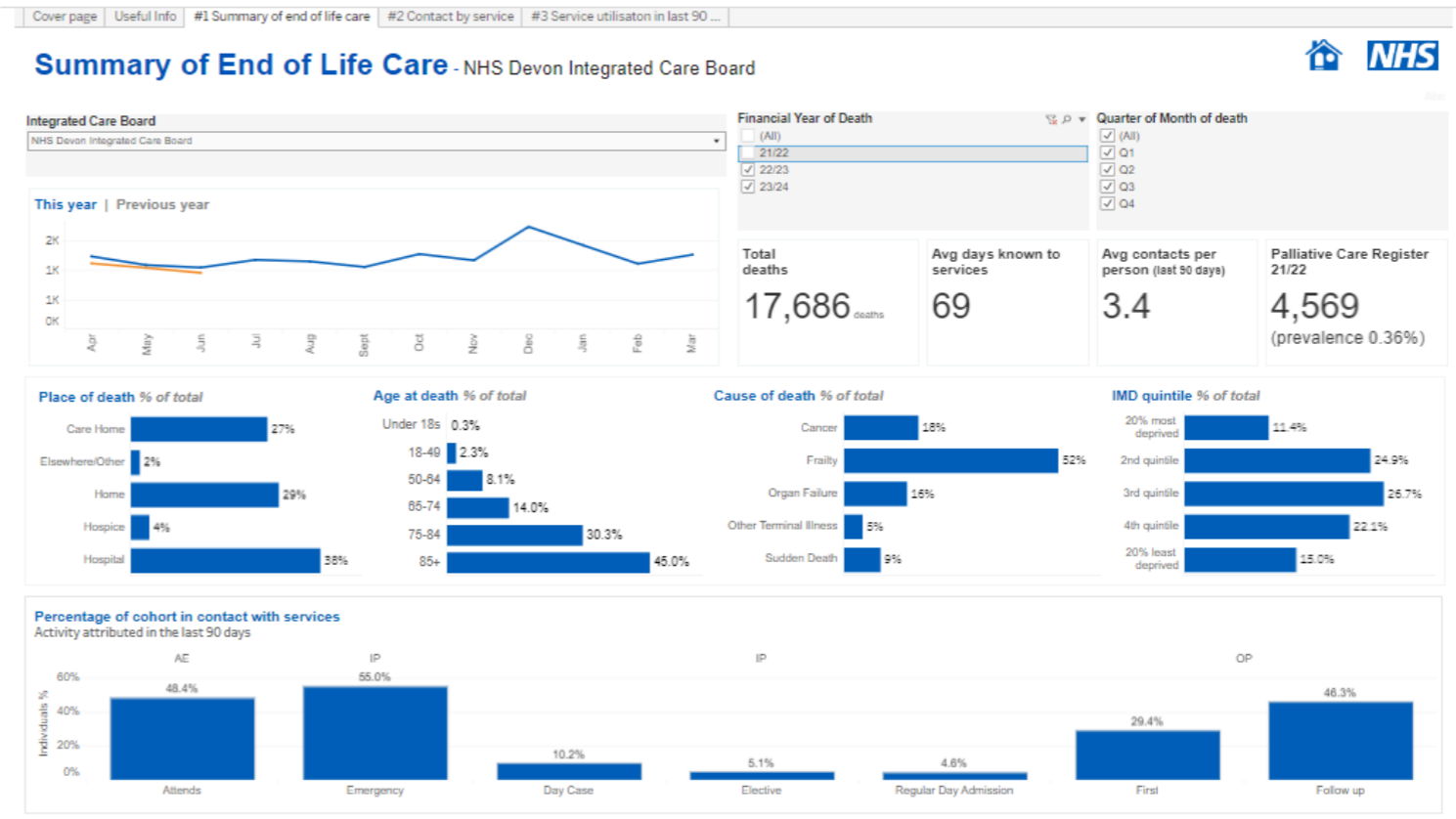
## Making the most of national data



# Access and compare national and local data...



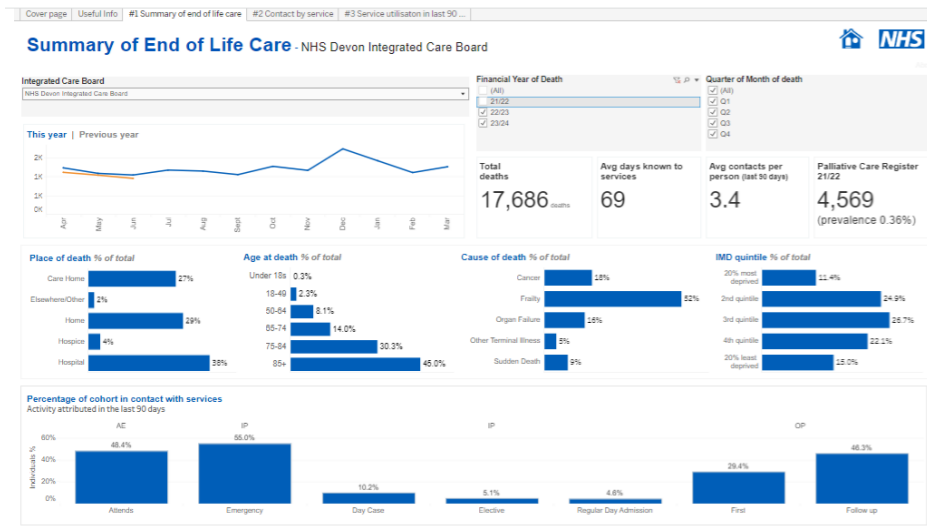
