

## Health Improvement Board 27 October 2015

### Q1 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 can be summarised as follows:
  - 4** indicators are Green.
  - 4** indicators are Amber (defined as within 5% of target).
  - 3** indicators are Red
6. The three indicators that are red are:
  - 8.4 At least 3650 people will quit smoking for at least 4 weeks by end of 2015/16.
  - 8.6 The target for opiate users should be at least 7.6% successfully leaving treatment by the end of 2015/16
  - 8.7 At least 39% of non-opiate users should successfully leave treatment by the end of 2015/16

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6 October 2015

**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
<b>Priority 8: Preventing early death and improving quality of life in later years</b>											
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%			
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%		Expected 11.25%		Expected 15%		West Oxfordshire locality has fairly small proportion invited to attend (1.8%) this quarter.	
OCC		Actual 5%		Actual		Actual		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%		Expected 58%		Expected 66%		North East Oxfordshire has a lower proportion attending (26.7%) whilst West Oxfordshire has had more attending than invited (150%)	
OCC		Actual 42.2%		Actual		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
8.4	At least 3650 people will quit smoking for at least 4 weeks (Achievement in 2014/15 = 1955)	Expected 913	R	Expected 1825		Expected 2738		Expected 3650			
OCC		Actual 477		Actual		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%		Expected <8%		Expected <8%			
OCC G		Actual 7.8%		Actual		Actual		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%		Expected 7.6%		Expected 7.6%			Please note that the completion data is from 1/10/14 to 31/12/14 and representations are up to 30/06/2015.
OCC		Actual 6.2%		Actual		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 %		Expected %		Expected %			
OCC		Actual 29%		Actual		Actual		Actual			
<b>Priority 9: Preventing chronic disease through tackling obesity</b>											
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					
OCC						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
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		Expected		Expected		Expected 22% or less			
District council		Actual		Actual		Actual		Actual			
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%		Expected 63%		Expected 63%		For CCG localities in Q1 all are over 50%	
NHS England & CCG		Actual 60.9%		Actual %		Actual %		Actual %			
<b>Priority 10: Tackling the broader determinants of health through better housing and preventing homelessness</b>											
10.1	The number of households in temporary accommodation as at 31 March 2016 should be no greater than the level reported in March 2015 (192 households in Oxfordshire in 2014/15)	Expected		Expected 192 or less		Expected		Expected 192 or less			
District Councils		Actual		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%		Expected 75%		Expected 75%			
OCC		Actual 84.8%		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				Expected			
				80%							
District Councils				Actual				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				Expected			
				>700							
Affordable Warmth				Actual				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					
District Councils						Actual					
10.6	A measure will be included in the performance framework to monitor the success of supporting vulnerable young people in appropriate housing following monitoring to establish a baseline.										Baseline to be established and outcome to be discussed in March 2016
OCC											

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%		Expected 95%		Expected 95%		Oxford City is almost at the target (93.3%). All others are achieving over 95%	
NHS England		Actual 95.1%		Actual %		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%		Expected 95%		Expected 95%		North Oxfordshire and Oxford City have lower rates this quarter – below 92%. All other CCG localities are achieving 94% or higher	
NHS England		Actual 92%		Actual		Actual %		Actual			
11.3	At least 60% of people aged under 65 in “risk groups” receive flu vaccination (2014/15 = )							Expected			
NHS England								55% Actual			
11.4	At least 90% of young women will receive both doses of HPV vaccination. (2014/15 = )							Expected Over 90%			
NHS England								Actual			

## Health Improvement Board outcomes for 2015-16 and relevant benchmarks

Outcome measure for 2015-16	England / SEast	Oxfordshire 2014-15
<b>Priority 8:</b> 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). <b>Responsible Organisation: NHS England</b>	55%	56%
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%. <b>Responsible Organisation: Oxfordshire County Council</b>	19.7% (2014/15)	21.2%
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 55% with all aspiring to 66%.(baseline 53% 2014-15) <b>Responsible Organisation: Oxfordshire County Council</b>	48.8% (2014/15)	53.3%
8.4 At least 3650 people will quit smoking for at least 4 weeks (achievement in 2014-15 to be reported). <b>Responsible Organisation: Oxfordshire County Council</b>	N/A	
8.5 The number of women smoking in pregnancy should decrease to below 8% recorded at time of delivery (baseline 2014-15 8.1%). <b>Responsible Organisation: Oxfordshire Clinical Commissioning Group</b>	11.4% (2014/15)	8.1%
8.6 The 2015-16 target for opiate users should be at least 7.6% successfully leaving treatment (baseline 7.8%) <b>Responsible Organisation: Oxfordshire County Council</b>	7.6% (2014-15)	6.7%
8.7 The 2014-15 target for non-opiate users should be set at 39% successfully leaving treatment (baseline 37.8%). <b>Responsible Organisation: Oxfordshire County Council</b>	39% (2014-15)	20.2%

<p><b>Priority 9:</b> Preventing chronic disease through tackling obesity</p> <p><b>9.1</b> Ensure that the obesity level in Year 6 children is held at no more than 16% (in 2014 this was 16.9%) No district population should record more than 19% <b>Data provided by Oxfordshire County Council</b></p> <p><b>9.2</b> 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). <b>Responsible Organisation: District Councils through Oxfordshire Sports Partnership</b></p> <p><b>9.3</b> 63% of babies are breastfed at 6-8 weeks of age (currently 59.7%) and no individual health visitor locality should have a rate of less than 50% <b>Responsible Organisation: NHS England and Oxfordshire Clinical Commissioning Group</b></p>	<p>Eng 19.1% SE 16.4%</p> <p>Eng 28.9% SE 26.5%</p> <p>Eng 43.8%</p>	<p>16.9%</p> <p>23.1%</p> <p>62.6%</p>
<p><b>Priority 10</b> – no benchmarks</p>		
<p><b>Priority 11:</b> Preventing infectious disease through immunisation</p>		
<p><b>11.1</b> 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% <b>Responsible Organisation: NHS England</b></p>	<p>92.7% (2013-14)</p>	<p>95% Rank 1 / 4 in Thames Valley</p>
<p><b>11.2</b> At least 95% children receive dose 2 of MMR (measles, mumps, rubella) vaccination by age 2 (currently 92.5%) and no CCG locality should perform below 94% <b>Responsible Organisation: NHS England</b></p>	<p>88.3% (2013-14)</p>	<p>92.1% Rank 2/4 in TV</p>
<p><b>11.3</b> – At least 60% of people aged under 65 in “risk groups” receive flu vaccination (baseline from 2014-15 to be confirmed) <b>Responsible Organisation: NHS England</b></p>	<p>52.3% (2013-14)</p>	<p>51.9% Rank 3 /4 in TV</p>
<p><b>11.4</b> At least 90% of young women to receive both doses of HPV vaccination. <b>Responsible Organisation: NHS England</b></p>	<p>86.7% (2013-14)</p>	<p>92.5% (2013-14)</p>