# Health Improvement Board 19 November 2020

## **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 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 over-arching priorities of:
  - A good start in life
  - Living well
  - Ageing well
  - Tackling Wider Issues that determine health

#### **Current Performance**

- 3. A table showing the agreed measures under each priority, expected performance and the latest performance is attached.
- 4. For all indicators it is clear which quarter's data is being reported on. This is the most recent data available.
- 5. Some areas of work will be monitored through achievement of milestones. These are set out on page 4 of this report. For Q1 and Q2 achievement progress is shown for Whole Systems Approach to Obesity and Mental Wellbeing.
- 6. The latest update for some indicators relates to 2019/20; therefore, RAG rating for those indicators refers to 2019/20 targets. Performance for indicators included in this report can be summarised as follows:

Of the 21 indicators reported in this paper:

**5** indicators are **green** 

5 indicators are amber

6 indicators are red

- 1.12 Reduce the level of smoking in pregnancy
- 1.14 Increase the levels of Measles, Mumps and Rubella immunisations dose 2
- 2.17 Increase the number of smoking quitters per 100,000 smokers in the adult population
- 2.21i Increase the level of Cervical Screening (Percentage of the eligible population women aged 25-49) screened in the last 3.5 years
- 2.21ii Increase the level of Cervical Screening (Percentage of the eligible population women aged 50-64) screened in the last 5.5 years
- 3.18 increase the level of Breast Screening Percentage of eligible population (women aged 50-70) screened in the last three years (coverage)

# **Health Improvement Board Performance Indicators 2020/21**

	Measure	Baseline	Target 2020/21	National or Locally agreed	Update	Latest	RAG	Notes
A good start in life	1.12 Reduce the level of smoking in pregnancy	8% (Q1 18/19)	7%	L (N target <6% by 2022)	Q1 20/21	7.5%	R	
	1.13 Increase the levels of Measles, Mumps and Rubella immunisations dose 1	94.3% (Q2 18/19)	95%	N	Q1 20/21	95.2%	G	
	1.14 Increase the levels of Measles, Mumps and Rubella immunisations dose 2	92.7% (Q2 18/19)	95%	N	Q1 20/21	92.5%	R	
	1.15 Maintain the levels of children obese in reception class	7.8% (17/18)	7%	L	2019/20	6.7%	Α	Measuring stopped in March
	1.16 Reduce the levels of children obese in year 6	16.2% (17/18)	16%	L	2019/20	16.2%	Α	2020 by NHS/PHE – reporting on incomplete cohort
Living Well	2.16 Reduce the Percentage of the population aged 16+ who are inactive (less than 30 mins / week moderate intensity activity)	21% (May 2018)	18.6%	L	May-20	17.7%	А	Cherwell 24.7% Oxford 13.4% South Oxfordshire 15.0% Vale of White Horse 16.5% West Oxfordshire 19.5%
	2.17 Increase the number of smoking quitters per 100,000 smokers in the adult population	>2,337 per 100,000 (2017/18)	3,468 per 100,000	L	Q1 20/21	1,839	R	
	2.18 Increase the level of flu immunisation for at risk groups under 65 years	52.4 (2017/18)	55%	N	Sep 2019 to Feb 2020	53.2%	Α	
	2.19 % of the eligible population aged 40-74 years invited for a NHS Health Check (Q1 2016/17 to Q4 2020/21)	97% (2018/19)		L	Q2 20/21	72.8%		GP Providers requesting their targets have received them. There is a mixed picture of NHS
	2.20 % of the eligible population aged 40-74 years receiving a NHS Health Check (Q1 2016/17 to Q4 2020/21)	49% (2018/19)		L	Q2 20/21	35.9%		Health Check delivery across the county, but a return to BAU is not expected until April 2021 at the earliest date.
	2.21i Increase the level of Cervical Screening (Percentage of the eligible population women aged 25-49) screened in the last 3.5 years	68.2% (all	80%	N	Q1 20/21	66.9%	R	
	2.21ii Increase the level of Cervical Screening (Percentage of the eligible population women aged 50-64) screened in the last 5.5 years	ages) Q4 2017/18	80%	N	Q1 20/21	76.1%	R	

	Measure	Baseline	Target 2020/21	National or Locally agreed	Update	Latest	RAG	Notes
Ageing Well	3.16 Maintain the level of flu immunisations for the over 65s	75.9% (2017/18)	75%	N	Sep 2019 to Feb 2020	76.3%	G	
	3.17 Increase the percentage of those sent Bowel Screening packs who will complete and return them (aged 60-74 years)	58.1% (Q4 2017/18)	60% (Acceptable 52%)	N	Q4 19/20	54.8%	Α	
	3.18 increase the level of Breast Screening - Percentage of eligible population (women aged 50-70) screened in the last three years (coverage)	74.1% (Q4 2017/18)	80% (Acceptable 70%)	N	Q4 19/20	55.4%	R	
Tackling Wider Issues that determine health	4.1 Maintain the number of households in temporary accommodation in line with Q1 levels from 18/19 (208)	208 (Q1 2018- 29)	>208	L	Q4 19/20	198	G	Cherwell: 41 Oxford: 93 South: 19 VoWH: 19 West: 26
	4.2 Maintain number of single homeless pathway and floating support clients departing services to take up independent living	tbc	<75%	L	Q2 19/20	87.9%	G	
	4.3 Maintain numbers of rough sleepers in line with the baseline "estimate" targets of 90	90 (2018-19)	>90	L	Q3 19/20	80	G	Cherwell: 11 Oxford: 62 South: VoWH: West:
	4.4. Monitor the numbers where a "prevention duty is owed" (threatened with homelessness)	no baseline	Monitor only	-	Q4 19/20	377	,	Cherwell: 83 Oxford: 56 South: 92 VoWH: 72 West: 74
	4.5 Monitor the number where a "relief duty is owed" (already homeless)	no baseline	Monitor only	-	Q4 19/20	159	-	Cherwell: 41 Oxford: 40 South: 17 VoWH: 28 West: 33
	4.6 Monitor the number of households eligible, homeless and in priority need but intentionally homeless	no baseline	Monitor only	-	Q4 19/20	5	-	

# **Health Improvement Board Process Measures 2020/21**

Measure	Qı	uarter 1	Quarter 2				
	Process	Progress		Process	Progress		
Whole Systems Approach to Obesity	Expand the network group for the whole systems approach to healthy weight	Network group expanded to represent all focus areas of the WSA (childhood obesity, physical activity, climate action and food).	G	Develop a joint action plan	Two WSA virtual stakeholder events held on the themes of childhood obesity and physical activity to inform the action plan.  Further stakeholder events planned for climate action and food and working with schools.	G	
Mental Wellbeing	Suicide Prevention Multi-Agency Group (MAG) active and delivering to the strategy and year 1 action plan.  Mental Wellbeing Prevention Framework development following the sign up to the Concordat for Better Mental Health	The MAG last met in Feb 20 and was put on hold Mar-Sep 20. The group is reconvening in Nov 20.  The Suicide and Self Harm Prevention Strategy was published in March 20.  Prevention Framework for Mental Health published on 31st Mar 20.	G	Suicide Prevention Multi-Agency Group (MAG) active and delivering to the strategy and year 1 action plan.  Mental Health Concordat Group active and delivering to the Framework and year 1 action plan.	Year 1 action plan review to consider the impact of COVID-19 to be completed by Jan 21.  Real time suicide surveillance continues and informs work of the MAG and action plan.  Year 1 action plan review to consider the impact of COVID-19 to be completed by Dec 20.  Mental wellbeing health needs assessment in progress to inform further work.	G	