National View



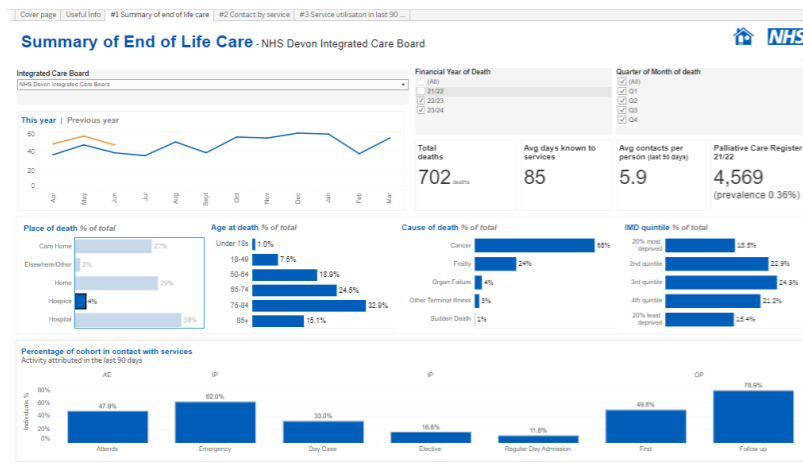
Devon View



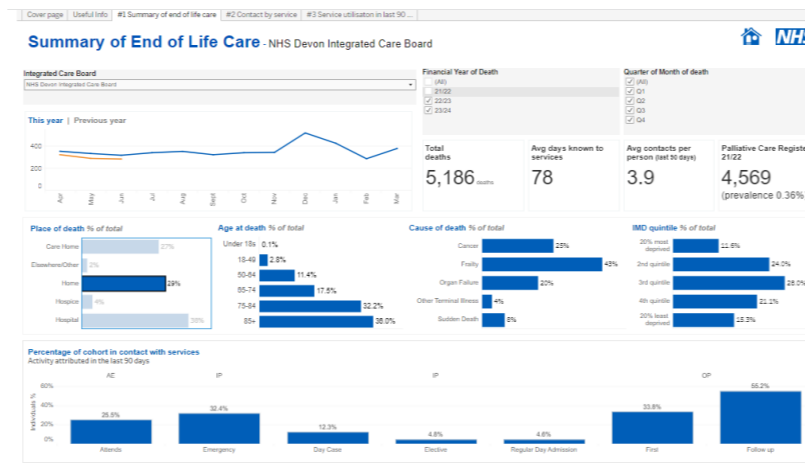
# Filter and compare local data by key parameters...



