

**ROTHERHAM BOROUGH COUNCIL –
REPORT HEALTH AND WELLBEING BOARD**

1. Meeting:	Health and Wellbeing Board
2. Date:	16th October, 2013
3. Title:	Performance Management Framework
4. Programme Area:	Public Health

5. Summary

This paper introduces the second performance report to the Health and Wellbeing Board.

6. Recommendations

Members of the Board are invited to note progress.

7. Proposals and details

This is the second performance report to the Health and Wellbeing Board about each of the six priority measures that the Board determined were key to the delivery of the Joint Health and Wellbeing Strategy. The data presented represents the most recently available and published metrics.

Where a metric has a significant lead-time before its publication and/or effect being observed, intermediate proxy measures are reported if possible every Quarter. In some instances the publication of refreshed metrics is less than Quarterly or will require the development of new data collection. The Board had previously indicated that it wanted to minimise new data collection.

Accountable Officers have been asked to provide metrics where these are available and details for each measure are provided below.

8. Finance

No new data collection has been instituted to complete the report. The report uses existing data collection systems.

9. Risks and uncertainties

Data quality and reporting timelines are an issue for some of the metrics and this will result in some metrics relating to a specific period changing in subsequent reports.

10. Policy and Performance Agenda Implications

Making Every Contact Count (MECC)

The MECC workshop took place in mid-September and was well attended. The event stimulated a lot of debate and partners now have to reflect on how to implement this approach in their services. The Director of Public Health will meet with Public Sector Human Resource Directors to embed MECC in training and development for staff.

Priority 1 Smoking - Goal 1 Preventing Initiative of Tobacco use amongst children and young people

Percentage of smoking at time of delivery

No new data has been published nationally.

Smoking Prevalence

2012-13 outturn is expected later in 2013.

Priority 2 Alcohol - Goal 1 - Preventing harm to children and young people from alcohol consumption

Development of Community Alcohol Partnerships (CAPs) across the borough

Number of CAPs remains at 2. Both have been launched and a detailed update will be presented to HWBB in November.

Goal 2 - Reducing Harm to Adults from alcohol consumption

Alcohol related admissions

The team to deliver this local data has now been selected with work to commence in October/November 2013. Figures will be reported to HWBB in the Quarter 3 report.

FPN Waivers which result in attendance at binge drinking course

Quarter 1 2013-14 figures significantly down on 2012-13 levels.

Brief interventions

Number of brief interventions in general practice – Q1 2013-14 = 6,846. This is a significant increase (over 2012-13 levels), the contract specifications changed from 1/4/2013 to 'any' patient aged 18 or over (from specified diagnosis group).

Brief interventions in hospital settings will start being recorded from September 2013 and the first and that months figure will be reported in December 2013.

Priority 3 Obesity – Goal 1 Preventing obesity in children and young people

National Child Measurement Programme data

Overweight and obesity in Reception/Year 6 data is published annually. The 2012-13 outturn figures are expected in December 2013.

The National Local Authority Health Profile published by NHS England places Rotherham as one of the best performing Local Authority areas for reduction in childhood obesity in reception and year 6.

Weight Management Framework Activity

Activity figures presented are enrolments and completions. The latter is a subset of the former and the duration of the treatment may go beyond the reporting cut-off; therefore, the 2012-13 outturn is liable to change when next reported.

Applications for fast food outlets in proximity to schools or in any of the 11 areas

Work is still required to develop this metric as the definition of deprived area has not been routinely used by the planning department RMBC.

Development of fast food outlets is permitted within existing centres (eg Town, district or local) within 400m of schools and there is no prohibition to development within deprived areas.

RMBC Planning would welcome a view from the Board on their stance towards:

- Developing policy to prohibit approval of new fast food outlets within 400m of a school.
- Developing policy to prohibit approval of new fast food outlets within the defined deprived areas.
- Reporting of the actual numbers of approvals in each of the above (including ones that are within policy) so that the Board can develop full situational awareness.

Goal 2 – Reducing harm to adults from obesity

Healthy eating prevalence is ranked red. There is no new data, this is from the 2006-2008 household survey and refers to Rotherham's ranking in the 2013 Local Authority Health Profiles.

Increased prevalence of diagnosed diabetes for Rotherham is also ranked red in the National Local Authority Health Profile. The Rotherham rate is 6.3% compared to the national rate of 5.8% which ranks Rotherham in the lowest quartile of Local Authorities. This reflects high levels of obesity within the community. This indicator can also be viewed positively indicating general practice is identifying people with diabetes.

Priority 4 NEET

RMBC Corporate Responsibility LAC/CL Young People (Academic Year 12 -14) who are Not in Employment, Education or Training

The make-up of this cohort comprises 35 individual young people, of whom 25 (71%) are aged 18 and 19. This age group are able to claim benefit in their own right and live independently and therefore are an extremely hard group to engage in any form of learning. We, as a service, are endeavouring to work more closely with Job Centre Plus to provide a more coherent approach to this group.

The remaining 10, (29%), young people are all of Y12 academic year, with 2 being resident outside of Rotherham and 1 refusing any offer of learning.

The other 7 young people have all recently left learning and are in the transition period. We are hopeful that they will re-engage in learning in September when the new academic year begins.

The number of properties receiving energy efficiency measures through Community Energy Saving programme (CESP)

The programmed work is now scheduled to be completed in Q1 of 2014-15 and the total number of houses this will assist is set to exceed 1,285.

Priority 5 Fuel Poverty

The number of properties receiving energy efficiency measures through the green deal is not yet available.

Priority 6 Dementia – Earlier Detection of Dementia in order to provide effective care

Dementia

Dementia specific care package assessment metrics (number, timeliness and reviews) are not currently available but are being considered for development in order to report from 2014-15.

Dementia raising has become a mandated part of the NHS Health Checks from April 2013. The read codes were made available over the summer of 2013 and practices are starting to report on these codes. This applies only to 65 year olds and over receiving Health Checks.

11. Background Papers and Consultation

Keywords: Performance Report, Health and Wellbeing Strategy

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