

<b>Theme summary – Health &amp; Wellbeing</b>	
Under this theme the following indicators are included in the corporate basket:	<b>Progress</b>
Smoking cessation rate from 1,234.584 per 100,000 population in 2010/11 to 1208.119 in 2011/12.	
Reduction in hospital admissions relating to alcohol (target to improve on 2010/11 outturn rate of 2829 per 100k population).	
Drug users in effective treatment from 1,193 in 2010/11 to 1,323 in 2011/12.	This was never an agreed target for the DAAT or NTA. Given positive NTA rating, red rating would be misleading.
Breastfeeding prevalence (at 6 to 8 weeks) from 25.1% in 2010/11 to 27.8% in 2011/12.	27.78% year end = 27.8% when rounded.
Reduce teenage conception rate to 24.04 in 2011~12 (based on national target of 50% reduction from 1998 baseline).	National target was never realistic – amber rated to reflect continued rate of improvement.
Screening rates for Chlamydia in under 25s from 22.7% in 2010/11 to 35% in 2011/12.	
Obesity rate in Y6 primary school children.	
<b>Overall progress</b>	
<b>Performance</b>	
<ol style="list-style-type: none"> <li>Performance in relation to smoking cessation (based on people attending Smoking Cessation sessions who are still not smoking after 4 weeks) has fallen below target, based on data at February 2012. <ul style="list-style-type: none"> <li>1,620 quitters were recorded, against a target for the period of 1,668. This equates to a rate of 1043.81 per 100K population aged 16+, suggesting the target rate of 1208.119 will not be achieved.</li> </ul> </li> <li>The rate of alcohol-related admissions to hospital has continued within target expectations. As at February, the rate was 2,493, per 100,000 population, i.e. 4,796 admissions (1211 wholly attributable and 3585 partially attributable).</li> <li>Latest available data shows only a slight increase to 1,207 PDUs (problematic drug users) in treatment, against the target of 1,323. As previously reported, the following context needs to be taken into account: <ul style="list-style-type: none"> <li>Analysis by the DAAT (Drugs and Alcohol Action Team) has indicated for some time that saturation point was being reached in terms of drug users entering treatment, with numbers unlikely to increase.</li> <li>In line with the withdrawal of this measure nationally, the DAAT is focusing more on</li> </ul> </li> </ol>	

success criteria based on the number undergoing treatment who remain drug free.

- Data provided at the last performance review with the NTA (National Treatment Agency, who monitor progress on behalf of government) indicated positive progress in this respect, with the NTA reporting "good performance in terms of both the percentage growth of successful completions and the number of successful completions as a percentage of the total number in treatment. Both indicators compare well with national figures."
4. Breastfeeding rates have continued to be a challenge with performance continuing below benchmark groups. However, latest data available (end of March 2012) indicates improvement over the quarter, leading to achievement of the year end target.
- A prevalence rate at 6 to 8 weeks of 27.78% (on target).
  - This compares to an England average of 47% and North East average of 29.8%.
  - The rate of initiation is 56.8, below the England average of 74.1% and North East average of 60.4%.
5. Sexual health:
- Latest reported national validated data (up to March 2011) for teenage pregnancy indicates a strong continuation of the improvement trend over the previous year with the number of conceptions (21 – a rate of 23.4 per 1,000) in the last reported quarter the lowest ever recorded since the national baseline and targets were set in 1998.
  - Based on a rolling quarterly average, the rate of 34.6 conceptions per 1,000 under 18s is the lowest (best) of the four Tees local authorities; is now even further below the NE average of 42.8 and has nearly matched the England average of 34.1. This picture is reflected in more recent, local (unvalidated) data which indicates a rate of 34.3.
  - For Chlamydia screening, a strong performance in March meant that the 35% target (of 15-24 yr olds) for the quarter was achieved. However, despite this improvement, the full year position of 20% remained well off target.
6. The recently released results of the National Child Measurement Programme for the 2010~11 school year show the Stockton-on-Tees rate as 20.4%, an increase on the previous year and outside target expectations. This rate is higher than the England average of 19% but lower (better) than the North East average of 21.4%.

### **Actions taken**

7. Drug users:
- Increasing numbers of outreach locations and psycho-social interventions as well as improving links with Police, Criminal Justice System to maximise performance in access to services and completion of effective treatment.
  - Developing future monitoring arrangements based on 'successful completions' for those receiving treatment.
  - A detailed needs assessment to inform the updated Young People's Strategy and Treatment Plan for submission to the NTA.
8. Smoking:
- A wide range of actions are underway to increase publicity about Stop Smoking Services (SSS) and to encourage referrals - e.g. via pharmacies, dentists and GP practices; VCS

organisations; all households through Stockton News; some targeted locations.

- Improving links to other agencies e.g. Fire Service volunteers are offered Brief Intervention training and stop smoking information is now included in their home visit pack in order to support smokers to quit through the local service.
  - To reduce the number of 'did not attend' cases a new process is being trialled for follow up / maintaining contact and motivation with clients. The Stockton Service Navigation Project will be making regular telephone and text contact with clients throughout their quit attempt to try to keep them engaged and help them to achieve their quit goal.
9. Breastfeeding: a number of actions are in place through the Breastfeeding Support Service to target improvements, including:
- trained peer support and supervision;
  - specialist antenatal workshops;
  - social marketing;
  - quality improvement session planned for key stakeholders
  - UNICEF Baby Friendly Initiative accreditation.
10. Chlamydia: a number of actions were undertaken to improve year end performance, including:
- revised marketing and communications plan,
  - accessing events and outreach services to promote Chlamydia testing,
  - increased uptake of health staff providing screening services (GPs/ Pharmacies)
11. Obesity: actions to address performance are overseen by the Healthy Lives, Healthy Weight Partnership. These include a 3 tier approach to weight management, from prevention, community based support services and specialist interventions through to secondary health commissioned care contracts for those children deemed most at risk of life limiting illness as a result of their BMI.

#### **Customer perception/ satisfaction**

12. No significant activity to report during Q4.

#### **Risk**

13. Ensuring effective transition to the new national and local Health arrangements is identified as a key risk area for the Council's Corporate Risk Register, particularly as it takes on new Public Health responsibilities from April 2013.

#### **Finance**

14. There are no significant budget issues impacting on the Council for this 2011~12 year end period.