

**TELFORD & WREKIN COUNCIL HEALTH & WELLBEING BOARD**

**DATE OF BOARD: 22.01.2014**

**6 MONTH PERFORMANCE REPORT: HEALTH AND WELLBEING STRATEGY OUTCOME MEASURES**

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**PART A) – SUMMARY REPORT**

**1. SUMMARY OF MAIN PROPOSALS**

This report sets out the latest available performance against the Health and Wellbeing Strategy priority outcome measures. A key factor in identifying the priorities was that they were areas of greatest challenge for the Borough. As a consequence the outcomes for the priorities are typically worse than national comparators. Our challenge is to show that we are driving year on year improvement in these areas. The Board should note that out of the 31 outcome measures identified, 12 have improved, 10 have got worse and 9 are awaiting data.

This report is a stock take against the outcome measures at mid-point for 2013/14 (i.e. at 6 months).

Please refer to Appendix 1 for full details of the outcome measures for the Health and Wellbeing Strategy.

**2. RECOMMENDATIONS**

That the Health and Wellbeing Board:

- a) considers the latest performance data against the Health and Wellbeing Strategy outcomes measures;
- b) consider if outcomes are improving at a rate that is satisfactory; and
- c) reviews the strategy's basket of outcome measures for completeness.

**3. IMPACT OF ACTION - (How it is intended that action will make a difference)**

By identifying any areas of concern the Board will drive improvement against the Health and Wellbeing priorities.

**4. SUMMARY IMPACT ASSESSMENT**

|   |  |   |
|---|--|---|
| <b>COMMUNITY IMPACT</b>                 | Do these proposals contribute to a specific HWB Priority   |   |
|   | No   | They cover all priorities.  |
|   | Do these proposals contribute to specific Co-Operative Council priority objective(s)?                                  |   |
|   | Yes  | Improve the health and wellbeing of our communities and address health inequalities.<br><br>Protect and support our vulnerable children and adults.   |
|   | Will the proposals impact on specific groups of people?  |   |
|   | No   | Priority outcomes will impact on all communities  |
| <b>TARGET COMPLETION/DELIVERY DATE</b>  | An update of the performance will be provided at the May 2014 meeting and will include the year end (2013/14) figures. |   |
| <b>FINANCIAL/VALUE FOR MONEY IMPACT</b> | No   |   |
| <b>LEGAL ISSUES</b>                     | Yes  | Receiving and reviewing the information contained within this report assists the Health and Wellbeing Board in undertaking its role of guiding and overseeing public health responsibilities and arrangements in the local authority (as set out in the Board's terms of reference at paragraph 1.5).<br>That, in turn, contributes towards the Council meeting its statutory responsibilities such as those contained in The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch |

|   |    |  |
|---|----|--|
|   |    | Representatives) Regulations 2013.                         |
| <b>EQUALITY &amp; DIVERSITY</b>                 | No | Priority outcomes will impact on all communities.          |
| <b>IMPACT ON SPECIFIC WARDS</b>                 | No | Priority outcomes will impact on all areas of the Borough. |
| <b>PATIENTS &amp; PUBLIC ENGAGEMENT</b>         | No |  |
| <b>OTHER IMPACTS, RISKS &amp; OPPORTUNITIES</b> | No |  |

### **PART B) – ADDITIONAL INFORMATION**

This report highlights the progress made against the Health and Wellbeing Board Strategy's priority outcome measures at mid-point for 2013/14 (6 months).

#### **Priority 1: Reduce excess weight in children and adults**

- The **percentage of infants breastfeeding at 6-8 weeks has increased** from 32.9% at 2011/12 year end to 33.2% at 2012/13 year end. Telford and Wrekin are significantly worse than the national average of 47.2%.
- The **percentage of reception children who have excess weight** in Telford and Wrekin is 23.9% whilst the national average is 22.6%; the estimated outturn for 2013/14 is 24.1% which is **significantly worse** than the current national average.
- The **percentage of Year 6 children who have excess weight** is 35.8% at year end (2012/13) compared with the national average of 33.9%; the estimated outturn for 2013/14 is 34.9% which **is improving**.
- The outcome measures will be further developed as part of the refreshed excess weight priority (please refer to Agenda Item 7).

#### **Priority 2: Reduce teenage pregnancy**

- Overall, the **teenage conception rate (rate per 1,000 females aged 15-17 years) has decreased** over the past three years from 52.7 to 37.5; however, at the end of quarter 2 the rate has slightly increased to 38. This is significantly worse than the national rate of 30.7.

#### **Priority 3: Improve emotional health and wellbeing**

- The **hospital admissions as a result of self-harm has increased** at year end (2012/13) from 203.4 to 243.8 per 1,000 population for all ages. This is significantly worse than the national average of 207.9.
- **The suicide rate** (per 100,000 population, all ages) for Telford and Wrekin at year end was 8.59 compared with the national average of

7.87; this **has improved** from 2011/12 year end when the rate was 9.1. (This outcome measure had not been included in this report previously but it was felt that it was an important measure to monitor for this priority.)

#### **Priority 4: Reduce the number of people who smoke**

- **Smoking in pregnancy has decreased** from 22.4% at year end to 20.9% at the end of quarter 2. Currently there is no national comparator to compare this result to.
- The **number of babies born with a low birth weight has decreased** since the year end (2012/13) from 4.6 to 3.28 (live births at term, greater or equal to 37 weeks and less than 2,500g) at quarter 2. Although this is getting better it is still significantly worse than the national average of 2.85.
- The **rate of hospital admissions attributable to smoking has been on the increase**; from 1,381 (rate per 100,000 population aged 35years+) in 2010/11, to 1,579 in 2011/12 to 1,581 at 2012/13 year end.
- Smoking cessation rate is no longer measured and new measures are currently being identified to replace it.

