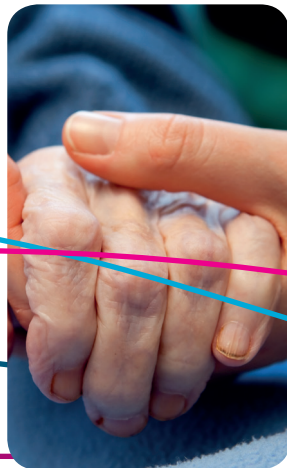
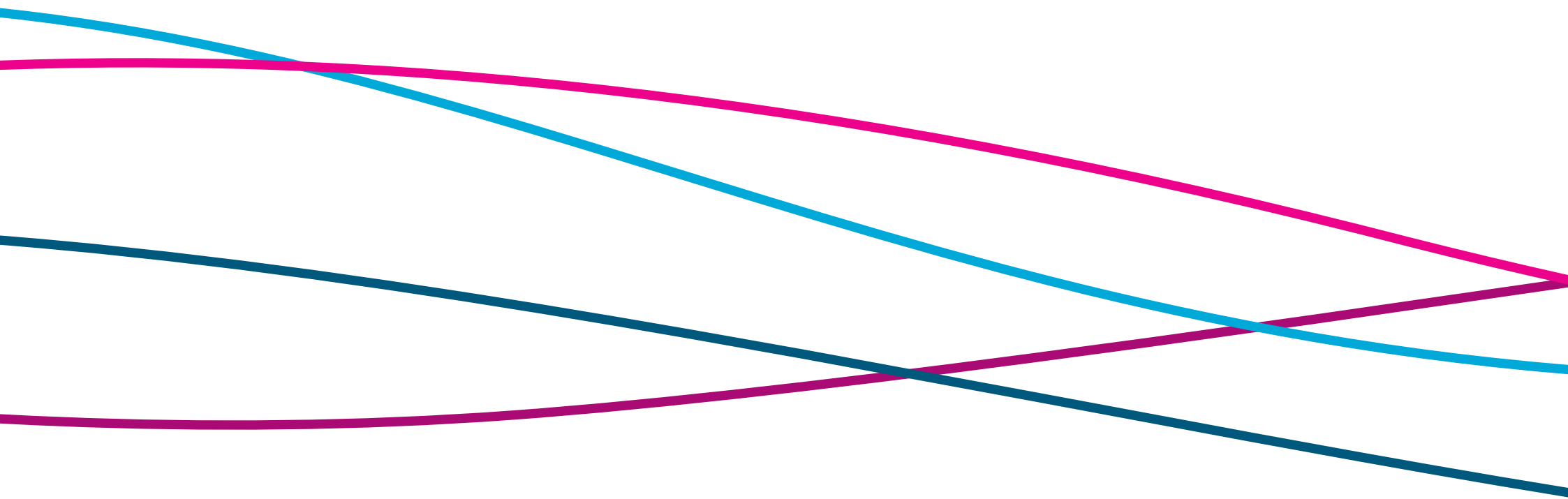


# Living well for longer in

Telford and Wrekin

2015/16





# Foreword



I focused my report last year on how many teams in the council, with the residents of Telford, are striving to make Telford a healthier town. A town that was created in the 1960s, but with deep historical roots. The generation who were born in this period - in the 1960s

- like me are now turning 50. I celebrated my 50th birthday last year. I definitely feel that 50 is the new 40 but it's still a landmark or a good excuse for a party and receiving many cards being rude about my age. The cards certainly suggest that I may be entering a new phase – although some suggested it was down hill while others depicted that life begins at 50! The new phase may be my mid-life years but it is a time of reflection nonetheless – and for me – especially with the arrival of grandchildren – is a time when valuing my fitness and health is really important. I know I'm not the only one as national surveys suggest this as well. I have set myself some personal goals about getting fitter and will let you know next year how I get on!

I have chosen the focus for this years report to be ageing well – a subject that is relevant to all as we are all ageing and not just those that reach a certain age! I am focusing on people in their 50s, 60s and 70s because it is often not recognised that it's never too late to take steps to improve your health and wellbeing and this age group, 58,300 people in Telford and Wrekin, is often forgotten as public service offers tend to focus on the young or very old. How we live our life in our mid-life will impact on the extent we are able to flourish in our later life and minimise any period of poor health. This is better for people and for care services.

Healthy life expectancy for men in Telford and Wrekin is 60 years whilst for women it is 57 years. This is 3 and 7 years shorter than the national average respectively. This gap is actually wider than the gap in life expectancy meaning that our residents are spending a longer time in poorer health as well as dying younger. The time spent in poorer health by people in Telford and Wrekin, over the period of their lives, is a significant loss to their communities.

Ageing well and healthily is affected by a range of factors: lifestyles, financial security, good quality care & advice, appropriate housing, being socially connected and having meaningful relationships, having independence and control over ones life and having a sense of being able to contribute to society and being valued.



During this past year, I have attended a wide number of celebration events – at work we have our customer service awards – where people who have gone the extra mile are acknowledged – 16% of our staff are over 50 and the experience and innovation they bring to the workplace makes a huge contribution. I also attended the active lifestyle awards ceremony and while it struck me that many of the winners were sporty young people and we need to promote the benefits of activity across the ages – we did have numerous awards for volunteers – the Mums, Dads, Grandparents – who help run the clubs and activities. A large number of volunteers nationally are over 50 and this is just the tip of the iceberg in terms of what we know is happening day to day in communities.


The Active Lifestyle Award – individual category was won by Antony Bellamy (*pictured above right*) who turns 50 this year. I had the pleasure of sitting next to him that evening. We chatted and he told me he had had a heart attack a few years ago but since then had joined Cycle Telford and has never looked back. He loves the comradeship, the outdoors and tells how cycling helps him to relax and explore new places. I think he wondered why he had been given this award but I think he really demonstrates how you can live well with a chronic condition and how this activity has improved both his physical and mental wellbeing. I shared with him – my upcoming birthday – and a few of the steps I was going to take to live well and more actively.



I am delighted to have produced this second Annual Public Health Report and would like to thank my team and all the officers from across the council who have contributed. I would also like to thank all the people who have shared their stories on camera about living well in their mid-years. The generation who were born when Telford became a new town 50 years ago are now entering their mid-life years and their parents are in their 70s and 80s. We have seen improvements in life expectancy, albeit at a slower rate than elsewhere, but we need to make sure we are adding life to years as well as years to life and we need to celebrate the huge contribution ‘older’ people make to their families and communities.

**Liz Noakes**  
Statutory Director of Public Health  
Telford & Wrekin Council



 [Click image to watch video](#)  
[Liz Noakes talks about Ageing Well](#)

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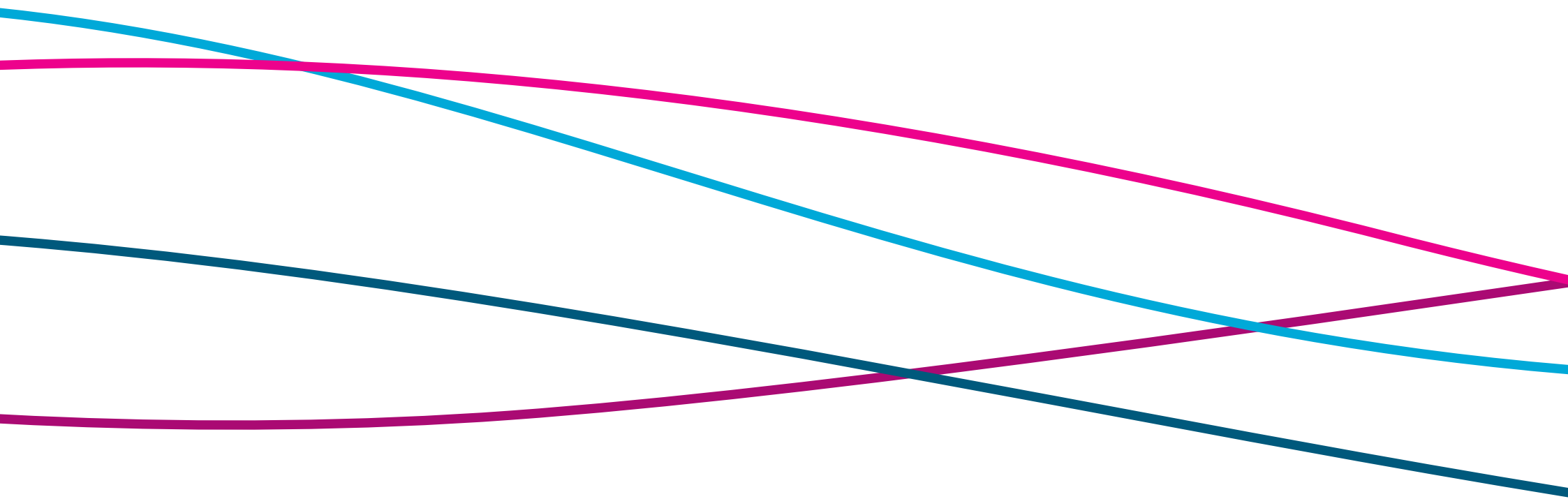
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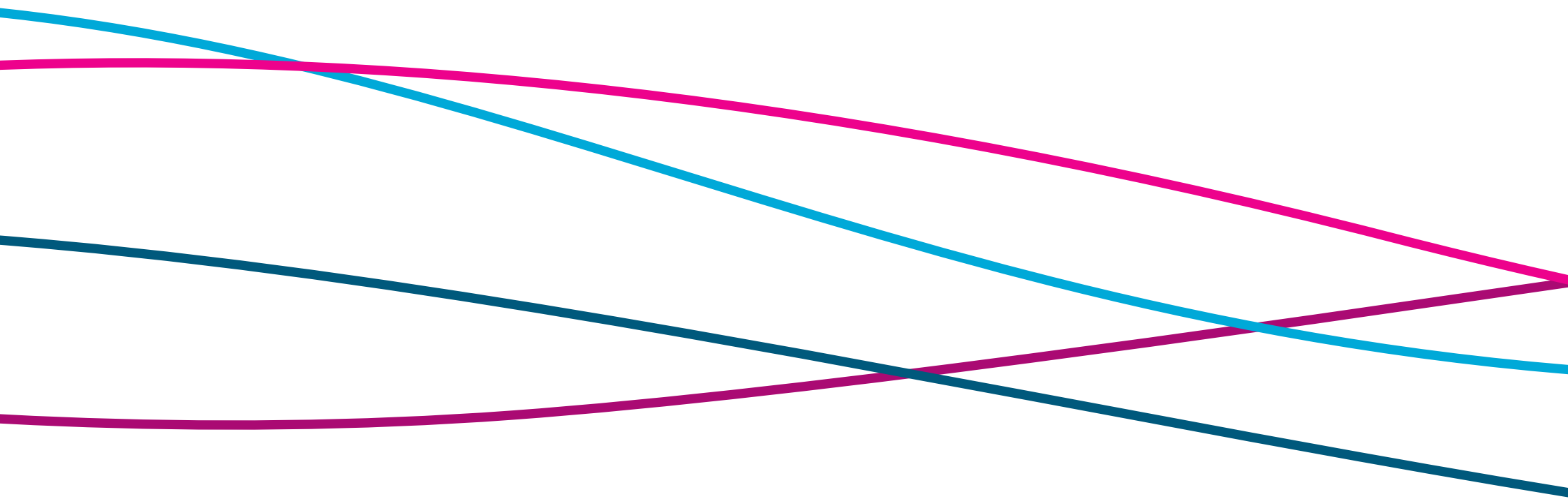
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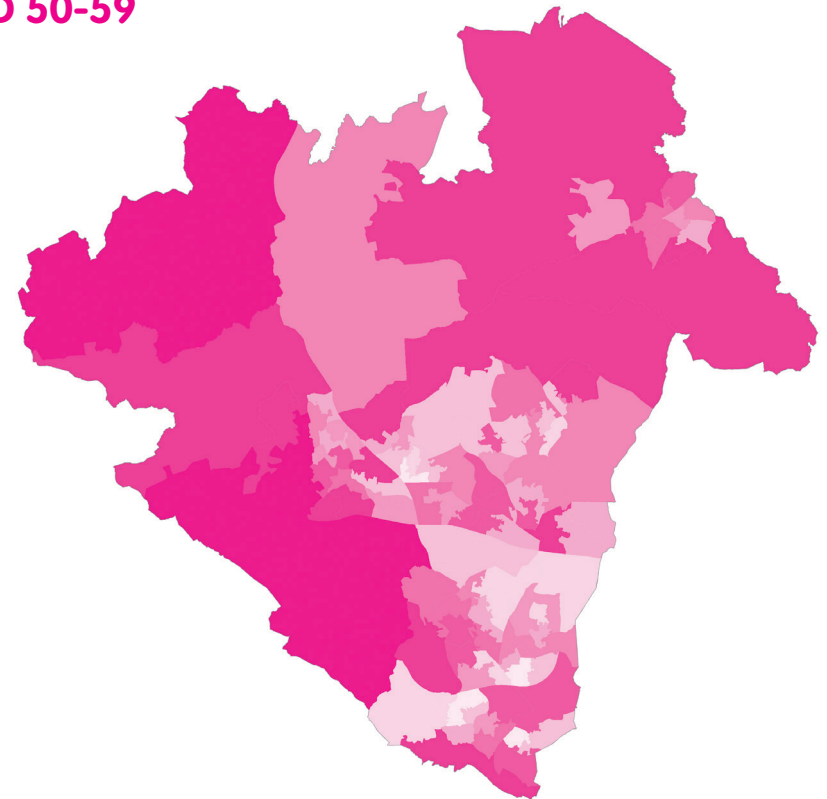
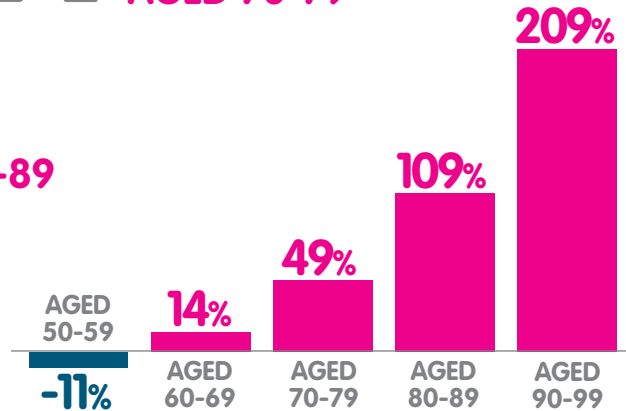
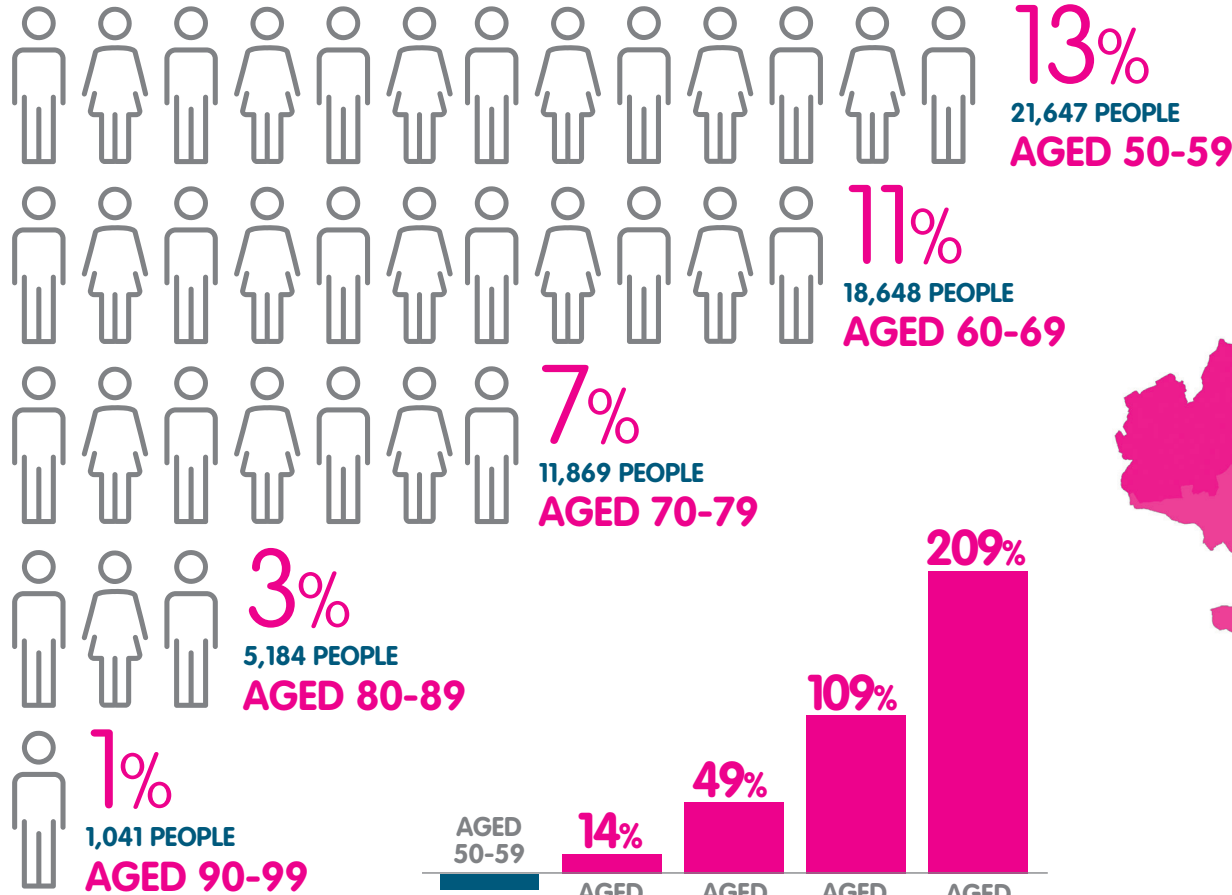


