

Barking and Dagenham Health and Wellbeing Strategy Outcomes Framework

Introduction

Barking and Dagenham's Health and Wellbeing Board brings together representatives across the NHS, local authority public health, adult social care and children's services with elected councillors and Healthwatch to jointly consider local needs and plan the right services for our population. Working together to improve the health and wellbeing of local people and reduce health inequalities requires us to share an understanding of what we are trying to achieve, and how we will measure progress towards that aim. For this purpose, the Board has developed a Health and Wellbeing Strategy as its mechanism for addressing the needs identified in the Joint Strategic Needs Assessment, setting out agreed priorities for partnership working and collective action. The Delivery Plan for the Health and Wellbeing Strategy focuses on the key milestones and actions for the respective subgroups of the Health and Wellbeing Board.

The Health and Wellbeing Strategy Outcomes Framework provides a supporting structure with which to monitor and measure achievement of the priorities and actions stated in the Health and Wellbeing Strategy Delivery Plan. It sets out the expected and desired outcomes for people who access health and social care services within the London Borough of Barking and Dagenham and their families and carers, in order to help us understand how the needs of the population is being met and how well the health and wellbeing of local communities is being improved and protected.

The Outcomes Framework Indicators

The Outcomes Framework describes in detail the measurements we will use to monitor progress against the Delivery Plan. To achieve this, actions stated in the Delivery Plan have been aligned to indicators and outcomes from national outcome frameworks.

The framework concentrates on high-level outcomes to be achieved across the local health and social care system in 2015/16. The outcomes reflect a focus on the four key themes for public health, health and social care in Barking and Dagenham across the whole life course - prevention, protection, improvement and personalisation. Indicators are grouped according to the life stage which they are most relevant to. Where an indicator is relevant to more than one life stage or the same data source is used for age-bracketed information a single framework template is included rather than replicate information. The indicator definitions are in the appendices.

Within the framework, the local health and wellbeing outcome indicators have been aligned with the following national health and social care frameworks:

- **Public Health Outcomes Framework (PHOF) 2015/16** - contains indicators for which a breakdown of data is currently collected and published at both national level and upper tier Local Authority level (unless otherwise stated).
- **NHS Outcomes Framework (NHSOF) 2015/16** - contains indicators for which data is available on the Health and Social Care Information Centre (HSCIC) Indicator Portal (NHS OF or CCG Indicators sections) unless otherwise stated.
- **Adult Social Care Outcomes Framework (ASCOF) 2015/16**

Local targets are also included where applicable. This includes any related indicators in local corporate / strategic plans including Children and Young People's plans.

Glossary:

ASCOF - Adult Social Care Outcomes Framework

BHRUT - Barking, Havering and Redbridge University Hospitals NHS Trust

CCG - Clinical Commissioning Group

NELFT - North East London Foundation Trust

NHSOF - National Health Service Outcomes Framework

NSHE - NHS England

LBBD - London Borough of Barking and Dagenham (Council)

PHOF - Public Health Outcomes Framework

The framework sets out the responsibilities and reporting for each indicator for the respective subgroups:

- Children and Maternity
- Integrated Care Group
- Learning Disability Subgroup
- Mental Health Subgroup
- Public Health Programmes Board

Pre-Birth and Early Years

Indicator no.	Outcome Indicator	Activity Indicator	Delivery Plan Indicator	Delivery Plan Action	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 2.2	Breastfeeding (all sub-indicators)	2.2i Breastfeeding initiation within 48 hours of delivery	Increased breastfeeding prevalence and rates, prevalence of breastfeeding and attachment Improved initiation Breastfeeding prevalence at 6-8 week check	Work towards stage 1 of Baby Friendly Initiative Implementation	BHRUT / NHS England	Children and Maternity Subgroup / Public Health Programmes Board	
PHOF 2.5	Child development at 2-2½ years	2.5i Proportion of children aged 2-2½yrs who received an assessment as part of the Healthy Child Programme or an integrated review (using any tool)	% of children seen by health visitor by day 14 Health Visitor transition	Healthy Child Programme for 0-5 years commissioned Transfer in October 2015 of the commissioning of the Early Years Programme services to the Council	LBBD	Public Health Programmes Board	

PHOF 3.3	Population vaccination coverage	3.3i Hepatitis B vaccination coverage (1 and 2 year olds)					13 - Percentage uptake of MMR (measles, mumps and rubella) vaccination (2 doses) at 5 years old 14 - Percentage uptake of DTaP/IPV (diphtheria, tetanus, whooping cough and polio) vaccination at age 5
			Number of unborn care assessment frameworks initiated	Clear safeguarding pathways and training in place across all maternity providers	CCG	Children and Maternity Subgroup	
			Introduce the new 4 routine blood tests for metabolic conditions	Successful introduction of tests at 9 weeks booking	BHRUT / NHS England	Children and Maternity Subgroup	

			Ensure that children with a LD under 5 years have an annual check and health plan	Children with complex care needs assessed and given appropriate care		Learning Disability Subgroup	
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Primary School Years

Indicator no.	Outcome Indicator	Activity Indicator	Delivery Plan Indicator	Delivery Plan Action	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 1.2	School readiness	1.2i Percentage of children achieving a good level of development at the end of reception	Improve the development of children in early years and introduce integrated reviews	To identify speech, language and communication needs (SLCN) in children before they reach the age of 2 years using robust research methods	LBBD	Public Health Programmes Board	
PHOF 2.6	Excess weight in 4-5 and 10-11 year olds (all sub-indicators)	2.6i Percentage of children aged 4-5 classified as overweight or obese	% children with health review, including BMI at reception and Year 6 % children taking regular exercise as measured at health review Reduction in unhealthy weight	Physical Activity programme GET ACTIVE	LBBD	Children and Maternity Subgroup / Public Health Programmes Board	67 - The percentage of children in Reception recorded as obese 68 - The percentage of children in Year 6 recorded as obese

			<p>in Reception and Year 6</p> <p>Reduction in obesity</p> <p>% of 5-11 yr olds participating in 2 hours PE or more</p> <p>Improve cooking skills of adults and children</p> <p>% of children from ethnic and gender groups with a healthy weight</p>				
PHOF 4.2	Tooth decay in children aged 5	4.2 Rate of tooth decay in children aged 5 years based on the mean number of teeth per child sampled which were either actively decayed or had been filled or extracted - decayed/missing/filled teeth	Improved oral health	Improved oral health across all age groups	NHS England	Children and Maternity Subgroup	
			Ensure that all children have complete immunisation records	Reach London levels for immunisation and then England levels	CCG	Children and Maternity Subgroup	

			Improving health outcomes for children with special educational needs and disabilities		LBBB	Learning Disability Subgroup	
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Adolescence

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 1.5	16-18 year olds not in education, employment or training	1.5 Percentage of 16-18 year olds not in education, employment or training (NEET)					27 - 16 to 18 year olds who are not in education, employment or training (NEET)
PHOF 2.4	Under 18 conceptions	2.4 Under 18 conception rate per 1,000 population	Under 18 yrs conception rate (per 1000) and % change against 1998 baseline Reduce rate of teenage conceptions by 50% from '98 baseline for > 16 yr olds	Coherent sexual health and contraceptive services in place for young people Review strategy and develop an action plan	LBBB	Children and Maternity Subgroup / Public Health Programmes Board	<i>* Use of local data collection and record keeping systems to assess prevalence and impact on health and mental health outcomes of children at risk of CSE within a multi-agency framework</i>
PHOF 2.9	<i>Smoking prevalence - 15 year olds</i>	2.9i Prevalence of smoking among 15	Smoking rates at 15 yrs (review and	Multi-agency smoking strategy	LBBB / NELFT	Children and Maternity	

	<i>(Placeholder)</i>	years olds	move to prevalence) % teen mothers supported by Family Nurse Partnership %teen mothers supported by Baby Intervention to breastfeed and stop smoking Reduction in numbers of school children taking up smoking	refreshed and action plan developed to reduce smoking in 15 yrs >80% of expected visits made to teenage mothers Social marketing campaign		Subgroup / Public Health Programmes Board	
PHOF 3.2	Chlamydia diagnoses (15-24 year olds)	3.2i Crude rate of chlamydia diagnoses screening detection per 100,000 young adults aged 15-24 using old National Chlamydia Screening Programme (NCSP) data	Increase the proportion of young people testing for Chlamydia	Increase coverage to 35%	LBBB	Public Health Programmes Board	

			% teen mothers supported by Family nurse partnership	FNP engagement plan and pathways refreshed. At least 60% of first time mums enrolled before 16 weeks and 100% no later than 28 weeks Baby Intervention pathways refreshed to ensure young parents who do not meet the criteria for FNP still get early intervention and support	NELFT	Children and Maternity Subgroup	
			Increase overall wellness score	Ensure health and wellbeing addressed within council and CCG OD plans	LBBB	Public Health Programmes Board	
			Perceptions of drunk or rowdy behaviour as a problem	Campaign for young men	LBBB	Public Health Programmes Board	

			% Looked after children with a learning disability with annual health check and personal health plan	Clear communication with staff about the role of health checks and health plans, supported by training and provider performance indicators	CCG	Learning Disability Subgroup	
			Change the way frontline health services respond to self-harm and how walk-in centres can be supported		CCG	Learning Disability Subgroup	
			Commissioning high quality mental health services across the life-course that emphasise recovery	Develop the road map to mental health improvement for the next 5 yrs	CCG	Mental Health Subgroup	

Maternity

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 2.3	Smoking status at time of delivery	2.3 Rate of smoking at time of delivery per 100 maternities	% teen mothers supported by Family Nurse Partnership Reduction in the number of pregnant women smoking at time of delivery %teen mothers supported by Baby Intervention to breastfeed and stop smoking Decrease the number of pregnant women who are smoking in pregnancy through the implementation of BabyClear	>80% of expected visits made to teenage mothers Identify funding for phase 2, improve assessments and support midwives Implementation of the BabyClear programme	NELFT / BHRUT	Children and Maternity Subgroup	

			Number of births at Barking hospital	Training for midwives and children's centres staff to support pathways of care	CCG	Children and Maternity Subgroup	
PHOF 2.21	Access to non-cancer screening programmes	2.21i: HIV coverage: The percentage of pregnant women eligible for infectious disease screening who are tested for HIV, leading to a conclusive result (national only)	% of women treated for HIV in pregnancy % of mothers booked with maternity services by 13th week of pregnancy in light of new blood tests Uptake of HPV vaccination Increase the uptake of seasonal flu amongst pregnant women %of over 65 yr olds protected through seasonal flu immunisation	Training for midwives supported by public awareness campaign Primary care and children's centres education programme to support signposting Move 1st booking to 11 weeks Preparation for parenthood classes - delivered by children's centre staff/Health visitors/midwives Commissioning of new HPV vaccines with training and governance support for staff Increase the uptake of seasonal	NHS England / CCG	Children and Maternity Subgroup / Public Health Programmes Board	

				flu amongst pregnant women Local pathway work to improve uptake through partnership			
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Early Adulthood

