Outcomes Library
for Whole System Integrated Care

A longlist of outcome measures grouped by population segment,
that can be used to build local Outcomes Frameworks

**outcomes**based**healthcare**

Outcomes Library for Whole System Integrated Care

OBH's library of outcome measures have been fully developed and validated, either by OBH, or else derived from an existing national source, for use at a local level. These outcomes are measured using local data from different care settings, to produce near real-time, monthly reporting.

Outcomes available are specific to the following locally configurable core population segments, as well as whole population measures. So every individual in the population is accounted for in outcome measurement.
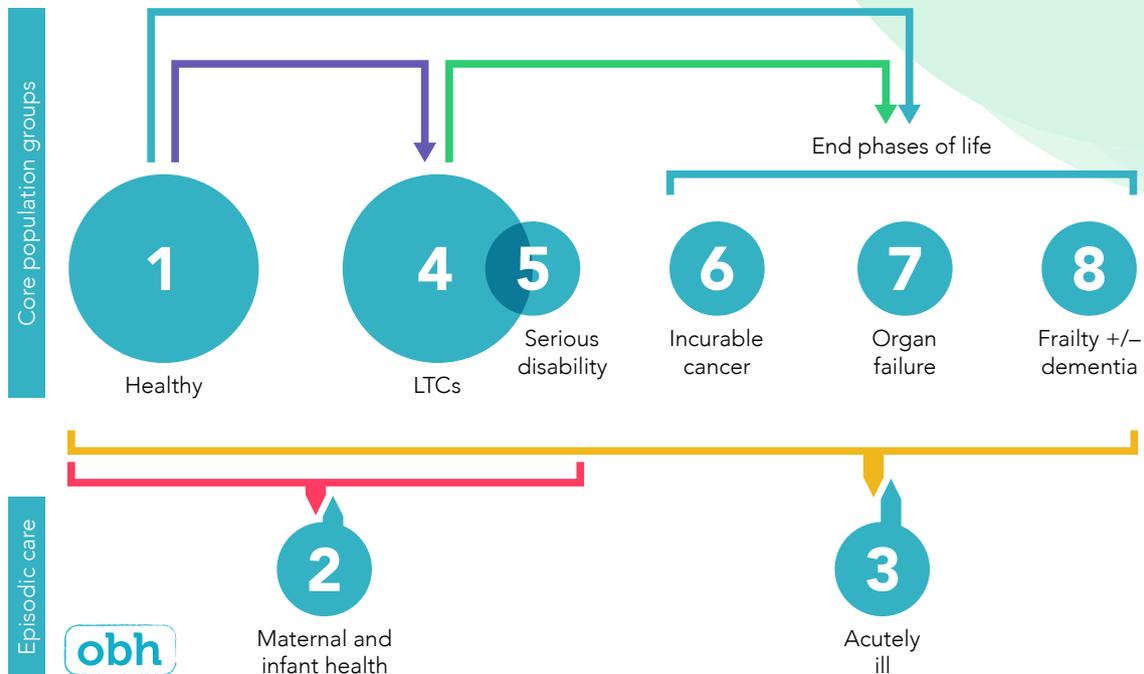
OBH segmentation model. Source: OBH, adapted from Lynn J, et al. Using population segmentation to provide better health for all: the 'Bridges to Health' model.

The library contains **Clinical and Social Outcome Measures (CSOMs)**, where existing linked, local data from administrative and clinical systems across multiple care settings, are used.

Where OBH have developed outcome measures, a robust, evidence-based, development process has been undertaken:

- All outcome measures have been built with key stakeholder involvement including patients, carers and health professionals
- Rigorous testing is applied to ensure all measures are technically validated, clinically appropriate and person-centred
- Each outcome has a rationale, numerator and denominator description, detailed further considerations and a data specification
- All measures, when improved, would make a meaningful difference to people's lives

All outcomes are available with appropriate risk-adjustment and filters for key characteristics such as age, gender, deprivation, and other outcome-specific features. Historical data can be provided for up to the last 5 years.