#### **Priority 5: Reduce the misuse of alcohol or drugs**

- The **rate of hospital admissions due to alcohol attributable conditions**, although better than the national rate (1,974 per 100,000 population), **has increased** every year since 2010/11 at 1,386 to 1,808 at 2012/13 year end.
- The **rate (per 1,000) of violence against the person where alcohol was a recorded factor has decreased** from 3.2 at 2011/12 year end to 2.8 at 2012/13 year end. This is lower than the national rate of 5.03.
- The number of drug users that left drug treatment successfully was recorded as 82.4. Due to a recent change of definition for this measure there is no comparable national rate or trend data.
- The rate (Directly age-Standardised Rates, DSR, per 100,000 population) of **admission to hospital for males with alcohol specific conditions has decreased slightly** from 361.72 at 2011/12 year end to 361.58 at 2012/13 year end. This is still significantly better than the national rate of 450.9.
- The rate (DSR, per 100,000 population) of **admission to hospital for females with alcohol specific conditions has decreased** from 192.29 at 2011/12 year end to 172.85 at 2012/13 year end. This is still significantly better than the national rate of 225.

- The mortality rate (DSR per 100,000 population) for chronic liver disease estimated outturn for 2013/14 is 17.57. This is higher than the national rate of 14.4. Due to a change in the indicator used there is no previous year end data (i.e. 2010/11 and 2011/12).

### **Priority 6: Improve adult and children carers' health and wellbeing**

The National Statutory Survey of carers is carried out every two years by every local authority. The survey aims to understand, at national and local level, how well services are meeting carer's needs.

- The carer reported quality of life is measured by averaging the score of a combination of questions within the survey, providing a value between 0-12. From the survey it was calculated that the carer reported quality of life was 8 when the survey was carried out which was worse than the national average of 8.1. The next carers' survey is due to be carried out in 2014-15.
- The proportion of carers who report that they have been included or consulted in discussion about the person they care for was 72.8% which was similar to the national average of 72.9%.

### **Priority 7: Improve life expectancy and reduce health inequalities**

- There is no 2012/13 year end data available currently for male life expectancy at birth as the next iteration is due out during January 2014. The last measure was 77.5 years at 2011/12 year end and this increased from 2010/11 (77.4 years).
- The measure of **difference between the most and least deprived within Telford and Wrekin for males** (life expectancy slope of index) **increased** from 6.9 years to 7.0 years at 2012/13 year end. Similarly the difference for **females also increased** from 2.3 to 2.8 at 2012/13 year end. These two measures are getting worse.
- The **mortality rate** (per 100,000 population under 75 years) **from all circulatory diseases has increased** from 67.2 to 74.1 at year end (2012/13). This is significantly worse than the national rate of 62.
- The **rate** (per 100,000 population under 75 years) **of premature mortality from all cancers increased** from 122.6 to 124.8 at year end (2012/13); this is significantly worse than the national rate of 108.14.
- The **numbers of people immunised against flu increased** to 73.6% at 2012/13 year end which was higher than the national average of 73.4%. At 30 November 2013 68.7% had been immunised with the target being 75% by the end of January 2014.

## **Priority 8: Support people to live independently**

- **Proportion of people using social care who received self-directed support has increased** from 58.8% at year end to 63.8% at the end of quarter 2. This is better than the national average of 55.5%.
- Although the **proportion of people using social care who receive direct payments has increased** slightly (from 8.1% at year end to 8.8% at the end of quarter two) this measure is still significantly lower than the national average of 16.5%. To address this issue a high level project group has been established which is looking at the Direct Payment process in order to improve the uptake and quality of Direct Payments. It is also worth noting that this project group is running alongside a regional project looking to address the same issues.
- The **proportion of older people (65+) who were still at home 91 days (3 months) after being offered intermediate care** following hospital admission **has decreased** consecutively for three years (from 77.9% in 2010/11, to 74.3% at the end of 2011/12 to 53.7% at the end of 2012/13). This is significantly lower than the national average of 81.4%.
- A key measure to assess the impact of our re-enablement service is “**people receiving re-ablement service** who need no support at the end of their service”. This measure **has improved** from 34.9% at year end to 39.1% at the end of quarter two.
- The **number of delayed transfers of care (average number of delayed people per 100,000 population) from hospital has increased** slightly from 5.3 at year end to 5.74 at the end of quarter 2. Although this is a slight increase locally this is still significantly better than the national rate of 9.5.

## **Priority 9: Support People with Dementia**

- We are currently awaiting the dementia diagnosis rates to be confirmed by the Department of Health.

## **Priority 10: Support People with Autism**

- The outcome measures will be developed as part of the refreshed autism strategy (please refer to Agenda Item 7).

## **B) BACKGROUND PAPERS**

- Health and Wellbeing Strategy 2013/14 to 2015/16:  
[http://www.telford.gov.uk/downloads/file/4123/hwb\\_priorities\\_consultation\\_may\\_2012](http://www.telford.gov.uk/downloads/file/4123/hwb_priorities_consultation_may_2012)

- Partnership and Outcome Measures Report to 18<sup>th</sup> July 2013 meeting (Item 8).

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