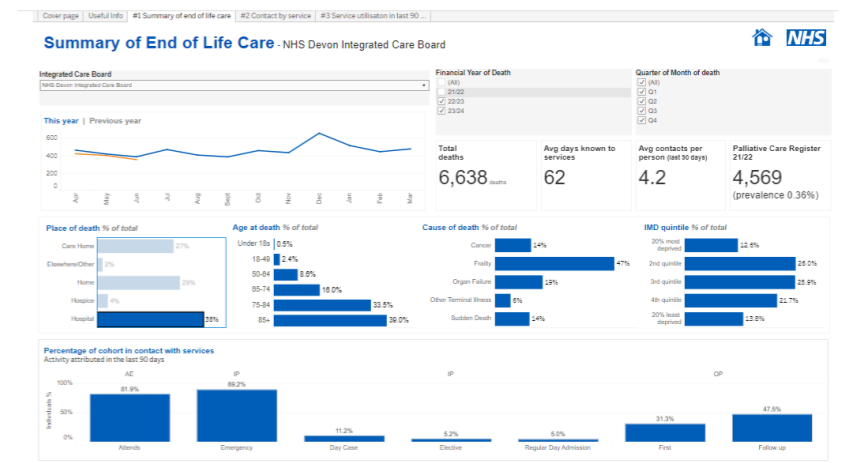
All Devon View



Died in a Hospice



Died at Home



Died in Hospital

# Understand patterns of contact with local services...

## Contact by Service - NHS Devon Integrated Care Board



### Integrated Care Board

NHS Devon Integrated Care Board

### Financial Year of Death

- (All)
- 21/22
- 22/23
- 23/24

### Quarter of Month of death

- (All)
- Q1
- Q2
- Q3
- Q4

Total deaths

**368** deaths

Avg days known to services

**75**

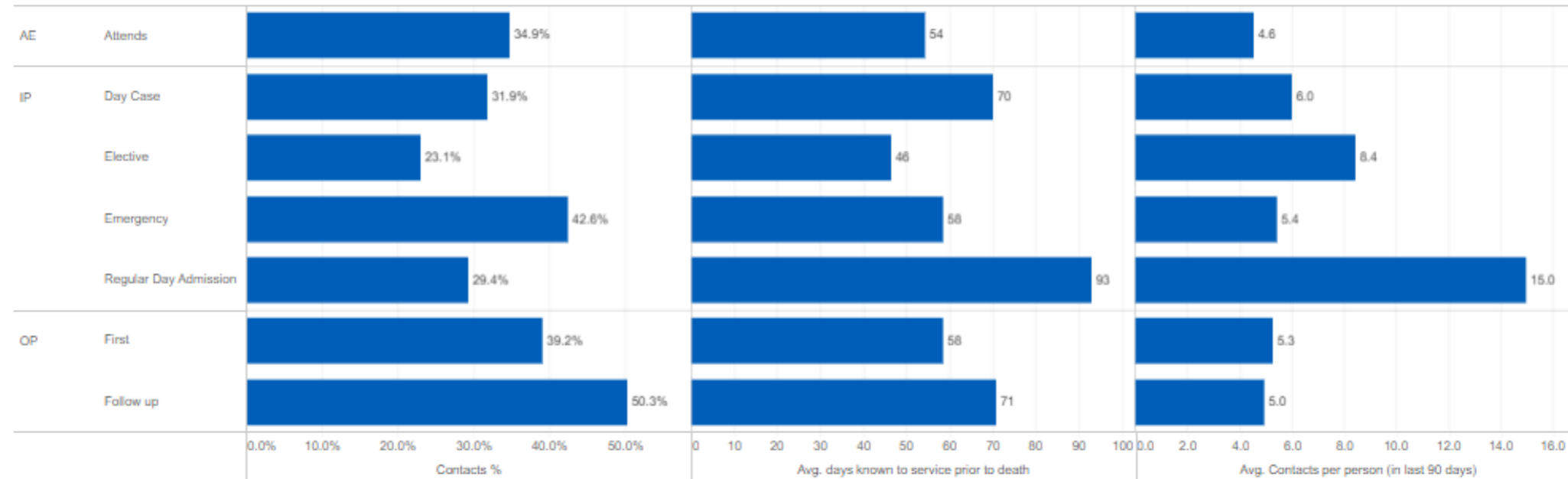
Avg contacts per person (last 90 days)