# Acknowledgements

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# Our over 50s

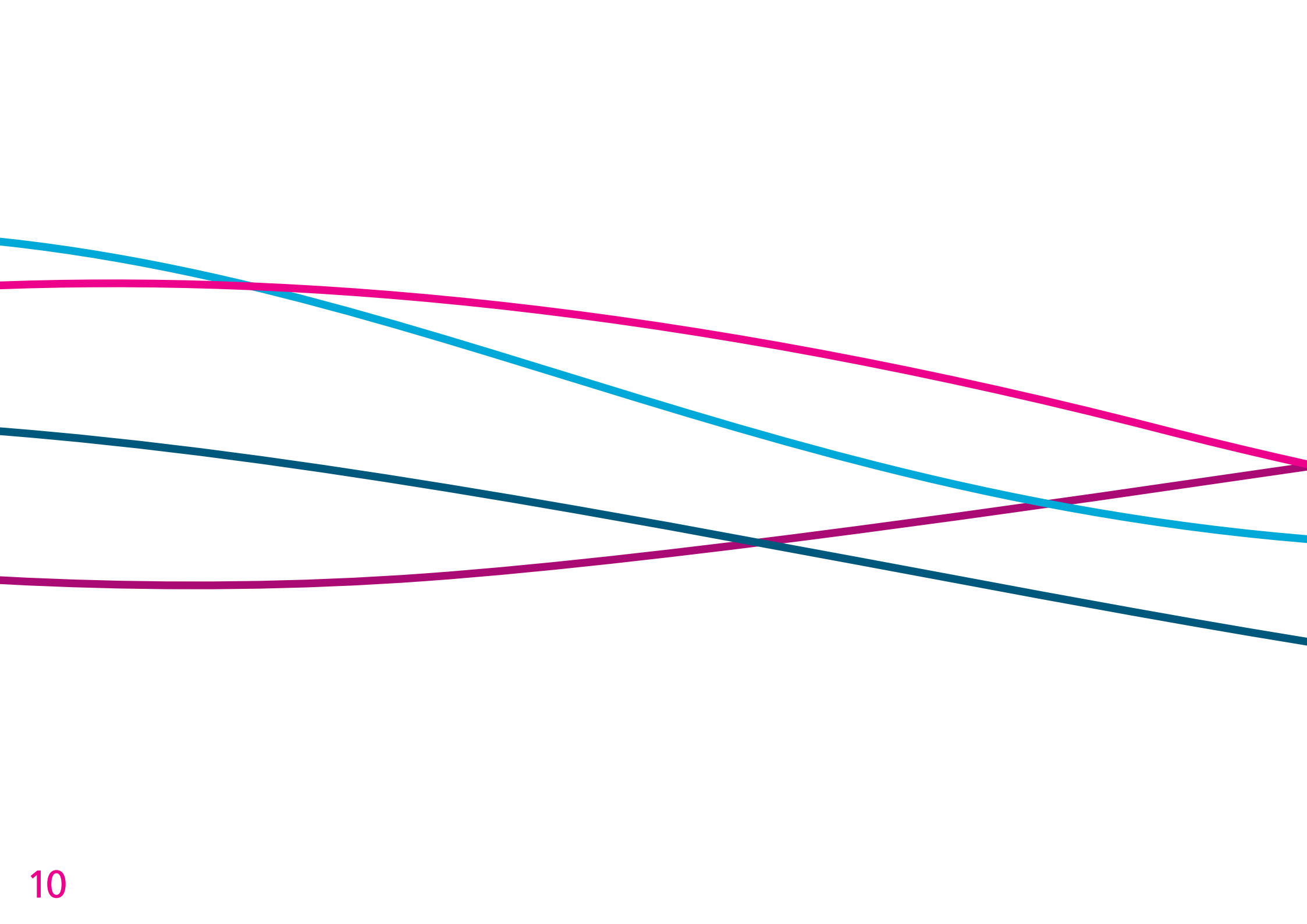


**169,440**  
TOTAL POPULATION  
OF TELFORD AND WREKIN

PROJECTED % CHANGE  
**2015 - 2035**

PERCENTAGE OF POPULATION AGED 50+

15%-17%	18%-21%	22%-24%	25%-27%	28%-29%
30%-31%	32%-33%	34%-38%	39%-44%	45%-51%



# Looking after yourself – healthier lifestyles

Looking after yourself - keeping active, eating sensibly, not smoking, moderating your drinking and taking care of your emotional health and wellbeing are important at all ages, but never more so than in our later years.

## Local insight

Conversations with local partners and residents tell us that many local people adopt healthy lifestyle behaviours and those who develop weekly routines, particularly with a social circle around their activities, are showing it is possible and practical to sustain a healthy way of life.

Equally, there are residents who feel a healthy lifestyle is not relevant to them, they are 'over the hill' and do not expect or aspire to have the same quality of life or be able to do the things they have done in the past. People have many other pressures in their lives and do not recognise or prioritise the benefits of a healthy active life.

## What our residents and partners say

**980**  
COMPLETED  
SURVEYS



The 'Are you healthy, safe and independent?' survey was carried out by Telford & Wrekin Council during July to September 2015. In total 980 people completed the survey and the majority of respondents were aged between 40 – 64 years.

### Being healthy and feeling good

74% responded to say they feel healthy and good or very healthy and very good. More males (79%) than females (72%) stated they felt healthy and good.



The things that people told us about that help them to be healthy and feel good can be themed in the following ways:

- Exercise, diet, walking and hobbies 68%
- Self or others 48%
- Good work life balance 26%
- Practical support such as GP and health support/appointments, medicine, money or income and good weather 19%

Things that make it difficult to be healthy and feel good include:

- Disability and illness 29%
- Practical issues, such as poor diet/over weight, money/cost, getting older, poor transport, difficulties accessing health/medical appointments/facilities, loneliness/isolation, poor weather, lack of community groups, lack of sleep 27%
- Time issues, such as lack of time in general, work commitments, caring responsibilities or a poor work life balance 20%

When asked for ideas on how friends, family or neighbours may be able to support to overcome any difficulties identified respondents suggested they need:

- General help and support 17%

- Practical support such as help with chores, childcare, sharing of information and financial support 10%
- Social support such as do things together, keeping in touch, opportunities to socialise, help to get out more 10%
- No suggestions/ideas or no difficulties identified or they can't help 37%

When asked for ideas on how community or voluntary groups may support to overcome any difficulties identified respondents suggested they need:

- Social support and opportunities, such as community or social groups, health hub and community fitness, befriending, sport and leisure and volunteering opportunities 29%
- Practical support, such as chores, advice and support, transport and food banks 12%
- No difficulties or suggestions or they can't help or help not wanted 70%



## What's the local picture?

- Just over a fifth (21%) of adults, circa 30,000 people, are still smokers
- However, people aged 45 years and over account for almost half (46%) of all people who successfully quit smoking through our local stop smoking services
- And successful quit rates improve with age, rising to 66% success rate in the over 60s, compared to well below 60% in younger adults<sup>14</sup>
- Over a quarter (26%) of adults are higher or increasing risk drinkers

- More than a quarter (28%) of adults are physically inactive - 36,650 people



**28%** ADULTS ARE PHYSICALLY INACTIVE

- Over two thirds (72%) adults, 93,800 people are overweight or obese
- Only 46% of adults eat the recommended '5-A-Day'

**46%**  

**ADULTS EAT RECOMMENDED 5-A-DAY**

- Every year around 300 people die from causes that are considered to be preventable, this includes a significant number of deaths which are due to smoking, alcohol consumption and excess weight

## You can act on this advice...

Supporting people to live healthier lifestyles has been shown to be effective at any age. A few key lifestyle changes could help reduce the risk of getting potentially avoidable illnesses and conditions<sup>7</sup>. Integrating physical activity into daily routines, for example walking and gardening, is an important way for older people to keep active.

## Top healthy lifestyle tips

### Eat well

Losing weight, getting in shape, feeling energised - eating well has lots of health benefits.



[www.nhs.uk/Change4Life/Pages/healthy-eating.aspx](http://www.nhs.uk/Change4Life/Pages/healthy-eating.aspx)  
[www.nhs.uk/LiveWell/Loseweight/Pages/Loseweighthome.aspx](http://www.nhs.uk/LiveWell/Loseweight/Pages/Loseweighthome.aspx)

### Drink less

Drinking a little less can make a real difference. Cutting back on alcohol can reduce health risk and boost general wellbeing.



[www.nhs.uk/Change4Life/Pages/drink-less-alcohol.aspx](http://www.nhs.uk/Change4Life/Pages/drink-less-alcohol.aspx)  
[www.nhs.uk/Livewell/alcohol/Pages/Effectsofalcohol.aspx](http://www.nhs.uk/Livewell/alcohol/Pages/Effectsofalcohol.aspx)

### Be smokefree

Quitting smoking is still the single most important change you can make to improve your health.



