

HEALTH AND WELLBEING BOARD			
Report Title	Health and Wellbeing Board Performance Dashboard Exceptions Report		
Contributors	Director of Public Health	Item No.	6
Class	Part 1	Date:	01 March 2018
Strategic Context	Please see body of report		

1. Purpose

This report provides members of the Health and Wellbeing Board with an update on performance against its agreed priorities within the Health & Wellbeing Strategy.

2. Recommendations

Members of the Health and Wellbeing Board are recommended to note performance as measured by health and care indicators set out in the attached dashboard at Appendix A.

3. Strategic Context

- 3.1 The Health and Social Care Act 2012 established Health and Wellbeing Boards as a forum where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities. The activity of the Health and Wellbeing Board is focused on delivering the strategic vision for Lewisham as established in Shaping our Future – Lewisham’s Sustainable Community Strategy, and in Lewisham’s Health and Wellbeing Strategy.
- 3.2 The work of the Board directly contributes to the priority outcome in Shaping our Future that communities in Lewisham should be Healthy, Active and Enjoyable – where people can actively participate in maintaining and improving their health and wellbeing.
- 3.3 The Health and Social Care Act 2012 placed a duty on local authorities and their partner clinical commissioning groups to prepare and publish joint health and wellbeing strategies to meet needs identified in their joint strategic needs assessments (JSNAs). Lewisham’s Health and Wellbeing Strategy was published in 2013.
- 3.4 The Health and Social Care Act also required Health and Wellbeing Boards to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and wellbeing of the area.

4. Background

- 4.1 In response to the request from members of the Board, the Director of Public Health has worked alongside colleagues within Adult Social Care, Children’s Services and the Clinical Commissioning Group (CCG) to produce a dashboard of indicators which would assist members in monitoring health and wellbeing improvements across Lewisham and the effectiveness of the integrated adult care programme.

- 4.2 The dashboard also includes a number of indicators (including those on low birth weight, immunisation and excess weight) that are also included in the 'Be Healthy' priority of the Children and Young People's Partnership Plan.

5. Health and Wellbeing Board Performance Dashboard Update

- 5.1 The dashboard is based on metrics drawn from the Quality and Outcomes (Primary Care), Public Health, NHS and Better Care Fund Frameworks. These metrics have been selected to assist members in their assessment of the impact and success of the plans and activities in relation to the Health and Wellbeing Strategy.

- 5.2 Updated indicators since the previous period of data availability ('worsening' indicators are marked with a red arrow in the dashboard in Annex A) which are significantly worse than England are highlighted below, together with a commentary on actions being taken to improve the position.

5.3 Overarching Indicators of Health & Wellbeing

The **premature CVD mortality rate in Lewisham has increased from 80.4 to 81.8** (DSR per 100,000) resulting in Lewisham again being significantly higher than England. This bucks a previous downwards trend since 2000. Work is continuing to counter this as the CCG has commissioned One Health Lewisham (OHL) to improve the prevalence and management for people with diabetes and hypertension. This includes ensuring the establishment of risk registers, thresholds for raised blood sugar and blood pressures and referral to the diabetes prevention programme for people with pre-diabetes and relevant services for newly diagnosed. OHL is also now commissioned to provide clinical follow up and self-management plans for people with CVD risk above 20% following a NHS Health Check. Follow up includes the offer of statin medication and recording of blood pressure as well as brief intervention and a referral to lifestyle services. The majority of Lewisham GP surgeries and 16 pharmacies offer NHS Health Checks. Plans are in place to offer Health Checks via the GP Extended Access Service which will increase the availability of appointments for evenings and weekends.

Both **male and female life expectancy** have increased and are both comparable to the national average. There was also improvement in **Low Birth weight of all babies**, which is now in line with England.

5.5 Priority Objective 1: Achieving a Healthy Weight

A new methodology has been introduced regarding collection of the **adult excess weight** indicator, hence no trend data is available. Lewisham is seen to be in line with the national average.

New figures regarding **children with excess weight** have been released, these show a marginal improvement for children in Reception year but an increase for those in Year 6, meaning Lewisham remains significantly higher on this indicator than the national average in 2016/17. However the proportion of Year 6 pupils who are obese has decreased. Work on the Whole System Approach to Obesity continues, including specific actions on supporting schools to get the Bronze Healthy Schools Award; the Daily Mile is now taking place in 22 schools, 17 schools have become Sugar Smart and Public Health are working with the school catering provider to increase school meal uptake. Further work is also taking place with the School Nurse and Oral Health Team to coordinate work in schools.

Maternal obesity has also increased. As this is local data provided by LGT we do not have benchmarking, however this is illustrating an upwards trend and now almost half of women weighed at their first midwife appointment are carrying excess weight. Action being taken includes the implementation of a LGT pathway for women with a BMI over 35 in which Midwives receive additional training in giving advice on healthy eating and physical activity. Weight Watchers and Slimming World have also been commissioned to accept referred pregnant women for additional support. Further work is continuing to encourage Pregnancy Plus midwives to incorporate physical activity into their programme. The Maternity Voices Partnership are also planning a free weekly walk to prevent parental isolation and improve mental health and wellbeing.

5.6 Priority Objective 2: Increasing the number of people who survive colorectal, breast and lung cancer for 1 and 5 years

The Under 75 cancer mortality rates have decreased slightly, however it remains significantly higher than England. This difference continues to be largely due to male cancer mortality, with lung and bowel cancer deaths increasing. Nationally there has been a general trend of decline over the past 10 years.

There is no new data available on cancer screening coverage.