Indicator no.	Outcome Indicator	Activity sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 1.9	Sickness absence rate	1.9i: Percentage of employees who had at least one day off sick in the previous week	Decrease average rates of sickness of those in work	Pilot with local employers	LBBB	Public Health Programmes Board	
PHOF 1.11	Domestic abuse	1.11 Rate of domestic abuse incidents reported to the police, per 1,000 population	Repeat MARAC caseload Reduce number of domestic violence cases among pregnant women	Ensure 20% of frontline staff have attended multi-agency domestic violence and violence against women and girls training	LBBB / CCG / NHSE	Integrated Care Group / Public Health Programmes Board	Repeat incidents of domestic violence (MARAC) - no more than 28% (2014/15 target)
PHOF 2.12	Excess weight in adults	2.12 Proportion of adults classified as overweight or obese	% reduction in prevalence of adult obesity from baseline	Develop adult obesity strategy Common/core nutritional standards for all commissioned services	LBBB	Public Health Programmes Board	

			Reduce the prevalence of STIs	Increase equitable access to contraception and STI testing Reduce PID to England and then London levels	LBBB	Children and Maternity Subgroup	
			% of Adults with Learning Disability with annual health check and personal plan	Clear communication with staff about the role of health checks and health plans, supported by training and provider performance indicators	CCG	Learning Disability Subgroup	
			% of people of different backgrounds getting on well	Development of peer intervention programme for the borough	Mental Health Subgroup	Mental Health Subgroup	
			Assessment for new diagnoses at outset of treatment particularly focussed on diabetes	Pathways and services for adults with depression into talking therapies taking place	CCG	Mental Health Subgroup	

Established Adulthood

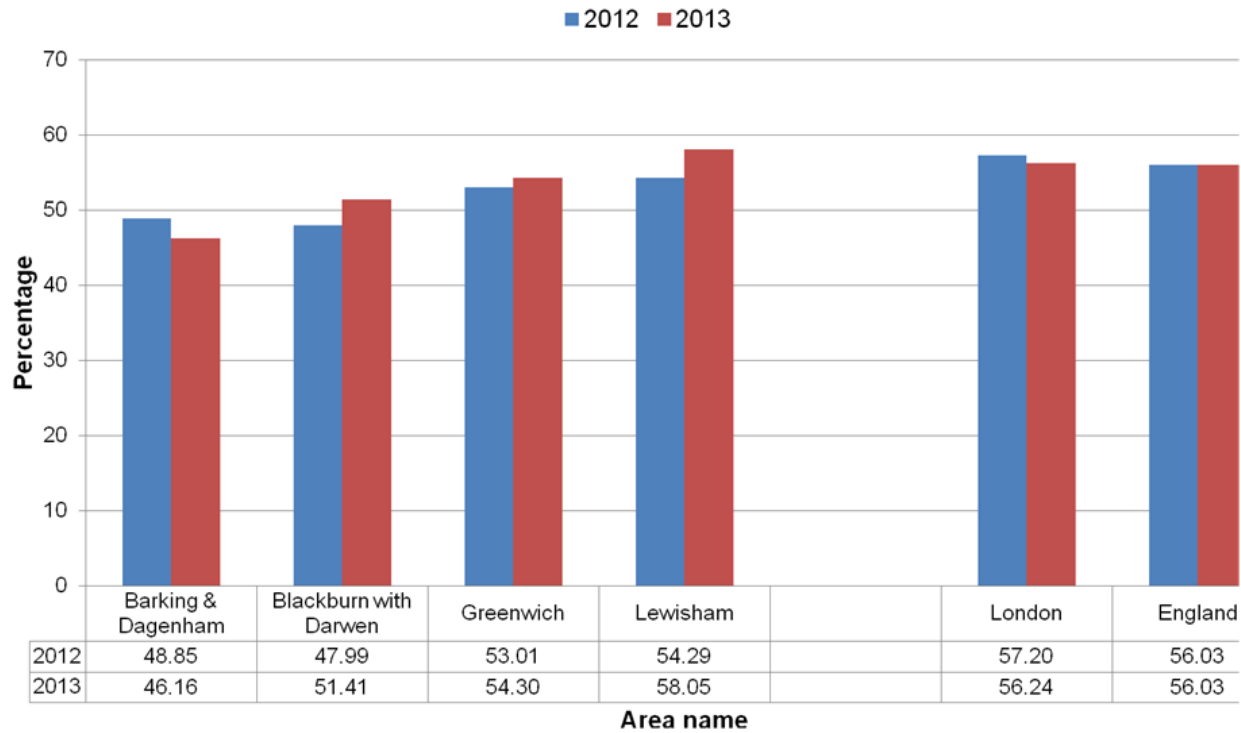
Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 2.13	Proportion of physically active and inactive adults	2.13i Proportion of adults achieving at least 150 minutes of physical activity per week in accordance with UK CMO recommended guidelines on physical activity	% of adults cycling or walking to work % increase in the number of adults participating in regular physical activity	Active transport survey conducted and cycling strategy developed across the partnerships Develop adult obesity strategy Leisure pass scheme for older people Leisure pass scheme for people with disabilities and those on low incomes Widening access through new and upgraded facilities	LBBD	Integrated Care Group	

PHOF 2.14	Smoking prevalence - adults (over 18s)	2.14 Prevalence of smoking among persons aged 18 years and over	Number of smoking quitters under 30 (review and move to prevalence) % reduction in smoking prevalence over the 3 year period from 2009/10 baseline	Targeted promotion work with high-risk smoking populations and routine and manual groups Social marketing campaign	LBBB	Integrated Care Group / Public Health Programmes Board	
PHOF 2.15	Successful completion of drug treatment	2.15 Number of drug users that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a proportion of the total number in treatment 2.15i - Successful completion of drug treatment - opiate users 2.15ii - Successful completion of drug treatment - non-opiate users	Increase the % successful completion of drug treatment (opiate and non-opiate users)		LBBB	Public Health Programmes Board	

PHOF 2.22	Take up of the NHS Health Check programme - by those eligible	2.22iii Cumulative percentage of eligible population aged 40-74 offered an NHS Health Check in the five year period 2013/14 - 2017/18 (Replaces indicator 2.22i)	Increase uptake of NHS Health Checks	Health checks process and pathways secured during transition Increase uptake to 50% of 40 - 74 yr olds	LBBB	Public Health Programmes Board	
PHOF 4.11	Emergency readmissions within 30 days of discharge from hospital		Re-admission to hospital within 30 days of discharge	Implement integrated discharge planning process	Integrated Care Subgroup	Integrated Care Group	
NHSOF 3b	Emergency readmissions within 30 days of discharge from hospital		Re-admission to hospital within 30 days of discharge	Implement integrated discharge planning process	Integrated Care Subgroup	Integrated Care Group	
ASCOF 1C	Proportion of people using social care who receive self-directed support and those receiving direct payments		Number of adults using direct payments	Increased choices for older people - more personal assistance available	LBBB	Integrated Care Group	10 - The proportion of social care clients accessing care and support in the home via direct payments

			Greater acceptance of adults with autism and ability to get a diagnosis and appropriate support	Ensure people with autistic spectrum disorders with assessed eligible needs for care and support have personal budgets	LBBB	Learning Disability Subgroup	
			Reduction in number of people claiming incapacity benefit from depression	Review and audit of case register and development of action plan	Mental Health Subgroup	Mental Health Subgroup	
			Access to Psychological Therapies (IAPT) services	Ensuring commissioned services are IAPT compliant 95% should have access within 28 days	CCG	Mental Health Subgroup	

% of adults achieving at least 150 minutes of physical activity per week, Barking & Dagenham and comparators, 2012-2013



Older Adults

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Action plan 2015/16	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 4.14	Health-related quality of life for older people		Increase early diagnosis and identification of at risk older people in primary care and reduce unnecessary admission to hospital	Pilot Self-care programme for patients and carers	LBBB	Public Health Programmes Board	
PHOF 4.15	Excess winter deaths		Reduce excess mortality of older people in extreme temperatures	At risk older people receive correct, clear, consistent, useful and actionable advice and information from the local organisations they come into contact with	NHSE	Integrated Care Group	
			Enable those at end of life to die with dignity where they	Expansion of specialist and palliative care	LBBB	Public Health Programmes Board	

			want	services			
			All bereaved people signposted to appropriate bereavement support services	Establishment of bereavement support services	CCG	Public Health Programmes Board	
			Measurement of the effects of austerity and welfare reform	Council to set up a system to measure the effects of austerity and levels of need so that partners can understand the impact on residents	LBBB	Mental Health Subgroup	
			% adults with severe mental illness with physical health check	Care pathways and data collection process set up for physical health assessment in mental health patient settings	CCG	Mental Health Subgroup	

Vulnerable and Minority Groups

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Delivery Plan Responsibility	Corporate Indicator
PHOF 1.8	Employment for those with long-term health conditions including adults with a learning disability or who are in contact with secondary mental health services	1.8i: Percentage of respondents in the Labour Force Survey (LFS) who have a long-term condition who are classed as employed using the International Labour Organisation (ILO) definition of employment, compared to the percentage of all respondents classed as employed					66 - The proportion of adults with a learning disability in paid employment
			Reduce numbers of people on incapacity benefit		LBBB	Public Health Programmes Board	

			% people who feel that they belong to their local neighbourhood IAPT take up amongst men	Increasing community resilience through development of programmes to support community	LBBB	Mental health Subgroup	
			Practices to establish depression registers	Development of new pathways for primary and community care	CCG	Mental health Subgroup	

The Activity Indicator Templates

Where the Local Authority and the NHS share national indicators these are highlighted as follows:

*Indicator shared with the NHS Outcomes Framework 2015/16

** Complementary to indicators in the NHS Outcomes Framework

† Indicator shared with the Adult Social Care Outcomes Framework

†† Complementary to indicators in the Adult Social Care Outcomes Framework

Indicator No	Outcome Indicator	Lead authority
PHOF 1.1	Children in poverty	LBBB
PHOF 1.2	School readiness	LBBB
PHOF 1.3	Pupil absence	LBBB
PHOF 1.4	First time entrants to the youth justice system	LBBB
PHOF 1.5	16-18 year olds not in education, employment or training	LBBB
PHOF 1.6	Adults with a learning disability / in contact with secondary mental health services who live in stable and appropriate accommodation	LBBB
	† ASCOF 1G and 1H	
PHOF 1.8	Employment for those with long-term health conditions including adults with a learning disability or who are in contact with secondary mental health services	LBBB
	*(i-NHSOF 2.2) ††(ii-ASCOF 1E) **(iii-NHSOF 2.5) †† (iii-ASCOF 1F)	
PHOF 1.9	Sickness absence rate	LBBB
PHOF 1.10	Killed and seriously injured casualties on England's roads	LBBB
PHOF 1.11	Domestic abuse	LBBB
PHOF 1.12	Violent crime (including sexual violence)	LBBB
PHOF 1.13	Re-offending levels	LBBB
PHOF 1.15	Statutory homelessness	LBBB
PHOF 1.16	Utilisation of outdoor space for exercise / health reasons	LBBB
PHOF 1.17	Fuel poverty	LBBB
PHOF 1.18	Social isolation	LBBB
	† ASCOF 1I	
PHOF 2.1	Low birth weight of term babies	LBBB
PHOF 2.2	Breastfeeding (all sub-indicators)	LBBB
PHOF 2.3	Smoking status at time of delivery	LBBB