<https://smarttools.change4life.co.uk/#quitsmoking>  
[www.nhs.uk/Livewell/smoking/Pages/Gethelp.aspx](http://www.nhs.uk/Livewell/smoking/Pages/Gethelp.aspx)

### Move more

Active people live longer and get ill less frequently.



<http://www.nhs.uk/Livewell/fitness/Pages/Fitnesshome.aspx>  
<https://smarttools.change4life.co.uk/#movemore>

## What's on offer in Telford and Wrekin?

Telford and Wrekin has a wide range of activities and services supporting people to adopt a healthy way of life. These are open to residents of all ages and those over 50 are particularly welcome. In some cases concessionary prices are available (e.g. for carers and those in receipt of pension tax credit) and quieter times (for example avoiding family sessions) may be more appealing for some.

In addition there are activities for those in later life who feel more comfortable with people of their own age. These include over 60's swimming sessions, Mature Mega Mix (low impact for the over 50s), Senior Gym Club (supervised gym sessions for over 55s), Primetime (short tennis group) and AgeUKs Living Well programme of activities.

A great starting point, The Healthy Lifestyle Hub at Southwater One (01952 382582) is where a simple health check and advice and support on a healthy lifestyle is offered.



### Healthylifestyles

#### Healthy Telford

[www.telford.gov.uk/info/20087/healthy\\_telford](http://www.telford.gov.uk/info/20087/healthy_telford)

Other services that can provide a range of activities and services locally include:



#### My Life

[www.telford.mylifeportal.co.uk](http://www.telford.mylifeportal.co.uk)



#### my options

activity, wellbeing and care

#### My Options

[www.myoptionstelford.co.uk](http://www.myoptionstelford.co.uk)



#### Age UK Telford and Wrekin Living Well programme

[www.ageuk.org.uk/shropshireandtelford/activities-events/living-well/](http://www.ageuk.org.uk/shropshireandtelford/activities-events/living-well/)

### Telford & Wrekin Leisure Services

#### Telford and Wrekin Leisure Services


[www.telfordandwrekinleisure.co.uk](http://www.telfordandwrekinleisure.co.uk)

## What works

- ✓ People of all ages, even those already frail, benefit from starting lifestyle interventions early; especially interventions to increase physical activity levels. Lifestyle interventions should include: smoking cessation, alcohol, physical activity, healthy diet and weight aspects<sup>7,10</sup>.
- ✓ Receiving prompts to improve lifestyle behaviour from people that they respect and trust encourages individuals to change their behaviour to improve their health. Making Every Contact Count (MECC) uses a brief advice approach, which usually takes up to 5 minutes. It involves raising a health behaviour issue with an individual (where appropriate) and signposting for further information and support.
- ✓ Particular workforces develop strong relationships with older people and research indicates<sup>1</sup>. Services such as pharmacy teams, the Fire and Rescue Service and the social housing workforce are particularly relevant as they work with people who have poorer health than the general population. There is a high level of trust from the public in lifestyle advice from these services.

- ✓ The NICE guideline *Dementia, disability and frailty in later life - mid-life approaches to delay or prevent onset*<sup>15</sup> aims to delay the onset of dementia, disability and frailty, by increasing the amount of time that people can be independent, healthy and active in later life by:
- changing specific risk factors and behaviours such as smoking, lack of physical activity, alcohol consumption, poor diet and being overweight
  - reducing the incidence of other chronic conditions that can contribute to onset
  - increasing people's resilience, for example by improving their social and emotional wellbeing



 **Click image to watch video**  
**Shirley and Glenys are determined to keep active**

# Recognising and supporting those in difficulty

In the current climate many local people are facing financial and social challenges which are having an impact on their health and wellbeing.

## Local insight

Local partners working with residents facing challenges have highlighted that those in their 50's and 60's have become squeezed as families change. Women having children later means many parents over 50 have dependant children at home or adult children remaining dependant for longer continuing to need practical and financial support. As people live longer this group is also likely to have elderly parents requiring an increasing amount of care and support.

Divorce, separation and bereavement are also causing disruption and challenges even in the seemingly most stable families. For some the outcomes are positive and liberating as new life opportunities open up. For others the result is debt and housing issues, loneliness and isolation. Loneliness and isolation is debilitating at any age, particularly for those in later life. Those that are able to have regular contact with friends, family and their local communities are known to have a better quality of life and improved outcomes.



## What's the local picture?

- One in four (24%) of 50-64 year olds are not living as a couple



**ONE IN FOUR 50-64 YEAR OLDS ARE NOT LIVING AS PART OF A COUPLE**

- A lower proportion of pensioners are living alone compared to the national average - 29.5% compared to 31.5% in England as a whole
- Over a fifth (21.6%) of older people are classified as living in deprivation, which is significantly worse than the England average of 18.1%
- Around a fifth (19.6%) of adults report having a high level of anxiety and 11.4% report low levels of happiness



**OF ADULTS REPORT LOW LEVELS OF HAPPINESS**

- Nationally, middle aged people (aged 45-54) are the most likely to feel lonely of all the age groups (15%) which equates to approximately 3,700 people in Telford and Wrekin

## You can take these steps...

Mid-life is a significant transition and often a stressful time, burdened with simultaneous demands from work, childcare and ageing parents. It is important to recognise the resulting pressures and to seek support from family, friends and wider community groups.

The **Five Ways to Wellbeing**<sup>16</sup> are a set of evidence-based steps which everyone can take in their everyday lives to improve their wellbeing.



Click image to watch video

Cathy found help when she was at a low ebb

# Five ways to wellbeing Telford

Five ways  
to wellbeing

## Take notice...

Be more aware of the present moment, including your feelings and thoughts, your body and the world around you. Some people call this awareness 'mindfulness', and it can positively change the way you feel about life and how you approach challenges.

Five ways  
to wellbeing

## Connect...

Connect with the people around you: your family; friends; colleagues; and neighbours. Spend time developing these relationships.

Five ways  
to wellbeing

## Be active...

You don't have to go to the gym. Take a walk, go cycling or play a game of football. Find the activity that you enjoy and make it a part of your life.

Five ways  
to wellbeing

## Keep learning...

Learning new skills can give you a sense of achievement and a new confidence. So why not sign up for that cooking course, start learning to play a musical instrument, or figure out how to fix your bike?

Five ways  
to wellbeing

## Give...

Even the smallest act can count whether it's a smile, a thank you or a kind word. Larger acts, such as volunteering at your local community centre, can improve your mental wellbeing and help you build new social networks.

## What's on offer in Telford and Wrekin?

A variety of sources of advice and support is available locally, including services delivered by:



### Telford & Wrekin Council

Advice and information on benefits, housing, council tax, blue badges and concessionary travel  
[www.telford.gov.uk/info/1002/benefits](http://www.telford.gov.uk/info/1002/benefits)  
01952 380000



### Citizens Advice

Free information and advice on areas including; benefits, consumer, debt, discrimination, employment, housing, immigration, legal, and relationships  
[www.telfordcab.co.uk](http://www.telfordcab.co.uk)



### Age UK

Advice and information, Help at Home, Befriending Visitor and Telephone Buddy Schemes  
[www.ageuk.org.uk/shropshireandtelford/about-us/](http://www.ageuk.org.uk/shropshireandtelford/about-us/)



### Senior Citizen's Forum

Opportunities to influence decision making and access information about services, activities, and volunteering opportunities  
[www.twseniors.org.uk](http://www.twseniors.org.uk)



### Telford Crisis Network

Providing basic essentials to local individuals and families in need  
[www.telfordsupport.org.uk/telford-crisis-network/](http://www.telfordsupport.org.uk/telford-crisis-network/)

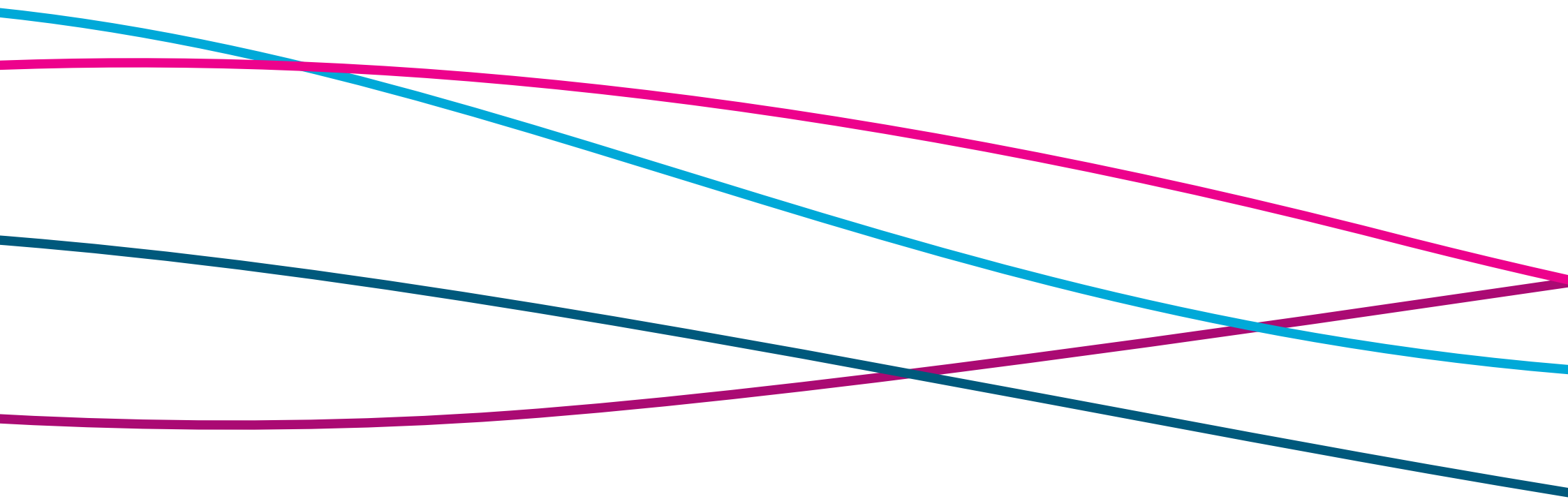


### Carer's Contact Centre

Information and support for carers in Telford and Wrekin  
<http://telfordcarers.org.uk/>

## What works

- ✓ Improving the mental wellbeing of older people and helping them to retain their independence benefits families, communities and society as a whole. Helping those at risk of poor mental wellbeing or losing their independence may also reduce, delay or avoid their use of health and social care services<sup>10</sup>.
- ✓ Evidence shows that effective interventions to improve outcomes for those experiencing disadvantage can be group based, one to one or include volunteering, include the following<sup>16</sup>:
  - Emotional health and wellbeing (positive psychology and mindfulness interventions, spiritual awareness, practices and beliefs, stress management)
  - Social and financial wellbeing (housing, fuel poverty, community cohesion, debt advice, financial capability, socialisation and prevention of social isolation)
  - Physical wellbeing (walkable neighbourhoods, interventions to enhance social interaction activities such as arts, music, creativity, learning, volunteering and time banks)



# Valuing contributions

We know from national evidence that people in mid-life and older age make a huge contribution to society through volunteering, caring activities within the family, their contribution at work and in retirement (to their friends, families and wider communities). This is beneficial to them and others, reciprocal relationships are important, being valued and valuing others.

Work provides income that supports a healthy life and provides social opportunities that are good for health and wellbeing. Good quality employment opportunities for older people are essential and can bring additional benefits for health and wellbeing<sup>8,12</sup>.

Evidence suggests that older people can also be beneficial to employers with higher profits, reduced staff turnover and less absenteeism. With an ageing population we are seeing a rise in the number of people working beyond the age of 65. Older people in more disadvantaged social positions are more likely to have difficulty finding and keeping a job and are more likely to have health problems at an earlier stage in life<sup>12</sup>.

## Local insight

Local partners supporting people into employment identify those over 50 as under pressure in the workplace particularly those with health issues which make work difficult. Those who are unemployed have difficulty getting back into work, especially when they are unfamiliar with current recruitment processes, have poor qualifications and a loss of confidence and self-esteem. Re-skilling is challenging making it difficult to change career and as a result people often end up in 'unskilled' jobs.

Volunteering offers a positive use of skills and expertise. It provides a good opportunity for work experience for those looking to gain employment but also contributes greatly to individuals and local communities. Many local clubs, groups and organisations would not be able to function without the fantastic support that their volunteers provide doing a very wide range of activities at varied levels of time commitment.