A joint strategic needs assessment (JSNA) for cancer has now been completed by Public Health. This suggests areas to explore going forward to improve outcomes: Filling gaps in knowledge (particularly around our increased burden in mortality in our under 75 year old male population and issues surrounding ethnicity); Improving public awareness; Improving early diagnosis; Continue to increase uptake of screening and Increased training opportunities for healthcare professionals.

5.7 Priority Objective 3: Improving Immunisation Uptake

The Over 65 flu immunisation uptake rate has fallen slightly and remains below the England average. At 67.5% it is also below the national target of 75%.

The HPV vaccine uptake rate in 2015/16 remained significantly lower than England. However the team providing the vaccinations has since changed to improve the delivery of the service this year, which is seen to be having a significant impact on the outcomes. Schools with the lowest uptake figures are being targeted in order to improve delivery. Communication from schools already takes place, with the immunisation team providing letters for the schools to use from a standard template. They also provide additional follow up communications on catch-up sessions outside of the school to help uptake.

New benchmarking data is not available for **MMR2 uptake**, however local data shows sustained performance well over 80%.

5.8 Priority Objective 4: Reducing Alcohol Harm

No new data is available since the last report. Practitioners continue to be trained in Brief Interventions and Making Every Contact Count.

5.9 Priority Objective 5: Preventing the uptake of smoking among children and young people and reducing the numbers of people smoking

The smoking prevalence in 2016 among 18+ adults (current smokers) has returned to be significantly higher than England at 21.2%. Public Health is therefore continuing to lead on partnership work to reduce smoking and its impact in

Lewisham via the Smokefree Future Delivery Group (SFDG). The SFDG is currently setting out its annual delivery plan for 2018-19 to incorporate aspirations from the new Tobacco Control Plan for England published in 2017. In line with the national plan, the SFDG is likely to include actions on the role of the NHS in contributing to smoking cessation particularly by delivering brief advice around smoking to patients, in addition to maximising the effectiveness of smoke free initiatives in the borough.

The rate of 4 week smoking quitters (crude per 100,000) has decreased since the last reporting period, and is now similar to the London and England averages. The local stop smoking service has recently launched a new online quitting smoking portal for smokers to access support to quit online. The online portal allows smokers who live, work or study in Lewisham to sign up on-line to receive digital support including access to behavioural support resources, motivational text messages, and medications. The system has links with the specialist service if a smoker requires more support at any point in their journey. This new initiative will help to mitigate against the declining number of quitters in Lewisham by offering an accessible and convenient option to support residents to quit smoking.

Smoking status at time of delivery has increased marginally but remains well below the national average.

5.10 Priority Objective 6: Improving mental health and wellbeing

Prevalence of Serious Mental Illness has remained stable, yet significantly higher than England. Prevalence of Depression in Adults has risen from 7.0% in 2015/16 to 7.5% in 2016/17, however remains significantly lower than England.

The 2017 Annual Public Health Report is focused on [Mental Health](#). The aim of the report was to provide user-friendly information about the levels of mental health and wellbeing in Lewisham, including information about risk and protective factors. The content can be summarised as:

- Providing real-life stories from Lewisham residents across the course of life about living with and through mental ill health.
- Providing information on the strategies, initiatives and interventions being delivered in Lewisham that aim to promote mental wellbeing and prevent mental ill health.
- Providing information about where residents can seek help if concerned about their mental ill health to ensure that mental ill health is identified and treated at the earliest possible opportunity.

5.11 Priority Objective 7: Improving sexual health

All the sexual health indicators have improved since the last reporting period:

- Rate of chlamydia diagnoses per 100,000 young people aged 15-24 years
- Percentage of people presenting with a late diagnosis of HIV
- Abortion rate per 1,000 women aged 15-44
- Teenage pregnancy rate (15-17 year olds)

However the Abortion rate remains significantly higher than England.

5.12 Better Care Fund Performance Metrics

No new data is available in the current format. The board may wish to discuss which indicators could be used going forward to reflect/monitor strategic Priority 8 (Delaying and reducing the need for long term care and support) and Priority 9 (Reducing the number of emergency admissions for people with long-term conditions).

6. Financial implications

There are no specific financial implications arising from this report. A range of activity designed to improve performance against these indicators is funded from the Public Health budget using the ring fenced Public Health Grant. This expenditure is reviewed regularly and reallocation to address indicators with poor performance is possible.

7. Legal implications

As part of their statutory functions, members of the Board are required to encourage persons who arrange for the provision of any health or social services in the area to work in an integrated manner, for the purpose of advancing the health and well-being of the area and to encourage persons who arrange for the provision of health-related services in its area to work closely with the Health and Wellbeing Board.

8. Crime and Disorder Implications

There are no specific crime and disorder implications arising from this report or its recommendations

9. Equalities Implications

There are no specific equalities implications arising from this report or its recommendations, but the dashboard highlights those areas where health inequalities exist in Lewisham and can be monitored.

10. Environmental Implications

There are no specific environmental implications arising from this report or its recommendations.

11. Summary and Conclusion

Challenges remain around a number of indicators. Work on improving HPV vaccine uptake is of particular note, highlighting how specific and coordinated targeting can improve vaccine uptake.

Although there are a number of indicators that show a decline in performance, issues have been identified and actions are being taken forward.

If you have any difficulty in opening the links above or those within the body of the report, please contact Stewart Snellgrove (Stewart.Snellgrove@lewisham.gov.uk; 020 8314 9308), who will assist.

If there are any queries on this report please contact Patricia Duffy, Health Intelligence Manager, Public Health, Community Services Directorate, Lewisham Council, on 020 8314 7990 or by email patricia.duffy@lewisham.gov.uk