

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 September 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. The updated indicators are:

- Teenage Conception Rate, 2014 Q1
- Hospital Admissions for Self-Harm, Aged 10 to 24, 2013-14
- Proportion of Physically Active Adults, 2014
- Alcohol-Related Admissions, 2014-15 (narrow and broad definitions)
- Incidence of Clostridium Difficile, 2014-15
- Feel Supported to Manage Own Condition, 2014-15 Q3-Q4

2.2 There were 18.5 conceptions per 1,000 females aged 15 to 17 in Devon between July 2013 and June 2014. This was not significantly different from the South West (21.2) and local authority comparator group (21.1) rates, but significantly below the England rate (24.3). The Devon rate has fallen sharply over the last two to three years and is the lowest on record.

2.3 There were 653 hospital admissions for self-harm in persons aged 10 to 24 in Devon in 2013-14. The rate per 100,000 in Devon was 501.8, which is below the South West rate (520.8), but above the local authority comparator group (463.1) and England (412.1) rates. Admission rates increased from 376.6 in 2007-08 to 501.8 in 2013-14.

2.4 60.3% of adults in Devon were physically active for at least 150 minutes per week in 2014. This is broadly in line with the South West (59.4%) and the local authority comparator group (58.9%) and significantly above the national (57.0%) rates. Levels of physical activity decreased slightly from 60.9% in 2013 to 60.3% in 2014.

2.5 The report now includes both the narrow definition of alcohol-related admissions, which covers admissions with an alcohol-related primary diagnosis, and the broad definition, which covers admissions with any alcohol-related primary or secondary diagnosis to capture a wider range of chronic health conditions where alcohol is a contributory factor. Using the narrow definition, the direct age standardised rate of admissions (639.7 per 100,000) is broadly in line with the South West (635.9) and England (636.1) rates but significantly above the local authority comparator group rate (597.2). Using the broad definition, the direct age standardised rate of admissions (1830.3 per 100,000) was below the South West (1985.3), local authority comparator group (1861.1), and England (2137.7) rates.

2.6 There were 354 cases of Clostridium Difficile in 2014-15 in Devon, Plymouth and Torbay. The incidence rate per 100,000 in Devon (30.8) was not significantly different from the South West (28.5), local authority comparator group (27.4) and England (26.3) rates. Infection rates increased slightly on 2013-14 levels. Within Devon infection highs were higher in the South Devon and Torbay CCG (48.7) and lower in Northern Eastern and Western Devon CCG (25.2).

2.7 In Devon during late 2014-15, 68.9% of people with a long-term condition in the GP survey felt they had enough support to manage their own condition. This is significantly higher than national (63.3%), South West (65.6%) and local authority comparator group (64.2%) rates. Rates were highest in the Mid Devon area. Rates have increased over recent years.

Table 1: Indicator List and Performance Summary, September 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		
	G	Teenage Conception Rate *	Watch		
	-	Child/Adolescent Mental Health Access Measure	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 (Narrow Definition) *	Watch		
	A	Alcohol-Related Admissions (Broad Definition) *	Watch		
	G	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 Hlth)	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, September 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 alcohol-related admissions (narrow definition) 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 significantly. 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.

Table 3: Devon compared with the Local Authority Comparator Group for all Health and Wellbeing outcome measures, September 2015

Measure	Rates			Significance		LAGG Rank / Position	
	Devon	LAGG	England	LAGG	England	Rank	Position
Life Expectancy Gap in Years (Male)	5.2	7.2	8.4	Better	Better	1 / 16	
30 Day Readmissions to Hospital (%)	10.3	11.0	11.8	Better	Better	1 / 16	
Early Years Good Development (%)	67.0%	60.0%	58.0%	Better	Better	1 / 16	
Feel Supported to Manage own Condition (%)	68.9%	64.2%	63.3%	Better	Better	1 / 16	
Life Expectancy Gap in Years (Female)	3.3	5.4	6.2	Better	Better	2 / 16	
Physical Activity (%)	60.3%	58.9%	57.0%	Similar	Better	3 / 16	
Reablement Services Effectiveness (%)	89.8%	82.6%	81.9%	Better	Better	3 / 16	
Social Connectedness	47.5%	45.2%	44.2%	Better	Better	3 / 16	
Stable Accommodation - MH (%)	54.5%	45.2%	60.9%	Better	Worse	5 / 16	
Cancer Deaths, under 75	130.9	134.3	144.4	Similar	Better	5 / 16	
Smoking at Time of Delivery (%)	12.2	12.3	12.0	Similar	Similar	6 / 15	
Carer Reported Quality of Life	8.173	8.043	8.068	Better	Better	6 / 16	
Circulatory Disease Deaths, under 75	63.8	66.7	78.2	Similar	Better	6 / 16	
Admission Rate for Accidental Falls	1766.1	1809.9	2011.0	Similar	Better	6 / 16	
Teen Conception Rate per 1,000	18.5	19.5	23.4	Similar	Better	6 / 16	
Child Poverty (%)	12.7%	13.9%	19.2%	Better	Better	7 / 16	
Excess Weight in Year Six (%)	30.3%	30.8%	33.5%	Similar	Better	7 / 16	
Adult Smoking Rate (%)	16.4%	16.7%	18.4%	Similar	Better	7 / 16	
Stable Accommodation - LD (%)	74.0%	72.1%	74.8%	Better	Similar	8 / 16	
Alcohol Admission Rate (Broad Definition)	1830.3	1861.1	2137.7	Better	Better	9 / 16	
Dementia Diagnosis Rate (%)	56.5%	56.5%	60.8%	Similar	Worse	9 / 16	
Low Happiness Score (%)	8.5%	8.6%	9.7%	Similar	Similar	9 / 16	
Excess Weight in Reception Year (%)	23.4%	22.3%	22.5%	Worse	Similar	10 / 16	
Incidence of Clostridium Difficile	30.8	27.4	26.3	Worse	Worse	12 / 16	
Hospital Admission Rate for Self-Harm	501.8	463.1	412.1	Worse	Worse	12 / 16	
Alcohol Admission Rate (Narrow Definition)	636.5	598.2	638.1	Worse	Similar	12 / 16	
Suicide Rate	10.4	9.5	8.8	Similar	Worse	13 / 16	
Reablement Services Coverage (%)	2.0%	3.4%	3.3%	Worse	Worse	15 / 16	

3. Child Sexual Exploitation

3.1 This section will contain a summary of emerging themes from the Devon Child Sexual Exploitation (CSE) scorecard. The scorecard is being developed by the CSE sub-group of the Devon Safeguarding Children Board (DSCB), with input from Devon and Cornwall Police, Devon County Council, Devon Partnership Trust and others. A senior information analyst from the Public Health Intelligence Team has been seconded on a fixed term, part-time basis to act as lead analyst for CSE data. This secondment is focused on completing the work to develop the multi-agency CSE scorecard. The analyst will work to ensure the production of qualitative information, analysis and reporting, combining information and intelligence from across all DSCB partner agencies. The first version of the scorecard has been drafted and will be made available later in September and produced thereafter on a quarterly basis. The intention is that further detail will be added to the scorecard as new processes for gathering data are established and the improved CSE risk assessment tool is implemented.

4. Legal Considerations

There are no specific legal considerations identified at this stage.

5. Risk Management Considerations

Not applicable.

6. Options/Alternatives

Not applicable.

7. 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