

Public Health Outcomes Framework
Briefing Paper
December 2012

Background

The new Public Health Outcomes Framework (PHOF) sets out the desired outcomes for public health and how these will be measured. The framework concentrates on two high-level outcomes to be achieved across the public health system. These are:

- increased healthy life expectancy
- reduced differences in life expectancy and healthy life expectancy between communities

The outcomes reflect a focus not only on how long people live but on how well they live at all stages of life. The second outcome focuses attention on reducing health inequalities between people, communities and areas. Using a measure of both life expectancy and healthy life expectancy will enable the use of the most reliable information available to understand the nature of health inequalities both within areas and between areas.

A set of supporting public health indicators will help focus understanding of progress year by year nationally and locally on those things that matter most to public health. The indicators, which cover the full spectrum of public health and what can be currently realistically measured, are grouped into four 'domains':

- improving the wider determinants of health
- health improvement
- health protection
- healthcare public health and preventing premature mortality

In November 2012, a baseline assessment was released which allows us to compare and benchmark ourselves against the national picture.

Overview

Generally, the overall picture for Oxfordshire shows that we are doing very well with only a few indicators which need more consideration. Oxfordshire is a healthy place to live, which generally has good services and high quality of living.

This compendium covers a range of topics which belong to a range of partners across many organisations within Oxfordshire. The indicators included in the "scorecard" are separated out in the four domains above.

Each indicator is displayed in three ways, by spine chart, as a tartan rug and finally as summary charts. Each provides the same information but in a format that shows different aspects of the data.

Some areas which need exploring in more depth.

It should be noted that in some instances the data used is old. However, there is no room for complacency, for some areas, we need to do better and in some areas where we are average, we need to aspire to being good. This briefing is intended to be a position statement of "where we are", it does not attempt to provide solutions to the problems.

Specific Indicators explored

1.06 – Adults with a learning disability/in contact with secondary mental health services who live in stable and appropriate accommodation

Indicator 1.6i - % of all adults with a learning disability who are known to the council, who are recorded as living in their own home or with their family.

Indicator 1.6ii - % of adults receiving secondary mental health services living independently at the time of their most recent assessment, formal review or other multi-disciplinary care planning meeting

	2010/2011	2011/12
Indicator 6i	81.4%	82.0%
Indicator 6ii		45.9%

The data suggests in 2010/11 81.4% of people with learning disabilities lived with their families or independently alone, by March 2012 this had increased to 82%. The regional (South East) average is 70% and the national average is 69.9%.

For those with Mental Ill health, in 2010/11, the data suggests that only 1.3% lived in appropriate accommodation. The 2011/12 data shows that 45.9% of people live in appropriate accommodation. This is higher than the regional average (43%) but lower than the national rate of 57.8%. The baseline data needs further exploration, but this could be an artifact of poor recording, it would be unlikely that a 44.6% improvement in performance would be achievable in one year.

This indicator uses 2010/11 data, 2011/12 data shows us that by the end of March 2012, our position was improving.

Lead Organisation/Director – John Jackson, Oxfordshire County Council

1.10 – Killed/seriously injured on Roads

Indicator - Number of people reported killed or seriously injured on the roads, all ages, per 100,000 resident population.

	2009/2011 Oxon	2009/2011 National
Indicator 10	56.3	48.1

As this has been aggregated into a three year rolling statistics, we do not as yet have comparative data for 2010/12, however looking at the annual data would suggest that 2010 was a particularly high year which will affect the 3 year average. This will impact on next year's data as well. The national average is 42.2.

2009	30 deaths	315 serious injuries
2010	41 deaths	354 serious injuries
2011	26 deaths	329 serious injuries

The data suggests that in Oxfordshire, there are significantly higher number of people who are killed or seriously injured on our roads but local monitoring shows this is decreasing.

This indicator uses 2009/11 data, 2010/12 provisional data will be available in February 2013

Lead Organisation/Director – Dave Etheridge, Oxfordshire County Council

2.15 – Drug Treatment

Indicator – Number of drug users that left drug treatment successfully (free of dependency) who do not re-present to treatment again within 6 months as a proportion of the local number in treatment

The data suggests Oxfordshire has just under 10% of drug users successfully completed treatment. The national average is 12.3% and the best results are 33.6%.

This indicator uses National Drug Treatment Monitoring data as at March 2010, the data shows that we are low compared to the national and regional trends. This is due to a number of compacting factors
the numbers are small and therefore one person could make the difference between high and low ratings.
as a new target, the baseline gives us something to focus on,
this new target measures 6 month success rate, new Oxfordshire services, as part of the National Payment by results pilots, measure 12 month recovery.
All patients were discharged from the old service and re registered with the new service which has also affected the data.

This indicator is the responsibility of Public Health in Local Authority.

2.17 - Recorded Diabetes

Indicator – Number of Quality Outcome Framework (QOF) recorded cases of diabetes per 100 patients registered with GP Practices (17 years and over)

The data suggests that we have significantly lower number of people, diagnosed with diabetes, than expected, using predictive modelling. This may be because we have a healthy population or it may be because diagnosis of Diabetes is being missed. Between April 2011 and March 2012 we have seen the roll out of NHS Health Checks programmes, this has identified an extra 38 patients with diabetes.

	National rate	Regional Rate	Oxon rate
2009/10	5.3	4.7	4.2
2010/11	5.5	4.9	4.4
2011/12	5.8	5.1	4.5

This indicator uses Quality Outcomes Framework (QOF) data as at March 2010, interim data shows us that we are still low but are following national and regional trends

This indicator is the responsibility of the NHS CB.