PHOF 2.4	Under 18 conceptions	LBBB
PHOF 2.5	Child development at 2-2½ years	LBBB
PHOF 2.6	Excess weight in 4-5 and 10-11 year olds (all sub-indicators)	LBBB
PHOF 2.7	Hospital admissions caused by unintentional and deliberate injuries in children and young people aged 0-14 and 15-24 years	LBBB
PHOF 2.8	Emotional well-being of looked after children	LBBB
PHOF 2.9	<i>Smoking prevalence - 15 year olds (Placeholder)</i>	LBBB
PHOF 2.12	Excess weight in adults	LBBB
PHOF 2.13	Proportion of physically active and inactive adults	LBBB
PHOF 2.14	Smoking prevalence - adults (over 18s)	LBBB
PHOF 2.15	Successful completion of drug treatment	LBBB
PHOF 2.17	Recorded diabetes	LBBB
PHOF 2.18	Alcohol-related admissions to hospital	LBBB
PHOF 2.19	Cancer diagnosed at stage 1 and 2	LBBB
PHOF 2.20	Cancer screening coverage	LBBB
PHOF 2.21	Access to non-cancer screening programmes	LBBB
PHOF 2.22	Take up of the NHS Health Check programme - by those eligible	LBBB
PHOF 2.24	Injuries due to falls in people aged 65 and over	LBBB
PHOF 3.2	Chlamydia diagnoses (15-24 year olds)	LBBB
PHOF 3.3	Population vaccination coverage	LBBB
PHOF 3.4	People presenting with HIV at a late stage of infection	LBBB
PHOF 3.5	Treatment completion for TB	LBBB
PHOF 4.1	Infant mortality <i>*NHSOF 1.6i</i>	LBBB
PHOF 4.2	Tooth decay in children aged 5	LBBB
PHOF 4.3	Mortality rate from causes considered preventable	LBBB

	**NHSOF 1a	
PHOF 4.4	Under 75 mortality rate from all cardiovascular diseases (including heart disease and stroke)	LBBB
	*NHSOF 1.1	
PHOF 4.5	Under 75 mortality rate from cancer	LBBB
	*NHSOF 1.4	
PHOF 4.6	Under 75 mortality rate from liver disease	LBBB
	*NHSOF 1.3	
PHOF 4.7	Under 75 mortality rate from respiratory diseases	LBBB
	*NHSOF 1.2	
PHOF 4.8	Mortality rate from communicable diseases	LBBB
PHOF 4.9	Excess under 75 mortality rate in adults with serious mental illness	
	*(NHSOF 1.5)	
PHOF 4.1	Suicide rate	LBBB
PHOF 4.11	Emergency readmissions within 30 days of discharge from hospital	LBBB
	*NHSOF 3b	
PHOF 4.12	Preventable sight loss	LBBB
PHOF 4.14	Health-related quality of life for older people	LBBB
PHOF 4.15	Excess winter deaths	LBBB
PHOF 4.16	Estimated diagnosis rate for people with dementia	LBBB
	*NHSOF 2.6i	
NHSOF 1ai	Potential Years of Life Lost (PYLL) from causes considered amenable to health care - adults	NHS
NHSOF 1aai	Potential Years of Life Lost (PYLL) from causes considered amenable to health care - children and young people	NHS
NHSOF 1.1	Under 75 mortality rate from respiratory disease	NHS
	*PHOF 4.4	

NHSOF 1.2	Under 75 mortality rate from respiratory disease <i>*PHOF 4.7</i>	NHS
NHSOF 1.3	Under 75 mortality rate from liver disease <i>*PHOF 4.6</i>	NHS
NHSOF 1.4	Under 75 mortality from cancer <i>*PHOF 4.5</i>	NHS
NHSOF 1.4i	One-year survival for all cancers	NHS
NHSOF 1.4iii	One-year survival for breast, lung and colorectal cancer	NHS
NHSOF 2	Healthy-related quality of life for people with long-term conditions	NHS
NHSOF 2.1	Proportion of people feeling supported to manage their condition	NHS
NHSOF 2.3i	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (all ages)	NHS
NHSOF 2.3ii	Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	NHS
NHSOF 3a	Emergency admissions for acute conditions that should not usually require hospital admission	NHS
NHSOF 3b	Emergency readmissions within 30 days within 30 days of discharge from hospital <i>*PHOF 4.11</i>	NHS
NHSOF 3.2	Emergency admissions for children with lower respiratory tract infections (LRTI)	NHS
NHSOF 3.5i	Proportion of patients with hip fractures recovering to their previous levels of mobility/walking ability at 30 days	NHS
NHSOF 3.3ii	Proportion of patients with hip fractures recovering to their previous levels of mobility/walking ability at 120 days	NHS
NHSOF 4a.i	Patient experience of GP services	NHS
NHSOF 4a.ii	Patient experience of out of hours GP services	NHS
NHSOF 4a.iii	Patient experience of NHS dental services	NHS
NHSOF 4b	Patient experience of hospital care	NHS
NHSOF 4.2	Responsiveness to in-patients' personal needs	NHS
NHSOF 4.4i	Access to GP services	NHS

NHSOF 4.4ii	Access to NHS dental services	NHS
ASCOF 1A	Social care-related quality of life	LBBB
ASCOF 1B	Proportion of people who use services who have control over their daily life	LBBB
ASCOF 1C	Proportion of people using social care who receive self-directed support and those receiving direct payments	LBBB
ASCOF 1D	Carer-reported quality of life	LBBB
ASCOF 1E	Proportion of adults with a learning disability in paid employment	LBBB
ASCOF 1F	Proportion of adults in contact with secondary mental health services in paid employment	LBBB
ASCOF 1G	Proportion of adults with a learning disability who live in their own home or with their family	LBBB
ASCOF 1H	Proportion of adults in contact with secondary mental health services who live independently, with or without support	LBBB
ASCOF 1I	Proportion of people who use services and their carers who reported that they had as much social contact as they would like	LBBB
ASCOF 2A	Permanent admissions to residential and nursing care homes, per 100,000 population	LBBB
ASCOF 2B	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into re-ablement/rehabilitation services	LBBB
ASCOF 2C	Delayed transfers of care from hospital and those which are attributable to adult social care	LBBB
ASCOF 2D	The outcomes of short-term support: sequel to service	LBBB
ASCOF 2E	<i>Effectiveness of re-ablement services (Placeholder)</i>	LBBB
ASCOF 2F	<i>Dementia - a measure of the effectiveness of post-diagnosis care in sustaining independence and improving quality of life (Placeholder)</i>	LBBB
ASCOF 3A	Overall satisfaction of people who use services with their care and support	LBBB
ASCOF 3B	Overall satisfaction of carers with social services	LBBB
ASCOF 3E	Improving people's experience of integrated care	LBBB
ASCOF 3C	The proportion of carers who report that they have been included or consulted in discussions about the person they care for	LBBB

ASCOF 3D	The proportion of people who use services and carers who find it easy to find information about services	LBBB
ASCOF 4A	The proportion of people who use services who feel safe	LBBB
ASCOF 4B	The proportion of people who use services who say that those services have made them feel safe and secure	LBBB
ASCOF 4C	<i>Proportion of completed safeguarding referrals where people report they feel safe (Placeholder)</i>	LBBB

Appendix A

The Outcome Indicator Templates

For each outcome indicator there is an indicator template setting out:

- Definition for the indicator, including definition of the denominator
- Source of the data
- Frequency of the data
- Responsible lead organisation for providing the data to the performance sub-group
- Historical activity to date where available

Pre-Birth and Early Years

Indicator Number	2.2i	Indicator Name	Breastfeeding prevalence at 6-8 weeks checks	Indicator Type	Outcome																		
Definition	Measures the percentage of mothers who give their babies breast milk in the first 48 hours after delivery. The numerator is the number of mothers initiating breast feeding and the denominator is the total number of maternities.																						
Source	Department of Health																						
Frequency	Quarterly																						
National target	??																						
Responsible Lead	BHRUT/NHS England																						
Historical performance	<p>Breastfeeding initiation (PHOF 2.1) - Projected changes based on current trends</p> <table border="1"> <caption>Breastfeeding initiation (PHOF 2.1) - Projected changes based on current trends</caption> <thead> <tr> <th>Year</th> <th>Percentage of mothers who give their babies breast milk in the first 48 hours after delivery</th> </tr> </thead> <tbody> <tr> <td>2011</td> <td>71.5</td> </tr> <tr> <td>2012</td> <td>73.5</td> </tr> <tr> <td>2013</td> <td>74.0</td> </tr> <tr> <td>2014</td> <td>76.5</td> </tr> <tr> <td>2015</td> <td>78.0</td> </tr> <tr> <td>2016</td> <td>80.0</td> </tr> <tr> <td>2017</td> <td>81.5</td> </tr> <tr> <td>2018</td> <td>83.5</td> </tr> </tbody> </table>					Year	Percentage of mothers who give their babies breast milk in the first 48 hours after delivery	2011	71.5	2012	73.5	2013	74.0	2014	76.5	2015	78.0	2016	80.0	2017	81.5	2018	83.5
Year	Percentage of mothers who give their babies breast milk in the first 48 hours after delivery																						
2011	71.5																						
2012	73.5																						
2013	74.0																						
2014	76.5																						
2015	78.0																						
2016	80.0																						
2017	81.5																						
2018	83.5																						

	2011	2012	2013	2014
Actual rates (%)	71.29	73.06	73.71	76.66
Reporting Period	2015	2016	2017	2018
Predicted rates, % (based on trend)	77.95	79.73	81.56	83.43
Actual rates., % (to be submitted)				

Indicator Number	2.5	Indicator Name	Child development at 2-2½ years	Indicator Type	Outcome
Definition	<i>Proportion of children aged 2-2½yrs who received an assessment as part of the Healthy Child Programme or an integrated review (using any tool)</i>				
Source	LBBD??				
Frequency	??				
Target	Data not available on PHE/PHOF website to set target/trajectory. May require discussion with Programme Leads. Two additional sets of indicators also included for activity				
Responsible Lead	To be confirmed				
Historical performance					

