

Health Improvement Board 18 February 2016

Q2 Performance Report

Background

1. The Health Improvement Board is expected to have oversight and of performance on four priorities within Oxfordshire's Joint Health and Wellbeing Strategy 2012-2016, and ensure appropriate action is taken by partner organisations to deliver the priorities and measures, on behalf of the Health and Wellbeing Board.
2. The four priorities the Board has responsibility for are:
 - Priority 8:** Preventing early death and improving quality of life in later years
 - Priority 9:** Preventing chronic disease through tackling obesity
 - Priority 10:** Tackling the broader determinants of health through better housing and preventing homelessness
 - Priority 11:** Preventing infectious disease through immunisation

Current Performance

3. A table showing the agreed measures under each priority, expected performance and current performance is attached as appendix A.
4. There are some indicators that are reported on an annual basis and some on a half-yearly basis - these will be reported in future reports following the release of the data.
5. For the indicators that can be regularly reported on, current performance (at Q2) can be summarised as follows:
 - 6 indicators are Green.
 - 3 indicators are Amber (defined as within 5% of target).
 - 7 indicators are Red
6. The indicators that are red are:
 - 8.3** At least 66% of those invited for NHS Health Checks will attend (ages 40-74) and no CCG locality should record less than 50% with all aspiring to 66% (Baseline 46% Apr 2014)
 - 8.4** At least 3650 people will quit smoking for at least 4 weeks
 - 8.6** The target for opiate users by end 2015/16 should be at least 7.6% successfully leaving treatment and not representing within 6 months
 - 8.7** At least 39% of non-opiate users by 2015/16 should successfully leave treatment and not represent within 6 months
 - 10.1** The number of households in temporary accommodation on 31 March 2016 should be no greater than level reported in March 2015
 - 10.5** Ensure that the number of people estimated to be sleeping rough in Oxfordshire does not exceed the baseline figure of 70 (2014/15)
 - 11.2** At least 95% children receive dose 2 of MMR vaccination by age 5 (currently 92.5%) and no CCG locality should perform below 94%

Sue Lygo
Health Improvement Practitioner
4 February 2016

**Oxfordshire Health and Wellbeing Board
Performance Report**

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 report Oct-Dec	R A G	Q4 report Jan-Mar	R A G	Locality spread	Notes
Priority 8: Preventing early death and improving quality of life in later years											
8.1	At least 60% of those sent bowel screening packs will complete and return them (ages 60-74 years)	Expected 60%	A	Expected 60%		Expected 60%		Expected 60%			Data for Q2 are not yet available.
NHS England		Actual 59.2%		Actual		Actual		Actual			
8.2	Of people aged 40-74 who are eligible for health checks once every 5 years, at least 15% are invited to attend during the year. No CCG locality should record less than 15% and all should aspire to 20%	Expected 3.75%	G	Expected 7.5%	G	Expected 11.25%	G	Expected 15%		<u>Cumulative Q3</u> North East: 13.1% North: 13.3% City: 17.6% South East 17.6% South West 18.1% West 11.2%	
OCC		Actual 5%		Actual 11.1%		Actual 15.7%		Actual			
8.3	At least 66% of those invited for NHS Health Checks will attend (ages 40-74) and no CCG locality should record less than 50% with all aspiring to 66% (Baseline 46% Apr 2014)	Expected 46%	A	Expected 50%	R	Expected 58%	R	Expected 66%		<u>Cumulative Q3</u> North East: 47.1% North: 58.8% City: 41.9% South East 41.2% South West 47% West 63.9%	
OCC		Actual 42.2%		Actual 45.7%		Actual 48%		Actual			

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 report Oct-Dec	R A G	Q4 report Jan-Mar	R A G	Locality spread	Notes
8.4	At least 3650 people will quit smoking for at least 4 weeks (Achievement in 2014/15 = 1955)	Expected 913	R	Expected 1825	R	Expected 2738		Expected 3650			
OCC		Actual 477		Actual 992		Actual		Actual			
8.5	The number of women smoking in pregnancy should decrease to below 8% (recorded at time of delivery). (Baseline 2014/15 = 8.1%)	Expected <8%	G	Expected <8%	A	Expected <8%	A	Expected <8%			
OCC		Actual 7.8%		Actual 8.5%		Actual 8.8%		Actual			
8.6	The target for opiate users by end 2015/16 should be at least 7.6% successfully leaving treatment and not representing within 6 months (baseline 7.8%)	Expected 7.6%	R	Expected 7.6%	R	Expected 7.6%		Expected 7.6%			Please note that the completion data is from 01/03/2014 to 31/01/2015 and representations are up to 30/09/2015 (end Q2)
OCC		Actual 6.2%		Actual 5.6%		Actual		Actual			
8.7	At least 39% of non-opiate users by 2015/16 should successfully leave treatment and not represent within 6 months (baseline 37.8%)	Expected 39%	R	Expected 39%	R	Expected %		Expected %			
OCC		Actual 29%		Actual 27.9%		Actual		Actual			
Priority 9: Preventing chronic disease through tackling obesity											
9.1	Ensure that the obesity level in Year 6 children is held at no more than 16% (in 2013/14 this was 16.9%). No district population should record more than 19%					Expected 16% or less	A			Cherwell 19.7% Oxford 19.2% All other districts under 15%	
OCC						Actual 16.2%					

