

# Health and Wellbeing Outcomes Framework

March 2020

**Barking &  
Dagenham**

Performance & Intelligence Team  
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# This workshop is...



- A follow up on September's paper actioning the HWBB mandate to deliver an outcomes framework, replacing the outdated outputs performance reporting
- Aims to finalise the list of measures to be reported, ensuring the representation of all parties
- Allocate individual leads to report on measures and decide on frequency of reporting to the HWB



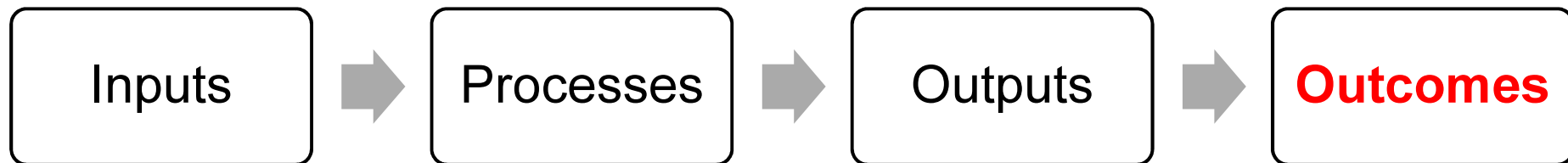
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# The new framework

“Residents will benefit from partners working together around their needs and priorities, focusing on **outcomes**, as opposed to a focus on process and outputs.”

*Joint Health and Wellbeing Strategy 2019-2023*



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# Health and Wellbeing Outcomes Framework

**Vision:** By 2023, as Barking and Dagenham continues to grow, our residents will have improved health and wellbeing, with less health inequalities between Barking and Dagenham residents and the rest of London: no-one will be left behind.

## Priority themes

## Outcomes

### Best Start in Life

1. Increase the percentage of children who are best prepared to start school by the age of 5

### Early Diagnosis and Intervention

2. Increase healthy life expectancy by removing barriers to early diagnosis and intervention

### Building Resilience

3. Improved multi-agency support for those with Adverse Childhood Experiences

4. Aspiration: Increase the level of educational attainment, skills and employment

5. Improve physical and mental wellbeing

6. Ageing Well: increased level of residents who age well

7. A borough with zero tolerance to Domestic Abuse that tackles underlying causes, challenges perpetrators, and empowers survivors

The nature of health means that it could take years or even decades to see marked improvements.

How will we know that our interventions are having the desired effect?

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# Supporting measures

Supporting measures demonstrate, year by year, the impact and effectiveness of the work being carried out and the progress made towards the desired outcomes.

They should be:

- Person centred
- Outcome focused (wherever possible, focusing on the impact to residents)
- Routinely measurable
- Comparable to national and local performance

Measures have been suggested for each of the seven outcomes. We need you to tell us:

- Are these the right measures?
- Will they demonstrate progress towards the relevant outcomes?
- If not, what can they be replaced with?
- Do they represent the work of all involved parties?
- For each measure, which organisation will lead on providing data and narrative?

# Best Start in Life

Outcome 1: Increase the percentage of children who are best prepared to start school by the age of 5

#	Suggested supporting measure	Frequency	Data source	Lead organisation
1	Percentage of children who received two doses of MMR before their fifth birthday	Annual	PHE / NHS Digital	BHR CCG
2	Percentage of children in Reception classified as obese	Annual	National Child Measurement Programme	LBBD
3	Percentage of children achieving a good level of development by the age of 5	Annual	Early Years Foundation Stage Profile return, DfE	LBBD

Questions:

- Are these the right measures?
- Will they demonstrate progress towards the desired outcome?
- If not, what can they be replaced with and which organisation will lead on providing data and narrative?