To build a local Outcomes Framework, select a smaller number of outcomes from this outcomes library, which match key local priorities.

OBH have more outcomes available:

- **Condition-Specific Clinical and Social Outcomes:** These are available through OBH's online Outcome Explorer tool.
- **Personal Outcomes:** These are typically measured using PROM (Patient-Reported Outcome Measurement) tools. OBH have PROMs Guides available for population segments that can be used to map against locally-defined Personal Outcomes.

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HealthSpan

HealthSpan measures a population's time spent in good health (or the age at which people first enter a period of significant ill health). The following indicators form OBH's suite of HealthSpan measures. Monitoring several of the following indicators in combination provides insight into the success of health and care systems in preventing ill health. For more information see: **www.humanhealthspan.com.**
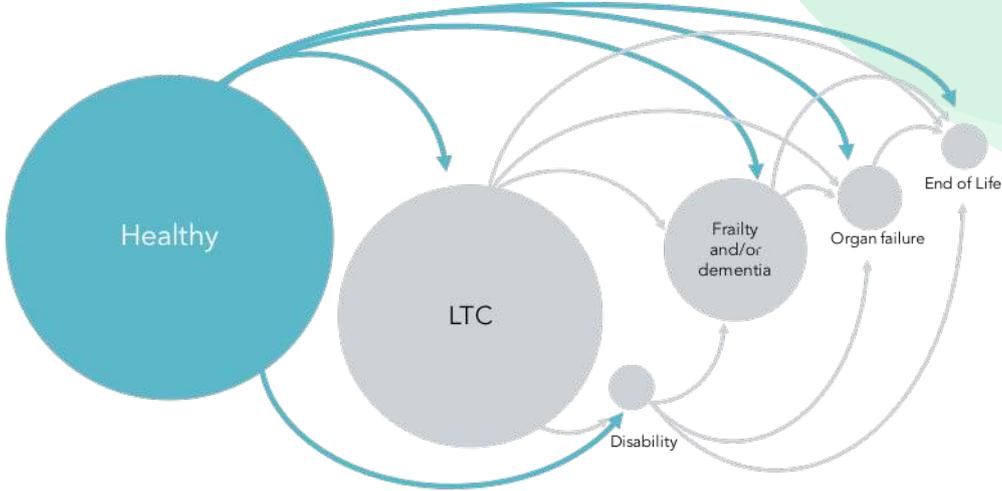
HSP1	Crude HealthSpan	An unadjusted measure of the age at which people first enter a period of significant ill health. It can be broken down by deprivation deciles, gender and other features.
HSP2	Risk-adjusted HealthSpan	An adjusted measure of the age at which people first enter a period of significant ill health, accounting for differences in demographic factors between areas (e.g. deprivation, gender).
HSP3	HealthSpan : LifeSpan Ratio	A ratio showing how much of a population's life is spent in good health. This measure is key to understanding health system sustainability.
HSP4	Healthy Population Size	A measure of the number of people who are currently healthy (in relation to total population size).
HSP5	HealthSpan 'Gap'	A measure of the variation in HealthSpan by deprivation gradient, i.e. the 'gap' in healthy years between the most and least deprived groups.

Whole Population (all segments)

Mortality outcomes	WP1	Overall mortality rate
	WP2	Healthy life expectancy
	WP3	Life expectancy
	WP7	Potential Years of Life Lost (PYLL) from causes amenable to healthcare

1 Healthy Population

Need for emergency care	H32	Overall mortality rate
	H63	Healthy life expectancy
	H84	Life expectancy
	H85	Potential Years of Life Lost (PYLL) from causes amenable to healthcare
Discharge	H86	Patients back in hospital on day 30 after discharge
Public health and risk factors	H21	Obesity
	H22	Smoking
	H23	Alcohol consumption
Complications of acute conditions	H62	Hospital length of stay for pneumonia and/or influenza
	H87	Emergency readmissions for those with admissions for pneumonia and/or influenza
	H8	Mortality following admission for pneumonia and/or influenza
	H9	Mortality following admission for trauma and/or injury

