

HEALTH AND WELLBEING BOARD

11 June 2019

Title:	Health and Wellbeing Outcomes Framework Performance Report – Q3 and Q4 2018/19		
Report of the Director of Public Health			
Open Report	For Decision: No		
Wards Affected: ALL	Key Decision: No		
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Sponsor:	Matthew Cole, Director of Public Health, London Borough of Barking and Dagenham		
Summary:	<p>To track progress across the wide remit of the Health and Wellbeing Board, the Board has agreed an outcomes framework which prioritises key issues for the improvement of the public's health and their health and social care services.</p> <p>This high-level dashboard is monitored quarterly by the Board and this report forms the account of performance in quarters 3 and 4 2018/19 or the latest data available.</p> <p>This indicator set is due be reviewed to bring it into alignment with the refreshed Joint Health and Wellbeing Strategy.</p>		
Recommendation(s)	Members of the Board are recommended to: <ol style="list-style-type: none">Review the overarching dashboard and raise any questions with lead officers, lead agencies or the chairs of subgroups as Board members see fit andNote the detail provided on specific indicators, and to raise any questions on remedial actions or actions being taken to sustain good performance.		
Reason(s)	The dashboard indicators were chosen to represent the wide remit of the Board while remaining manageable in number. It is therefore important that Board members use this opportunity to review key areas of Board business and confirm that effective delivery of services and programmes is taking place. Subgroups are undertaking further monitoring across the wider range of indicators in the Health and Wellbeing Outcomes Framework. When areas of concern arise outside of the indicators ordinarily reported to the Board, these will be escalated as necessary.		

1 Introduction

- 1.1 This report and its three appendices provide updated data and commentary on key performance indicators for the Health and Wellbeing Board. They also summarise CQC inspection reports published in quarters 3 and 4 to provide an update on the quality of local service provision.
- 1.2 The indicators included within this report provide an overview of performance of the whole health and social care system; the Health and Wellbeing Board has a wide remit and it is important to ensure that the Board has an overview across this breadth of activity. Indicators are categorised into life course stages (children, adolescents, adults, older adults, and across the life course).
- 1.3 The dashboard is a summary of important areas from the Health and Wellbeing Board Outcomes Framework as well as indicators from the Local A&E Delivery Group's Urgent Care Dashboard. The outcomes framework itself is based on selections from the key national performance frameworks: the Public Health Outcomes Framework, Adult Social Care Outcomes Framework, and the NHS Outcomes Framework. Priority programmes such as the Better Care Fund have also been represented in the selected indicators.

2 Structure of the report

- 2.1 This report provides an overview of performance and CQC inspections, with further information contained in three appendices:
 - Appendix A: Dashboard of indicators
 - Appendix B: Performance summary reports of red-rated indicators
 - Appendix C: CQC inspection reports, 2018/19 quarters 3 and 4.
- 2.2 All indicators are rated red, amber or green (RAG) as a measure of success and risk to end-of-year delivery. Any indicator that is RAG-rated red has additional information available in Appendix B.
- 2.3 Board members should note that this means that Appendix B is focused on poor performance to highlight what needs improving and is not to be taken as indicative of overall performance.

3 Performance overview

- 3.1 Out of the 19 indicators, seven were RAG-rated red, seven were rated amber, four were rated green and one could not be rated. Please note that indicators are ordered from red to no rating in the following sections which may not correspond to their order in Appendix A.

Children

- 3.2 Among the five children's indicators, two were RAG-rated red, two were rated amber and one could not be rated:
 - i) **Percentage uptake of measles, mumps and rubella (MMR2) immunisation at 5 years old:** Quarter 3 performance (72.7%) is lower than London (75.7%) and England (86.6%) and remains below the target of 90%.

- ii) **Prevalence of children in Year 6 that are obese or overweight:** This is an annual indicator and the latest data for Barking and Dagenham shows an increase from 43.8% in 2016/17 to 44.5% in 2017/18. This is above the target of the London average (37.7%) and is therefore RAG-rated red.
- iii) **Percentage of looked-after children with a completed health check:** This increased from 79.4% in quarter 3 to 91.2% in quarter 4 2018/19. This is within 10% of the target of 92% and is therefore RAG-rated amber.¹
- iv) **The number of children who turn 15 months old in the reporting quarter who receive a 12-month review:** This measure increased from 66.1% in quarter 3 to 70.5% in quarter 4 2018/19 and is rated amber as it is within 10% of the target of 75%.
- v) **Number of children and young people accessing Tier 3/4 CAMHS services:** Updated data shows that there were 565 children and young people in contact with CAMHS at the end of quarter 3, a decrease from 590 at the end of quarter 2. It is not possible to provide a target to 'rate' progress against for this measure due to the lack of national benchmarking information.

Adolescents

3.3 Of the two adolescents' indicators, one was rated red and one was rated amber:

- a) **Under 18 conception rate (per 1,000 population aged 15–17 years):** Although this measure continues to decrease, it remains above target. In the most recent time period, Barking and Dagenham had 26.8 conceptions per 1,000 15–17 year olds compared with a target (the London average) of 17.2 per 1,000. This is a rolling 3-year average measure.
- b) **Care leavers in education, employment or training (EET):** This measure improved from 49.6% in quarter 2 to 51.4% in quarter 3 and finally to 54.1% in quarter 4. The proportion of care leavers in EET is within 10% of the target of 57.0% and is therefore RAG-rated amber.

