Committee(s):	Date(s):
Health and Wellbeing Board	7 May 2013
Subject: Health and Wellbeing Board Performance Indicators	Public
Report of: Director of Community and Children's Services	For Decision

Summary

This report ask Members to consider the key outcome indicators which will be used to monitor the effectiveness of the Health and Wellbeing Strategy, the ongoing monitoring mechanisms for those and the approval of two Public Health indicators for inclusion within the departmental business plan.

Health and Wellbeing Board (HWB) Members have discussed the three outcomes frameworks (NHS, Adult Social Care and Public Health) as part of recent health and wellbeing board development days. The recommended indicators will be used by the Board to monitor progress against the health and wellbeing strategy on an annual basis, and it is recommended that the Board receives exception reports for indicators.

The outcome frameworks are already monitored by existing groups and a number of children's specific indicators are monitored by the Children's Executive Board as part of its ongoing monitoring responsibility. The Department of Community and Children's services has the responsibility for the delivery of the public health function going forward and a number of associated actions within the business plan.

Appendix 2 sets out the recommended indicators mapped against health and wellbeing strategy priorities

Recommendation

Members are asked to:

- a. Agree the key outcome indicators for the HWB and the Health and Wellbeing Strategy
- b. Consider asking the CEB to recommend children's indicators for the children's 'placeholder section' of the HWB
- c. Review the proposed indicators for inclusion within the Department of Community and Children's Services business plan (paragraph 8) and
- d. Agree the proposed annual monitoring of all the key indicators as part of the health and wellbeing strategy update, and exception reporting where performance is either poor or significantly above target.

Main Report

Background

- 1. Alongside the development of the legislation surrounding Health and Wellbeing Boards and the Health and Social Care Act 2012, the Government has consulted on three national outcomes frameworks which support and guide the work of Clinical Commissioning Groups, Local Authorities and Health and Wellbeing Boards. A diagram showing how the three frameworks interact is attached at Appendix 1. All three frameworks consist of a number of indicators which are either being collected through existing monitoring mechanisms, and a number of new indicators, the methodology of which is being finalised. The frameworks are:
 - a. The Public Health Outcomes Framework (PHOF)
 - b. The NHS Outcomes Framework (NHSOF)
 - c. The Adult Social Care Outcomes Framework (ASCOF)
- 2. Members of the Health and Wellbeing Board (HWB) received briefings on the frameworks at the February and March HWB development days. A number of outcome indicators were recommended to the Board by officers responsible for the individual outcomes frameworks. They were chosen because they demonstrate progress against the Health and Wellbeing Strategy, are nationally mandated for quality premiums (NHS), locally agreed NHS priorities, or they are linked to national agendas (Adult Social Care). At the most recent development day, Members discussed these recommendations and requested they be re-ordered to match the health and wellbeing strategy objectives this is attached at Appendix 2.

Current Position

3. Appendix 2 sets out the latest available performance information for all the indicators. This has not changed since the March 2013 development day as a number of end of year outturn figures are not yet available.

Children's Indicators

4. The health and wellbeing strategy sets out a number of priorities, including some relevant to children and young people. It is unclear at this stage whether the children's health outcomes framework will have the same statutory standing as the three set out in paragraph 1. In recognition of the ongoing development of the children's framework, the strategy includes a 'placeholder' so that relevant national indicators can be included as they are developed.

- The Children's Executive Board has agreed a performance monitoring mechanism for any indicators being collected and reported on by partners (including a number of health indicators and children's social care indicators). It has delegated monitoring responsibility for these to its sub groups, with exceptions only being reported to the Children's Executive Board (CEB)
- 6. The Health and Wellbeing Board may wish to consider requesting the CEB recommend appropriate children's indicators for inclusion in the Health and Wellbeing Strategy in the 'placeholder' section until such a time when the Government determines which national indicators form part of a children's outcome framework.

