

HEALTH AND WELLBEING BOARD

7 November 2018

Title:	Health and Wellbeing Outcomes Framework Performance Report – Q2 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 at the end of 2018/19 quarter 2 (to end September 2018) or the latest data available.</p> <p>This indicator set is due be reviewed as part of the work currently underway to refresh the Joint Health and Wellbeing Strategy.</p>		
Recommendation(s)	The Board is recommended to: (i) review the overarching dashboard and raise any questions with lead officers, lead agencies or the chairs of subgroups; and (ii) note 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 four appendices provide updated data and commentary on key performance indicators for the Health and Wellbeing Board. They also summarise CQC inspection reports published in quarter 2 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 In light of the work currently underway to refresh the Joint Health and Wellbeing Strategy, it was proposed in June's report that this indicator set be retained as it is, with one exception (the inclusion of a revised healthy lifestyles programme measure) and reviewed as part of the refresh.
- 1.4 In addition to the change made to the healthy lifestyles programme indicator, there is also now an alternative indicator for smoking cessation; the number of smoking quitters has been replaced by smoking prevalence in adults.
- 1.5 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 quarter 2
- 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, one was rated amber, one was rated green and one could not be rated:

- i) **Percentage uptake of measles, mumps and rubella (MMR2) immunisation at 5 years old:** Quarter 1 performance (67.6%) is lower than London (72.2%) and remains below the target of 90%. No comparison with England is possible as England data was not published this quarter due to CHIS (Child Health Information Services) Hub data migration issues.
- ii) **Prevalence of children in Year 6 that are obese or overweight:** The latest data for Barking and Dagenham shows an increase from 43.8% in 2016/17 to 44.5% in 2017/18. This is more than 10% above the target of the London average (37.7%) and is therefore RAG-rated red.¹
- iii) **Percentage of looked-after children with a completed health check:** This decreased from 86.0% in quarter 1 to 82.9% in quarter 2 2018/19. This is within 10% of the target of 92% and is therefore RAG-rated amber.
- iv) **The number of children who turn 15 months old in the reporting quarter who receive a 12-month review:** This measure decreased from 79.0% in quarter 4 2017/18 to 78.5% in quarter 1 2018/19. It exceeds the target of 75% and is therefore rated green.
- v) **Number of children and young people accessing Tier 3/4 CAMHS services:** Updated data shows that there were 675 children and young people in contact with CAMHS at the end of quarter 1, a decrease from 695 at the end of quarter 4. 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 Both adolescents' indicators are RAG-rated red:

- a) **Under 18 conception rate (per 1,000 population aged 15–17 years):** Although this measure continues to decrease, it remains more than 10% above its target, with a rolling 3-year average of 28.3 conceptions per 1,000 15–17 year olds compared with a target (the London average) of 18.5 per 1,000.

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.

- b) **Care leavers in education, employment or training (EET):** Despite an improvement from 48.8% in quarter 1 to 49.6% in quarter 2 2018/19, the proportion of care leavers in EET remains more than 10% below the target of 57.0% and is therefore RAG-rated red.

Adults

- 3.4 Of the three adults' indicators, one was RAG-rated red, one was rated amber and one was rated green:
- a) **Percentage of eligible population that received a health check:** No updated data is available in this report. Coverage in quarter 1 2018/19 (2.32%) was more than 10% below the quarterly and year-to-date target of 3.75%. It is therefore RAG-rated red. This figure is a decrease from quarter 4 2017/18 (3.55%) and is also lower compared to quarter 1 last year (2.81%).
- b) **Smoking prevalence in adults – current smokers:** This GP-based measure was 19.9% for Barking and Dagenham in 2016/17. This is less than 10% above the target of 19.5% and is therefore RAG-rated amber. Barking and Dagenham has a much higher smoking prevalence compared with London (17.3%) or England (17.6%).
- c) **Cervical screening – coverage of women aged 25–64 years:** No updated data is available as this is an annual measure. Based on 2016/17 data, cervical screening coverage is rated green, as coverage (67.0%) is above the London average (65.7%). Nonetheless, coverage in Barking and Dagenham shows a downward trend and 2016/17 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).

Older adults

- 3.5 Of the three older adults' indicators, one is RAG-rated red, one is rated amber and one is rated green:
- a) **Bowel screening – coverage of people aged 60–74 years:** At 42.1% of eligible people aged 60 to 74 years, bowel screening coverage continues to be RAG-rated red, with the latest available data (quarter 3 2017/18) placing Barking and Dagenham third lowest among all local authorities in England for coverage.
- b) **Breast screening – coverage of women aged 53–70 years:** No updated data is available as this is an annual measure. Based on 2016/17 data, breast screening coverage is rated amber as Barking and Dagenham's coverage (67.8%) was within 10% of the figure for London (69.4%). This is an improvement from 66.5% in 2015/16.
- c) **Number of long-term needs met by admission to a residential or nursing care home:** This is a cumulative figure. Performance in quarter 2 was below the year-to-date target and lower than at the same point in 2017/18.

Across the life course

- 3.6 Of the six 'across the life course' indicators, one was RAG-rated red, four were rated amber² and one was rated 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 57.2% in quarter 4 2017/18 to 50.9% in quarter 1 2018/19. 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):** The last three quarters show continued improvements from 74.5% to 82.3% to 83.2% for the latest quarter (quarter 2 2018/19). However, set against the target of 90.0%, this measure continues to be RAG-rated amber.
 - c) **Emergency admissions aged 65 and over per 100,000 population:** No updated data is available.
 - d) **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.
 - e) **Percentage of people using social care who receive services through direct payments:** This decreased from 65.5% in quarter 1 to 58.9% in quarter 2. This is below the target of 60% and is therefore RAG-rated amber.
 - f) **Delayed transfers of care:** Across quarter 1, there were an average of 125.8 delayed days per 100,000, which is below the target of 190.8 per 100,000 and hence RAG-rated green. This relates to 558 delayed days, of which 534 were attributable to NHS organisations and 24 (4.3%) to social care.

4 CQC inspections

- 4.1 Twenty-one reports of CQC inspections to healthcare organisations in the borough were published in quarter 2. Thirteen were rated as 'Good', while six received a rating of 'Requires Improvement'. Of the remaining two, one was a dental practice which are inspected but not rated by the CQC and one was a specialist service³ which was inspected with favourable reporting but was not given an overall rating.
- 4.2 There were no CQC reports published that rated Barking and Dagenham organisations as 'Inadequate' in this quarter.
- 4.3 Appendix C contains details of all the inspection reports published in quarter 2 2018/19.

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.

³ Ear, nose and throat specialist provider.

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 The Outcomes Framework, of which this report presents a subset, sets out how the Health and Wellbeing Board intends to address the health and social care priorities for the local population. The indicators chosen are grouped by the 'life course' themes of the Strategy and reflect core priorities.

Integration

- 5.3 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.

Legal

- 5.4 Not applicable.

Financial

- 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 quarter 2.