

# Health Improvement Partnership Board

## 29<sup>th</sup> February 2024

### Performance Report

#### Background

1. The Health Improvement Partnership Board is expected to have oversight of performance on four priorities within Oxfordshire's Joint Health and Wellbeing Strategy 2018-2023, 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 indicators are grouped into the overarching priorities of:
  - A good start in life
  - Living well
  - Ageing well

#### Current Performance

3. A table showing the agreed measures under each priority, expected performance and the latest performance is below. A short commentary is included to give insight into what is influencing the performance reported for each indicator.
4. All indicators show which period the data is being reported on and whether it is new data or the same as that presented to the last meeting (if the metric is yet to be updated).

Of the 15 indicators reported in this paper:

**NINE** indicators have **NEW DATA**

**Four** indicators are **green**.

**Seven** indicators are **amber**.

**Four** indicators are **red**:

- **2.18** Increase the level of flu immunisation for at risk groups under 65 years (cumulative for flu season only)  
*No new data.*
- **2.21i** Increase the level of Cervical Screening (Percentage of the eligible population women aged 25-49) screened in the last 3.5 years)  
*The latest data is moving in the right direction towards the target.*
- **3.16** Maintain the level of flu immunisations for the over 65s (cumulative for flu season only)  
*No new data*
- **3.18** Breast screening – uptake (The proportion of eligible women invited who attend for screening).  
*The latest data has decreased and the measure has moved from amber to red.*

# Health Improvement Board Performance Indicators 2023/24

\*National target

## 1 - Targets set by Local Authority Public Health

2 - RAG: **G** has exceeded or is close to target **A** is borderline but within threshold **R** is off target

	Measure	New data since last HIB	Frequency	Target 23/24	Latest Period	Latest Data	RAG <sup>2</sup>	Direction of travel	Trend	Commentary
<b>A good start in life</b>	1.12 Reduce the level of smoking in pregnancy	Y	Quarterly	6.0%	23-Q2	6.1%	G	↑		Variation across quarterly reporting is expected due to overall low numbers. The public health funded stop smoking service is in place to support pregnant women to quit. A new maternity tobacco dependency service (NHSE funded, implemented via the ICB) went live in early 2024. The Family Nurse Partnership incentivised quit scheme to support young mothers and their significant others to quit is also in situ. National funding is due to be released during 24/25 to ICB's to implement a pregnancy incentive quit scheme
	1.13 Increase the levels of Measles, Mumps and Rubella (MMR) immunisation (dose 1) by age 2 years	Y	Quarterly	95%	23-Q2	94.0%	A	↑		The Thames Valley Improving Uptake of MMR Vaccination Action Plan 2023-28 has been finalised. Included is a plan to strengthen engagement with Early Years services; in education and health settings, and to develop toolkits to enable confidence in non-clinical staff when discussing MMR vaccination. The Thames Valley Improving Immunisation Uptake Team continues to provide direct support to practices with low preschool immunisation uptake rates.
	1.14 Increase the levels of Measles, Mumps and Rubella (MMR) immunisation (dose 2) by age 5 years	Y	Quarterly	95%	23-Q2	90.8%	A	↓		Over the summer of 2023 NHSE Thames Valley Screening and Immunisation Team in collaboration with GPs launched a targeted communication campaign to promote the MMR vaccine ahead of the new school year. NHSE Thames Valley Screening and Immunisation Team is reviewing the impact of this focussed communication campaign.
	1.15 Reduce the levels of children overweight (including obese) in reception class (NCMP data)	N	Annual (Nov)	18.4%	22/23	19.3%	A	↓		There has been a small decrease in Reception overweight and obesity which is similar to pre-pandemic levels in 2018/2019. Work is continuing to address this through the whole systems approach to healthy weight action plan and specific programmes such as You Move and the child healthy weight service, Gloji Energy.
	1.16 Reduce the levels of children overweight (including obese) in Year 6 (NCMP data) - (Annual Dec)	N	Annual (Nov)	31.0%	22/23	30.7%	A	↓		There has been a small decrease in Year 6 overweight and obesity levels however this remains higher than 2018/2019 (pre-pandemic). Work is continuing to address this through the whole systems approach to healthy weight action plan and specific programmes such as You Move and the child healthy weight service, Gloji Energy.
<b>Living Well</b>	2.16 Reduce the Percentage of the population aged 16+ who are inactive (less than 30 mins / week moderate intensity activity).	N	Annual (Jun)	20.0%	Nov 21/22	19.2%	G	↓		During COVID, levels of inactivity worsened across England. New projects such as Move Together (launched July 2021) and You Move (launched June 2022) to help improve this measure and latest data from Sport England shows this is now improving. This year a local physical activity framework, Oxfordshire on the Move launched in April 2023, coordinated by Active Oxfordshire to galvanise partners to increasing physical activity through specific ambitions.
	2.17 Increase the number of smoking quitters per 100,000 smokers in the adult population.	Y	Quarterly	1628 per 100,000	23-Q2	1131	A	-		Additional capacity has been added to the Local Stop Smoking service to anticipate increased referrals from work with key priority groups such as routine manual workers, housing association tenants, debt management providers, and via the Tobacco Dependency Service within acute and mental health hospitals, commissioned by ICB). This figure is anticipated to improve as efforts to increase referrals are realised as part of this approach." Additional funding to Local Authorities will be available from 24/25 to support increasing quit rates within Local Stop Smoking Services. Plans are being developed for Oxfordshire on implementation.