Departmental Business Plan

7. The annual business plan for the Department of Community and Children's Services was agreed by the Community and Children's Services committee at its April 2013 meeting. It contains a number of actions, (shown below) related to the new Local Authority responsibility for public health. The Health and Wellbeing Board are asked to consider which of the PHOF indicators should be included within the departmental business plan as an effective method of monitoring these actions.

Improvement/delivery actions	Target Date	Measure of success	Resources
1.1 Review and re-commission key public health contracts.	March 2014	KPI 1 and 2 - Public Health	£1.6 million public health grants
 Develop new public health services for City workers 	Septe mber 2013	Outcomes Framework indicators (TBC May 2013)	J.
 Integrate health and wellbeing priorities into the Corporate objectives 	March 2014	Health and Wellbeing Board deliver services	Existing departmental budgets and resources

8. The suggested PHOF indicators for inclusion within the business plan are shown below. If national targets are not in place within six months, local indicators will be developed.

NEW: Potential workplace health indicator	Indicator and baseline data is not yet
	known by Public Health England
PHOF 2.22 - Take up of the NHS Health	Baseline data is not yet known by Public
Check Programme	Health England

Reporting and Monitoring Mechanisms

9. All of the indicators within the three Outcomes Frameworks are already collected and monitored by other groups or organisations: PHOF (Department of Community and Children's Services and Public Health Transition Group), ASCOF (People's Management Team within Community and Children's Services and the City and Hackney Adult Safeguarding Board, NHS (The Clinical Commissioning Group and the Health Outcomes Sub Group of the CEB). As such HWB Members had discussed at their development day the potential for annual reports to the HWB (as part of the health and wellbeing strategy update) and exception reporting where one of the existing monitoring groups identifies either poor or significantly above target performance against an indicator.

Conclusion

- 10. Members are asked to consider the indicators at appendix 2, mapped against the health and wellbeing strategy priorities and:
 - a. Agree the key outcome indicators for the HWB and the Health and Wellbeing Strategy
 - b. Consider asking the CEB to recommend children's indicators for the children's 'placeholder section' of the HWB
 - c. Review the proposed indicators for inclusion within the Department of Community and Children's Services business plan (paragraph 8) and
 - d. Agree the proposed annual monitoring of all the key indicators as part of the health and wellbeing strategy update, and exception reporting where performance is either poor or significantly above target.

Appendices

- Appendix 1 Outcomes Frameworks
- Appendix 2 recommended outcomes indicators mapped against the Health and Wellbeing Strategy Priorities

Background Papers:

Health and Wellbeing Board Development Day Outcomes Frameworks Discussion Paper March 2013

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Overview of the Outcomes Frameworks

<u>Appendix 1</u>

Public Health Outcomes Framework	NHS Outcomes Framework	Adult Social Care Outcomes Framework
1. Improving the wider determinants of health		
2. Health improvement		
3. Health protection		
4. Healthcare public health and preventing premature mortality	1. Preventing people from dying prematurely	
	2. Enhancing quality of life for people with long term conditions	1. Enhancing the quality of life for people with care and support needs
		2. Delaying and reducing the need for care and support
	3. Helping people to recover from episodes of ill health or following injury	
	4. Ensuring that people have a positive experience of care	3. Ensuring that people have a positive experience of care and support
	5. Treating and caring for people in a safe environment and protecting them from avoidable harm	4. Safeguarding adults who are vulnerable and protecting them from avoidable harm

Health and Wellbeing Board Outcomes linked to Strategy

Appendix 2

Shown below are the Health and Wellbeing strategic priorities, shown against their City of London performance indicators and their individual outcomes frameworks.

