

AGENDA ITEM

REPORT TO HEALTH AND WELLBEING BOARD

25TH NOVEMBER 2015
REPORT OF DIRECTOR OF
PUBLIC HEALTH

PERFORMANCE UPDATE – NOVEMBER 2015

SUMMARY

This paper provides a performance update regarding key indicators from the performance monitoring framework for the Joint Health and Wellbeing Strategy delivery plan, at November 2015

RECOMMENDATIONS

1. The Stockton-On-Tees Health and Wellbeing Board are asked to note the update and example data; and consider any implications for addressing performance issues /spreading good practice.
2. It is recommended that this performance update is circulated to the Adults' Health and Wellbeing Partnership and the Children and Young People's Partnership to inform their plans in addressing the issues highlighted in this report.

DETAIL

1. The Stockton Health and Wellbeing Board are responsible for overseeing the performance of partner organisations in relation to key health and wellbeing indicators. This is the quarterly performance update report to the Board, compiled on an exception basis as agreed. Key areas of performance are outlined, with some areas of good performance highlighted and some areas where improvement is required. This report covers Q2 data where available and the most recent data where Q2 data is unavailable. Where no new data has become available since the last quarter, performance and narrative have not been duplicated.
2. The local performance summary is set out below. Some national benchmarking data from the Public Health Outcomes Framework (PHOF) is referred to for context (www.phoutcomes.info). The Board are asked to consider how and where issues of good and poor performance are followed up across Board members organisations and then updates fed back to the Board.

3. Wider Determinants of Health

Early Years Foundation Stage - proportion of children with an overall good level of development

The following indicator is based on provisional data. Final validated data will be available later in the year.

- The proportion of children with an overall good level of development: For the 2014/15 school year, the proportion of children in Stockton-On-Tees achieving a good level of development at Early Year's Foundation Stage was 58.8%.
- Nationally the figure was 66.3%. This result shows a rate of improvement from summer 2014 of 17% for Stockton-on-Tees (Stockton's performance was 50.2% in summer 2014), better than the national rate of improvement of 10% (the national performance was 60.4% in summer 2014) meeting target.

Context

This improvement from 2013 reflects the positive impact of focused training for schools and settings. Also, the improving quality of early year's settings and child-minders provision has impacted on children's school readiness, enabling faster progress (the proportion of our early years settings and child-minders rated as good or better in Ofsted inspections compares very well with national averages). We continue to work with all providers to ensure high quality early years provision. The introduction of the free entitlement for 2 year olds and other entitlements already in place will continue to involve the Education Improvement Team in assessing and monitoring practice and, where necessary, supporting improvement.

First Time Entrants to the Youth Justice System

Latest data available is at end of August.

- This shows that there were 24 First Time Entrants to the Youth Justice System. This equates to a rate of 134 per 100k population (17873 children and young people aged 10 to 17)
- This is an improvement on 2014/15 August performance of 32 First Time Entrants (equating to a rate of 179 per 100k population (17873 children and young people aged 10 to 17) and is on track to meet the target of a 5% reduction on the previous year's number of First Time Entrants of 73. This figure is cumulative from 1st April to 31 August.

Context

Current performance is on track to meet target.

Not in Employment, Education or Training (NEETS) / Not Known

The latest local data available is based on a 3 month average for the period July to September 2015.

- This shows a rate of young people Not in Education, Employment or Training (NEET) of 10.6% and a Not Known rate of 26.8%.
- This is slightly higher than the Tees Valley NEET rate of 10.0% and Not Known rate of 26.1%, narrowly missing the target of improving on the previous year's performance so that performance is better than the Tees Valley average by at least the same rate.

Context

It should be noted however, that at the end of Quarter 2 period, the destinations of school leavers are not known until October resulting in a higher NEET / Not Known rates for the period. This rate reduces significantly at quarter 3. As such, performance at quarter 2 is not representative of the likely year end outturn or of current performance.

The latest national validated data available is the DFE NEET Scorecard (published 27th July 2015). This shows that the proportion of 17 year olds who have had an offer of an education place under the September Guarantee is 97.5% compared to a national average of 93.2%. Furthermore, the proportion of 16-18 year olds whose activity is known to the local authority 99.0% compared to 91.0% nationally. Additionally, of the 16-17 year olds who have been NEET, 9.7% have re-engaged with EET (education, employment and training) compared to 7.7% nationally. This reflects a continuing strong focus on ensuring we track and work with nearly every young person no matter how complex or challenging their situation to improve their opportunities and outcomes.

4. Health improvement

HW100 & 101: Obesity in 4-5 Year olds (reception) and 10-11 year olds (year 6) % of children measured through the National Childhood Measurement programme

- No update available from that reported in Q1
- 2014/15 data will be published at the end of December 2015

Context

No update available from that reported in Q1.