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 report Oct-Dec	R A G	Q4 report Jan-Mar	R A G	Locality spread	Notes
9.2	Reduce by 1% the proportion of people who are NOT physically active for at least 30 minutes a week (Baseline for Oxfordshire 23% against 28.9% nationally, 2014-15 Active People Survey)			Expected 22% or less	G						
Distri ct				Actual 21.9%							
9.3	63% of babies are breastfed at 6-8 weeks of age (currently 60.4%) and no individual CCG locality should have a rate of less than 50%	Expected 63%	A	Expected 63%	G	Expected 63%		Expected 63%		No CCG locality under 50% (Q1 & Q2). However, some practices across most localities have less than 50%	
NHS England & CCG		Actual 60.9%		Actual 63.8%		Actual %		Actual			
Priority 10: Tackling the broader determinants of health through better housing and preventing homelessness											
10.1	The number of households in temporary accommodation on 31 March 2016 should be no greater than level reported in March 2015 (baseline 192 households)			Expected 192 or less	R			Expected 192 or less			
Distri ct Councils				Actual 218				Actual			
10.2	At least 75% of people receiving housing related support will depart services to take up independent living (baseline 91% in 14/15)	Expected 75%	G	Expected 75%	G	Expected 75%		Expected 75%			
OCC		Actual 84.8%		Actual 86.1%		Actual %		Actual			

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 report Oct-Dec	R A G	Q4 report Jan-Mar	R A G	Locality spread	Notes
10.3	At least 80% of households presenting at risk of being homeless and known to District Housing services or District funded advice agencies will be prevented from becoming homeless (baseline 83% in 2014/15 when there were 2454 households known to services). Reported 6-monthly			Expected 80%	G			Expected 80%			
District Councils				Actual 82%				Actual			
10.4	More than 700 households in Oxfordshire will receive information or services to enable significant increases in the energy efficiency of their homes or their ability to afford adequate heating, as a result of the activity of the Affordable Warmth Network and their partners.					Expected >700	G	Expected >700			This represents a cumulative figure for Q1, Q2 and Q3.
Affordabl e Warmth						Actual 1427		Actual			
10.5	Ensure that the number of people estimated to be sleeping rough in Oxfordshire does not exceed the baseline figure of 70 (2014/15)					Target < 70	R				
District Councils						Actual 90					
10.6	<i>Suggested measure: 95% of young people receiving housing</i>										Measure to be agreed at February HIB meeting.

OCC	<i>related support within the young people's supported housing pathway depart to a planned and positive accommodation option (baseline 70% from 2015-16 Q1 & Q2 performance data)</i>											Breakdown of baseline data for positive move-on: Package 1 - families provision = 100% Package 2 - singles shared provision = 76% Package 3 - self-contained, dispersed provision = 0% Package 4 - specialist provision = 0%
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Priority 11: Preventing infectious disease through immunisation

No	Indicator	Q1 Apr-Jun	R A G	Q2 Jul-Sept	R A G	Q3 report Oct-Dec	R A G	Q4 report Jan-Mar	R A G	Locality spread	Notes
11.1	At least 95% children receive dose 1 of MMR (measles, mumps, rubella) vaccination by age 2 (currently 95.2%) and no CCG locality should perform below 94%	Expected 95%	G	Expected 95%	A	Expected 95%		Expected 95%		Oxford = 93.3 (Q1)	Data for CCG localities are not available for Q2
NHS England		Actual 95.1%		Actual 94.5%		Actual %		Actual			
11.2	At least 95% children receive dose 2 of MMR vaccination by age 5 (currently 92.5%) and no CCG locality should perform below 94%	Expected 95%	A	Expected 95%	R	Expected 95%		Expected 95%		North = 91.6 (Q1) Oxford = 91.7 (Q1)	Data for CCG localities are not available for Q2
NHS England		Actual 92%		Actual 91%		Actual %		Actual			
11.3	At least 60% of people aged under 65 in "risk groups" receive flu vaccination							Expected 55%			

NHS England	(2014/15 = 51.9%)							Actual			
11.4	At least 90% of young women will receive both doses of HPV vaccination. (2014/15 =91.7%)							Expected Over 90%			
NHS England								Actual			