DOMAIN FRAMEWORK		
ASCOF	Adult Social Care Outcomes Framework	
NHSOF National Health Service Outcomes Framework		
PHOF Public Health Outcomes Framework		

	More people with mental health issue			
	Domain	Indicator	Current Performance	
1	ASCOF 1 - Enhancing quality of life for people with care and support needs	1F - Proportion of adults in contact with secondary mental health services in paid employment	0 clients out of a total of 5. Local PI (ASC 1) could report quarterly	\downarrow
2		1H - Proportion of adults in contact with secondary mental health services living independently, with or without support	0 clients out of a total of 5 as at December 2012	\downarrow
3	NHSOF 1 - Preventing people from dying prematurely	Excess under 75 mortality rate in adults with serious mental illness	Data not yet available	
4	NHSOF 2 - Enhancing quality of life for people with long-term conditions	Proportion of people feeling supported to manage their condition	Proportion of people answered yes in C&H – 0.48, compared to 0.52 in England (C&H significantly lower)	\downarrow
5	PHOF 2 - Health improvement	2.22 - Take up of the NHS Health Check Programme	Potential indicator for inclusion once data is known	

	More people in the City are socially connected and know where to go for help			
	Domain	Indicator	Current Performance	
6	ASCOF 1 - Enhancing quality of life for people with care and support needs	1A - Enhancing quality of life for people with care and support needs	Annual Survey (new for 2012/13)	
7	_	1C - Proportion of people using social care who receive self- directed support and those receiving direct payments	72% compared to national target of 75% based on population of 167 clients as at December 2012	$\leftarrow \rightarrow$
8		1D - Carer reported quality of life	Carers Survey (new for 2012/13)	
9	ASCOF 3 - Ensuring that people have a positive experience of care and support	3A Overall satisfaction of people who use services with their care and support	Annual User Survey - 64%	$\leftarrow \rightarrow$
10		3B Overall satisfaction of carers with social services	Annual Carers Survey (new for 2012/13)	$\leftarrow \rightarrow$
11		3C The proportion of carers who report that they have been included or consulted in discussions about the person they care for	Annual Carers Survey (new for 2012/13)	$\leftarrow \rightarrow$
12		3D The proportion of people who use services and carers who find it easy to find information about services	Annual User Survey - 70%	$\leftarrow \rightarrow$
13	ASCOF 4 - Safeguarding adults whose circumstances make them vulnerable and protecting from avoidable harm	4B The proportion of people who use services who say that those services have made them feel safe and secure	Annual User Survey - 83%	$\leftarrow \rightarrow$

	More rough sleepers can get health care, including primary care, when they need it			
	Domain	Indicator	Current Performance	
14	NHSOF 1 - Preventing people from dying	Potential Years of Life Lost	C&H – 2419 YLL per 100,000	
	prematurely	(PYLL) from causes	(DSR). Higher than national	$\leftarrow \neg$
		considered amenable to	average – 2228 per 100,000 (but	
		healthcare - adults	not significantly different)	
15		Potential Years of Life Lost	Data not yet available	
		(PYLL) from causes		
		considered amenable to		
		healthcare - CYP		

	More people in the City take advantage of P	Public Health preventative intervent	ions, with a particular focus on at-ris	k groups
	Domain	Indicator	Current Performance	
16	ASCOF 2 - Delaying and reducing the need for care and support	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into re- ablement/rehabilitation services	89% (based on 19 clients) as at December 2012	1
17	NHSOF 1 - Preventing people from dying prematurely	Under 75 mortality rate from cardiovascular disease	C&H – 79 deaths per 100,000, significantly higher than England at 58 per 100,000	\downarrow
18		Under 75 mortality rate from respiratory disease	C&H – 37 deaths per 100,000, significantly higher than England at 24 per 100,000	\downarrow
19		Under 75 mortality rate from liver disease	Proxy indicator: emergency admissions for alcohol related liver disease. C&H – 5.8 per 100,000 compared to England average of 25 per 100,000 population	1