HW201 % of smoking population accessing the stop smoking service commissioned by Stockton-On-Tees Public Health

- End of year data for 2014/15 showed that 2619 smokers set a quit date against a population of 29750. This equates to 9% of the smoking population accessing the service compared with the NE 6.6%.

Context

No update available from that reported in Q1

HW202 % Smoking Quitters (number of four week quitters for smoking cessation service commissioned by Stockton-On-Tees Public Health)

- According to Q1 data, the service had 241 four-week quitters against a target of 337. This is 28% below target and lower than Q4 2014/15 performance of 270. In 2014/15 the service remained 25% behind target.

Context

Smoking prevalence data for 2014 has been released in November 2015. This shows that prevalence has fallen from 19.8% in 2013 to 19.2% in 2014. The North East has seen the biggest reduction by region (down by 9.1% since 2005) Stockton remains below the new North East Average of 19.9% but above the national average of 18.0%.

HW300 Rate of emergency hospital admissions for alcohol related harm per 100,000 population

- There were 677.05 admissions per 100,000 for Q1 2015/16 giving an extrapolated figure of 2708.2 against a proposed target of 2560. This is a slightly worse than the 2014/15 figure of 2705
- The rate for 2014/15 in Stockton is higher than the North East average of 2656
- The rate of broad hospital episodes with alcohol related conditions remain lower in Stockton than the other Tees authorities, despite this increase.

Context

A new, regional programme of identification and brief advice training is being rolled out from 2016, that builds on previous work aimed at increasing substance misuse risk awareness, early identification and interventions to frontline staff groups.

The public health team have also worked with Licensing to integrate public health priorities into the updated statement of licensing policy. There is also work to be undertaken as part of the recent scrutiny review for the council to lobby its local MPs in support of the Directors of Public Health and Public Health England's campaign for the introduction of a national minimum unit pricing of alcohol.

Alcohol remains a significant issue for Stockton-on-Tees and continues to worsen. One of the priorities for the Public Health team is to work with partners to develop an updated Alcohol Action plan that aims to address this upward trend of hospital admissions.

HW301 Number of opiate drug users that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a proportion of the total number in treatment

- Q2 2015/16 performance was 5.5% against a proposed target of 6%.
- This is better than the previous reported figure of 4.8% for time period Q1 2015/16.

Context

Stockton-On-Tees performance remains low in comparison with comparator authorities (top quartile performance is between 8.6% and 13.1%). The national trend shows continuous and significant decline in completions as there are very few new opiate users entering treatment and many of those that remain in treatment have now been in treatment for more than six years which is a barrier to completions. Work is ongoing to attempt to reduce the number of unplanned exits such as being taken into custody or dropping out. This aims to improve performance through tackling the most chaotic behaviour including illicit drug use and offending.

HW302 Number of non opiate drug users that left drug treatment successfully (free of drug(s) of dependence) who do not then re-present to treatment again within 6 months as a proportion of the total number in treatment:

- Q2 2015/16 saw a slight decrease in completions from 49.3% in Q1 2015/16 to 39.5%.

Context

The number of non-opiate clients has fallen from a 3 year high of 149 in December 2014 to 104 in September 2015. The numbers are expected to fluctuate in line with highly variable arrest referrals following positive drug tests. This will also make exit rates unpredictable as lower numbers of referrals will increase the average complexity of the case load.

Self-reported wellbeing (PHOF data)

- No update available from that reported at Q4.

Context

No update available from that reported in Q1

5. Health protection

HW103 Chlamydia diagnosis (crude rate 15-24 year olds)

- No update available from that reported in Q1

HW102 Under 18 conceptions(3 year rolling average rate per 15-17 year olds per 1,000 population)

- The most recently available (2013) under 18 conception rate for Stockton on tees is 33.5 per 1000. This is significantly better than the 38.1 per 1000 recorded in 2012. This is against a target of 43 per 1000. This gives us a three-year rolling average of 36 per 1000.
- This rate remains higher than the North East Average rate of 32.1 and the England average of 25.2 but is a reduction on the local rolling average rate of 40.
- Rates of under 18 conception have fluctuated in Stockton-on-Tees since 1998 and the highest rates are in areas of greater deprivation.

Context

Ensuring the provision of good quality sex and relationship education at home, at school and through broader community services remains a priority. Public Health continues to work with EIS to develop high quality resources and training for settings. The Children and Young People's Public Health School Nurse service continues to implement its new service model which includes sexual health advice both within school and community settings.

Vaccinations

- No update available from that reported in Q1

Context

The NHS Area Team is continuing to develop plans together with Public Health to increase uptake of immunisation programmes, particularly in vulnerable groups; and the CCG is targeting groups to increase flu vaccination uptake.

Stockton Borough Council CESC have worked with NHS England and SBC Public Health Team to roll out the flu vaccine to reception and year 1 and 2 children in an extensive programme due to end in December 2015. Currently uptake rates have been high, but full details will be available in Q3.