2.20 - Cancer Cervical Screening

Indicator – The percentage of women in a population eligible for cervical screening at a given point in time who were screened adequately within a specified period

	National rate	Regional Rate	Oxon rate
2010/11	78.6%	79.7%	78.1%
2011/12	78.6%	79.8%	78.3%

The data suggests that whilst average, we would aspire to be significantly better than average and have work to do to increase coverage.

This indicator uses 2010 data, 2011/12 data shows us that cervical screening coverage in Oxfordshire is 78.3%, below the national and regional rates

This indicator is the responsibility of the Public Health England who are responsible for ensuring screening programmes are delivered, whilst Public Health in Local Authority have a responsibility to monitor the programme ensuring effective coverage.

2.22 – NHS Health checks

Indicator – Percentage of eligible population aged 40 – 74 offered an NHS Health Check in the financial year.

This indicator is currently under development. The data shown is for PCT level data as at March 2011/12. As schemes have been developed in different ways across the country the data is not comparable. From April 2013, this indicator will be reported at Local Authority level. Local data shows that in 11/12 12,432 people were offered a health check – 13.7% of the eligible population over a 5 year period, slightly lower than Englands average of 13.9%

This indicator is the responsibility of Public Health in Local Authority

2.24 – Falls

Indicator 2.24i – Age sex standardised rate of emergency hospital admissions for injuries due to falls in persons aged 65 and over per 100,000 population.

Indicator 2.24ii – Age sex standardised rate of emergency hospital admissions for injuries due to falls in persons aged 65 to 79 per 100,000 population.

Indicator 2.24iii – Age sex standardised rate of emergency hospital admissions for injuries due to falls in persons aged 80 and over per 100,000 population.

The data suggests that we appear to have a more falls than other populations. This may be due to several reasons, we may record falls better than other areas, a greater awareness of falls or our population could be falling more often than others do. Our falls service is extensive, and there are several projects underway to support the work they do, for example, a nursing home project which reaches staff to recognise those residents most at risk from falling.

This indicator uses 2010/11 data, local data suggests that the number of falls are decreasing

	Hip fracture	Fracture per 1000 beds
Year 2003	81	
Year 2005	111	2.6
Year 2007	91	2.07
Year 2009	84	
Year 2011	82	1.8

This indicator is the responsibility of the Oxfordshire County Council

3.02 – Chlamydia

Indicator – Crude rate of Chlamydia diagnoses per 100,000 adults aged 15 - 24

The data suggests that we are significantly lower than average, this is a difficult indicator to assess as high infection in a population is bad, yet may also show a well-targeted service. Much work has been undertaken to increase, firstly, the number of screens undertaken and secondly targeting screens at those most at risk from Chlamydia. It should be noted that the data provided is crude data, therefore does not take into account the different sex/age structures of populations.

This indicator uses 2010 data although this has been produced retrospectively as the indicator is new. Quarter 2 data for 2012/13 shows an increased diagnosis rate.

	National	Regional	Oxon PCT
Imputed Data for 2010	2220		1396
Quarter 2 2012/13	1850	1353	1548

This indicator will be the responsibility of Public Health in Local Authority.

33.03 – Flu for “at risk” populations

Indicator – Flu Vaccination coverage (at risk individuals from age 6 months to under 65, excluding pregnant women)

The data suggests that whilst average, we would aspire to be significantly better than average

This indicator uses 2010/2011 data, 2011/12 data shows us that Oxfordshire’s flu vaccination coverage in people under 65 at risk had improved on the previous year, although we will still fall short of the national 75% target.

Year	OPCT	South Central	England
2010/11	50.3%	51%	47.4%
2011/12	51.1%	52.6%	51.1%
2012/13(to date)	50.2%	51.4%	50.4%

This indicator is the responsibility of the PHE who are responsible for ensuring immunisation programmes are delivered, whilst Public Health in Local Authority have a responsibility to monitor the programme ensuring effective coverage.

3.05 – Treatment Completion for TB

Indicator – The percentage of people completing treatment for tuberculosis within 12 months prior to 31st December, of all those whose case was notified the previous year.

Indicator – TB Incidence per 100,000 population

The data suggests that we have high completion rates (98.3%) and low TB incidence (9.5). This is good news.

This indicator uses 2011 data, which is the latest available data.

This indicator is the responsibility of the Oxfordshire Clinical Commissioning Group who are responsible for delivering secondary care treatments, whilst NHS Commissioning Board are responsible for ensuring that primary care services are available. Public Health in Local Authority have a responsibility to monitor the programme ensuring effective coverage.

4.12 – Preventable Sight loss certificates

Indicator – Crude rate of sight loss certifications per 100,000 population

The data suggests that whilst we have average levels of sight loss, we have lower than average sight loss certifications, the reason for this is not clear from the data available. There are four indicators in this set all which use different Office of National Statistics Mid-year population estimates age groups, this could mean that we are not comparing like with like. However to assure ourselves, an audit of sight loss certification would indicate if everyone eligible for certification is offered the opportunity to apply because certification and registration are voluntary. The indicator uses 2010/11 data. Interim data is not available.

This indicator is the responsibility of the PHE who are responsible for ensuring immunisation programmes are delivered, whilst Public Health in Local Authority have a responsibility to monitor the programme ensuring effective coverage.