

Health and Wellbeing Outcomes Report

Report of the Chief Executive

Recommendation: It is recommended that the Devon Health and Wellbeing Board note the updated Health and Wellbeing Outcomes Report.

1. Context

This paper introduces the current detailed outcomes report for the Devon Health and Wellbeing Board, which monitors the priorities identified in the Joint Health and Wellbeing Strategy for Devon 2013-2016.

2. The Health and Wellbeing Outcomes Report

2.1 An 'updates only' version of the Health and Wellbeing Outcomes Report for January 2015 is included separately. The report is themed around the four Joint Health and Wellbeing Strategy 2013-16 priorities, and includes breakdowns by local authority, district, clinical commissioning group, inequalities characteristics and trends over time.

2.2 The following indicators have been updated since the last report:

- Children in Poverty (2012)
- Early Years Foundation Score (2013-14)
- Smoking at Time of Delivery (2013-14)
- Teenage Conception Rate (Q3 2013)
- Excess Weight in Four / Five Year Olds (2013-14)
- Excess Weight in 10 / 11 Year Olds (2013-14)
- Adult Smoking Prevalence (2013)
- Under 75 Mortality Rate – All Cancers (2011-2013)
- Under 75 Mortality Rate – Circulatory Diseases (2011-2013)
- Suicide Rate (2011-2013)

2.3 The percentage of children living in households dependent on benefits or tax credits (12.7%) is significantly below the South West (15.1%) and England (19.2%) rates and fell from 2011 levels.

2.4 The percentage of children achieving at least the expected level of development in Devon (67%) was significantly above South West (61%), local authority comparator group (60%) and England (58%) rates.

2.5 The smoking at time of delivery measure is no longer published at a local authority level. The rate for Devon (12.2%) now includes Plymouth and Torbay (where rates are typically higher), compared to 13.0% for the South West and 12.0% for England. A further breakdown is currently being sought locally.

2.6 There were 23.3 conceptions per 1,000 females aged 15 to 17 in Devon between October 2012 and September 2013. This was above the South West (21.5) and local authority comparator group rates (21.2), but below the England rate (24.8). The current Devon rate is the lowest on record.

2.7 In reception year (aged four to five), 23.4% of pupils in Devon were in the excess weight category, compared with 23.5% for the South West, 22.3% for the local authority comparator group and 22.5% for England. In year six (aged 10 to 11), 30.3% of pupils in Devon were in the excess weight category, compared with 31.0% for the South West, 30.8% for the local authority comparator group and 33.5% for England.

2.8 The latest figures suggest that 16.4% of adults in Devon smoke, which is below the South West (17.3%), local authority comparator group (16.7%) and England (18.4%) rates. Rates have fallen more rapidly for people working in routine and manual occupations, with the rate currently standing at 24.6%.

2.9 In 2013, there were 942 deaths due to cancer in persons aged less than 75 years old in Devon. The direct age standardised rate of 130.9 per 100,000 population, was below the South West (134.3), local authority comparator group (134.3) and England (144.4) rates.

2.9 In 2013, there were 500 deaths due to circulatory diseases in persons aged less than 75 years old in Devon. The direct age standardised rate of 63.8 per 100,000 population, was below the South West (67.1), local authority comparator group (66.7) and England (78.2) rates.

2.11 Around 65 deaths per year are registered as suicide or injury undetermined (open verdict) in Devon. The direct age standardised rate of 10.4 per 100,000 population, was above the South West (10.1), local authority comparator group (9.5) and England (8.8) rates.