Our local 'Are you healthy, safe and independent?' survey asked for ideas on how community or voluntary groups may support people to overcome difficulties. Suggestions included:

## Being healthy and feeling good

- Social support and opportunities, such as community or social groups, health hub and community fitness, befriending, sport and leisure and volunteering opportunities
- Practical support, such as chores, advice and support, transport and food banks

## Being safe and secure

- Social and community support, such as safe place schemes or groups, neighbourhood watch or community groups, advice and support and education groups, work together and communicate and increase community spirit, reduce isolation
- Practical support, such as better policing, improve or repair the local environment, help with transport

## Being in control of your own life

- Practical support such as advice and education, support groups, transport, help with shopping and household chores, organise activities and hobby groups, financial support and advice, health or disability groups, help with childcare, independence and confidence support groups, police



## What's the local picture?

- Almost two thirds, 65.6% of people aged 50-64 work (48.2% full time, 17.4% part time)



**65.6%**  
OF PEOPLE

### AGED 50-64 WERE WORKING

- Almost one in 10, 9.4% of people, aged 65 and over work (4.3% full time, 5.2% part time)
- Nationally 19% of people have volunteered in the last 12 months, this equates to approximately 24,800 in Telford and Wrekin



**19%**  
OF PEOPLE

### HAVE VOLUNTEERED IN THE LAST 12 MONTHS

- Nationally 18% of people have been involved in at least one social action project in their local area in the last 12 months, this equates to approximately 23,500 in Telford and Wrekin
- The census suggests there are 18,000 carers in Telford and Wrekin with 2,200 registered. They provide help to, or look after, a friend, relative or neighbour with practical, personal or emotional support.

## You can consider...

### Volunteering

Helping others can be fun, you will feel appreciated, make new friends and widen your knowledge and have a rewarding experience. Volunteering helps build strong ties to the community, reduces isolation and helps the move into retirement<sup>8,10,11</sup>.

### Befriending

Visit people's homes to provide friendship and that little bit of support for lonely and less mobile older people.

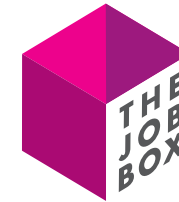
### Learn something new

Sign up for a class or develop a new skill you've always wanted to try, join a book club or research something you've wondered about

### Working

The characteristics of work – activity, social interaction, identity and status – are proven to be beneficial for our physical and mental health. Research shows that people in work tend to enjoy happier and healthier lives than people who are out of work.

## What's on offer in Telford and Wrekin



### Telford Job Box

Support for those seeking employment  
[www.telfordjobbox.co.uk](http://www.telfordjobbox.co.uk)

## Learning for wellbeing

### Telford

### Learning for Wellbeing

Offering a range of free courses designed to improve the wellbeing of adults with mild to moderate mental health conditions, this includes stress, anxiety and depression amongst others.  
[www.telfordjobbox.co.uk/learn.html](http://www.telfordjobbox.co.uk/learn.html)



### Telford Carers Centre

Information and support for people who provide help to or are looking after a friend, relative or neighbour with practical, personal or emotional support.  
<http://telfordcarers.org.uk/>



### Age UK Shropshire, Telford & Wrekin

Volunteer programmes including Help at Home, Befriending Visitor and Telephone Buddy Schemes.

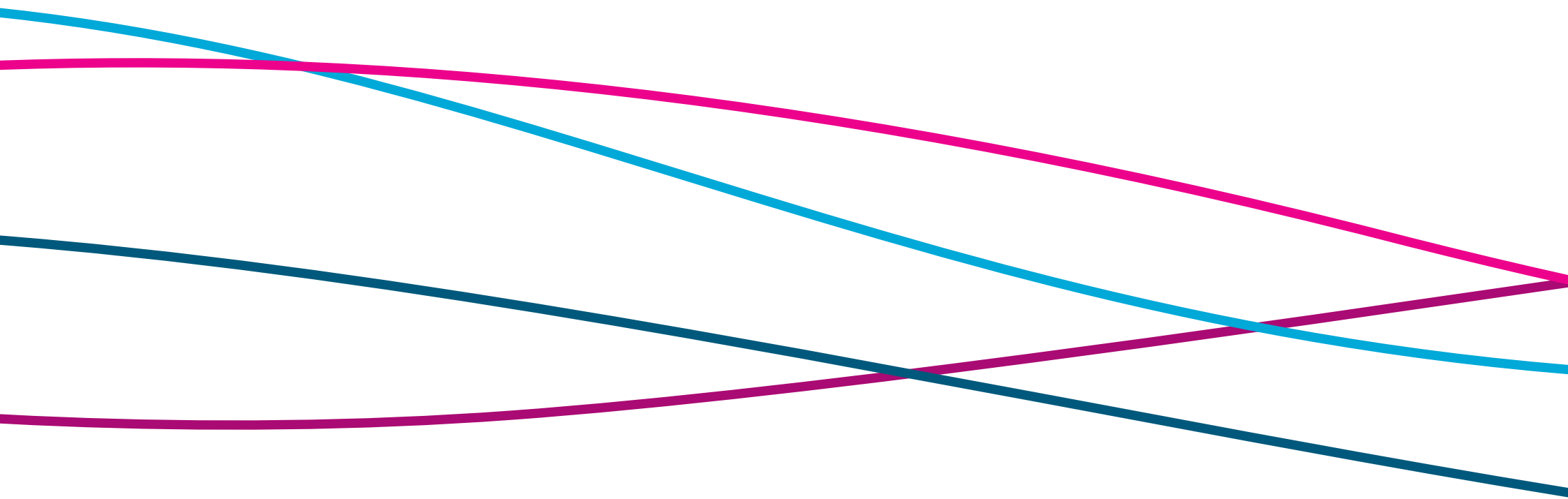
## What works

- ✓ Community Health Champions are local community volunteers who care about the health and wellbeing of those around them and their communities. They can bring their own life experiences to improve health and wellbeing within those communities, including their individual circles of families, friends and workplaces<sup>4</sup>. Volunteers from local communities are best placed to influence those communities and make a positive contribution to the health and wellbeing of those local groups and individuals through building connections.
- ✓ Intergenerational practice aims to bring people together in purposeful, mutually beneficial activities which promote greater understanding and respect between generations and contributes to building more cohesive communities<sup>8</sup>.

- ✓ Key features of success in increasing employment opportunities and retention for older people include<sup>8,12</sup>:
  - Improvements to the physical and psychosocial work environment, risk assessment for workers with health or mobility needs
  - Training for managers on issues of age, fair recruitment practices that encourage applications from older people
  - Ensuring training and lifelong learning opportunities are offered throughout working life and making them appropriate and accessible for older employees, Career development – providing older workers with opportunities to progress and to maintain their skills and knowledge, Performance discussion for employees of all ages to alleviate concerns in this area
  - Flexible working time practices, Phasing retirement and flexible retirement option



 [Click image to watch video](#)  
**Peter remains active by volunteering**



# Staying well

Beyond the lifestyle behaviour influences of smoking, alcohol consumption, excess weight and lack of exercise there are other key risk factors which can be changed or modified to prevent some types of common conditions such cardiovascular disease (heart disease and stroke), certain cancers, dementia and the onset of Type 2 diabetes.

One of the most important modifiable risk factors is high blood pressure (hypertension), which can cause heart attacks and strokes and also lead to chronic kidney disease and some types of dementia.

Half of all cancers occur in people aged 50-74 years and our understanding of the impact of lifestyle choices on our risk of developing various cancers is growing all the time. Cancer screening programmes, which aim to detect changes before symptoms occur, can prevent some cancers as well as ensuring early detection and prompt treatment.

As our population ages it is becoming more usual for us to live with more than one health issue at the same time (known as co-morbidity), but people can live well with chronic conditions and it is never too late to prevent or delay complications.

## What our residents tell us

In Telford and Wrekin one in ten people (10.7%) aged 50-64 years report their health as bad or very bad, which rises to 14% in 65-74 year olds. Unsurprisingly, the levels of local people who report that their day-to-day activities are limited a lot due long term health problems or disability rises sharply with age, increasing from 12.5% in 50-64 year olds, 20% in 65-74 year olds, up to two thirds (60%) in people aged 85 years and over.



## What's the local picture?

- Life expectancy is worse than the England average and is not improving as fast as the national rate, particularly for women. During 2012-14 local life expectancy rates were 78.7 years for males and 81.8 years for women

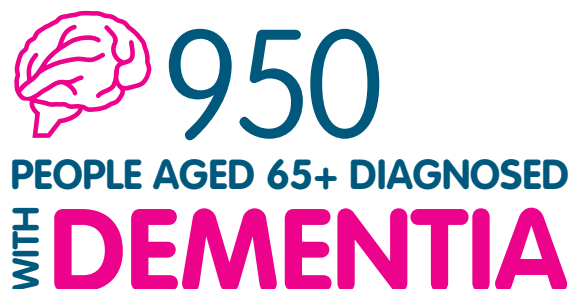


- Every year approximately 530 people die before the age of 75 years, which makes a significant impact on our local life expectancy rates. The biggest killers are cardiovascular diseases (heart disease and stroke) and cancers, which cause two thirds of early deaths
- Cancer is the biggest cause of death under 75 years, causing 42% of all early deaths. We lose around 220 people from cancer before their 75th birthday each year and the local rate is significantly worse than the England average

**42%** EARLY DEATHS FOR **UNDER 75 YEARS** CAUSED BY **CANCER**

- Many cancers can be avoided by reducing lifestyle risks or through prompt, high quality treatment. The top three cancers which are avoidable are lung cancer (50 early deaths per year), bowel cancer (23 early deaths per year), and breast cancer (20 early deaths per year)
- Heart disease and stroke cause just over a fifth (21%) of early deaths, which amounts to approximately 110 deaths before age 75 per year. Our early death rates from cardiovascular disease have fallen rapidly over the past decade and are now similar to the national average

- There are 950 local people aged 65 years and over who have been diagnosed with dementia. This equates to 3.4% of the population aged 65+ years, which compares to 4.3% across England as a whole. There is a major national drive to improve dementia diagnosis



## You can stay well by...

**Attending any health check that you are invited to by your General Practice** - as we get older our risk of disease increases and many, like high blood pressure or Type 2 Diabetes may not cause any symptoms. It is important to get diagnosed and treated as soon as possible to prevent complications

**Getting Vaccinated** - protect yourself and others around you by taking up the offer from your GP to be immunised against:

- 'Flu every winter, if you are 65 years and over or you are under 65 and have a chronic health condition

- Pneumococcal infection, which cause pneumonia, septicaemia and meningitis, by having the one off 'pneumo jab' if you are 65 years and over or you are under 65 and have a chronic health condition
- Shingles, by having a one off vaccination if you are aged 70 and 78 years

<http://www.nhs.uk/Conditions/vaccinations/Pages/vaccination-schedule-age-checklist.aspx>

**Being Screened** – to find out if you are at higher risk of a health problem, so that early treatment can be offered or information given to help you make informed decisions, by taking up the invitations for:

- Cervical screening – every five years if you are aged 50 to 64 years or if you are over 65 and you haven't been screened since age 50 or have recently had abnormal tests
- Breast screening – if invited between age 47-73 years and also if you wish to continue when over the age of 70 years
- Bowel Cancer Screening – by sending the test kit back every two years if you are 60-74 years and by attending the one-off bowel scope test if you are invited at the age of 55
- Abdominal aortic aneurysm (AAA) – screening for men when you are invited at age 65 years
- Diabetes Eye Screening – every two years if you have been diagnosed with diabetes

**Noticing Symptoms and Seeking Help** - cancer is more common as we get older, so it is useful to know the key symptoms to look out for. Spotting cancer early is important as it means treatment is much more likely to be successful, the most important symptoms.

- A lump anywhere in your body
- Bleeding from anywhere
- A new mole, or existing moles that change in size, shape or colour, become crusty or bleed or ooze
- A cough, croaky voice or hoarseness that won't go away
- A change in bowel habits that won't go away
- Unexplained significant weight loss (a noticeable amount when you are not trying to lose any)

**Being Mindful of Dementia** - if confusion and memory problems start to affect your daily life, it is worth sharing your concerns and making an appointment to discuss them with your GP. If you are worried about someone else, try to encourage them to see their GP, offering to go with them for support if they seem a bit reluctant.