20		Under 75 mortality rate from cancer	C&H – 108 deaths per 100,000, not significantly different to England at 107 per 100,000	$\leftarrow \rightarrow$
21		One and Five-year survival from all cancers (and breast, lung and colorectal cancers)	Data not yet available	
22		Excess under 75 mortality rate in adults with serious mental illness	Data not yet available	
23		Infant mortality	Data not yet available	
24		Neonatal mortality and stillbirths	Data not yet available	
25		Five year survival from all cancers in children	Data not yet available	
26		Excess under 60 mortality rate in adults with a learning disability	Data not yet available	
27	NHSOF 2 - Enhancing quality of life for people with long conditions	Unplanned hospitalisation for chronic ambulatory care sensitive conditions (adults)	C&H 225 per 100,000, significantly less than England at 929 per 100,000	1
28		Unplanned hospitalisation for asthma, diabetes and epilepsy in under 19s	C&H 74 per 100,000, significantly less than England at 319 per 100,000	1
29		Estimated diagnosis rate for people with dementia	Data not yet available	
30	NHSOF 3 - Helping people to recover from episodes of ill health or following injury	Emergency admissions for acute conditions that should not usually require hospital	C&H – 270 per 100,000, significantly lower than England at 1036 per 100,000	1

		admission		
31		Emergency admissions for children with Lower respiratory tract infections	C&H – 78 per 100,000, significantly lower than England at 365 per 100,000	1
32		Total health gain as assessed by patients for elective procedures - Knee replacement	EQ-5D index 0.243 for C&H, significantly lower than 0.295 for England	\checkmark
33	NHSOF 4 - Ensuring that people have a positive experience of care	4C Patient experience of primary care: Friends and family test	Data not yet available	
34	NHSOF 5 - Treating and caring for people in a safe environment and protect them from avoidable harm	5.2 Incidence of healthcare associated infection (HCAI): i - MRSA ii - C. difficile	C&H significantly lower than England average for incidence of MRSA with 0.7 cases per 100,000 compared to 1.8 per 100,000 and 8 cases of C. diff per 100,000 compared to 28 per 100,000 in England	1
35	PHOF 2 - Health improvement: People are helped to live healthy lifestyles, make healthy choices and reduce health inequalities	2.2a Cancer screening coverage – breast cancer	66.7 compared to 76.9 for England based on a population of 421	\downarrow
36		2.2b Cervical cancer	58 compared to 75.5 for England (based on population of 1304)	\downarrow
37		2.22 Take up of the NHS Health Check Programme	Potential indicator for inclusion once data is known	
38	PHOF 3 - Health protection	3.3 Population vaccination coverage	Potential indicator for inclusion once data is known	

	More people in the City are warm in the winter months		
	Domain	Indicator	Current Performance
39	PHOF 1 - Improvements against wider factors that affect health and wellbeing and health	1.17 Fuel poverty	Potential indicator for inclusion once data is known
	inequalities		

	More people in the City have jobs: more children grow up with economic resources			
	Domain	Indicator	Current Performance	
40	PHOF 1 - Improvements against wider factors that affect health and wellbeing and health inequalities	1.1 Children in poverty	18.7 compared to 21.1 for England (based on numerator of 125)	$\leftrightarrow \rightarrow$
41	ASCOF 1 - Enhancing quality of life for people with care and support needs	1E - Proportion of adults with learning disabilities in paid employment	0 clients currently based on population of 15 at December 2012	\checkmark

	City air is healthier to breathe			
42	Domain	Indicator	Current Performance	
	PHOF 3 - Health protection: The population's	3.1 Fraction of mortality	9.0 compared to England	
	health is protected from major incidents and	attributable to air pollution	average of 5.6 (modelled on air	$ $ \vee
	other threats, while reducing health		quality)	
	inequalities			

	More people in the City are physically active		
	Domain	Indicator	Current Performance
43	PHOF 2 - Health improvement: People are helped to live healthy lifestyles, make healthy choices and reduce health inequalities	2.13 - Proportion of physically active and inactive adults	Data not yet available
44		2.22 - Take up of the NHS Health Check Programme	Potential indicator for inclusion once data is known

	The City is a less noisy place			
	Domain	Indicator	Current Performance	
45	PHOF 1 - Improvements against wider factors that affect health and wellbeing and health	1.4 Percentage of population affected by	67.3 compared to 7.8 for England but numerator and denominator	\downarrow
	inequalities	noise: number of complaints about noise	relate to different populations	

Children and Young People priorities [Placeholder Only]		
Domain	Indicator	Current Performance