4 People with Long-Term Conditions (LTCs)

Mortality outcomes	LTC1	Overall mortality rate
	LTC4	Premature mortality
	LTC5	Potential Years of Life Lost (PYLL)
	LTC6	Average age at death
	SMI4	Premature mortality in people with Serious Mental Illness (SMI)
	SMI5	Potential Years of Life Lost (PYLL) in people with Serious Mental Illness (SMI)
	LTC17	Mortality following admission for stroke
	LTC18	Mortality following admission for pneumonia
Mortality outcomes, based on cause of death	CVD10	Premature mortality from cardiovascular disease
	RESP11	Premature mortality from respiratory disease
	LIV12	Premature mortality from liver disease
	CAN13	Premature mortality from cancer
	CAN14	One year survival from cancer
	CAN15	One year survival from breast, lung and colorectal cancer
	MH16	Suicide rate
Risk factors	LTC21	Obesity in people with LTCs
	LTC22	Smoking in people with LTCs
Disruption by care	LTC33	Episodes of ill health requiring emergency admission in people with LTCs
	LTC37	Days disrupted by care in people with LTCs

Acute conditions	LIV24	Emergency admissions for alcohol-related liver disease
	LTC34	Emergency admissions for chronic Ambulatory Care Sensitive (ACS) conditions
	DM64	Composite acute symptoms related to diabetes control
	CVD65	Repeated episodes of angina requiring emergency hospital admission
	AST66	Acute exacerbations of asthma
	EP67	Seizures in people with epilepsy
	CIRC68	Acute Kidney Injury (AKI) in people with diabetes and/or cardiovascular conditions
	MH69	Self harm/injury in people with depression and/or Serious Mental Illness (SMI)
	COPD73	Acute exacerbations of COPD
	HF74	Acute exacerbations of heart failure
	RESP76	Pneumonia in people with respiratory disease
	LTC78	Respiratory infections following stroke
Complications	CIRC44	Stroke in people with diabetes and/or cardiovascular conditions
	CIRC45	Myocardial Infarction (MI) in people with diabetes and/or cardiovascular conditions
	DM49	Composite diabetes complications (such as stroke, myocardial infarction, lower limb amputations, End-Stage Renal Failure (ESRF), and blindness)
	SMI70	Episodes of acute respiratory disease in people with Serious Mental Illness (SMI)
	SMI71	Acute exacerbations of chronic respiratory conditions in people with Serious Mental Illness (SMI)
Cancer	CAN26	Proportion of cancers diagnosed at an early stage
	CAN27	Proportion of diagnoses of cancer occurring during an emergency admission

5 People with a Learning or Physical Disability

Mortality outcomes	D1	Overall mortality rate
	D4	Premature mortality (under 75 mortality rate)
	D5	Potential Years of Life Lost (PYLL)
	D6	Average age at death
	LD4	Premature mortality in people with learning disability
	LD5	Potential Years of Life Lost (PYLL) in people with learning disability
Risk factors	D21	Obesity in people with disability
	D22	Smoking in people with disability
Disruption by care	D33	Emergency admissions (without A&E attendances)
	LD33	Emergency admissions for people with learning disability
	PD33	Emergency admissions for people with physical disability
	D37	Days disrupted by care in people with disability
	LD38	Time spent at home for people with learning disability
Acute conditions and complications	D33	Emergency admissions (without A&E attendances)
	LD33	Emergency admissions for people with learning disability
	PD33	Emergency admissions for people with physical disability
	D37	Days disrupted by care in people with disability
	LD38	Time spent at home for people with learning disability