## What's on offer in Telford and Wrekin?

A range of services and programmes are in place locally to support us stay well, including **your local GP** and the following:

### NHS Choices

<http://www.nhs.uk/pages/home.aspx>

### Shropshire Breast Screening Service

<http://www.sath.nhs.uk/services/breastscreening/default.aspx>

### The Shropshire Bowel Cancer Screening Centre

[http://www.sath.nhs.uk/services/cancer\\_services/screening/bowel\\_screening/bowel\\_cancer\\_screening.aspx](http://www.sath.nhs.uk/services/cancer_services/screening/bowel_screening/bowel_cancer_screening.aspx)

### Shropshire, Telford & Wrekin Abdominal Aortic Aneurysm (AAA) Screening Programme

<http://www.sath.nhs.uk/services/AAA-screening/default.aspx>

### Shropshire Diabetes Eye Screening

<http://www.sath.nhs.uk/services/diabetes/Eye.aspx>

## What works

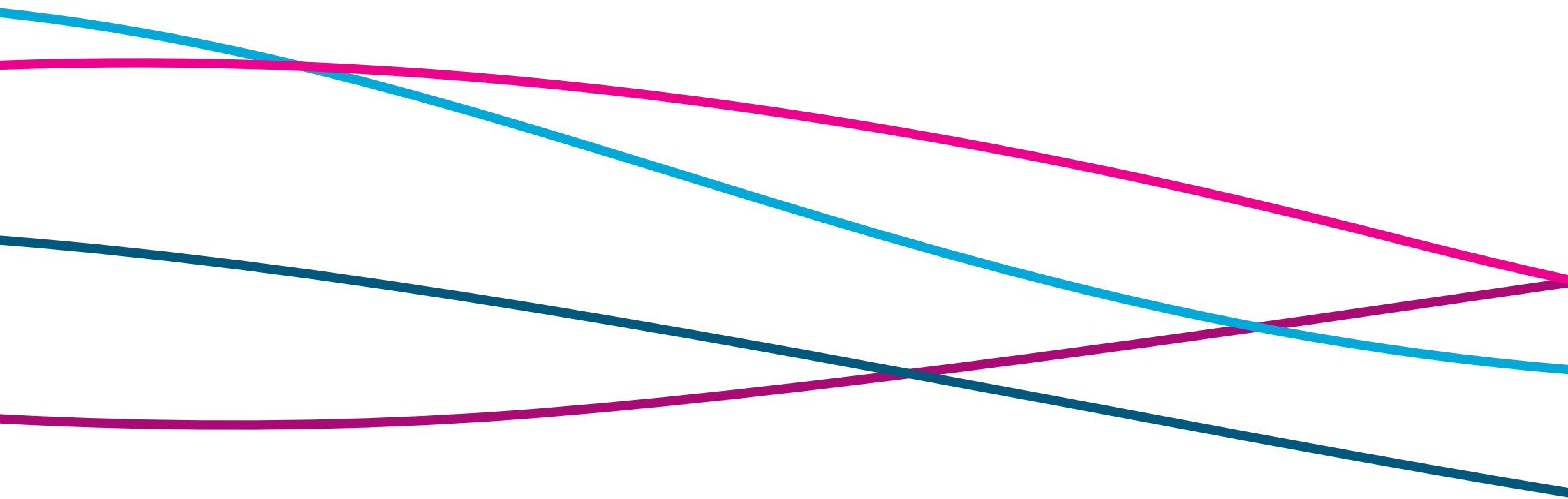
- ✓ Only four out of ten people with high blood pressure in England have been diagnosed and treated to the recommended level, compared to seven out of ten people in countries like Canada. The national Blood Pressure System Leadership Board is a partnership of twelve organisations, including: Public Health England, NHS England, the Department of Health, Royal College of General Practitioners, British Heart Foundation and British Hypertension Society. The Board's vision and action plan *Tackling high blood pressure, From evidence into action*<sup>17</sup>, which is based on the best evidence and practical experience, sets out the improvements required to tackle hypertension systematically across three areas: prevention, detection and management.
- ✓ *Achieving world-class cancer outcomes: a strategy for England 2015-2020*<sup>18</sup> provides recommendations to radically improve the outcomes for people affected by cancer through the following:
  - Radically upgrading prevention and public health programmes
  - Driving a national ambition to achieve earlier diagnosis
  - Improving patient experience
  - Transforming the support offered to people living with and beyond cancer
  - Investment to deliver a modern high-quality service

- ✓ The risk of dementia, disability and frailty will sometimes be determined by factors that cannot be changed, such as inherited conditions or injury. But changing specific risk factors and behaviours can reduce the risk of dementia, disability and frailty for many people. As with hypertension and cancer, these changeable factors include smoking, lack of physical activity, alcohol consumption, poor diet and being overweight.



**Click image to watch video**

**Trevor has benefitted from regular exercise**



# Recommendations: Shaping our local offer

There is strong evidence that improving lifestyle behaviour for people in mid-life will significantly improve health and wellbeing of people in Telford and Wrekin given: what our residents tell us about how healthy lifestyles make them feel, the clear impact of lifestyle risk factors on preventable chronic diseases and the evidence from national guidance and best practice about what works. It is therefore recommended that:

## Recommendation 1

Action should be taken by the Council and partners to encourage and support people over 50 to adopt healthy lifestyle behaviours, which incorporate opportunities to volunteer and ensure advice, signposting into services by health and social care professionals is systematic.

### This should include:

- Working with local partners to implement locally the 'One You Campaign' (developed nationally by Public Health England)
- Working with local employers to provide manual workers with support to quit smoking

- Action should be taken to encourage and support people in mid-life (aged over 50 years) to be more physically active and to continue to be active into their older years. This should include:
  - ensuring an age appropriate offer - making use of available good practice
  - opportunities to volunteer
  - maximising the potential of advice, prescribing and referral interventions by health and social care professionals
- Taking local action to raise awareness of the new alcohol guidelines
- Working with our existing alcohol service providers to offer evidence based interventions to support people in mid-life (aged over 50 years) to drink less
- Working with the Health and Economy Steering Group for Dementia and wider partners to audit local practice against the NICE Guidance to identify gaps and agree next steps to preventing and delaying the onset of dementia

## Recommendation 2

The Council's public health team should work with key partners to develop the wider public health workforce to expand our local capacity and capability to improve the health and wellbeing for our ageing population.

### This should include:

- Further development of our Making Every Contact Count (MECC) training programme to include tailored messages for an ageing population. Action should be taken to engage particular workforces in contact with people in mid life and older people.
- Collaborative working with the Telford and Wrekin Clinical Commissioning Group, Shropshire Local Pharmaceutical Committee and our community pharmacies to develop a Healthy Telford Pharmacy approach – to include health promotion, disease prevention and health protection services
- Partnering with Shropshire Fire and Rescue to build workforce capacity and capability and develop their understanding of health improvement with an initial focus on quit smoking, safe and well checks and falls prevention

- Working with providers of Social Housing to: understand the contacts the housing workforce has with customers and the extent of the opportunities that exist to improve health and wellbeing; gather evidence of the impact of trained and competent staff on the health and wellbeing of customers, and wider community; and provide education and training on health topics that have been identified as important to improving customers' health and wellbeing

### Recommendation 3

Action should be taken by the Council, NHS Telford and Wrekin Clinical Commissioning Group and partners to ensure good access to healthy lifestyle support for the most vulnerable adults, such as those with long term conditions or mental health illness.

#### This should include:

- Improving the physical health of those with a long term condition and mental health illness by ensuring good access to healthy lifestyle support – work should be undertaken to review the current offer for lifestyle services and ensure tailored support is available
- Exploring further access to existing services – data should be recorded of those people with a long term condition and mental health illnesses who have accessed the available lifestyle services for physical health promotion so that we can ensure that we are accessing this population and further activity taken if these numbers are low.

- Health and care professionals should be aware of the higher prevalence of smoking in those with mental health illness and increase the use of MECC to identify smokers and signpost them to services
- Practitioners delivering behaviour change and lifestyle interventions should receive appropriate training to tailor the support they provide

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Building resilient communities clearly benefits individuals, their families, wider networks of friends, neighbourhoods, localities and the Borough as a whole. The significant contribution community volunteers play is clearly recognised. Evidence shows that people being supported within their communities by their friends and neighbours will improve health and wellbeing in Telford and Wrekin, therefore it is recommended that:

### Recommendation 4

The Council, its partners and communities should support and promote a range of group, one-to-one and volunteering activities that meet the needs and interests of local older people.

#### This should include:

- Continued work with partners and communities to raise public awareness of Five Ways to Wellbeing – signposting people to opportunities to Connect, Be Active, Take Notice, Keep Learning and Give; and paying attention to target older people who are identified as being

most at risk of a decline in their independence and mental wellbeing

- Identifying those most at risk of a decline in their independence and mental wellbeing and providing them with information on activities that might help them. Those at increased risk include those who:
  - Are Carers
  - live alone and have little opportunity to socialise
  - have recently separated or divorced
  - have recently retired (particularly if involuntary)
  - were unemployed in later life
  - have a low income
  - have recently experienced or developed a health problem
  - have had to give up driving
  - have an age related disability
  - are aged 80 or older

### Recommendation 5

Building on work already underway, the Council and partners should take a community-centred approach to improving the health and wellbeing of our ageing population.

#### This should include:

- Working with local partners and communities to develop a local network of Health Champions
- Commissioners should consider community-centred approaches when commissioning services that build on the talents of older citizens and enable older people to be part of mutually supportive communities

- The council and partners should continue to invest time and resources into developing local volunteers – women are more likely than men to volunteer on a monthly basis therefore taking action to encourage and facilitate older men to volunteer in their communities should be encouraged
  - Working with key partners we should identify opportunities to pilot and evaluate intergenerational practice:
    - Intergenerational volunteering
    - Programmes to promote community relationships, promote community safety and address fear of crime
    - Programmes to promote active ageing and improved health and wellbeing
    - Programmes to support young people and families through both older family members and volunteer support (linking to our early help offer for children and families)
- 

The benefits of work beyond simply providing income are widely acknowledged, particularly the promotion of purpose, the development of social opportunities and the positive impact on good mental health and general wellbeing. Good quality employment opportunities for older people which recognise these wider benefits should therefore be encouraged in Telford and Wrekin:

### Recommendation 6

Action should be undertaken by the Council with local employers to raise awareness of the links between work, healthy lifestyles and wellbeing and the action employers can take to increasing employment opportunities and retention for older people.

#### This should include:

- Expanding our local Work Well Initiative to include key messages and practical tips for local employers and encourage employers to share best practice and case studies of how they are supporting older employees in the workplace via local business forums and networks
  - Harnessing the power of local businesses and organisations to play their part in supporting people to make healthier choices – encouraging them to commit to taking action voluntarily to improve public health through their commercial actions, community activities and their responsibility as an employer
- 

Prevention is better than cure and healthy lifestyles are crucial, but the detection of other risk factors which can be measured and where appropriate treated will also allow people to prevent or delay diseases which can significantly reduce life span or quality.

Actions at a local level need to enable people to realise the national vision of prevention as everybody's business.

### Recommendation 7

Action should be taken, by NHS Telford & Wrekin CCG with the Council and other partners to maximise every opportunity for awareness raising and early detection of risk factors and symptoms, ensuring early diagnosis and treatment for cancer, cardiovascular disease (heart disease and stroke) and Type 2 Diabetes.

#### To improve cancer survival by:

- Awareness raising of the link between lifestyle choices and cancer risk, including tailored information for those with lower levels of health literacy.
- Promoting symptom awareness – in addition to supporting the national Be Clear campaigns, develop a local communication plan to extend the reach of symptom awareness key messages, with a focus on the over 50s as half of all cancers occur in those aged 50-74 years

- Taking action to improve the uptake of the three cancer screening programmes, with a particular focus on inequalities in uptake
- Extension of our MECC training programme to incorporate cancer awareness information, advice and signposting (link to Recommendation 2)
- Developing an appropriate referral service, which is embedded in the pathway for patients being treated for cancer to ensure they receive appropriate lifestyle advice tailored to their circumstances and risk.

**To tackle high blood pressure, through work with partners on all three aspects described by the Blood Pressure Leadership Board:**

**Prevention**

- Increasing the rate of brief interventions delivered by healthy lifestyle advisors and other partners (suitably trained) to explain the effect of alcohol on blood pressure, and the risks associated with consumption above recommended new guidelines
- Developing a strong local narrative around the impact of alcohol intake on blood pressure
- Developing the role of community pharmacy in identifying and managing blood pressure
- Working with Fire and Rescue Services to include blood pressure in safe and Well Checks

**Detection**

- Developing the scope of blood pressure testing venues for example through pharmacy and the voluntary sector organisations and potentially at home.
- Encouraging more frequent opportunistic testing in primary care both by clinicians and wider staff and integrating testing into the management of long term conditions, including the targeting of high-risk and deprived groups through audit and outreach testing
- Work with CCG to encourage more waiting room testing e.g. automated systems
- Encourage and support self-testing through education and awareness raising with all partners
- Provide insight into under-served communities to support local development of detection approaches which reduce inequalities for example use of community health champions

**Management**

Support awareness raising with the public and our partners, as well as supporting the CCG as they address variation and barriers to implementing best practice.

- Adopt and support roll out of a Blood Pressure Pathway being developed by CVD Strategic Clinical Network later in 2016.
- Support adherence to drug therapy and lifestyle change, particularly through self-monitoring of blood pressure and pharmacy medicine support

- Encourage development of self-monitoring and telehealth options
- Expand community pharmacist role in management
- Support health professional education through signposting to resources, training and tools

**To reduce the risk of cardiovascular disease – heart disease, stroke and diabetes:**

- Work with partners and through all available channels to encourage people to attend all invitations to health screening
- Continue to raise awareness of the risk factors for cardiovascular disease and link this to the nation One You Programme
- Support other national programmes promoting awareness of Type 2 Diabetes as a preventable disease linked closely to excess weight

# Review of last year's recommendations

I made seven recommendations in my last annual public health report. Progress made towards delivering these recommendations with our partners during the past year is outlined below.

## **The Early Help Partnership should work with schools to develop a schools based programme to improve emotional health and wellbeing of children and young people**

26 schools have participated in structured interviews contributing to the 'Health Promoting Schools Survey'. Emerging themes requiring greater focus are: self harm; depression; anxiety; coping strategies; online safety; RSE; effective approaches for engaging with parents; and personal resilience. The outcomes of the school survey are informing the development of our school based programme for emotional health and wellbeing. 37 schools have benefitted from additional training to help them to better support children with anxiety and anger issues. School Nurses commissioned by Public Health have continued to work with children and young people to support improved emotional health and wellbeing. They also support school staff to work better with children and young people on a day to day basis and fire fight issues that come up in everyday school life.

### **What's next:**

We have recently been informed that we have secured some additional funding to train and develop our early help workforce – this will include primary, secondary and further education.