Indicator Number	PHOF 3.3	Indicator Name	Population vaccination coverage		Indicator Type	Outcome															
Definition	Hepatitis B vaccination coverage (1 and 2 year olds)																				
Source	Department of Health																				
Frequency	Quarterly																				
National target	Coverage to be confirmed with PH consultants, but likely to be 95%. Coverage for other vaccinations (COVER stats) to be included in list. Target should be set at minimum national uptake rates, but could also be considered for stretching to match SNs uptake rates																				
Responsible Lead																					
Historical performance	<p>Hepatitis B Vaccine uptake in LBBD compared with some London statistical neighbours</p> <table border="1"> <thead> <tr> <th></th> <th>LBBD</th> <th>Greenwich</th> <th>Lewisham</th> <th></th> </tr> </thead> <tbody> <tr> <td>■ 2012-13</td> <td>88.00</td> <td>94.20</td> <td>97.26</td> <td></td> </tr> <tr> <td>■ 2013-14</td> <td>83.67</td> <td>96.55</td> <td>97.62</td> <td></td> </tr> </tbody> </table>							LBBD	Greenwich	Lewisham		■ 2012-13	88.00	94.20	97.26		■ 2013-14	83.67	96.55	97.62	
	LBBD	Greenwich	Lewisham																		
■ 2012-13	88.00	94.20	97.26																		
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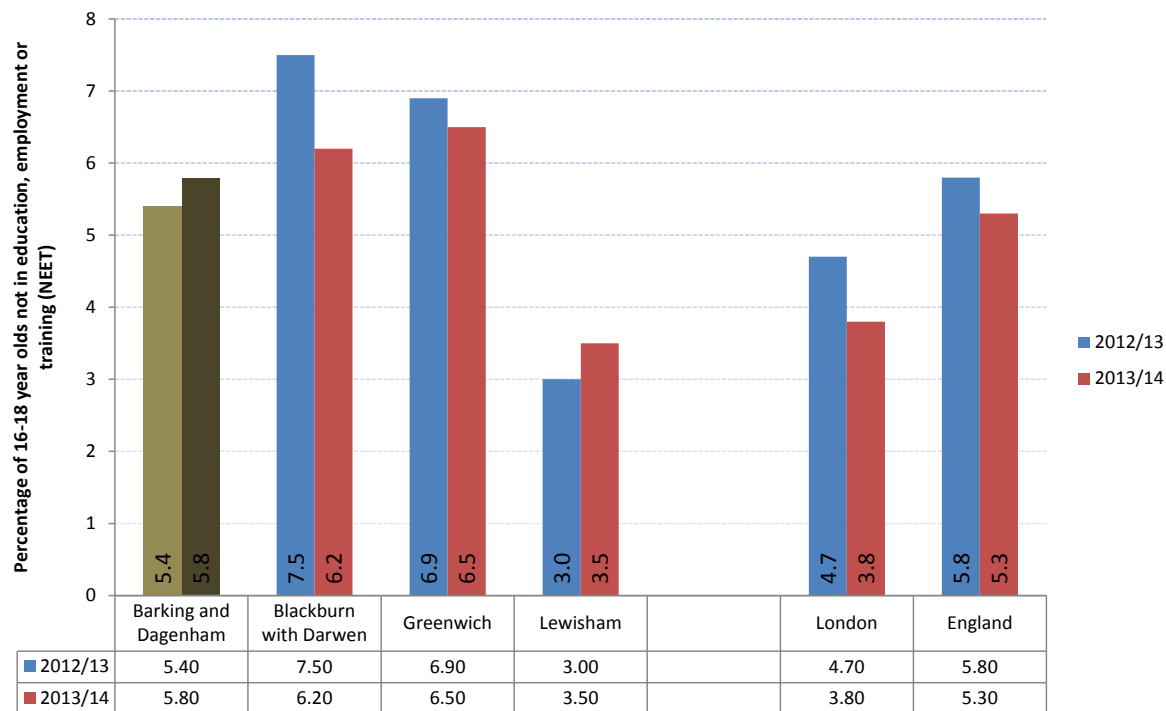
Primary School Years

Indicator Number	1.2i	Indicator Name	School Readiness	Indicator Type	Outcome																					
Definition	1.2i Percentage of children achieving a good level of development at the end of reception																									
Source	Department for Education (DfE), EYFS Profile (Produced by PHE); http://www.gov.uk/government/statistics/eyfsp-attainment-by-pupil-characteristics-2013-to-2014																									
Frequency	Annual publication																									
National target	To be clarified - but in absence of target, comparisons with some statistical neighbours, London and England is appropriate. To match either London SNs, OR at least London/national levels at 61-62%, reaching 75% by 2018. May want to average for all SNs for more precision																									
Responsible Lead																										
Historical performance	<p>Percentage of LBD children eligible for EYFS profile achieving a good level of development at the end of reception (compared to some statistical neighbours, London and England)</p> <table border="1"> <thead> <tr> <th></th> <th>Barking and Dagenham</th> <th>Blackburn with Darwen</th> <th>Greenwich</th> <th>Lewisham</th> <th>London</th> <th>England</th> </tr> </thead> <tbody> <tr> <td>2012/13</td> <td>45.69</td> <td>39.83</td> <td>69.02</td> <td>67.89</td> <td>52.81</td> <td>51.68</td> </tr> <tr> <td>2013/14</td> <td>59.55</td> <td>46.52</td> <td>73.24</td> <td>75.27</td> <td>62.21</td> <td>60.36</td> </tr> </tbody> </table>						Barking and Dagenham	Blackburn with Darwen	Greenwich	Lewisham	London	England	2012/13	45.69	39.83	69.02	67.89	52.81	51.68	2013/14	59.55	46.52	73.24	75.27	62.21	60.36
	Barking and Dagenham	Blackburn with Darwen	Greenwich	Lewisham	London	England																				
2012/13	45.69	39.83	69.02	67.89	52.81	51.68																				
2013/14	59.55	46.52	73.24	75.27	62.21	60.36																				

Indicator Number	1.5	Indicator Name	16-18 year olds not in education, employment or training		Indicator Type	Outcome																																																				
Definition	Annual rate of Children who are of excess weight (obese and overweight) in in the Reception/Year Six Children cohort.																																																									
Source	National Child Measurement Programme																																																									
Frequency	Annually - published in December of the year following the academic measurement year																																																									
National target	Based on current trends, trajectory suggests increase in rates of excess weight in both cohorts. Comparatively rates are set to decrease in London and England, so suggest benchmark against these standards (for Reception, 22-23%, and Year 6, 34-38% between 2015-18).																																																									
Responsible Lead																																																										
Historical performance	<p>% of Children who are of excess weight (Reception and Year 6), And trajectory based on current trends</p> <table border="1"> <thead> <tr> <th></th> <th colspan="8">current trend</th> <th colspan="4">trajectory</th> </tr> <tr> <th></th> <th>2007</th> <th>2008</th> <th>2009</th> <th>2010</th> <th>2011</th> <th>2012</th> <th>2013</th> <th>2014</th> <th>2015</th> <th>2016</th> <th>2017</th> <th>2018</th> </tr> </thead> <tbody> <tr> <td>Reception</td> <td>28.40</td> <td>28.37</td> <td>26.80</td> <td>27.65</td> <td>27.80</td> <td>26.66</td> <td>25.76</td> <td>26.82</td> <td>25.99</td> <td>25.72</td> <td>25.45</td> <td>25.18</td> </tr> <tr> <td>Year 6</td> <td>37.12</td> <td>40.50</td> <td>40.28</td> <td>39.26</td> <td>41.24</td> <td>42.23</td> <td>39.79</td> <td>42.17</td> <td>42.50</td> <td>43.01</td> <td>43.52</td> <td>44.04</td> </tr> </tbody> </table> <p>Axis Title</p> <p>— Reception — Year 6</p>							current trend								trajectory					2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Reception	28.40	28.37	26.80	27.65	27.80	26.66	25.76	26.82	25.99	25.72	25.45	25.18	Year 6	37.12	40.50	40.28	39.26	41.24	42.23	39.79	42.17	42.50	43.01	43.52	44.04
	current trend								trajectory																																																	
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018																																														
Reception	28.40	28.37	26.80	27.65	27.80	26.66	25.76	26.82	25.99	25.72	25.45	25.18																																														
Year 6	37.12	40.50	40.28	39.26	41.24	42.23	39.79	42.17	42.50	43.01	43.52	44.04																																														

Adolescence

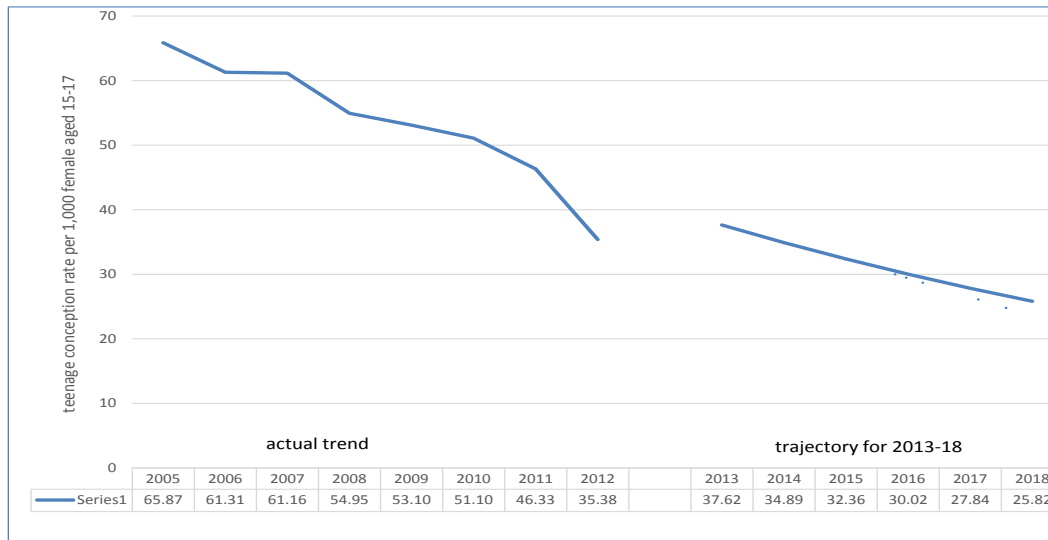
Indicator Number	1.5	Indicator Name	16-18 year olds not in education, employment or training (NEET)	Indicator Type	Outcome
Definition	1.5 Percentage of 16-18 year olds not in education, employment or training (NEET)				
Source	Department for Education				
Frequency	Annually				
National target	Targets can be set consistent with the rates for London – 3.8-4.7% between 2015 and 2018.				
Responsible Lead	To be confirmed				
Historical performance	Percentage of 16-18 year olds not in education, employment or training (NEET)				



Indicator Number	2.4	Indicator Name	Conception rates	Indicator Type	Outcome
Definition	Under 18 conception rate per 1,000 population				
Source	Office for National Statistics (ONS)				
Frequency	Annual				
National target	Trajectory benchmarked against 2005 rather than 1998 for which targets will not be as challenging considering rates of 35/1000 already reached at 2012. Target set are in tables below chart (2013-18)				
Responsible Lead	To be confirmed				