1-Targets set by Local Authority Public Health

2 - RAG: **G** has exceeded or is close to target **A** is borderline but within threshold **R** is off target

	Measure	New data since last HIB	Frequency	Target 23/24	Latest Period	Latest Data	RAG <sup>1</sup>	Direction of travel	Trend	Commentary
Living Well	2.18 Increase the level of flu immunisation for at risk groups under 65 years (cumulative for flu season only)	N	Annual	60.4% (annual) 22/23	Sep22-Feb23	56.5%	R	↓		Uptake for the 22/23 season surpassed the baseline of 2017/18 but did not meet the uptake of 21/22. This is mirrored in the regional data, where uptake has dropped compared to 21/22. One reason is that the public may be less sensitised to the need for vaccinations this year compared to the height of the COVID pandemic. The NHS England Thames Valley Public Health Commissioning Teams are completing a review of the 22/23 flu vaccination programme with a view to maximising uptake and reducing inequalities in 23/24.
	2.19 % of the eligible population aged 40-74 who have been offered an NHS Health Check in 2023 -24.	Y	Quarterly	5.0%	23-Q3	4.2%	A	↓		There has been a decrease in the number of people being offered a NHS Health Check in Q3 2023/24. This is expected during this period (Oct - Dec), because other pressures on Primary Care such as delivery of the annual flu vaccine programme takes priority.
	2.20 Of those residents invited for a NHS Health check, the % who accept and complete the offer.	N	Annual (Jun)	45.0%	2022/23	45.2%	G	↑		GP Practices are actively inviting eligible patients and a countywide marketing campaign is currently underway alerting the public to the NHS Health Check programme and urging them to attend their appointments when invited. The newly commissioned supplementary NHS Health Check Services began the service implementation phase between October - December 2022 and service delivery through outreach clinics began from 1st February 2023. The Oxfordshire service continues to benchmark higher than regional and national averages.
	2.21i Increase the level of Cervical Screening (Percentage of the eligible population women aged 25-49) screened in the last 3.5 years).	Y	Quarterly	80%*	23-Q1	65.2%	R	↑		The NHSE Thames Valley Screening and Immunisation Team are now working with targeted practices in central Oxford with the lowest cervical screening coverage in the 25-49-year-old cohort to support completion of audits to understand uptake of cervical screening by ethnicity and student status.
	2.21ii Increase the level of Cervical Screening (Percentage of the eligible population women aged 50-64) screened in the last 5.5 years).	Y	Quarterly	80%*	23-Q1	75.1%	A	↑		Direct work between NHSE Thames Valley Screening and Immunisation team and practices with low cervical screening coverage rates in the younger cohort will be expanded to better understand specific reasons for lower coverage in the older cohort.
Ageing Well	3.16 Maintain the level of flu immunisations for the over 65s (cumulative for flu season only)	N	Annual	86.4% (annual) 22/23	Sep22-Feb23	84.9%	R	↓		Uptake for the 22/23 season surpassed the baseline of 2017/18 but did not meet the uptake of 21/22. This is mirrored in the regional data, where uptake has dropped compared to 21/22. One reason is that the public may be less sensitised to the need for vaccinations this year compared to the height of the COVID pandemic. The NHS England Thames Valley Public Health Commissioning Teams are completing a review of the 22/23 flu vaccination programme with a view to maximising uptake and reducing inequalities in 23/24.
	3.17 Increase the percentage of those sent Bowel Screening packs who will complete and return them (aged 60-74 years).	Y	Quarterly	60% (Acceptable 52%)*	23-Q1	67.2%	G	↓		The programme is meeting the achievable standard for uptake. Age-extension for the bowel screening programme is being phased in with age-extension to include those from 54 year being completed. Work on the remaining cohort 50-52yrs will start shortly.
	3.18 Breast screening – uptake (The proportion of eligible women invited who attend for screening).	Y	Quarterly	80% (Acceptable 70%)*	23-Q1	66.9%	R	↓		The breast screening programme was significantly impacted by the pandemic. Uptake is comparable to the South East (63.1%) and above the England (58%) averages. Unpublished data suggest improvements in uptake in the next quarter in Oxfordshire. NHSE South East regional teams are working collaboratively to develop a breast screening workforce plan. The service is planning to carry out a Health Equity Audit to inform the focus of future improvements and to reduce inequalities and improve uptake. The service has implemented test messaging to those that did not attend their appointments.