For further information please contact:

[public.health@telford.gov.uk](mailto:public.health@telford.gov.uk)

## **The Council should be an exemplar employer for promoting and supporting improvements in employee health and wellbeing, using an evidence-based and innovative approach.**

The Senior Management Team at the Council recognises the benefits of promoting a healthy workplace and has supported a review of the activities available for employees to improve their physical and mental health. There are a wide range of initiatives including cycle to work scheme, flexible working policy, access to counselling, Workplace Challenge, volunteering opportunities and resilience training, however they cannot be found in one place under a 'Workplace Wellbeing' offer.

### **What's next:**

The People Services team which includes Organisational Development, Occupational Health and Human Resources is considering a wellbeing offer and approach for all Council employees

For further information please contact:

[work.well@telford.gov.uk](mailto:work.well@telford.gov.uk)

## **The Living Well Board, in collaboration with employers, should develop a workplace wellbeing offer within the Telford Bondholders Scheme.**

Work Well is being developed as a coordinated network of organisations interested in workplace wellbeing as part of their corporate social responsibility. It is facilitated by Public Health at Telford and Wrekin Council and brings together expertise and support from across the Borough. Registration is free for employers in Telford and Wrekin.

Organisations can register on the Work Well website to access a menu of resources which include:

- Information, facts & figures
- Examples of best practice nationally and locally
- Simple guides on how to get started
- Detailed information on specific areas
- Workshops/seminars on aspects of health and wellbeing
- Support from local organisations
- News updates and items for inclusion in newsletters and communication feeds
- Volunteering programme opportunities

- Self assessment tools
- Campaigns calendar with free resources and ideas on how to get involved

#### What's next:

The website will be launched to the local business networks in Spring 2016 and the supporting programme of activities rolled out throughout the year.

For further information please contact:

[work.well@telford.gov.uk](mailto:work.well@telford.gov.uk)

**The Council should work with wider partners to ensure that the universal offer for physical activity and also the targeted work to address health inequalities provides opportunities comprehensively across the life course.**

Over the last year the Council has continued to support and develop new approaches to offer physical activity opportunities to as wide a range of residents as possible. This has included:

- Junior Park Run - The Council supported local volunteers to establish Junior parkrun which compliments the existing parkrun in Telford Town Park. Junior parkrun is a 2k run for juniors only (4-14 year olds) and is held every Sunday at 10am.
- BE ACTIVE – following a successful implementation in Brookside this project is now also being delivered in Donnington. The project is meeting its aim of getting sedentary 14+ residents to increase their participation in sport and physical activity through a variety of informal opportunities.

- Doorstep Sport Clubs (DSCs) continue to engage young people 14+ in weekly sports clubs in disadvantaged areas. The offer ranges from football to dance. With funding from Street Games, a national charity Telford and Wrekin Council have been able to extend delivery of DSC in new areas of the borough.
- Tackle your Health has been proactive in recruiting volunteers to deliver activities as part of the men's health programme. This year has seen the introduction of cycling which has been extremely successful. Volunteers have completed the 'Mountain-Bike Instructors Award Scheme' and offer rides as part of Cycle Telford every other Sunday 10am – 12noon in the Town Park.



**Click image to watch video**  
**Jim was overweight and decided it was time to act**

- The local leisure provision has continued to be improved. Leisure Services opened a new gym at Horsehay Village Golf Centre in March 2015 encouraging more people to become aspirations members.
- This year TParty in July was a sporting extravaganza and was the first venue in the West Midlands to welcome the arrival of the

Webb Ellis Rugby World Cup Trophy! The day saw a range of family fun activities delivered across Telford Town Park and Southwater. There were a whole host of come and try it activities including: Penalty shoot-out competition, bubble football, rounders games, Tennis Factory and rugby.

#### What's next:

Increasing participation in sport and physical activity continues to be a priority for the Council. It recognises the contribution this can make to peoples lives across the life course and particularly in helping people to lead healthy independent lives.


For further information please contact:

[leisure@telford.gov.uk](mailto:leisure@telford.gov.uk)

**The Public Health team should work with the Development, Business & Employment team to develop specific policies which support the creation of healthy environments, for example, controlling the number of new fast food outlets within local centres and near schools, in the Shaping Places Development Strategy.**

A number of themes that promote health and wellbeing have been woven through the development of the Local Plan that is now out for consultation. These include maintaining, enhancing and protecting sports and recreation facilities, improving infrastructure to promote walking, cycling and use of public transport and providing community facilities for an ageing population.



 **Click image to watch video**  
**CLlr Richard Overton talks about the council's Green Guarantee**

**Next steps:**

The progress of the Local Plan will be monitored and opportunities to further enhance health through planning will be taken where appropriate.

For further information please contact [public.health@telford.gov.uk](mailto:public.health@telford.gov.uk)

**The Council, partners and communities recognise the valuable contribution volunteering can make to volunteers themselves and to others and support the development of more volunteering opportunities.**

Volunteering is a co-operative activity; it helps to build relationships and partnerships between public, private and voluntary sector organisations. We are fortunate to have a huge number of volunteers in Telford and Wrekin, many of whom volunteer within Council services.

Through Cities of Service (a Cabinet Office funded programme) this experience has been built on and even more opportunities have been created for residents to be active citizens within our Borough.



 **Click image to watch video**  
**Brookside is buzzing with volunteers**

Let's Grow has established community growing projects in the most vulnerable areas of the borough, run cooking courses, developed tool hire schemes and planting events. The impact the project has achieved can be seen in this short video.

**What's next:**

The Cabinet Office Cities of Service initiative ends in March 2016 but Let's Grow will continue, as will many other opportunities for volunteers across the Borough.

For further information please contact [getinvolved@telford.gov.uk](mailto:getinvolved@telford.gov.uk)

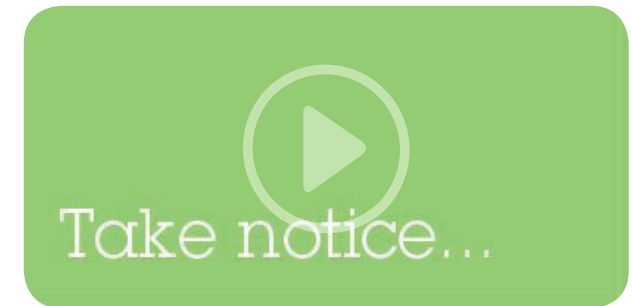
**The Council, partners and communities use the '5 Ways Telford' social media blog to cascade 'people like us' stories to inspire others to take simple steps to feel well, be more positive and get more from life.**


Public mental wellbeing is described as people feeling good, functioning well and having a positive experience of life. The 'Five Ways to Wellbeing' is a set of evidence based actions that promote people's wellbeing. The actions are:

Connect, Be Active, Take Notice, Keep Learning and Give.

A 'Telford 5 Ways' Campaign has been developed cascading 'people like us' stories through blogging and social media networks. Whilst the blogging and social media approach has been slower to show impact than was anticipated it has reached a large number of individuals who are unlikely to have received the messages through more traditional formats.

In addition Five Ways to Wellbeing has been embedded into services across the Council including Healthy Lifestyles Hub, Learning for Wellbeing Courses, Job Box and the volunteering programme



 **Click image to watch video**  
**Julie's journey began with one small step and ended in a transformation**

**What's next:**

Five Ways to Wellbeing will continue to be promoted as simple steps that everyone can use to improve their wellbeing.

For further information please contact: [public.health@telford.gov.uk](mailto:public.health@telford.gov.uk)

**In order to fully realise the opportunities for Making Every Contact Count it is recommended that:**

- **The Council develop and roll out Health & Wellbeing Making Every Contact Count training for front-line council services, who have received Public Health grant funding, to ensure our workforce feels confident in using brief advice to raise lifestyle and wellbeing issues with customers and;**
- **The NHS Telford and Wrekin Clinical Commissioning Group support collaborative work on Making Every Contact Count across the Local Health Economy, for example through use of the NHS standard contract to specify MECC training and delivery requirements for providers.**

Receiving prompts from people that they respect and trust encourages individuals to change their behaviour to improve their health. Making Every Contact Count (MECC) uses a brief advice approach which usually takes up to 5 minutes. It involves raising a lifestyle issue with an individual (where appropriate) and signposting for further information and support.

An online learning package for Health and Wellbeing MECC is now available via the Council's Ollie online learning framework. Since May 2015 over 300 members of staff have completed the online training module.

A 2 hour face to face training session has also been developed for Council frontline staff and partners in public and third sector working with vulnerable groups. The training seeks to further embed the messages and skills required to deliver MECC. To date over 90 members of staff and volunteers from a range of organisations have completed the training, the programme continues with monthly sessions until April 2016. The initial indications from the evaluation are that the training is effective and that staff will use MECC on average once a week.

As well as the positive impact on service users, MECC also has potential to improve the health and wellbeing of staff and their friends and families.

#### **Next steps:**

The online and face to face training programme will continue through 2016/17 with delegates welcomed from a wide range of partners who work with vulnerable residents as part of their everyday roles.

In addition a specific programme will be developed with Shropshire Fire and Rescue to enable officers to use Health and Wellbeing MECC during contacts with the public, particularly during home visits.

For further information please contact:

[public.health@telford.gov.uk](mailto:public.health@telford.gov.uk)

# Public Health Outcomes Framework

## Summary of key changes to the health of people in Telford and Wrekin

Since the last annual public health report there have been some significant changes on certain indicators which measure the health of our population.

### For life expectancy and mortality rates

- Whilst life expectancy figures remain significantly worse than the England average, there have been improvements in death rates and the following measures are no longer significantly worse than the national average:
  - Mortality rates for all causes considered preventable, for males
  - Early mortality rate (under 75 years) for cardiovascular diseases (heart disease and stroke) for all persons
  - Early mortality rate (under 75 years) for cancer in women
  - Early mortality rates (under 75 years) for liver disease considered preventable in all persons and males
- The early mortality rate from all cancers considered preventable in men has deteriorated and is now worse than the England average

### In terms of health improvement

- Measures of health for children and young people have mainly remained worse than the national average, including: smoking in pregnancy and teenage pregnancy, excess weight and breastfeeding at birth – although breastfeeding at 6-8 weeks has improved
- Hospital admissions caused by deliberate and unintentional injury have risen and are now worse than the England average
- For adults, levels of smoking and excess weight and the uptake of the NHS Health Check remain worse than average. However, levels of physical activity and cervical screening coverage have improved
- Hip fractures for older people aged 65 years and over in all persons and in women have increased and are now worse than the national average.

### With respect to the wider determinants which impact on health

- Levels of children living in poverty have improved, but remain worse than the England average
- School readiness measures have improved, particularly in our most disadvantaged children, with two indicators now significantly better than the national average

## Introduction

The Public Health Outcomes Framework (PHOF) for England<sup>6</sup>, was first published in January 2012 by Public Health England (PHE). The overarching vision of the PHOF is improving and protecting the nation's health and wellbeing, and improving the health of the poorest fastest. This vision is encompassed in the framework's two high level outcomes:

**Outcome 1: Increased healthy life expectancy**

**Outcome 2: Reduced differences in life expectancy and healthy life expectancy between communities**

The framework aims to deliver these outcomes through improvement across 66 public health indicators and a series of sub indicators grouped into four domains.

PHE refresh and update the data the PHOF indicators at quarterly intervals in August, November, February and May. This report provides an updated overview and key headlines for Telford and Wrekin from the most recent PHOF, comprising updates released by PHE in November 2015.

## PHOF Summary for Telford & Wrekin November 2015

### Domain 0 - Overarching determinants of health

There are two primary indicators with a total of ten sub-indicators in this domain with reported data. There were no new indicators for this domain; no indicators have been updated in the November 2015 release. The Telford & Wrekin position is significantly worse than the England average for all eight sub-indicators that have been compared.

#### Worse than average indicators:

- Healthy life expectancy at birth (male and female)
- Life Expectancy at birth – (male and female)
- Life Expectancy at 65 – (male and female)
- Gap in life expectancy at birth between compared with England – (male and female)

### Domain 1 – Wider determinants of health

There are 17 primary indicators with a total of 40 sub-indicators with reported data in this domain. No new indicators have been added and three sub-indicators have had data updates since the May 2014 release (KSI casualties, Violent offences per 1,000 population and sexual offences per 1,000 population). The Telford & Wrekin position is significantly better than the England average for eight of the sub-indicators and significantly worse for seven.

#### Better than average indicators:

- School Readiness: Year 1 pupils achieving the expected level in the phonics screening check (all children and those receiving free schools meals)
- Killed and seriously injured casualties on England's roads
- Emergency hospital admissions for violence
- The percentage of the population affected by noise
- Statutory homelessness – households in temporary accommodation
- Utilisation of outdoor space for exercise/health reasons
- Loneliness and isolation in adult carers

#### Worse than average indicators:

- Children living in poverty (under 16 and under 20)
- School readiness of children at reception age (all children)
- First time entrants into the youth justice system
- 16-18 year olds not in education, employment or training
- Employee sickness absence (% of employees taking days off)
- Fuel Poverty

### Domain 2 – Health improvement

There are 22 primary indicators with 54 sub-indicators with reported local data in this domain. Five sub-indicators have had new baseline data added (5-a-day, fruit consumed, veg consumed, excess weight in adults, cancer screening coverage – bowel cancer) and a further ten have had data updates since the May 2015 release. Overall, Telford & Wrekin is significantly better than the England average in 19 of the sub-indicators and significantly worse in 16.