Historical performance

Trajectory for teenage conception based on 2005-2012 trend



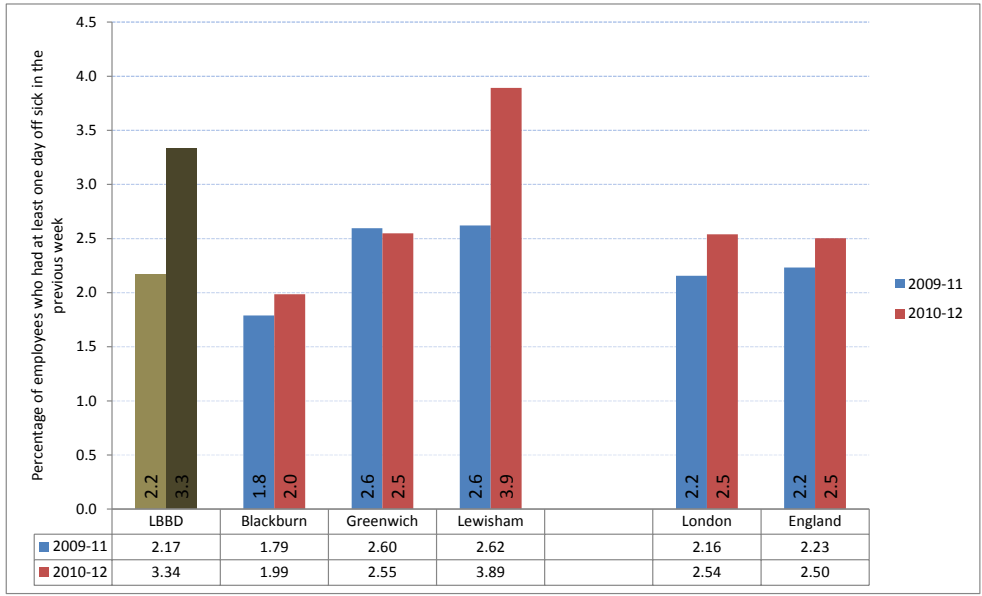
Maternity

Indicator Number	2.3	Indicator Name	Smoking status at time of delivery	Indicator Type	Outcome																																				
Definition	2.3 Number of women who currently smoke at time of delivery per 100 maternities.																																								
Source	Health and Social Care Information Centre																																								
Frequency	Annual																																								
Target	Reduce the gap between LBBDD and London average; and marked reductions in LBBDD rates matching that of London																																								
Responsible Lead	To be confirmed																																								
Historical performance	<p>LBBDD smoking status at time of delivery (with trajectory benchmarked against current trends), London and England</p> <table border="1"> <thead> <tr> <th></th> <th>2010/11</th> <th>2011/12</th> <th>2012/13</th> <th>2013/14</th> <th>2014/15</th> <th>2015/16</th> <th>2016/17</th> <th>2017/18</th> </tr> </thead> <tbody> <tr> <td>LBBDD</td> <td>12.95</td> <td>12.81</td> <td>14.24</td> <td>9.95</td> <td>10.44</td> <td>9.75</td> <td>9.10</td> <td>8.50</td> </tr> <tr> <td>London</td> <td>6.32</td> <td>6.01</td> <td>5.72</td> <td>5.12</td> <td>4.87</td> <td>4.55</td> <td>4.25</td> <td>3.97</td> </tr> <tr> <td>England</td> <td>13.53</td> <td>13.19</td> <td>12.69</td> <td>11.99</td> <td>11.61</td> <td>11.16</td> <td>10.72</td> <td>10.30</td> </tr> </tbody> </table>						2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	LBBDD	12.95	12.81	14.24	9.95	10.44	9.75	9.10	8.50	London	6.32	6.01	5.72	5.12	4.87	4.55	4.25	3.97	England	13.53	13.19	12.69	11.99	11.61	11.16	10.72	10.30
	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18																																	
LBBDD	12.95	12.81	14.24	9.95	10.44	9.75	9.10	8.50																																	
London	6.32	6.01	5.72	5.12	4.87	4.55	4.25	3.97																																	
England	13.53	13.19	12.69	11.99	11.61	11.16	10.72	10.30																																	

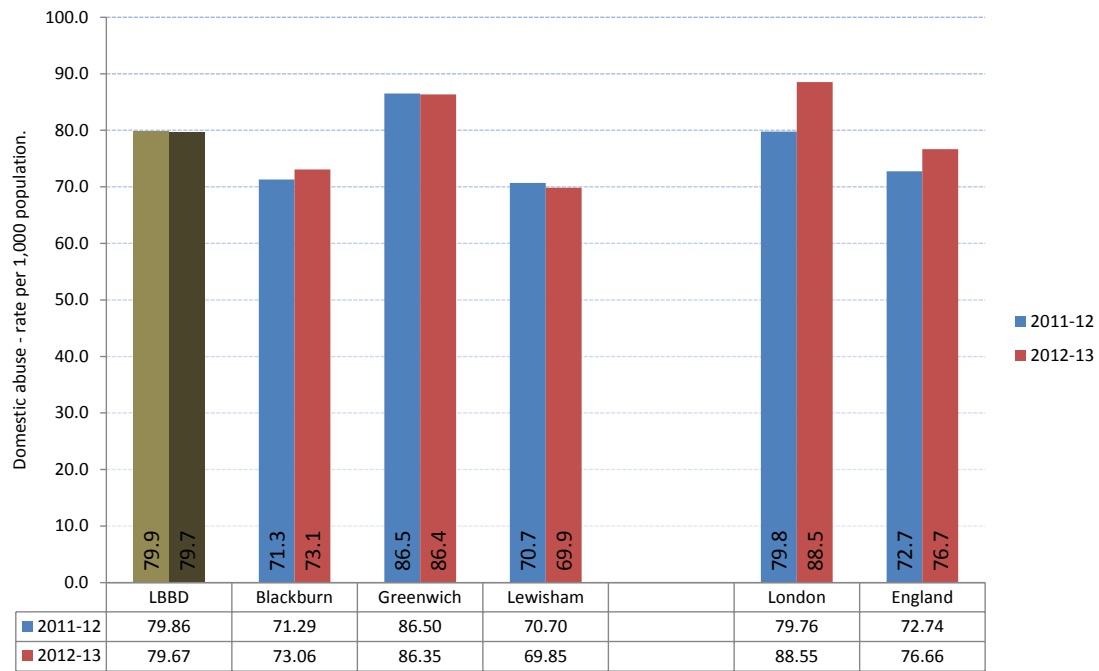
Indicator Number	2.21	Indicator Name	Access to non-cancer screening programmes - diabetic retinopathy			Indicator Type	Outcome																				
Definition	Patients aged 12+ with diabetes tested at a digital screening encounter as a proportion of all those offered screening.																										
Source	Department of Health																										
Frequency	Annual																										
Target	Aspire to match coverage consistent with SNs and England. Programme Leads can review comparative rates to set targets, but suggest not less than 8-% coverage by 2018 (on the assumption that there is no national target set)																										
Responsible Lead	BHRUT Divisional Director for Maternity Services																										
Historical performance	<table border="1"> <thead> <tr> <th></th> <th>LBBB</th> <th>Blackburn</th> <th>Greenwich</th> <th>Lewisham</th> <th>London</th> <th>England</th> </tr> </thead> <tbody> <tr> <td>2011/12</td> <td>75.99</td> <td>81.86</td> <td>80.27</td> <td>81.26</td> <td>78.72</td> <td>80.88</td> </tr> <tr> <td>2010-12</td> <td>78.82</td> <td>80.63</td> <td>81.01</td> <td>79.93</td> <td>77.02</td> <td>79.15</td> </tr> </tbody> </table>							LBBB	Blackburn	Greenwich	Lewisham	London	England	2011/12	75.99	81.86	80.27	81.26	78.72	80.88	2010-12	78.82	80.63	81.01	79.93	77.02	79.15
	LBBB	Blackburn	Greenwich	Lewisham	London	England																					
2011/12	75.99	81.86	80.27	81.26	78.72	80.88																					
2010-12	78.82	80.63	81.01	79.93	77.02	79.15																					

Early Adulthood

Indicator Number	1.9i	Indicator Name	Sickness absence rate	Indicator Type	Outcome
Definition	Percentage of employees who had at least one day off sick in the previous week				
Source	Labour Force Survey - Data provided by ONS				
Frequency	Annual				
Target	Unclear if target set, but to see a declining trend in rates consistent with regional and/or national average could be a realistic objective				
Responsible Lead	LBBD				
Historical performance	Percent of employees who had at least one day off due to sickness absence in the previous working week.				



Indicator Number	1.11	Indicator Name	Domestic abuse	Indicator Type	Outcome
Definition	Rate of domestic abuse incidents reported to the police, per 1,000 population				
Source	Office for National Statistics (ONS)				
Frequency	Annual				
Target	No set target, but reduction in rates will be a key objective. Based on SN trends, aspire to aim at rates close to Lewisham's (or SN average), and definitely below London and national rates				
Responsible Lead					
Historical performance	Rate of domestic abuse incidents reported to the police, per 1,000 population				

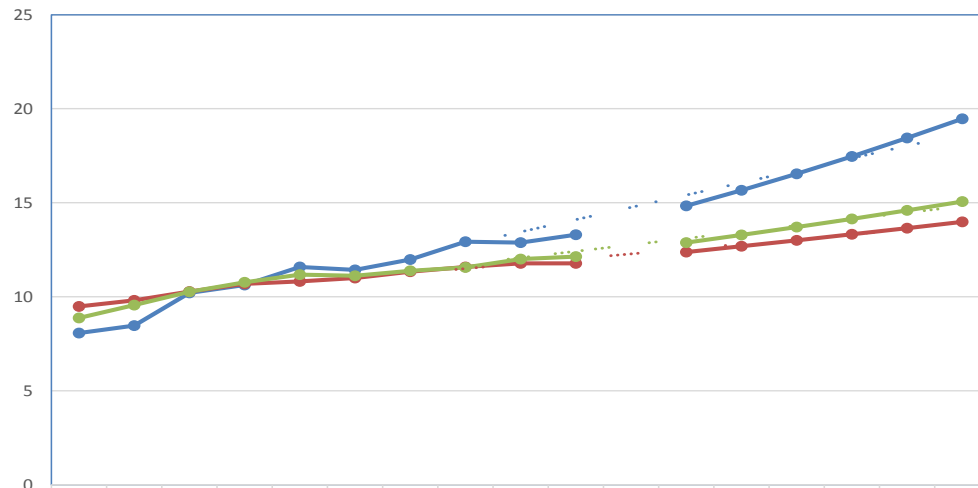


Established Adulthood

Indicator Number	2.2iii	Indicator Name	Take up of the NHS Health Check programme – by those eligible			Indicator Type	Outcome																
Definition	The 5 year cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check																						
Source	http://www.healthcheck.nhs.uk ; PHE																						
Frequency	Quarterly																						
Target	Frequency of coverage improves at faster pace compared to London and England. Targets could be benchmarked against SN (Lewisham), or set against local borough targets for individual Practices to aspire for attainment.																						
Responsible Lead	LBBD																						
Historical performance	<p>Cumulative % of the eligible population aged 40-74 offered an NHS Health Check</p> <table border="1"> <thead> <tr> <th></th> <th>Barking and Dagenham</th> <th>Blackburn with Darwen</th> <th>Greenwich</th> <th>Lewisham</th> <th></th> <th>London</th> <th>England</th> </tr> </thead> <tbody> <tr> <td>■ 2013/14</td> <td>25.13</td> <td>13.19</td> <td>22.98</td> <td>28.26</td> <td></td> <td>21.13</td> <td>18.42</td> </tr> </tbody> </table>								Barking and Dagenham	Blackburn with Darwen	Greenwich	Lewisham		London	England	■ 2013/14	25.13	13.19	22.98	28.26		21.13	18.42
	Barking and Dagenham	Blackburn with Darwen	Greenwich	Lewisham		London	England																
■ 2013/14	25.13	13.19	22.98	28.26		21.13	18.42																

