HEALTH AND WELLBEING BOARD

10 DECEMBER 2013

Title: Health & Wellbeing Outcomes Framework Performance Report - Quarter 2 (2013/14)

Report of the Director of Public Health

Open Report	For Decision
Wards Affected: ALL	Key Decision: NO
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Sponsor:

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Summary:

At its meeting of 16 July 2013, the Health & Wellbeing Board agreed the subset of performance measures that would form its regular Board reporting, from within the extensive set of measures agreed in the Outcomes Framework whilst the Board was in shadow form. The Board also agreed a dashboard format, and a format for reporting further detail on those indicators that required escalation, whether due to noteworthy success, failure to meet targets, or because they were deemed to be of particular policy significance. This report provides the performance update in line with that system for Quarter 2 (to September 2013). It also contains a summary of reports issued by the Care Quality Commission on Barking & Dagenham providers during the period.

Recommendation(s)

Members of the Board are recommended to:

- Review the overarching dashboard, and raise any questions to lead officers, lead agencies or the chairs of subgroups as Board members see fit;
- Note the further detail provided on specific indicators, and to raise any further questions on remedial actions or actions being taken to sustain good performance;
- Note the information provided about Urgent Care and CQC activity in the period.

Reason(s):

The dashboard was chosen to represent the wide remit of the Board, but to remain manageable. It is important, therefore, 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 Outcomes Framework.

1. Background/Introduction

- 1.1. The Health & Wellbeing Board has a wide remit, and it is therefore important to ensure that the Board has an overview across this breadth of activity. The performance framework is designed to provide this overview, and to provide ongoing monitoring of areas of concern.
- 1.2. In July 2013, the Board agreed a process and format for performance reporting, including a selection of indicators from within the more exhaustive Outcomes Framework agreed in 2012. Quarter 1 was reported in September.

2. Overview of Performance in Quarter 2

2.1. Appendix A contains the dashboard that summarises performance against the measures selected by the Board in July 2013.

3. Data availability and timeliness of indicators chosen

- 3.1. There continue to be substantial gaps in monitoring information due to indicators being on annual cycles or having significant delays in the data becoming available. The matter has been discussed at the Executive Planning Group, and the suggestion made to continue for the remainder of this year on the indicators proposed, and to review the position in time to report on quarter 1 in 2014/15. Where there remain difficulties in data flows to Public Health from parts of the NHS, it is anticipated that these would have been resolved. In other areas, interim or proxy measures will have been worked up to give some approximate indication of progress towards targets set.
- 3.2. Additionally, work is underway to agree the measures that will support monitoring of the Integration Transformation Fund, which should be reflected in future Board monitoring reports for 2014/15. This can be picked up when agreements have been finalised in February 2014.

4. Areas of concern

4.1. Appendix B contains detail sheets for seven areas of concerning performance highlighted this quarter, as below.

4.2. Indicator 6: Prevalence of obesity in children in Reception Year Indicator 7: Prevalence of obesity in children in Year 6

The prevalence rate in both reception year and year six is well above the national and regional averages, with Barking ranking the fifth and fourth highest respectively across the country. Childhood obesity is acknowledged as a key priority locally and regionally. The target for participation in the national child measurement programme has been achieved in 2011/12. Obesity in reception (age 4 -5 years) has decreased in 2011/12 as compared to the previous year, and the target has been achieved for this age group, whilst for year 6 a significant increase has been seen. Funding has been allocated from the Public Health Grant for a range of healthy eating proposals which will give an industrial scale healthy eating programme across the borough,

and an ambitious programme to promote participation in regular physical activity in schools. The Board's Obesity Summit will seek to address these long-term trends.

4.3. Indicator 16: Number of positive Chlamydia screening tests

Performance has been below target for this indicator over the course of the past year. A recovery plan was constructed by Terrence Higgins Trust (THT) for 2013/14 Q2 which aimed to improve both coverage and numbers of positives at Chlamydia testing sites. The original discussion with our parties was to extend this contract with a similar time line and with similar reasons as outlined above. However since the reporting mechanisms for this project changed at the beginning of April 2013 (previously the provider was measured on the number of people tested; now it is on the number of people who test positive) the current provider THT has been unable to hit the targets set and is not likely to hit the target for this year despite all the efforts being made.