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# Early Diagnosis and Intervention

Outcome 2: Increase healthy life expectancy by removing barriers to early diagnosis and intervention

#	Supporting measure	Frequency	Data source	Lead organisation
4	Proportion of cancers diagnosed at an early stage (stage 1 & 2)	Annual	National Cancer Registration and Analysis Service	LBBD
5	Percentage of people receiving an HIV diagnosis at a late stage of infection	Annual	HIV and AIDS Reporting System (HARS), PHE	LBBD
6	Proportion of eligible people receiving an NHS Health Check	Quarterly	Health Checks data collection, PHE	BHR CCG

Questions:

- Are these the right measures? Will they demonstrate progress towards the outcome?
- Is there a pre-diabetes or NHS Diabetes Prevention Programme measure that should be included?
- Is there a composite measure which sums up early detection?

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# Building Resilience

## Outcome 3: Improved multi-agency support for those with Adverse Childhood Experiences

#	Supporting measure	Frequency	Data source	Lead organisation
7	First time entrants into the youth justice system (rate per 100,000 population aged 10-17 years)	Quarterly	LBBB	Youth Offending Service
8	<i>Placeholder</i>			
9	<i>Placeholder</i>			

### Questions:

- What else can be measured that will demonstrate improvements in the multi-agency support provided for those with ACEs?
- Measures from Health, NELFT, 3<sup>rd</sup> Sector?

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# Building Resilience

Outcome 4: Increase the level of educational attainment, skills and employment

#	Supporting measure	Frequency	Data source	Lead organisation
10	Average Attainment 8 score of pupils at the end of key stage 4	Annual	GCSE Results, DfE	LBBDD
11	<i>Placeholder</i>			
12	<i>Placeholder</i>			

Questions:

- What else can be measured that will demonstrate improved education, increased skill levels and higher employment rates?

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# Building Resilience

## Outcome 5: Improve physical and mental wellbeing

#	Supporting measure	Frequency	Data source	Lead organisation
13	Percentage of physically inactive adults	Annual	Active Lives Adult Survey, Sport England	?
14	Suicide mortality rate per 100,000 population (directly age standardised)	Annual	PHE	?
15	Proportion of patients who felt that the healthcare professional recognised and/or understood any mental health needs during their last general practice appointment	Annual	GP Patient Survey	BHR CCG

### Questions:

- Are these the right measures? Will they demonstrate progress towards improved physical and mental wellbeing?
- If not, what can they be replaced with and which organisation will lead on providing data and narrative?

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# Building Resilience

## Outcome 6: Ageing Well - Increased level of residents who age well

#	Supporting measure	Frequency	Data source	Lead organisation
16	Rate of emergency admissions to hospital per 100,000 population aged 65 and over	Quarterly	Hospital Episodes Statistics (HES)	BHR CCG
17	Emergency hospital admissions due to falls in people per 100,000 population aged 65 and over (directly age standardised rate) OR Hip fractures per 100,000 population aged 65 and over (directly age standardised rate)	Annual	PHE (using HES from NHS Digital)	BHR CCG
18	Percentage of patients aged 17 years and over with diabetes	Annual	Quality and Outcomes Framework, NHS Digital	BHR CCG

### Questions:

- Are these the right measures? Will they demonstrate that services are enabling people to age well?
- Should an obesity measure be included?

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# Building Resilience

Outcome 7: A borough with zero tolerance to Domestic Abuse that tackles underlying causes, challenges perpetrators, and empowers survivors

#	Supporting measure	Frequency	Data source	Lead organisation
19	Domestic abuse-related incidents and crimes recorded by the police, crude rates per 1,000 people	Annual	ONS	?
20	Percentage of secondary pupils who state that hitting a partner is acceptable (Schools Survey)	Every 2 years	School Survey	?
21	<i>Placeholder – awaiting Autumn report from the Domestic Abuse Commission</i>			

Questions:

- Are these the right measures?
- Should number/rate of referrals to Refuge charity be included?
- Will they demonstrate progress towards tackling the underlying causes of domestic abuse, challenging perpetrators and empowering survivors?
- If not, what can they be replaced with and which organisation will lead on providing data and narrative?

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# Next steps

- Do the agreed measures represent all parties and do they meet the expectations of the Board?
- How frequently should supporting measures be reported to HWB?
- Who within your organisation will provide the data and narrative for reporting to HWB?

The measures will be reviewed at the end of the 2020/21 reporting year to ensure they are fulfilling their purpose.