6. Healthcare and premature mortality

HW204 Uptake of NHS health check programme by those eligible

- There were 2669 health assessments made out of the 50774 invited to attend giving 52.6% in Q2 2015/16 (year to date) against a target of 50%.
- This is greater than the previous reported figure of 45.4% for Q1 2015/16.

Context

In addition, for Q1 & 2 we have improved on the number of people from the two most deprived quintiles that attended for an assessment. 1745 invitations were sent to those in lowest 2 quintiles and 835 of these attended the assessment This equates to 48 % who accepted the invitation which compares favourably with the 31% reported in 2014/15.

7. Addressing Inequalities

Following discussions by the board around reducing inequalities, work has been ongoing in 15/16 aimed at improving health and wellbeing and reduce inequalities. This includes collaborative work with stakeholders to help them consider how they can work to address inequalities. An inequalities workshop was held with providers and VCSE identified a range of proposals that partner organisations suggested that could address inequalities. A follow up of this workshop is planned to look at how these organisations can specifically work to target the areas in which the 2% most deprived residents live, to improve all health outcomes.

As well as targeting the areas in which the most deprived 2% of the population live, the 'proportionate universalism' approach (Marmot 2010) is to be continued with all providers.

In addition work to address inequalities is in place through:

- An oral health programme in schools. The programme is offering tooth brushing to all nursery and reception children in the Borough; and a fluoride varnish programme to the most deprived 20%

- Review of the Warm Homes Healthy People project eligibility criteria, to ensure that although the project provides a universal service for those requiring preventative measures, it is coordinated to ensure the most significant interventions are targeted at those in greatest need.
- Focusing NHS Health Checks and Lung Checks together with the Tees Valley Public Health Shared Service (TVPHSS) to continue to universal provision but incentivising a focus on the areas of greatest deprivation (where CVD and COPD prevalence are highest). Uptake has increased in these groups
- Targeting provision of the stop smoking service towards the 6 areas in which there is the greatest need.
- Work with the school nursing service and the TVPHSS to develop school health profiles, to inform delivery of the new school nursing model according to need

Other work to improve health and wellbeing and reduce inequalities includes:

- Continuing to provide development sessions at the Board and Partnerships around key health and wellbeing themes, to stimulate debate and multi-agency problem-solving e.g. alcohol, drugs misuse, mental health, sexual health
- Input to regular multi-agency performance monitoring reports to the Board

8. Additional activity reported in Corporate performance report

An adult's drug recovery strategy event was also delivered to members of the health and wellbeing board, commissioning groups and partnership groups to allow wider discussion of the issue and to develop ideas for the future strategic direction for adult drug misuse. The key findings from this event were subsequently presented back to the adults health and wellbeing partnership. The adult's partnership also had a presentation on the opportunities for engaging with arts and culture. This has led to a proposal for further bits of partnership working that are to be undertaken in the remainder of 2015-16 specifically looking at how arts interventions can address health and wellbeing.

A range of services are currently being reviewed by SBC Public Health, in consultation with partners and the public, to inform future delivery & commissioning, including:

- Falls service
- Sexual Health Services as part of the review of the Tees-wide integrated sexual health service.
- Joint Review between SBC Public Health & NHSE of current model of Adult drug recovery and treatment & Healthcare

SBC Public Health team continue to work with the CCG, to provide input into their commissioning intentions for 16-17, but also through a joint piece of work on behalf of the HWBB to look at how the NHS Five Year Forward view can be implemented within Stockton, to shift the focus of care from treatment to prevention. To start this process it was agreed to identify and map all alcohol prevention and treatment interventions to clarify commissioning responsibilities and gaps between services. Alcohol was chosen as a key HWB indicator for Public Health, and as a significant

risk factor identified in a number of reviews undertaken by the CCG Health and Wellbeing Workstreams

FINANCIAL IMPLICATIONS

9. There are no direct financial implications of this update.

LEGAL IMPLICATIONS

10. There are no specific legal implications of this update.

RISK ASSESSMENT

11. Consideration of risk will be included in the narrative around any performance issues, together with actions being taken to mitigate this risk.

SUSTAINABLE COMMUNITY STRATEGY IMPLICATIONS

12. Monitoring of performance across Board organisations will have a positive impact on coordinated activity to deliver both the Sustainable Community Strategy and Joint Health and Wellbeing Strategy themes.

CONSULTATION

13. Consultation has been an integral part of generating priorities for action, through the Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy development process.

Current local work is capturing the views of services users and the community, including:

- Review of weight management pathway
- Health needs assessment regarding mental health in children and young people
- Health needs assessment regarding sexual health
- Services for people with dementia to inform the Dementia Friendly Communities initiative
- Re-commissioning of the drug treatment service in October 2016.

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