	то:	Health and Wellbeing Board
	DATE:	20 th March 2019
BRIEFING	LEAD OFFICER	Becky Woolley, Policy and Partnerships Officer, Rotherham Metropolitan Borough Council
	TITLE:	Health and Wellbeing Strategy, 2018-2025 – draft performance framework

Background

1. It was agreed in July 2018 that an accompanying performance framework would be developed to measure the successful delivery of the Health and Wellbeing Strategy.

A longlist of potential indicators was circulated to the Health and Wellbeing Board in November 2018 and the full draft performance framework was discussed by the Health and Wellbeing Board in January 2019. Following the feedback from this discussion, changes have been made and indicators have been added into the framework.

The framework was also received by the ICP Place Board in March 2019, for information and to discuss how the Place Board would like to engage with this framework once approved.

Key Issues

The draft performance framework (see appendix one) seeks to compliment additional information available to the board such as the JSNA and the ICP Place Plan quarterly performance reports by providing a high-level and outcomes-focussed overview of performance based on a number of priority indicators.

Two indicators within the framework remain to be confirmed. One of these is around loneliness; this has been left as 'to be confirmed' to ensure that this aligns with the loneliness plan which is currently in development.

The other indicator regards the number of referrals to Child and Adolescent Mental Health Services following feedback at the last Health and Wellbeing Board that there was no indicator included in the framework relating to the mental health of children and young people. This will be discussed further at the CAMHS SDIP on 13th March to ensure that this is the most appropriate indicator.

Key Actions and Relevant Timelines

3. Subject to the draft performance framework being approved, a scorecard will be developed, which will include data benchmarking Rotherham's position to national and regional averages. Updates to the scorecard will become a standing item on Health and Wellbeing Board agendas.

An annual session on performance will also take place involving both members of the Health and Wellbeing Board and the ICP Place Board.

Recommendations

4. That the Health and Wellbeing Board approve the draft performance framework.

Rotherham Health and Wellbeing Strategy 2018-2025 – draft performance framework

Aim	Strategic Priority	Proposed indicator
All children get the best start in life and go on to achieve their potential.	Ensuring every child gets the best start in life (preconception to age 3)	Smoking status at the time of delivery
potential.		School readiness: the percentage of children achieving a good level of development at the end of reception
	Improving health and wellbeing outcomes for children and young people through integrated commissioning and service delivery	Child excess weight in 4-5 year olds
	Reducing the number of children who experience neglect or abuse	The number of children subject to a CP plan (rate per 10K population under 18)
	Ensuring all young people are ready for the world of work	Average attainment 8 score
All Rotherham people enjoy the best possible mental health and wellbeing and have a good	Improving mental health and wellbeing of all Rotherham people	Self-reported wellbeing – % of respondents with a high happiness score
quality of life.	Reducing the occurrence of common mental health problems	A reduction in the number of referrals to Child and Adolescent Mental Health Services – (this is to be confirmed and will be discussed at the CAMHS SDIP on 13 th March.)
		Depression recorded prevalence (% of practice register aged 18+)

	Improving support for enduring mental health needs (including dementia)	Suicide: age-standardised rate per 100,000 population (3 year average) The percentage of patients diagnosed with dementia whose care plan has been reviewed in a face-to-face review in the preceding 12 months
	Improve the health and wellbeing of people with learning disabilities and autism	Proportion of adults with a learning disability in paid employment
All Rotherham people live well for longer.	Preventing and reducing early deaths from the key health issues for Rotherham people, such as cardiovascular disease, cancer and respiratory disease	Life expectancy at birth (male and female)
		Healthy life expectancy at birth (male and female)
	Promoting independence and self-management and increasing independence of care for all people	Proportion of people who use services who have control over their daily life
	Improving health and wellbeing outcomes for adults and older people through integrated commissioning and service delivery; ensuring the right support at the right time	Health related quality of life for older people

	Ensuring every carer in Rotherham is supported to maintain their health, wellbeing and personal outcomes, so they are able to continue their vital role and live a fulfilling life.	Percentage of carers reporting that their health has not been affected by their caring role
All Rotherham people live in healthy, safe and resilient communities.	Increasing opportunities for healthy, sustainable employment for all local people.	The rate of the working age population economically active in the borough
	Ensuring everyone is able to live in safe and healthy environments.	Number of repeat victims of anti-social behaviour
		Number of households in temporary accommodation
	Ensuring planning decisions consider the impact on people's health and wellbeing.	
	Increasing opportunities for people of all ages to participate in culture, leisure, sport and green space activity in order to improve their health and wellbeing	Utilisation of outdoor space for exercise/health reasons
	Mitigating the impact of loneliness and isolation in people of all ages	Loneliness indicator to be confirmed following the development of the loneliness plan.