Table 1: Indicator List and Performance Summary, January 2015

Priority	RAG	Indicator	Type	Trend	Dev/SW/Eng
1. A Focus on Children and Families	A	Children in Poverty *	Chall		
	G	Early Years Foundation Score *	Chall		
	G	Smoking at Time of Delivery *	Watch		
	A	Teenage Conception Rate *	Watch		
	-	Child/Adolescent Mental Health Access	Improve	-	-
	R	Hospital Admissions for Self-Harm, Aged 10-24	Improve		
2. Healthy Lifestyle Choices	G	Proportion of Physically Active Adults	Chall		
	A	Excess Weight in Four / Five Year Olds *	Chall		
	A	Excess Weight in 10 / 11 Year Olds *	Chall		
	A	Alcohol-Related Admissions	Watch		
	A	Adult Smoking Prevalence *	Watch		
	G	Under 75 Mortality Rate - All Cancers *	Improve		
	G	Under 75 Mortality Rate - Circulatory Diseases *	Improve		
3. Good Health and Wellbeing in Older Age	A	Incidence of Clostridium Difficile	Chall		
	G	Injuries Due to Falls	Chall		
	A	Dementia Diagnosis Rate	Chall		
	G	Feel Supported to Manage Own Condition	Watch		
	G	Re-ablement Services (Effectiveness)	Watch		
	A	Re-ablement Services (Coverage)	Watch		
	A	Readmissions to Hospital Within 30 Days	Improve		
4. Strong and Supportive Communities	A	Suicide Rate *	Chall		
	G	Male Life Expectancy Gap	Chall		
	G	Female Life Expectancy Gap	Chall		
	G	Self-Reported Wellbeing (low happiness score)	Watch		
	G	Social Contentedness	Watch		
	G	Carer Reported Quality of Life	Watch	-	
	A	Stable/Appropriate Accommodation (Learn. Dis.)	Improve		
	G	Stable/Appropriate Accommodation (Mental)	Improve		

RAG Ratings

Red	R	Major cause for concern in Devon, benchmarking poor / off-target
Amber	A	Possible cause for concern in Devon, benchmarking average / target at risk
Green	G	No major cause for concern in Devon, benchmarking good / on-target

Table 2: Priority Area Summaries, January 2015

Priority	Summary
1. A Focus on Children and Families	Child poverty levels fell between 2011 and 2012. Recorded levels of child development are above the South West and England averages. Rates of smoking at delivery are falling over time. Teenage conception rates have fallen over time, particularly in more deprived areas. Self-harm admissions in younger people are above the national average.
2. Healthy Lifestyle Choices	Higher levels of physical activity are seen in Devon. Levels of excess weight in children are above average at age 4/5 and below average at age 10/11. The narrow alcohol-related admissions rate is similar to England. Adult smoking rates are below the national average. Mortality rates are falling.
3. Good Health and Wellbeing in Older Age	Clostridium Difficile incidence aligns with South West and national rates. The gap between Devon and the South West and England for the detection of dementia has narrowed. Devon has relatively low levels of injuries due to falls. A higher proportion feel supported to manage their long-term condition in Devon. Re-ablement service effectiveness is above average, but recorded coverage is low. Readmission rates are below average but are increasing over time.
4. Strong and Supportive Communities	Suicide rates in Devon are consistently above the national average. There is a smaller gap in life expectancy between the most and least deprived communities in Devon than nationally. Self-reported wellbeing in Devon tends to be better than the national average. The proportion stating that they have as much social contact as they would like is above the national average. Quality of life for carers is in line with the national average. Devon had similar levels of people with learning disabilities in stable and appropriate accommodation than the national average, but lower rates for people with mental health issues.

3. Legal Considerations

There are no specific legal considerations identified at this stage.

4. Risk Management Considerations

Not applicable.

5. Options/Alternatives

Not applicable.

6. Public Health Impact

The Devon Health and Wellbeing Outcomes Report is an important element of the work of the board, drawing together priorities from the Joint Health and Wellbeing Strategy, and evidence from the Joint Strategic Needs Assessment. This report and the related documents have a strong emphasis on public health and other relevant health, social care and wellbeing outcomes. A number of the outcomes indicators are also drawn from the Public Health Outcomes Framework. The report also includes a specific focus on health inequalities.

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Background Papers
Nil