6 People at the End of Life

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Dying in preferred place	EOL29	People dying in preferred place of death
	EOL30	People dying in usual place of residence
	EOL31	People dying in hospital for residents of care homes
Proactive care at the end of life	EOL25	Proportion of those expected to die who are on the Palliative Care Register

Living better, receiving care in the right place, at the end of life	**EOL39**	Time spent at home in last [60 days]* of life
	EOL40	Need for emergency hospital care for people on the Palliative Care Register
	EOL41	Need for emergency hospital care in last [30 days]* of life
	EOL42	Emergency admissions for respiratory infections in last [30 days]* of life
	EOL43	Emergency admissions for pain control in last [30 days]* of life

*Locally configurable

7 People with Organ Failure

Mortality outcomes	**OF1**	Overall mortality rate
	OF4	Premature mortality (under 75 mortality rate)
	OF5	Potential Years of Life Lost (PYLL)
	OF6	Average age at death
Risk factors	**OF21**	Obesity in people with organ failure
	OF22	Smoking in people with organ failure
Disruption by care	**OF33**	Emergency admissions (without A&E attendances) in people with organ failure
	OF37	Days disrupted by care in people with organ failure
Acute conditions and complications	**OF72**	Emergency admissions for organ failure exacerbations
	SC73	Acute exacerbations of severe COPD
	SHF74	Acute exacerbations of severe heart failure
	RF92	Acute complications of renal failure
	LF93	Acute complications of liver failure
	NEUR75	Acute infections that should not normally require admission in people with significant neurological disease (multiple sclerosis, Parkinson's disease, motor neurone disease)

8 People with Frailty and/or Dementia

| Category	Code	Description
Mortality outcomes	FD1	Overall mortality rate
	FD3	Life expectancy at age 75
	FD6	Average age at death
	FD19	Excess winter death rate
Time spent at home	FD33	Emergency admission rate per person with frailty and/or dementia
	FD35	Proportion of people with frailty and/or dementia requiring at least one emergency admission
	FD36	Emergency admission rate per admitted person with frailty and/or dementia
	FD38	Time spent at home for people with frailty and/or dementia
Complications	FD60	Pressure ulcers in people with frailty and/or dementia
	FD61	Fragility fractures in people with frailty and/or dementia
	FD77	Serious falls in people with frailty and/or dementia
	FD80	Potentially avoidable infections in people with frailty and/or dementia
	FD81	Delirium in people with frailty and/or dementia
	FD82	UTIs, severe constipation and incontinence in people with frailty and/or dementia
Dementia	DEM28	Dementia prevalence gap
Sustainability of care	FD84	People with frailty and/or dementia readmitted as emergency within 30 days of discharge (includes A&E attendances)
	FD85	People with frailty and/or dementia readmitted as emergency inpatient within 30 days of discharge
	FD86	People with frailty and/or dementia back in hospital on day 91 after discharge
Complications of conditions	FD20	Mortality following hip fracture
	FD83	Delirium in people undergoing treatment for hip fracture
	FD91	Recovery of mobility at 30 and 120 days following fragility fracture
	FD18	Mortality following admission for pneumonia

Outcomes Explorer

The OBH Outcomes Explorer tool enables users to view all outcomes in the Outcomes Library, and forms part of the OBH Outcomes Platform suite of technology solutions.

The Outcomes Explorer provides additional background information for each outcome, including:

- Outcome descriptions, numerator and denominator definitions,
- Rationale for measurement,
- Considerations (such as potential for ambiguity, time to impact, impact on care pathway), and
- Data requirements.