#### Better than average indicators:

- Smoking prevalence at age 15 (current, regular and occasional smokers)
- Cancer screening coverage (breast cancer and cervical cancer)
- Newborn (bloodspot & hearing) screening
- Access to non-cancer screening programmes – diabetes eye screening
- Abdominal aortic aneurysm screening
- Offer of the NHS Health Check programme to those eligible
- Injuries due to falls in people aged 65 and over (persons, males, females, aged 65-79 and aged 80+)

#### Worse than average indicators:

- Breastfeeding initiation at birth
- Maternal smoking: Smoking at time of delivery
- Under 18 conception rate
- Percentage of children with excess weight (both 4-5 and 10-11 age groups)
- Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4 & 0-14 years)
- Fruit and Veg '5-a-day', average portion of fruit eaten, average portions of vegetable eaten
- Excess weight in adults
- Smoking prevalence in adults
- Male admission episodes for alcohol-related conditions
- Cancer screening coverage – bowel cancer
- Health check take up (by those offered and received and those who received)

### Domain 3 – Health protection

There are seven primary indicators with 22 sub-indicators that have reported local data in this domain. Three indicators have been updated since May 2015. Statistically, the Telford & Wrekin position is significantly better than the England average for 14 of the sub-indicators and significantly worse for one.

#### Better than average indicators:

- Population vaccination coverage: Dtap / IPV / Hib (at both 1 year and 2 years old)
- Population vaccination coverage: MenC
- Population vaccination coverage: PCV
- Population vaccination coverage: Hib / MenC booster (at both 2 years and 5 years old)
- Population vaccination coverage: PCV booster
- Population vaccination coverage: MMR : one dose at 2 years old
- Population vaccination coverage: MMR : one dose at 5 years old
- Population vaccination coverage: MMR : two doses at 5 years old
- Population vaccination coverage: HPV (females 12-13 years)
- Population vaccination coverage: Flu (at risk individuals)
- Incidence of TB
- Comprehensive, agreed inter-agency plans for responding to health protection incidents and emergencies

#### Worse than average indicators:

- Population immunisation coverage: (PPV)

### Domain 4 – Healthcare and premature mortality

There are 16 primary indicators with a total of 64 sub-indicators with reported local data in this domain. There have been no new indicators and 32 data updates since the May 2015 release. The Telford & Wrekin position is significantly worse than the England average for 11 of the sub-indicators.

#### Worse than average indicators:

- Mortality from causes considered preventable (persons)
- Mortality for under 75s from cancer (persons and males)
- Mortality for under 75 from cancer considered preventable (persons and males)
- Preventable sight loss – glaucoma
- Health related quality of life for older people
- Hip fractures in people aged 65 and over (persons and females)

### Key to RAG rating

#### RED:

Telford & Wrekin position statistically significantly worse than the England average or goal

#### AMBER:

Telford & Wrekin position statistically significantly similar to the England average or goal

#### GREEN:

Telford & Wrekin position statistically significantly better than the England average or goal

The RAG rating in these tables uses the statistical significance as calculated and presented by Public Health England (PHE) in the PHOF release November 2014. Indicators without RAG ratings are those where PHE have not applied statistical comparisons.

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Domain 0 - Overarching determinants of health				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
0.1i	Healthy life expectancy at birth - Male	60.1	63.3	2011 - 13
0.1i	Healthy life expectancy at birth - Female	57.1	63.9	2011 - 13
0.1ii	Life Expectancy at birth - Male	78.2	79.4	2011 - 13
0.1ii	Life Expectancy at birth - Female	81.5	83.1	2011 - 13
0.1ii	Life Expectancy at 65 - Male	18.0	18.7	2011 - 13
0.1ii	Life Expectancy at 65 - Female	20.1	21.1	2011 - 13
0.2iii	Slope index of inequality in life expectancy at birth within English local authorities, based on local deprivation deciles within each area - Male	7.2	0	2011 - 13
0.2iii	Slope index of inequality in life expectancy at birth within English local authorities, based on local deprivation deciles within each area - Female	2.1	0	2011 - 13
0.2iv	Gap in life expectancy at birth between each local authority and England as a whole - Male	-1.2	0	2011 - 13
0.2iv	Gap in life expectancy at birth between each local authority and England as a whole - Female	-1.6	0	2011 - 13

Domain 1 - Wider Determinants of Health				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
1.01i	Children in poverty (all dependent children under 20) - Persons	22.8	18.6	2012
1.01ii	Children in poverty (under 16s) - Persons	23.9	19.2	2012
1.02i	School Readiness: The percentage of children achieving a good level of development at the end of reception - Persons	58.2	60.4	2013/14
1.02i	School Readiness: The percentage of children with free school meal status achieving a good level of development at the end of reception - Persons	47.9	44.8	2013/14
1.02ii	School Readiness: The percentage of Year 1 pupils achieving the expected level in the phonics screening check - Persons	77.4	74.2	2013/14
1.02ii	School Readiness: The percentage of Year 1 pupils with free school meal status achieving the expected level in the phonics screening check - Persons	68.7	61.3	2013/14
1.03	Pupil absence - Persons	4.4	4.5	2013/14
1.04	First time entrants to the youth justice system - Persons	549.5	409.1	2014
1.05	16-18 year olds not in education employment or training - Persons	7.3	4.7	2014
1.06i	Adults with a learning disability who live in stable and appropriate accommodation - Persons	65.1	74.9	2013/14
1.06i	Adults with a learning disability who live in stable and appropriate accommodation - Male	62.5	74.5	2013/14

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Domain 1 - Wider Determinants of Health				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
1.06i	Adults with a learning disability who live in stable and appropriate accommodation - Female	68.6	75.4	2013/14
1.06ii	% of adults in contact with secondary mental health services who live in stable and appropriate accommodation - Persons	84.9	60.8	2013/14
1.06ii	% of adults in contact with secondary mental health services who live in stable and appropriate accommodation - Male	83.2	59.4	2013/14
1.06ii	% of adults in contact with secondary mental health services who live in stable and appropriate accommodation - Female	86.6	62.4	2013/14
1.08i	Gap in the employment rate between those with a long-term health condition and the overall employment rate - Persons	9.7	8.7	2013/14
1.08ii	Gap in the employment rate between those with a learning disability and the overall employment rate - Persons	67.9	65.0	2013/14
1.08ii	Gap in the employment rate between those with a learning disability and the overall employment rate - Male	74.5	69.5	2013/14
1.08ii	Gap in the employment rate between those with a learning disability and the overall employment rate - Female	61.3	60.7	2013/14
1.08iii	Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate - Persons	62.2	64.7	2013/14
1.08iii	Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate - Male	68.9	71.1	2013/14
1.08iii	Gap in the employment rate for those in contact with secondary mental health services and the overall employment rate - Female	55.4	58.0	2013/14
1.09i	Sickness absence - The percentage of employees who had at least one day off in the previous week - Persons	3.5	2.5	2010 - 12
1.09ii	Sickness absence - The percent of working days lost due to sickness absence - Persons	1.9	1.6	2010 - 12
1.10	Killed and seriously injured (KSI) casualties on England's roads - Persons	21.6	39.3	2012 - 14
1.11	Domestic Abuse - Persons	15.5	19.4	2013/14
1.12i	Violent crime (including sexual violence) - hospital admissions for violence - Persons	36.1	52.4	2011/12 - 13/14
1.12ii	Violent crime (including sexual violence) - violence offences per 1,000 population - Persons	15.8	13.5	2014/15
1.12iii	Violent crime (including sexual violence) - Rate of sexual offences per 1,000 population - Persons	2.2	1.4	2014/15
1.13i	Re-offending levels - percentage of offenders who re-offend - Persons	23.2	25.9	2012
1.13ii	Re-offending levels - average number of re-offences per offender - Persons	0.7	0.8	2012

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<b>Domain 1 - Wider Determinants of Health</b>				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
1.14i	The rate of complaints about noise - Persons	4.9	7.4	2013/14
1.14ii	The percentage of the population exposed to road, rail and air transport noise of 65dB(A) or more, during the daytime - Persons	0.8	5.2	2011
1.14iii	The percentage of the population exposed to road, rail and air transport noise of 55 d B(A) or more during the night-time - Persons	2.0	8.0	2011
1.15i	Statutory homelessness - homelessness acceptances - Not applicable	1.8	2.3	2013/14
1.15ii	Statutory homelessness - households in temporary accommodation - Persons	0.8	2.6	2013/14
1.16	Utilisation of outdoor space for exercise/health reasons - Persons	25.1	17.1	Mar 2013 - Feb 2014
1.17	Fuel Poverty - Persons	10.8	10.4	2013
1.18i	Social Isolation: % of adult social care users who have as much social contact as they would like - Persons	45.4	44.5	2013/14
1.18ii	Social Isolation: % of adult carers who have as much social contact as they would like - Persons	44.0	41.3	2012/13

<b>Domain 2 - Health improvement</b>				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
2.01	Low birth weight of term babies - Persons	2.5	2.9	2014
2.02i	Breastfeeding - Breastfeeding initiation	67.5	74.3	2014/15
2.02ii	Breastfeeding - Breastfeeding prevalence at 6-8 weeks after birth	41.1	43.8	2014/15
2.03	Smoking status at time of delivery	21.2	11.4	2014/15
2.04	Under 18 conceptions	35.1	24.3	2013
2.04	Under 18 conceptions: conceptions in those aged under 16	4.8	4.8	2013
2.06i	Excess weight in 4-5 and 10-11 year olds - 4-5 year olds - Persons	25.9	22.5	2013/14
2.06ii	Excess weight in 4-5 and 10-11 year olds - 10-11 year olds - Persons	37.3	33.5	2013/14
2.07i	Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-14 years) - Persons	143.8	112.2	2013/14
2.07i	Hospital admissions caused by unintentional and deliberate injuries in children (aged 0-4 years) - Persons	192.9	140.8	2013/14
2.07ii	Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24) - Persons	144.7	136.7	2013/14

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Domain 2 - Health improvement				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
2.08	Emotional wellbeing of looked after children - Persons	15.8	13.9	2013/14
2.09i	Smoking prevalence at age 15 - current smokers (WAY survey) - Persons	6.0	8.2	2014/15
2.09ii	Smoking prevalence at age 15 - regular smokers (WAY survey) - Persons	4.1	5.5	2014/15
2.09iii	Smoking prevalence at age 15 - occasional smokers (WAY survey) - Persons	1.9	2.7	2014/15
2.11i	Proportion of the population meeting the recommended '5-a-day' - Persons	46.4	53.5	2014
2.11i	Average number of portions of fruit consumed daily - Persons	2.4	2.6	2014
2.11iii	Average number of portions of vegetables consumed daily - Persons	2.1	2.3	2014
2.12	Excess Weight in Adults - Persons	71.9	64.6	2012 - 14
2.13i	Percentage of physically active and inactive adults - active adults - Persons	55.5	57.0	2014
2.13ii	Percentage of physically active and inactive adults - inactive adults - Persons	28.1	27.7	2014
2.14	Smoking Prevalence - Persons	20.7	18.0	2014
2.14	Smoking prevalence - routine & manual - Persons	28.5	28.0	2014
2.15i	Successful completion of drug treatment - opiate users - Persons	8.2	7.4	2014
2.15ii	Successful completion of drug treatment - non-opiate users - Persons	40.4	39.2	2014
2.16	People entering prison with substance dependence issues who are previously not known to community treatment - Persons	42.2	46.9	2012/13
2.17	Recorded diabetes - Persons	6.5	6.2	2013/14
2.18	Admission episodes for alcohol-related conditions - narrow definition - Persons	681.5	645.1	2013/14
2.18	Admission episodes for alcohol-related conditions - narrow definition - Male	909.8	835.3	2013/14
2.18	Admission episodes for alcohol-related conditions - narrow definition - Female	476.1	474.8	2013/14
2.19	Cancer diagnosed at early stage (Experimental Statistics) - Persons	45.3	45.7	2013
2.20i	Cancer screening coverage - breast cancer - Female	78.6	75.4	2015
2.20ii	Cancer screening coverage - cervical cancer - Female	74.7	73.5	2015
2.20iii	Cancer screening coverage - Bowel cancer - Persons	53.9	57.1	2015
2.21iv	Newborn bloodspot screening - coverage - Persons	96.8	93.5	2013/14
2.21v	Newborn Hearing screening - Coverage - Persons	99.5	98.5	2013/14
2.21vii	Access to non-cancer screening programmes - diabetic retinopathy - Persons	85.0	79.1	2012/13
2.21viii	Abdominal Aortic Aneurysm Screening - Male	99.6	95.9	2013/14
2.22iii	Cumulative % of the eligible population aged 40-74 offered an NHS Health Check - Persons	43.3	37.9	2013/14 - 14/15