**2.4**

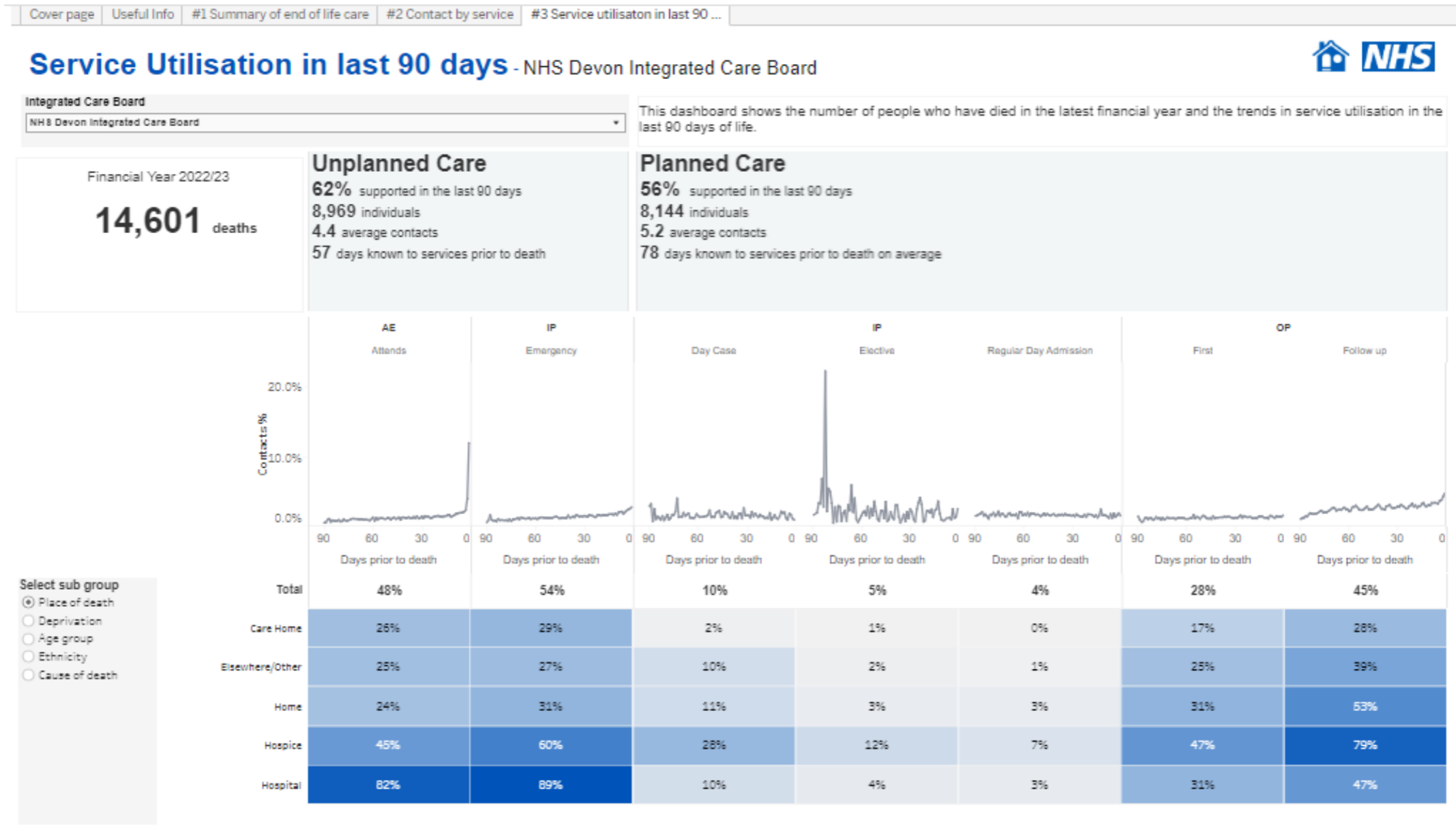
Palliative Care Register 21/22

**4,569**  
(prevalence 0.36%)

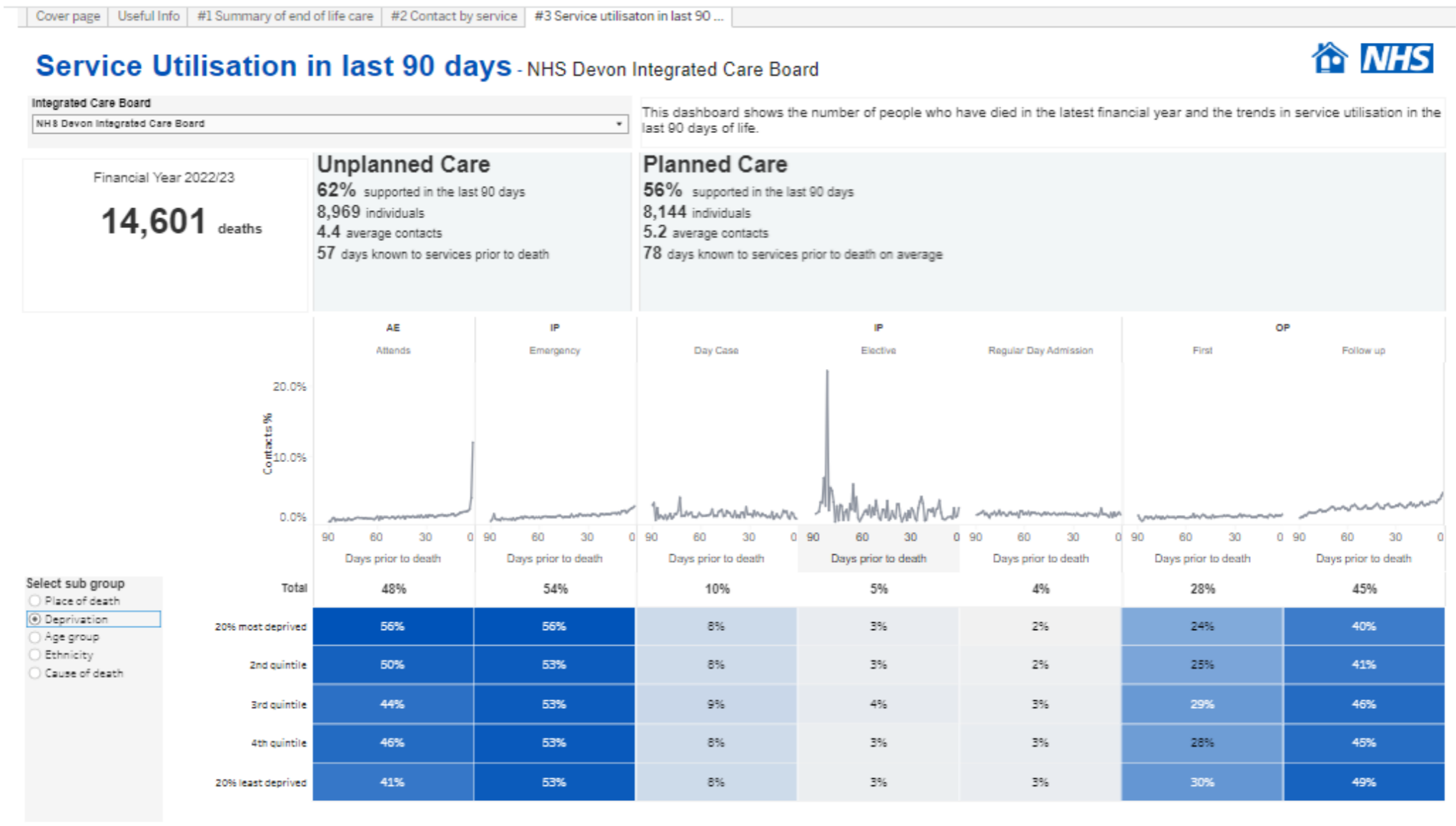
### Contact by service



# Understand patterns of activity towards end of life...



# Filter by deprivation, age, cause of death, etc...



# Find out more...

Cover page Useful Info #1 Summary of end of life care #2 Contact by service #3 Service utilisation in last 90 ...