Indicator Number	4.11	Indicator Name	Emergency readmissions within 30 days of discharge from hospital	Indicator Type		Outcome	
Definition	Percentage of emergency admission to any hospital in England occurring within 30 days of the last, previous discharge from hospital after admission.						
Source	Hospital Episode Statistics (HES); https://indicators.ic.nhs.uk/webview/						
Frequency	Annual but could possibly be retrieved locally on a quarterly bases for active monitoring						
National target	Close gap between LBBB, London and England Average. Trajectory is an indication of likely admission rates. Targets might have to be set to, initially be on a declining trend, although rates are rising across all areas, but slower pace of increase compared to LBBB. SNs trends also slower pace. Discussions between groups to set targets based on benchmark/trajectory, and consider quarterly active monitoring						
Responsible Lead	Integrated Care Subgroup						
Historical performance	Emergency readmissions within 30 days of discharge from hospital						

Percentage of emergency admission to any hospital in England occurring within 30 days of the last, previous discharge from hospital after admission

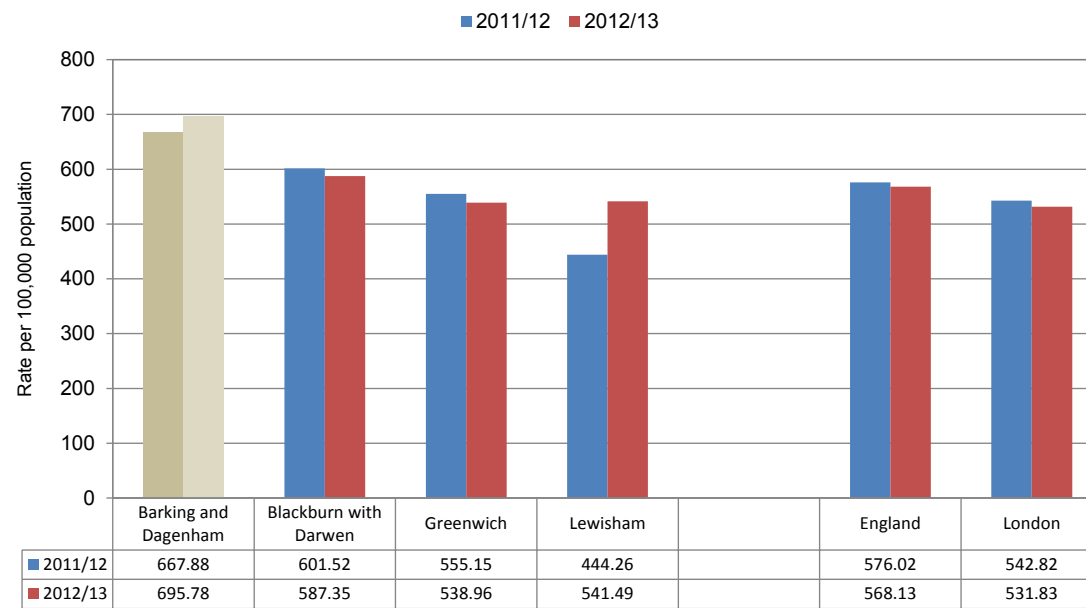


● Barking and Dagenham	8.07	8.46	10.20	10.63	11.58	11.43	11.98	12.93	12.88	13.30	14.84	15.67	16.54	17.47	18.44	19.47
● England	9.48	9.81	10.28	10.68	10.82	11.00	11.33	11.58	11.78	11.78	12.38	12.69	13.00	13.32	13.65	13.99
● London	8.87	9.56	10.26	10.77	11.18	11.12	11.38	11.56	12.00	12.14	12.88	13.29	13.71	14.14	14.60	15.06

Axis Title

Older Adults

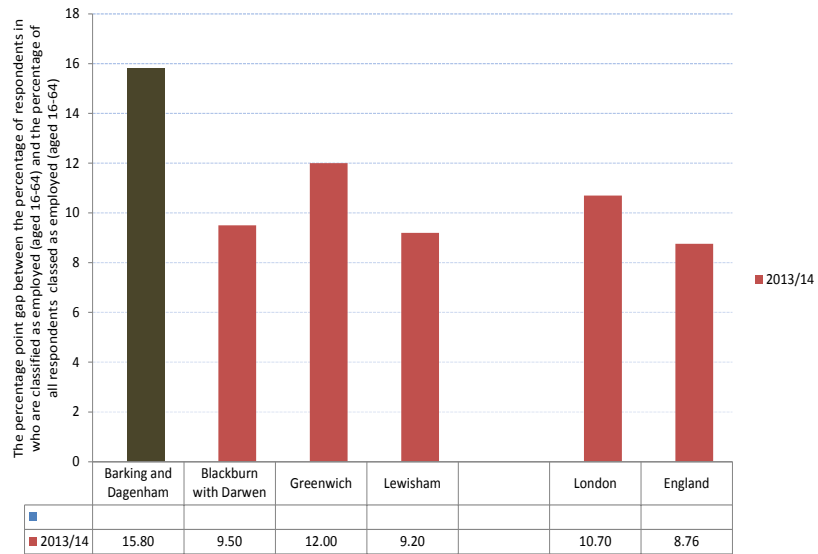
Indicator Number	4.14	Indicator Name	Hip fractures in people aged 65 and over	Indicator Type	Outcome
Definition	Emergency Hospital Admission for fractured neck of femur in persons aged 65 and over, directly age-sex standardised rate per 100,000.				
Source	Hospital Episode Statistics (PHE calculation, but can also be done locally with correct ICD10 codes)				
Frequency	Annual				
Target	Quarterly monitoring of these figures is recommended. Rates in LBBD have gone up from previous year; much higher than SNs. Suggest target set close to London and England rates (more realistic reductions from these figures, but with review on quarterly basis by CCG/PHI and, with such trends, set realistic targets based on trajectory and other system factors. Discussions between key groups recommended.				
Responsible Lead	CCG (or jointly with LBBD)?				
Historical performance	Hip fractures in people aged 65 and over, rate per 100,000 population				



Indicator Number	4.15	Indicator Name	Excess Winter Deaths Index (3 years, all ages)	Indicator Type	Outcome																																																								
Definition	Excess winter deaths measured as the ratio of extra deaths from all causes that occur in the winter months compared with the expected number of deaths, based on the average of the number of non-winter deaths.																																																												
Source	Annual Public Health Mortality File provided by ONS																																																												
Frequency	Annual																																																												
Target	Current trends suggest a significant increase in rates of EWD in LBBD. Consider review of current figures with key players and set reasonable/realistic target that perhaps could match, aspirationally, rates consistent with relatively low rates at London and England levels (or perhaps comparisons with that of statistical neighbours)																																																												
Responsible Lead	LBBD??																																																												
Historical performance	<p>Excess winter deaths - All ages (and trajectory based on current trends)</p> <table border="1"> <thead> <tr> <th></th> <th>8/06-7/09</th> <th>8/07-7/10</th> <th>8/08-7/11</th> <th>8/09-7/12</th> <th>8/10-7/13</th> <th></th> <th>8/11-7/14</th> <th>8/12-7/15</th> <th>8/13-7/16</th> <th>8/14-7/17</th> <th>8/15-7/18</th> <th>8/16-7/19</th> <th>8/17-7/20</th> </tr> </thead> <tbody> <tr> <td>LBBD</td> <td>18.22</td> <td>16.55</td> <td>20.29</td> <td>16.45</td> <td>25.23</td> <td></td> <td>23.17</td> <td>24.71</td> <td>26.36</td> <td>28.12</td> <td>29.99</td> <td>31.99</td> <td>34.12</td> </tr> <tr> <td>London</td> <td>18.15</td> <td>19.28</td> <td>19.15</td> <td>17.16</td> <td>18.02</td> <td></td> <td>17.63</td> <td>17.40</td> <td>17.17</td> <td>16.95</td> <td>16.73</td> <td>16.51</td> <td>16.29</td> </tr> <tr> <td>England</td> <td>18.11</td> <td>18.71</td> <td>19.05</td> <td>16.45</td> <td>17.44</td> <td></td> <td>16.87</td> <td>16.53</td> <td>16.20</td> <td>15.87</td> <td>15.55</td> <td>15.24</td> <td>14.93</td> </tr> </tbody> </table>						8/06-7/09	8/07-7/10	8/08-7/11	8/09-7/12	8/10-7/13		8/11-7/14	8/12-7/15	8/13-7/16	8/14-7/17	8/15-7/18	8/16-7/19	8/17-7/20	LBBD	18.22	16.55	20.29	16.45	25.23		23.17	24.71	26.36	28.12	29.99	31.99	34.12	London	18.15	19.28	19.15	17.16	18.02		17.63	17.40	17.17	16.95	16.73	16.51	16.29	England	18.11	18.71	19.05	16.45	17.44		16.87	16.53	16.20	15.87	15.55	15.24	14.93
	8/06-7/09	8/07-7/10	8/08-7/11	8/09-7/12	8/10-7/13		8/11-7/14	8/12-7/15	8/13-7/16	8/14-7/17	8/15-7/18	8/16-7/19	8/17-7/20																																																
LBBD	18.22	16.55	20.29	16.45	25.23		23.17	24.71	26.36	28.12	29.99	31.99	34.12																																																
London	18.15	19.28	19.15	17.16	18.02		17.63	17.40	17.17	16.95	16.73	16.51	16.29																																																
England	18.11	18.71	19.05	16.45	17.44		16.87	16.53	16.20	15.87	15.55	15.24	14.93																																																

Vulnerable and Minority Groups

Indicator Number	1.8	Indicator Name	1.08i - Gap in the employment rate between those with a long-term health condition and the overall employment rate	Indicator Type	Outcome
Definition	The percentage point gap between the percentage of respondents in the Labour Force Survey who have a long-term condition who are classified as employed (aged 16-64) and the percentage of all respondents in the Labour Force Survey classed as employed (aged 16-64)				
Source	Annual Population Survey - Labour Force Survey				
Frequency	Annual				
National target	Rates can be set at London or England rates – to be achieved by 2018 (with equal reductions on an annual basis)				
Responsible Lead					
Historical performance					



Appendix B

The Activity Indicator Templates

For each outcome indicator there is an indicator template setting out:

- Indicator number (where applicable)
- Outcome indicator
- Activity indicator
- Delivery plan indicator and related action
- Lead organisation
- Historical activity to date where available
- Frequency of reporting