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Domain 2 - Health improvement				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
2.22iv	Cumulative % of the eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check - Persons	39.1	48.9	2013/14 - 14/15
2.22v	Cumulative % of the eligible population aged 40-74 who received an NHS Health check - Persons	16.9	18.6	2013/14 - 14/15
2.23i	Self-reported wellbeing - people with a low satisfaction score - Persons	5.4	5.6	2013/14
2.23ii	Self-reported wellbeing - people with a low worthwhile score - Persons	5.8	4.2	2013/14
2.23iii	Self-reported wellbeing - people with a low happiness score - Persons	11.4	9.7	2013/14
2.23iv	Self-reported wellbeing - people with a high anxiety score - Persons	19.6	20.0	2013/14
2.24i	Injuries due to falls in people aged 65 and over - Persons	1569.6	2064.3	2013/14
2.24i	Injuries due to falls in people aged 65 and over - Male	1215.6	1661.3	2013/14
2.24i	Injuries due to falls in people aged 65 and over - Female	1923.7	2467.2	2013/14
2.24ii	Injuries due to falls in people aged 65 and over - aged 65-79 - Persons	726.3	989.3	2013/14
2.24ii	Injuries due to falls in people aged 65 and over - aged 65-79 - Male	605.7	798.9	2013/14
2.24ii	Injuries due to falls in people aged 65 and over - aged 65-79 - Female	846.9	1179.7	2013/14
2.24iii	Injuries due to falls in people aged 65 and over - aged 80+ - Persons	4015.3	5181.7	2013/14
2.24iii	Injuries due to falls in people aged 65 and over - aged 80+ - Male	2984.3	4162.4	2013/14
2.24iii	Injuries due to falls in people aged 65 and over - aged 80+ - Female	5046.3	6201.1	2013/14

Domain 3 - Health protection				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
3.01	Fraction of mortality attributable to particulate air pollution - Persons	4.6	5.3	2013
3.02	Chlamydia detection rate (15-24 year olds) - Persons	1948.6	2012.0	2014
3.02	Chlamydia detection rate (15-24 year olds) - Male	1196.9	1355.3	2014
3.02	Chlamydia detection rate (15-24 year olds) - Female	2754.2	2664.2	2014
3.03iii	Population vaccination coverage - Dtap / IPV / Hib (1 year old) - Persons	97.2	94.3	2013/14
3.03iii	Population vaccination coverage - Dtap / IPV / Hib (2 years old) - Persons	98.1	96.1	2013/14
3.03iv	Population vaccination coverage - MenC - Persons	97.2	93.9	2012/13
3.03v	Population vaccination coverage - PCV - Persons	96.4	94.1	2013/14
3.03vi	Population vaccination coverage - Hib / MenC booster (2 years old) - Persons	96.3	92.5	2013/14

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Domain 3 - Health protection				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
3.03vi	Population vaccination coverage - Hib / Men C booster (5 years) - Persons	95.7	91.9	2013/14
3.03vii	Population vaccination coverage - PCV booster - Persons	97.0	92.4	2013/14
3.03viii	Population vaccination coverage - MMR for one dose (2 years old) - Persons	97.6	92.7	2013/14
3.03ix	Population vaccination coverage - MMR for one dose (5 years old) - Persons	98.0	94.1	2013/14
3.03x	Population vaccination coverage - MMR for two doses (5 years old) - Persons	95.9	88.3	2013/14
3.03xii	Population vaccination coverage - HPV - Female	92.7	86.7	2013/14
3.03xiii	Population vaccination coverage - PPV - Persons	65.5	68.9	2013/14
3.03xiv	Population vaccination coverage - Flu (aged 65+) - Persons	73.1	72.7	2014/15
3.03xv	Population vaccination coverage - Flu (at risk individuals) - Persons	55.8	50.3	2014/15
3.04	HIV late diagnosis - Persons	43.8	42.2	2012 - 14
3.05ii	Incidence of TB - Persons	6.9	13.5	2012 - 14
3.06	NHS organisations with a board approved sustainable development management plan - Not applicable	50.0	41.6	2013/14
3.07	Comprehensive, agreed inter-agency plans for responding to health protection incidents and emergencies - Not applicable	100.0	95.2	2014/15

Domain 4 - Healthcare and premature mortality				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
4.01	Infant mortality - Persons	5.3	4.0	2011 - 13
4.02	Tooth decay in children aged 5 - Persons	0.8	0.9	2011/12
4.03	Mortality rate from causes considered preventable - Persons	198.4	182.7	2012 - 14
4.03	Mortality rate from causes considered preventable - Male	250.0	230.1	2012 - 14
4.03	Mortality rate from causes considered preventable - Female	149.1	138.4	2012 - 14
4.04i	Under 75 mortality rate from all cardiovascular diseases - Persons	80.3	75.7	2012 - 14
4.04i	Under 75 mortality rate from all cardiovascular diseases - Male	112.9	106.2	2012 - 14
4.04i	Under 75 mortality rate from all cardiovascular diseases - Female	49.1	46.9	2012 - 14
4.04ii	Under 75 mortality rate from cardiovascular diseases considered preventable - Persons	52.0	49.2	2012 - 14
4.04ii	Under 75 mortality rate from cardiovascular diseases considered preventable - Male	77.2	74.1	2012 - 14
4.04ii	Under 75 mortality rate from cardiovascular diseases considered preventable - Female	27.8	25.6	2012 - 14

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Domain 4 - Healthcare and premature mortality				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
4.05i	Under 75 mortality rate from cancer - Persons	159.4	141.5	2012 - 14
4.05i	Under 75 mortality rate from cancer - Male	179.0	157.7	2012 - 14
4.05i	Under 75 mortality rate from cancer - Female	141.2	126.6	2012 - 14
4.05ii	Under 75 mortality rate from cancer considered preventable - Persons	95.2	83.0	2012 - 14
4.05ii	Under 75 mortality rate from cancer considered preventable - Male	108.6	90.5	2012 - 14
4.05ii	Under 75 mortality rate from cancer considered preventable - Female	82.9	76.1	2012 - 14
4.06i	Under 75 mortality rate from liver disease - Persons	21.2	17.8	2012 - 14
4.06i	Under 75 mortality rate from liver disease - Male	25.8	23.4	2012 - 14
4.06i	Under 75 mortality rate from liver disease - Female	16.9	12.4	2012 - 14
4.06ii	Under 75 mortality rate from liver disease considered preventable - Persons	18.9	15.7	2012 - 14
4.06ii	Under 75 mortality rate from liver disease considered preventable - Male	24.4	21.0	2012 - 14
4.06ii	Under 75 mortality rate from liver disease considered preventable - Female	13.6	10.6	2012 - 14
4.07i	Under 75 mortality rate from respiratory disease - Persons	32.7	32.6	2012 - 14
4.07i	Under 75 mortality rate from respiratory disease - Male	34.1	38.3	2012 - 14
4.07i	Under 75 mortality rate from respiratory disease - Female	31.3	27.4	2012 - 14
4.07ii	Under 75 mortality rate from respiratory disease considered preventable - Persons	19.1	17.8	2012 - 14
4.07ii	Under 75 mortality rate from respiratory disease considered preventable - Male	19.2	20.1	2012 - 14
4.07ii	Under 75 mortality rate from respiratory disease considered preventable - Female	18.9	15.7	2012 - 14
4.08	Mortality from communicable diseases - Persons	62.8	63.2	2012 - 14
4.08	Mortality from communicable diseases - Male	78.6	74.0	2012 - 14
4.08	Mortality from communicable diseases - Female	57.2	56.4	2012 - 14
4.09	Excess under 75 mortality rate in adults with serious mental illness - Persons	438.8	347.2	2012/13
4.10	Suicide rate - Persons	10.4	8.9	2012 - 14
4.10	Suicide rate - Male	15.9	14.1	2012 - 14
4.10	Suicide rate - Female	*	4.0	2012 - 14
4.11	Emergency readmissions within 30 days of discharge from hospital - Persons	11.5	11.8	2011/12
4.11	Emergency readmissions within 30 days of discharge from hospital - Male	11.6	12.1	2011/12
4.11	Emergency readmissions within 30 days of discharge from hospital - Female	11.3	11.5	2011/12
4.12i	Preventable sight loss - age related macular degeneration (AMD) - Persons	125.0	118.8	2013/14
4.12ii	Preventable sight loss - glaucoma - Persons	21.9	12.9	2013/14

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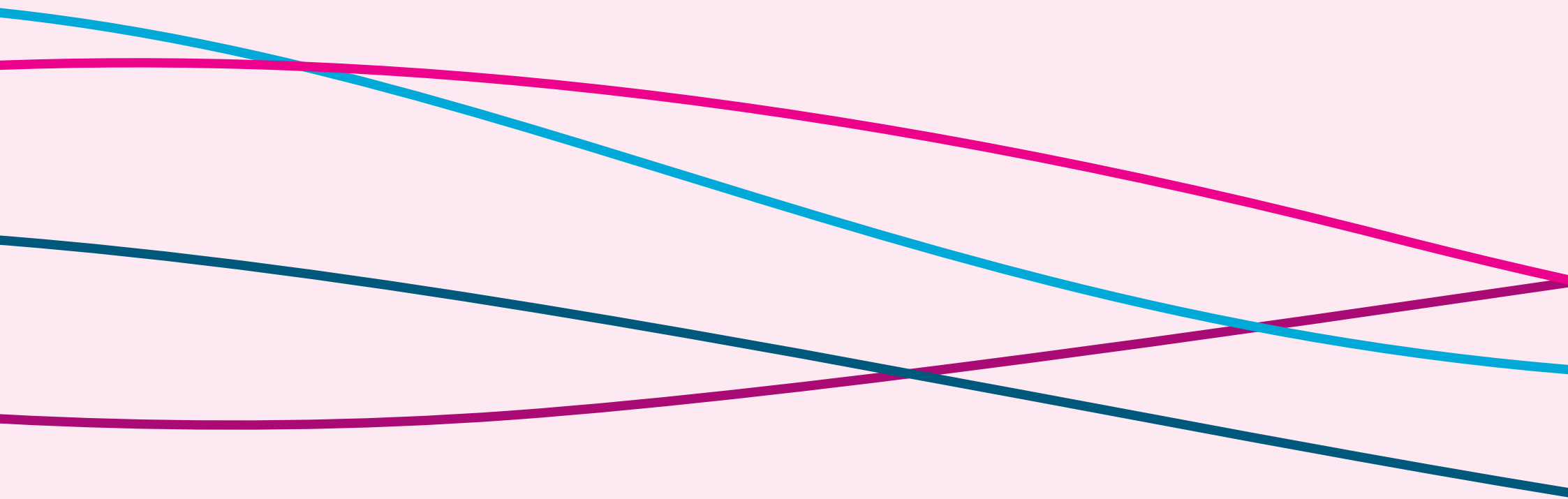
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Domain 4 - Healthcare and premature mortality				
Ref.	Indicator	Telford and Wrekin average	England average	Time period
4.12iii	Preventable sight loss - diabetic eye disease - Persons	5.6	3.4	2013/14
4.12iv	Preventable sight loss - sight loss certifications - Persons	42.1	42.5	2013/14
4.13	Health related quality of life for older people - Persons	0.7	0.7	2012/13
4.14i	Hip fractures in people aged 65 and over - Persons	703.0	580.0	2013/14
4.14i	Hip fractures in people aged 65 and over - Male	483.2	423.2	2013/14
4.14i	Hip fractures in people aged 65 and over - Female	922.9	736.7	2013/14
4.14ii	Hip fractures in people aged 65 and over - aged 65-79 - Persons	261.9	240.1	2013/14
4.14ii	Hip fractures in people aged 65 and over - aged 65-79 - Male	171.9	163.8	2013/14
4.14ii	Hip fractures in people aged 65 and over - aged 65-79 - Female	352.0	316.4	2013/14
4.14iii	Hip fractures in people aged 65 and over - aged 80+ - Persons	1982.2	1565.7	2013/14
4.14iii	Hip fractures in people aged 65 and over - aged 80+ - Male	1385.9	1175.6	2013/14
4.14iii	Hip fractures in people aged 65 and over - aged 80+ - Female	2578.5	1955.7	2013/14
4.15i	Excess Winter Deaths Index (Single year, all ages) - Persons	29.2	20.1	Aug 2012 - Jul 2013
4.15i	Excess Winter Deaths Index (Single year, all ages) - Male	34.3	17.5	Aug 2012 - Jul 2013
4.15i	Excess Winter Deaths Index (Single year, all ages) - Female	24.5	22.6	Aug 2012 - Jul 2013
4.15ii	Excess Winter Deaths Index (single year, ages 85+) - Persons	51.3	28.2	Aug 2012 - Jul 2013
4.15ii	Excess Winter Deaths Index (single year, ages 85+) - Male	42.3	26.7	Aug 2012 - Jul 2013
4.15ii	Excess Winter Deaths Index (single year, ages 85+) - Female	56.5	29.1	Aug 2012 - Jul 2013
4.15iii	Excess Winter Deaths Index (3 years, all ages) - Persons	17.2	17.4	Aug 2010 - Jul 2013
4.15iii	Excess Winter Deaths Index (3 years, all ages) - Male	18.6	15.5	Aug 2010 - Jul 2013
4.15iii	Excess Winter Deaths Index (3 years, all ages) - Female	15.8	19.3	Aug 2010 - Jul 2013
4.15iv	Excess Winter Deaths Index (3 years, ages 85+) - Persons	22.4	24.1	Aug 2010 - Jul 2013
4.15iv	Excess Winter Deaths Index (3 years, ages 85+) - Male	27.1	23.2	Aug 2010 - Jul 2013
4.15iv	Excess Winter Deaths Index (3 years, ages 85+) - Female	19.9	24.6	Aug 2010 - Jul 2013

Source: [www.phoutcomes.info](http://www.phoutcomes.info)

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