Adults

3.4 Of the three adults' indicators, one was rated amber and two were rated green:

- a) **Smoking prevalence in adults – current smokers:** This is an annual indicator, with the latest data (2017/18) placing this at 19.5%. This is less than 10% above the target of 18.6% and is therefore RAG-rated amber. Barking and Dagenham has a higher smoking prevalence compared with London (16.8%) or England (17.2%).
- b) **Cervical screening – coverage of women aged 25–64 years:** Based on 2017/18 data, cervical screening coverage is rated green, as coverage (66.8%)

¹ RAG ratings based on measures being more than 10% above or below target are based on percentage difference rather than difference in percentage points.

is above the London average (64.7%). Nonetheless, coverage in Barking and Dagenham shows a downward trend and 2017/18 data indicates that one-third of eligible women had not been adequately screened within the last 3.5 years (ages 25–49 years) or 5.5 years (ages 50–64 years).

- c) **Percentage of eligible population that received a health check:** Coverage in quarter 4 was 4.79%, which is above the pro-rata target for the quarter of 3.75%. This is based on self-reports from practices and hence is marked as provisional.

Older adults

3.5 Of the three older adults' indicators, one was rated red, one was amber and one was green:

- a) **Bowel screening – coverage of people aged 60–74 years:** Coverage remained stable between quarter 1 (43.7%) and quarter 2 (43.9%) and this continues to be RAG-rated red. Barking and Dagenham had the fourth lowest bowel cancer screening coverage among all local authorities in England in quarter 2.
- b) **Breast screening – coverage of women aged 53–70 years:** Based on 2017/18 data, breast screening coverage is rated amber as Barking and Dagenham's coverage (67.0%) was within 10% of the figure for London (69.3%). This is a small decline from 67.8% in 2016/17.
- c) **Number of long-term needs met by admission to a residential or nursing care home:** This is a cumulative figure. Performance in quarter 4 remains below the target, although higher than the same point in 2017/18.

Across the life course

3.6 Of the six 'across the life course' indicators, three indicators were rated red, two were amber² and one was green:

- a) **The percentage of children and adults who start healthy lifestyle programmes that complete the programme:** There has been a fall in this measure, from 50.0% in quarter 2 of 2018/19 to 48.3% in quarter 3. This measure is more than 10% below the target of 65.0% and is therefore RAG-rated red. This is a local indicator so there are no benchmarking figures for London or England.
- b) **A&E attendances ≤ 4 hours from arrival to admission, transfer or discharge (type all):** This quarter is the second successive fall from 83.2% in quarter 2 to 80.6% in quarter 3 to 76.9% for the latest quarter (quarter 4 2018/19). Set against the target of 90.0%, this measure has dropped below 10% of the target and is now RAG-rated red. Looking at performance across 2018/19, England (88.0%) and London (88.6%) performed better than Barking and Dagenham (80.7%) but were also below the 90% target.

² Note that two of the amber-rated measures (emergency admissions aged 65 and over per 100,000 population and the number of leisure centre visits) are no longer updated.

- c) **Percentage of people using social care who receive services through direct payments:** This has consistently decreased throughout the last four quarters, from 65.5% in quarter 1 to 49.1% in quarter 4. This is more than 10% below the target of 60% and is therefore RAG-rated red.
- d) **Emergency admissions aged 65 and over per 100,000 population:** No updated data is available.
- e) **The number of leisure centre visits:** This indicator is no longer being updated and is presented for information only; performance of leisure centres is being managed through a separate contract management process following the transfer of management to Sports Leisure Management (SLM) Limited on 1 September 2017.
- f) **Delayed transfers of care:** Across quarter 4, there were an average of 178.4 delayed days per 100,000, which is below the threshold target of 194.9 per 100,000 and hence RAG-rated green. This relates to 728 delayed days, of which 669 days (91.9%) were attributable to NHS organisations, 54 delayed days (7.4%) to social care and 5 days (0.7%) to both services.

4 CQC inspections

- 4.1 Eighteen reports of CQC inspections to healthcare organisations in the borough were published in quarter 3 and 16 reports in quarter 4. In total over the two quarters, 23 inspections (67.6%) were rated as 'Good', while eight providers (23.5%) received a rating of 'Requires Improvement', two (5.9%) were rated as 'Inadequate' reports and one inspection did not result in a rating. Appendix C contains details of all the inspection reports published in quarters 3 and 4 2018/19.

5 Mandatory implications

Joint Strategic Needs Assessment

- 5.1 The Joint Strategic Needs Assessment provides an overview of the health and care needs of the local population, against which the Health and Wellbeing Board sets its priority actions for the coming years. By ensuring regular performance monitoring, the Health and Wellbeing Board can track progress against the health priorities of the JSNA.

Joint Health and Wellbeing Strategy

- 5.2 This indicator set is due be reviewed to bring it into alignment with the refreshed Joint Health and Wellbeing Strategy.
- 5.3 The current indicators chosen are grouped by the 'life course' themes of the previous Strategy and reflect core priorities.

Integration

- 5.4 The indicators chosen include those which identify performance of the whole health and social care system, including indicators selected from the A&E Delivery Board's dashboard.

Financial and Legal Implications

5.5 Not applicable.

List of appendices

Appendix A: Performance dashboard

Appendix B: Performance summary reports of red-rated indicators

Appendix C: CQC inspection reports, 2018/19 quarters 3 and 4.