The Explorer enables working group leads to create longlists of outcomes specific to their care pathways. Local stakeholders, including patients, can:

- Vote on the most important outcomes that matter to them to prioritise the list,
- Configure outcomes to align with local priorities
- Select a shortlist of outcomes to form local Outcomes Frameworks.
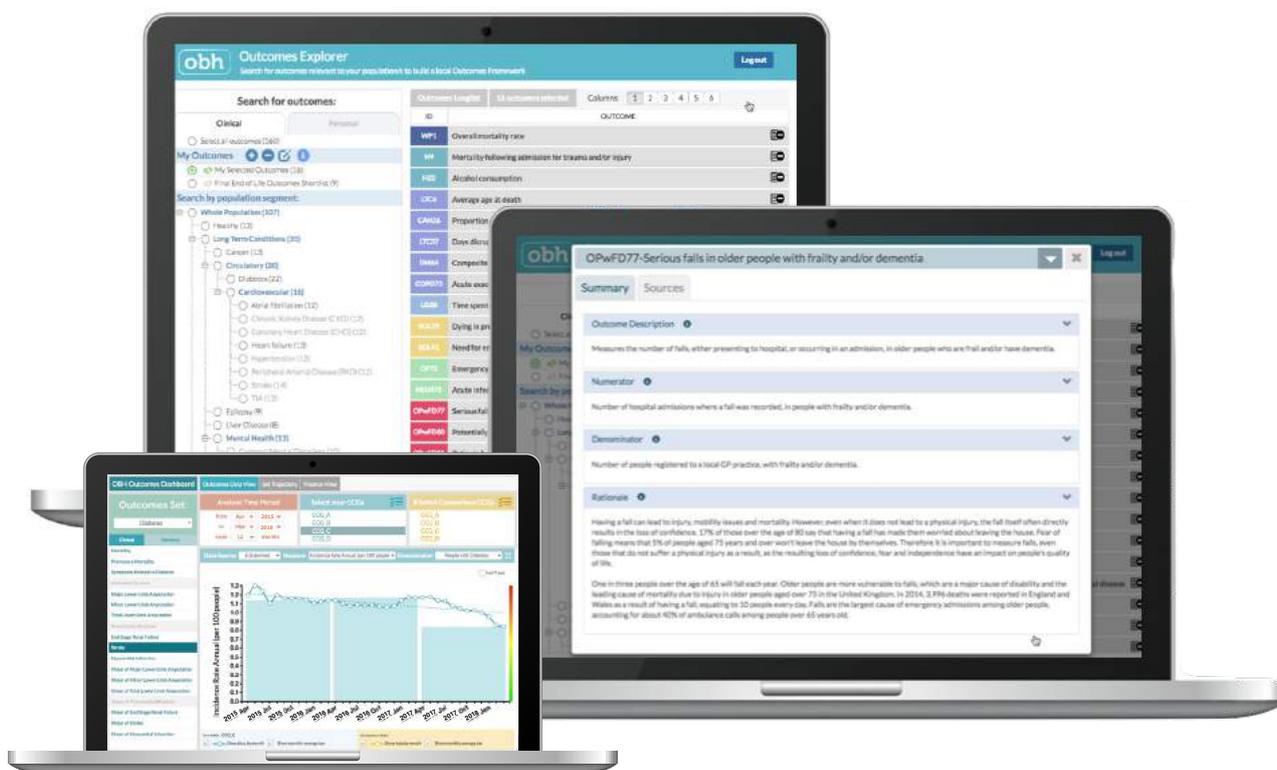
About Outcomes Based Healthcare

OBH are a health data analytics organisation, using the power of technology to support commissioners and providers in making a reality of value-based healthcare strategies, outcome measurement and outcomes-based contracts. OBH use integrated health and care data, across multiple care settings, to derive accurate and meaningful insights about local population outcomes, to support service transformation. Built around the GP registered list, OBH's approach supports localities pursuing accountable care approaches, whether at neighbourhood, locality, CCG, STP, or ICS level.

A team of clinicians, data analysts, developers, data scientists, economists, and public health specialists, who all share a deep commitment to supporting health and care organisations transform the way success in health and care is measured and funded, to those things that matter to people.

OBH have worked with an extensive range of commissioners and providers across the UK. Our relationships are long-lasting, collaborative, trusted, and supportive.