Activity Indicator Templates

Pre-Birth and Early Years

Indicator no.	Outcome Indicator	Activity Indicator	Delivery Plan Indicator	Delivery Plan Action	Lead Organisation	Historical baseline	Reporting Frequency
PHOF 2.2	Breastfeeding (all sub-indicators)	2.2i Breastfeeding initiation within 48 hours of delivery	Increased breastfeeding prevalence and rates, prevalence of breastfeeding and attachment Improved initiation Breastfeeding prevalence at 6-8 week check	Work towards stage 1 of Baby Friendly Initiative Implementation	BHRUT / NHS England		
PHOF 2.5	Child development at 2-2½ years	2.5i Proportion of children aged 2-2½yrs who received an assessment as part of the Healthy Child Programme or an integrated review (using any tool)	% of children seen by health visitor by day 14 Health Visitor transition	Healthy Child Programme for 0-5 years commissioned Transfer in October 2015 of the commissioning of the Early Years Programme services to the Council	LBBD		
PHOF 3.3	Population vaccination coverage	3.3i Hepatitis B vaccination coverage (1 and 2 year olds)					

			Number of unborn care assessment frameworks initiated	Clear safeguarding pathways and training in place across all maternity providers	CCG		
			Introduce the new 4 routine blood tests for metabolic conditions	Successful introduction of tests at 9 weeks booking	BHRUT / NHS England		
			Ensure that children with a LD under 5 years have an annual check and health plan	Children with complex care needs assessed and given appropriate care			

Primary School Years

Indicator no.	Outcome Indicator	Activity Indicator	Delivery Plan Indicator	Delivery Plan Action	Lead Organisation	Historical baseline	Reporting Frequency
PHOF 1.2	School readiness	1.2i Percentage of children achieving a good level of development at the end of reception	Improve the development of children in early years and introduce integrated reviews	To identify speech, language and communication needs (SLCN) in children before they reach the age of 2 years using robust research methods	LBBD		
PHOF 2.6	Excess weight in 4-5 and 10-11 year olds (all sub-indicators)	2.6i Percentage of children aged 4-5 classified as overweight or obese	% children with health review, including BMI at reception and Year 6 % children taking regular exercise as measured at health review Reduction in unhealthy weight in Reception and Year 6 Reduction in obesity % of 5-11 yr olds participating in 2 hours PE or more Improve cooking skills of adults and	Physical Activity programme GET ACTIVE	LBBD		

			children % of children from ethnic and gender groups with a healthy weight				
PHOF 4.2	Tooth decay in children aged 5	4.2 Rate of tooth decay in children aged 5 years based on the mean number of teeth per child sampled which were either actively decayed or had been filled or extracted - decayed/missing/filled teeth	Improved oral health	Improved oral health across all age groups	NHS England		
			Ensure that all children have complete immunisation records	Reach London levels for immunisation and then England levels	CCG		
			Improving health outcomes for children with special educational needs and disabilities		LBBB		

Adolescence

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Historical baseline	Reporting Frequency
PHOF 2.4	Under 18 conceptions	2.4 Under 18 conception rate per 1,000 population	Under 18 yrs conception rate (per 1000) and % change against 1998 baseline Reduce rate of teenage conceptions by 50% from '98 baseline for > 16 yr olds	Coherent sexual health and contraceptive services in place for young people Review strategy and develop an action plan	LBBB		
PHOF 2.9	<i>Smoking prevalence - 15 year olds (Placeholder)</i>	2.9i Prevalence of smoking among 15 years olds	Smoking rates at 15 yrs (review and move to prevalence) % teen mothers supported by Family Nurse Partnership %teen mothers supported by Baby Intervention to breastfeed and stop smoking Reduction in numbers of school children taking up smoking	Multi-agency smoking strategy refreshed and action plan developed to reduce smoking in 15 yrs >80% of expected visits made to teenage mothers Social marketing campaign	LBBB / NELFT		

PHOF 3.2	Chlamydia diagnoses (15-24 year olds)	3.2i Crude rate of chlamydia diagnoses screening detection per 100,000 young adults aged 15-24 using old National Chlamydia Screening Programme (NCSP) data	Increase the proportion of young people testing for Chlamydia	Increase coverage to 35%	LBBB		
			% teen mothers supported by Family nurse partnership	FNP engagement plan and pathways refreshed. At least 60% of first time mums enrolled before 16 weeks and 100% no later than 28 weeks Baby Intervention pathways refreshed to ensure young parents who do not meet the criteria for FNP still get early intervention and support	NELFT		
			Increase overall wellness score	Ensure health and wellbeing addressed within council and CCG OD plans	LBBB		
			Perceptions of drunk or rowdy behaviour as a problem	Campaign for young men	LBBB		

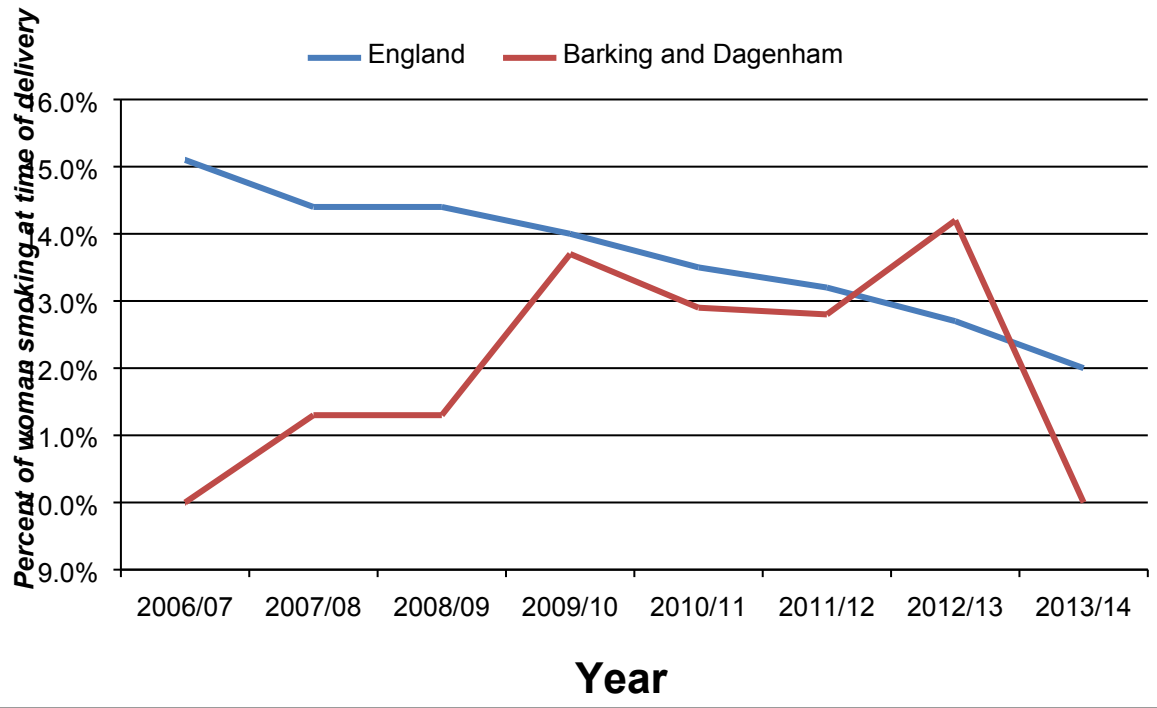
			% Looked after children with a learning disability with annual health check and personal health plan	Clear communication with staff about the role of health checks and health plans, supported by training and provider performance indicators	CCG	Learning Disability Subgroup	
			Change the way frontline health services respond to self-harm and how walk-in centres can be supported		CCG	Learning Disability Subgroup	
			Commissioning high quality mental health services across the life-course that emphasise recovery	Develop the road map to mental health improvement for the next 5 yrs	CCG	Mental Health Subgroup	

Maternity

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Historical baseline	Reporting Frequency
PHOF 2.3	Smoking status at time of delivery	2.3 Rate of smoking at time of delivery per 100 maternities	% teen mothers supported by Family Nurse Partnership Reduction in the number of pregnant women smoking at time of delivery %teen mothers supported by Baby Intervention to breastfeed and stop smoking Decrease the number of pregnant women who are smoking in pregnancy through the implementation of BabyClear	>80% of expected visits made to teenage mothers Identify funding for phase 2, improve assessments and support midwives Implementation of the BabyClear programme	NELFT / BHRUT		
			Number of births at Barking hospital	Training for midwives and children's centres staff to support pathways of care	CCG		

PHOF 2.21	Access to non-cancer screening programmes	2.21i: HIV coverage: The percentage of pregnant women eligible for infectious disease screening who are tested for HIV, leading to a conclusive result (national only)	% of women treated for HIV in pregnancy % of mothers booked with maternity services by 13th week of pregnancy in light of new blood tests Uptake of HPV vaccination Increase the uptake of seasonal flu amongst pregnant women %of over 65 yr olds protected through seasonal flu immunisation	Training for midwives supported by public awareness campaign Primary care and children's centres education programme to support signposting Move 1st booking to 11 weeks Preparation for parenthood classes - delivered by children's centre staff/Health visitors/midwives Commissioning of new HPV vaccines with training and governance support for staff Increase the uptake of seasonal flu amongst pregnant women Local pathway work to improve uptake through partnership	NHS England / CCG		
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Percent of women smoking at time of delivery, England and Barking and Dagenham, 2006/07-2013/14