4.4. Indicator 20. Percentage of women who are smoking at time of delivery Barking & Dagenham is, and has, historically, been performing far worse than both the London and England averages. Rates for the last two quarters have risen from 12.1% to 15.0%.

4.5. Indicator 30: Alcohol-related recorded crimes

Barking & Dagenham's performance is worse than both national and regional averages, with rates being almost twice as high as England as a whole. However, this indicator has shown a slight downward trend over the last two reported financial years, mirroring national and regional trends.

4.6. Indicator 32: Emergency readmissions within 30 days of discharge from hospital

Barking & Dagenham has a higher percentage of readmission than both national and regional averages. The rate has also shown an increasing trend since 2006/07. However, 2010/11 is the most recent data available and was released by HSCIC in March 2013. It is not possible to calculate local rates as Public health do not currently have access to HES data; applications for access to HES data are currently in process.

4.7. Indicator 33: Rate of premature mortality of people under the age of 75 from all causes amenable to healthcare

Barking & Dagenham has consistently been above the regional and national rates over the last 17 years. The rate for Barking & Dagenham does show a downward trend though, with rates falling by 28.2 per 100,000 in the last four years, a trend that is also observed in national and regional rates.

5. Areas of good performance to highlight

5.1. Appendix C contains a detail sheet on the healthcheck target, highlighting improved performance in this quarter's report.

5.2. Indicator 21: Percentage of eligible population that received a health check in last five years

Whilst the indicator remains below target, progress between quarter 1 and quarter 2 is deserving of mention. At 3.5%, whilst below the expected 3.75%, is the nearest to target that this indicator has been over the last six quarters. This is a result of

work undertaken with primary care by Public Health, including the incentive payments that were introduced in order to drive up performance.

- 6. Inspection activity of the Care Quality Commission with Barking & Dagenham registered providers, published between 1 July 2013 and 30 September 2013
- 6.1. Appendix D contains an overview of investigation reports published during the period on providers in the London Borough of Barking & Dagenham, or who provide services to residents in the Borough. The report lists the position at the time of publication of the inspection report, as well as the current status of the service (as at 27 November 2013).
- 6.2. During the second quarter, 19 organisations were inspected across the Borough. Of these, 15 met all required standards set by CQC. The remaining 4 did not meet all requirements. Notably during this time Queen's Hospital Emergency Department was inspected and failed to meet 3 of the required standards, and there has been considerable separate briefing and discussion on the matters raised by the Care Quality Commission. In addition, the following providers failed to meet one or more of CQC's standards:
 - Abbey Care Home Ltd;
 - Anytime Recruitment Ltd / Anytime Care 2020;
 - Elora House (learning disability residential care);
 - Dr Mohan & Associates, Urswick Medical Practice.
- 6.3. The organisations that did not meet standards were given deadlines to comply with actions set down by CQC in order to implement improvements to meet requirements. These improvements will be reviewed by CQC as part of their ongoing inspection cycle. As at 29 November 2013, improvements continue to be required at these providers; Anytime Care has ceased to offer services.

7. Mandatory Implications

Joint Strategic Needs Assessment

7.1. The Joint Strategic Needs Assessment provides an overview of the health and care needs of the local population, against which the Health & Wellbeing Board sets its priority actions for the coming years. By ensuring regular performance monitoring, the Health & Wellbeing Board can track progress against the health priorities of the JSNA, the impact of which should be visible in the annual refreshes of the JSNA.

Health and Wellbeing Strategy

7.2. The Outcomes Framework, of which this report presents a subset, sets out how the Health & 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

7.3. The indicators chosen include some which identify performance of the whole health and social care system, including in particular those indicators selected from the Urgent Care Board's dashboard.

8. List of Appendices:

- Appendix A: Performance Dashboard
- Appendix B: Detailed overviews for indicators highlighted in the report as being in need of improvement
- Appendix C: Detailed overviews for indicators highlighted in the report as performing particularly well
- Appendix D: Details of inspection activity undertaken by the Care Quality Commission on Barking & Dagenham registered providers