## ICB Palliative End of Life Dashboard

The ICB Palliative End of Life Care report provides an overview of the services accessed by patients in their last 90 days of life. The dashboard displays service utilisation across multiple years to enable the user to assess changes in activity over time. The dashboard has been developed to allow the user to switch the focus of the report views by selecting chosen criteria, including ICB, financial year, and specific sub-groups such as age group, cause of death, place of death, ethnicity and deprivation. The aims of the dashboard report are to :

1. Review and identify disparities based on patient characteristics and deprivation, to enable ICBs to put plans in place to address and to track the effectiveness of these plans.
2. To provide information to understand whole patient journeys and develop new funding currencies.
3. Standardised reports for every ICS.
4. Provide the benefits of scale and automation, produce once use many times, providing much better value than individual ICS and regions producing separate analysis.


**Data Sources:** The following activity data sets have been accessed via NCDR: Mortality, SUS+ Emergency Care Dataset, Admitted Patient Care, Critical Care & Outpatient Datasets. In addition, the Palliative Care Register is derived from GP Quality Outcomes Framework (QOF).

**Frequency:** Quarterly  
**Latest Data Period:** Q4, 2022/23  
**Last Updated:** June 2023

The NHS England Team would like to thank the following for their contributions in developing this work:  
NHS Midlands and Lancashire CSU Business Intelligence Teams  
NHSE Midlands and NHS North East & Yorkshire regional Strategic Network Leads and the Palliative Care Data and Intelligence Lead  
Shropshire Telford and Wrekin ICB for their partnership in this work


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**Release and Release Year:** 1, 2023



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Available via [future.nhs.uk](https://future.nhs.uk)

[https://future.nhs.uk/connect.ti/EOLC\\_Practitioners/view?objectId=46048944](https://future.nhs.uk/connect.ti/EOLC_Practitioners/view?objectId=46048944)



# Find out more...

Cover page Useful Info #1 Summary of end of life care #2 Contact by service #3 Service utilisation in last 90 ...

## ICB Palliative End of Life Dashboard: Useful Information NHS

**Sub group categories:** The sub groups are ordered as follows; Place of death and Cause of death are in alphabetical order; Age at death is in a fixed order to show age bands in ascending order, similarly the IMD quintiles are shown in a fixed order from the most deprived to the least deprived.

**Selecting items within sub groups:** It is possible to filter within the sub group charts on the Summary of End of Life Care view by clicking on the chosen parameter (e.g. Place of Death / Age etc.), and the dashboard updates based on the selections made. For example, within the Place of Death subgroup it is possible to select Hospital, you can also then select a specific age group, cause of death and IMD Quintile. To remove a filter simply click on the selected item again and the filter is removed.


**Index of Multiple Deprivation (IMD):** The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation for small areas in England. The IMD ranks every small area in England from 1 (most deprived area) to 32,844 (least deprived area). The IMD classifies these areas into five quintiles based on relative disadvantage, with quintile 1 being the most deprived and quintile 5 being the least deprived. The link below provides access to further information regarding IMD including FAQs.

**Patient Classifications: Regular Day Admission:** A patient admitted electively during the day, as part of a planned series of regular admissions for an on-going regime of broadly similar treatment and who is discharged the same day. **Day Case Admission:** A patient admitted electively during the course of a day with the intention of receiving care who does not require the use of a Hospital Bed overnight and who returns home as scheduled. Please see NHS Data Dictionary (link below) for additional information.

**Note:** Where there are blank cells on the 'Service Utilisation in last 90 days' view table, this is where there are no records within the data.

**Useful links:**  
NHS Data Model and Dictionary <https://www.datadictionary.nhs.uk/>  
English indices of deprivation <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>

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