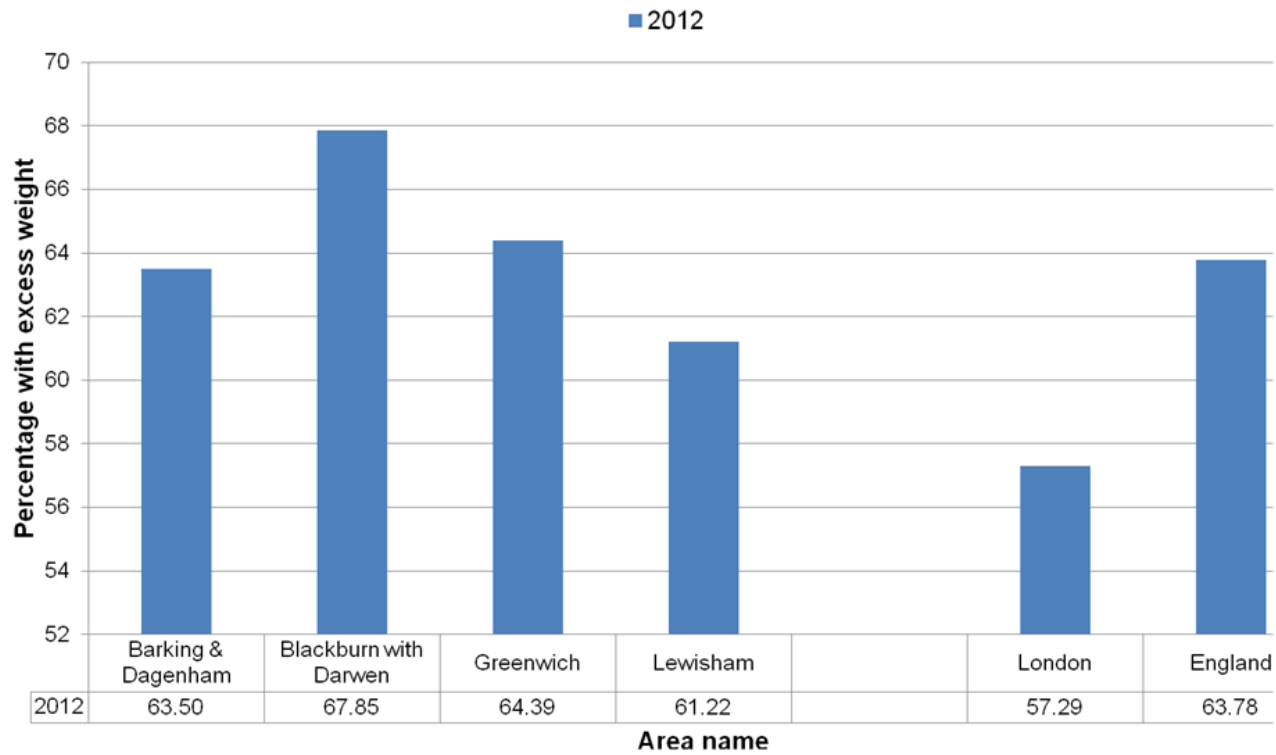


Early Adulthood

Indicator no.	Outcome Indicator	Activity sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Historical Baseline	Reporting Frequency
PHOF 1.9	Sickness absence rate	1.9i: Percentage of employees who had at least one day off sick in the previous week	Decrease average rates of sickness of those in work	Pilot with local employers	LBBB		
PHOF 1.11	Domestic abuse	1.11 Rate of domestic abuse incidents reported to the police, per 1,000 population	Repeat MARAC caseload Reduce number of domestic violence cases among pregnant women	Ensure 20% of frontline staff have attended multi-agency domestic violence and violence against women and girls training	LBBB / CCG / NHSE		
PHOF 2.12	Excess weight in adults	2.12 Proportion of adults classified as overweight or obese	% reduction in prevalence of adult obesity from baseline	Develop adult obesity strategy Common/core nutritional standards for all commissioned services	LBBB		
			Reduce the prevalence of STIs	Increase equitable access to contraception and STI testing Reduce PID to England and then London levels	LBBB		

			% of Adults with Learning Disability with annual health check and personal plan	Clear communication with staff about the role of health checks and health plans, supported by training and provider performance indicators	CCG		
			% of people of different backgrounds getting on well	Development of peer intervention programme for the borough	Mental Health Subgroup		
			Assessment for new diagnoses at outset of treatment particularly focussed on diabetes	Pathways and services for adults with depression into talking therapies taking place	CCG		

Percentage of adults classified as overweight or obese, Barking & Dagenham and comparators, 2012



Established Adulthood

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Historical Baseline	Reporting Frequency
PHOF 2.13	Proportion of physically active and inactive adults	2.13i Proportion of adults achieving at least 150 minutes of physical activity per week in accordance with UK CMO recommended guidelines on physical activity	% of adults cycling or walking to work % increase in the number of adults participating in regular physical activity	Active transport survey conducted and cycling strategy developed across the partnerships Develop adult obesity strategy Leisure pass scheme for older people Leisure pass scheme for people with disabilities and those on low incomes Widening access through new and upgraded facilities	LBB		
PHOF 2.14	Smoking prevalence - adults (over 18s)	2.14 Prevalence of smoking among persons aged 18 years and over	Number of smoking quitters under 30 (review and move to prevalence) % reduction in smoking prevalence over the 3 year period from 2009/10 baseline	Targeted promotion work with high-risk smoking populations and routine and manual groups Social marketing campaign	LBB		

PHOF 2.15	Successful completion of drug treatment	2.15 Number of drug users that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a proportion of the total number in treatment 2.15i - Successful completion of drug treatment - opiate users 2.15ii - Successful completion of drug treatment - non-opiate users	Increase the % successful completion of drug treatment (opiate and non-opiate users)		LBB		
PHOF 2.22	Take up of the NHS Health Check programme - by those eligible	2.22iii Cumulative percentage of eligible population aged 40-74 offered an NHS Health Check in the five year period 2013/14 - 2017/18 (Replaces indicator 2.22i)	Increase uptake of NHS Health Checks	Health checks process and pathways secured during transition Increase uptake to 50% of 40 - 74 yr olds	LBB		
PHOF 4.11	Emergency readmissions within 30 days of discharge from hospital		Re-admission to hospital within 30 days of discharge	Implement integrated discharge planning process	Integrated Care Subgroup		

NHSOF 3b	Emergency readmissions within 30 days within 30 days of discharge from hospital		Re-admission to hospital within 30 days of discharge	Implement integrated discharge planning process	Integrated Care Subgroup		
ASCOF 1C	Proportion of people using social care who receive self-directed support and those receiving direct payments		Number of adults using direct payments	Increased choices for older people - more personal assistance available	LBB		
			Greater acceptance of adults with autism and ability to get a diagnosis and appropriate support	Ensure people with autistic spectrum disorders with assessed eligible needs for care and support have personal budgets	LBB		
			Reduction in number of people claiming incapacity benefit from depression	Review and audit of case register and development of action plan	Mental Health Subgroup		
			Access to Psychological Therapies (IAPT) services	Ensuring commissioned services are IAPT compliant 95% should have access within 28 days	CCG		

Indicator Number	2.15i	Indicator Name	Successful completion of drug treatment - opiate users	Indicator Type	Outcome										
Definition	Number of users of opiates that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a percentage of the total number of opiate users in treatment.														
Source	National Drug Treatment Monitoring System														
Frequency	Annual														
Target															
Responsible Lead	LBBD?														
Historical performance	<p>Trajectory for successful completion of drug treatment - opiate users</p> <table border="1"> <thead> <tr> <th></th> <th>2010</th> <th>2011</th> <th>2012</th> <th>2013</th> </tr> </thead> <tbody> <tr> <td>Series 1</td> <td>9.53</td> <td>12.59</td> <td>16.85</td> <td>14.77</td> </tr> </tbody> </table>						2010	2011	2012	2013	Series 1	9.53	12.59	16.85	14.77
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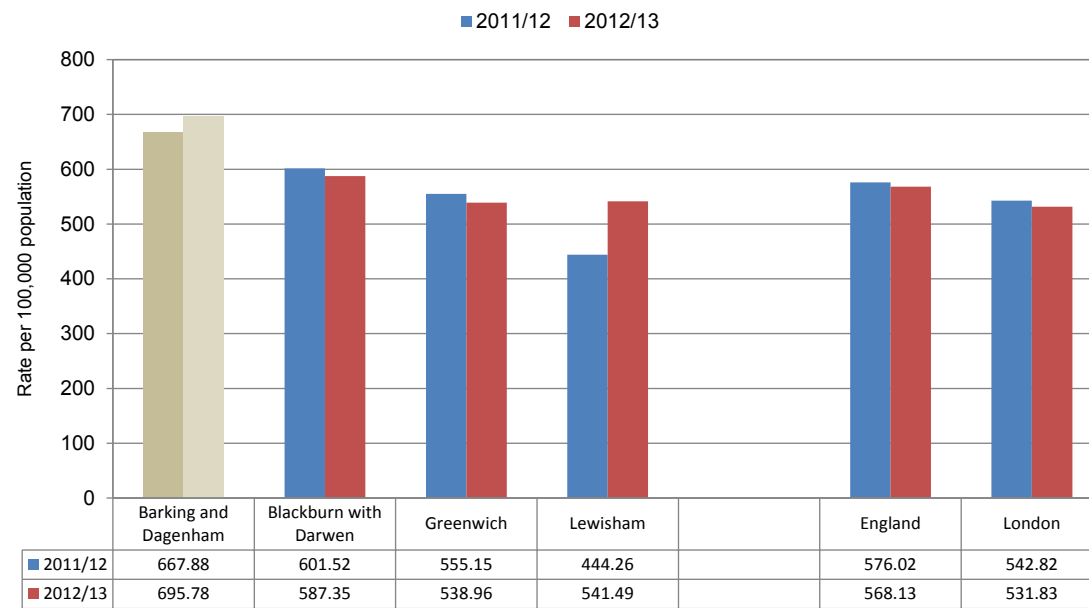
Indicator Number	2.22	Indicator Name	Cumulative % of the eligible population aged 40-74 offered an NHS Health Check			Indicator Type	Outcome													
Definition	The 5 year cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check																			
Source	Public Health England																			
Frequency	Annual																			
Target																				
Responsible Lead	LBBD																			
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Older Adults

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Action plan 2015/16	Lead Organisation	Historical Baseline	Reporting Frequency
PHOF 4.14	Health-related quality of life for older people		Increase early diagnosis and identification of at risk older people in primary care and reduce unnecessary admission to hospital	Pilot Self-care programme for patients and carers	LBBB		
PHOF 4.15	Excess winter deaths		Reduce excess mortality of older people in extreme temperatures	At risk older people receive correct, clear, consistent, useful and actionable advice and information from the local organisations they come into contact with	NHSE		
			Enable those at end of life to die with dignity where they want	Expansion of specialist and palliative care services	LBBB		
			All bereaved people signposted to appropriate bereavement support services	Establishment of bereavement support services	CCG		

			Measurement of the effects of austerity and welfare reform	Council to set up a system to measure the effects of austerity and levels of need so that partners can understand the impact on residents	LBBB		
			% adults with severe mental illness with physical health check	Care pathways and data collection process set up for physical health assessment in mental health patient settings	CCG		

Indicator Number	4.14	Indicator Name	Hip fractures in people aged 65 and over	Indicator Type	Outcome
Definition	Emergency Hospital Admission for fractured neck of femur in persons aged 65 and over, directly age-sex standardised rate per 100,000.				
Source	Hospital Episode Statistics (PHE calculation, but can also be done locally with correct ICD10 codes)				
Frequency	Annual				
Target	Quarterly monitoring of these figures is recommended. Rates in LBBB have gone up from previous year; much higher than SNs. Suggest target set close to London and England rates (more realistic reductions from these figures, but with review on quarterly basis by CCG/PHI and, with such trends, set realistic targets based on trajectory and other system factors. Discussions between key groups recommended.				
Responsible Lead	CCG (or jointly with LBBB)?				
Historical performance	Hip fractures in people aged 65 and over, rate per 100,000 population				



Vulnerable and Minority Groups

Indicator no.	Outcome Indicator	Activity Sub-Indicator	Delivery Plan Indicator	Delivery Plan Action 2015/16	Lead Organisation	Historical Baseline	Reporting Frequency
PHOF 1.8	Employment for those with long-term health conditions including adults with a learning disability or who are in contact with secondary mental health services	1.8i: Percentage of respondents in the Labour Force Survey (LFS) who have a long-term condition who are classed as employed using the International Labour Organisation (ILO) definition of employment, compared to the percentage of all respondents classed as employed					
			Reduce numbers of people on incapacity benefit		LBBB	Public Health Programmes Board	
			% people who feel that they belong to their local neighbourhood IAPT take up amongst men	Increasing community resilience through development of programmes to support community	LBBB	Mental health Subgroup	
			Practices to establish depression registers	Development of new pathways for primary and community care	CCG	Mental health Subgroup	

