Health and Wellbeing Outcomes Report

Report of the Chief Officer for Communities, Public Health, Environment and Prosperity

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 updated outcomes report for the Devon Health and Wellbeing Board, which monitors the priorities identified in the Joint Health and Wellbeing Strategy for Devon 2016-2019.

2. Summary of the Health and Wellbeing Outcomes Report, December 2017

2.1 An 'updates only' version of the Health and Wellbeing Outcomes Report for December 2017 is included separately. The report is themed around the five Joint Health and Wellbeing Strategy 2016-19 priorities, and includes breakdowns by local authority, district, clinical commissioning group, inequalities characteristics and trends over time. 14 indicators have been updated with new data since the September 2017 report covering the following areas:

- Excess Weight in Four / Five Year Olds, 2016-17 Levels of excess weight in reception year children (22.8%) are similar to the South West, comparator group and national rates.
- Excess Weight in 10 / 11 Year Olds, 2016-17 Levels of excess weight in year six (29.3%) were below South West, comparator group and national rates and were significantly lower than England in East Devon, Exeter, North Devon, the South Hams, Teignbridge and West Devon.
- **Teenage Conception Rate, Q2 2016** Conceptions to under 18s have fallen in Devon and are similar to South West and comparator group rates. Rates are significantly higher in Teignbridge.
- Excess Weight in Adults, 2015-16 According to the Active People Survey, 61.6% of the adult population in Devon are overweight or obese, which is broadly similar to South West, comparator group and national rates.
- **Proportion of Physically Active Adults, 2015-16** This updated measure includes physical activity as a mode of transportation to work, and reveals that 69.9% of the Devon adult population are active for at least 150 minutes per week, which is above regional and national rates.
- Diet Fruit and Veg '5-a-day', 2015-16 64.3% of the adult population in Devon consumed five or more portions of fruit and vegetables per day, which is significantly above South West, comparator group and national rates.
- **Mortality rate from preventable causes, 2014-2016** The age-standardised mortality rate in Devon (159.7 per 100,000) is significantly below South West, comparator group and England rates. However, the rate of decline has slowed in recent years and inequalities persist.
- **Reablement Services (Effectiveness), 2016-17** In Devon, 86.8% of older people were still at home 91 days after discharge from hospital into reablement services, which is significantly above the South West, comparator group and national rates.
- **Reablement Services (Coverage), 2016-17** In 2016-17, 1.8% of older people discharged from hospital in Devon were offered reablement services which is significantly lower than South West, comparator group and national rates.
- **Deaths in Usual Place of Residence, 2016** 54.9% of Devon residents dying in 2016 did so in their usual place of residence, which is significantly above South West, comparator group and national rates. Rates are increasing over time and are highest in West Devon (61.5%).
- Stable and Appropriate Accommodation (Learning Disabilities), 2016-17 78.4% of adults with a learning disability in Devon were living in their own home or with family, which is above South West, comparator group and national rates.
- Stable and Appropriate Accommodation (Mental Health Clients), 2016-17 60.0% of adults in contact with a secondary mental health service were living in stable and appropriate accommodation, which is below the South West, but above comparator group and national rates.
- **Suicide Rate, 2014-2016** There are around 70 suicides per annum in Devon, with rates remaining around or slightly above the national average. Rates are significantly higher in males.
- Social Contentedness, 2016-17 44% of social care users reported being satisfied with their social situation, which is below South West, comparator group and national rates.

2.2 Further details for these indicators are included in the separate report. The following tables in this paper provide a quick summary of overall findings:

- Table 1 provides a summary of the indicators, the latest available rate, an indication of trend and a quick comparison between Devon, the South West and England.
- Table 2 gives a short textual summary covering the five priority areas.
- Table 3 compares the indicators with Devon's local authority comparator group, a group of similar local authorities, and is ordered according to Devon's ranking. The darker purple shading shows the position of Devon in the local authority comparator (1 is best and 16 is worst) and the lighter purple shading shows Devon's ranking when the report was introduced in December 2016.

Table 1: Indicator List and Performance Summary, December 2017

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Priority	RAG	Indicator	Rate	Trend	Dev/SW/Eng
	Α	Children in Poverty	14.3%	\leq	
1. Children,	G	Early Years Foundation Score	72.2%		
Young	Α	Excess Weight in Four / Five Year Olds *	22.8%	$\sim \sim$	
People and	Α	Excess Weight in 10 / 11 Year Olds *	29.3%	\sim	
Families	Α	GCSE Attainment	58.6%	\sim	
rannes	G	Teenage Conception Rate *	16.3	~	
	A	Alcohol-Specific Admissions in under 18s	51.8		
	G	Adult Smoking Prevalence 12.6%			
	G	Excess Weight Adults *	61.6%	-	
	G	Proportion of Physically Active Adults *	69.9%	-	
2. Living Well	Α	Alcohol-Related Admissions	605.0	\langle	
2. Living Weir	G	Fruit and Vegetable Consumption (Five-a-day) *	64.3%	-	
	G	Mortality Rate from Preventable Causes *	159.7		
	G	Male Life Expectancy Gap	5.9	\sim	
	G	Female Life Expectancy Gap	3.9	\langle	
	G	Feel Supported to Manage Own Condition	67.5%		
3. Good	G	Re-ablement Services (Effectiveness) *	86.8%		
Health and	A G	Re-ablement Services (Coverage) *	1.8%	\sim	
Wellbeing in	G	Healthy Life Expectancy Male	65.3		
Older Age	G	Healthy Life Expectancy Female Injuries Due to Falls	66.5		
ũ	G		1788.0 54.9%	$\overline{}$	
	A	Deaths in usual place of residence *	12.0		
	Ā	Domestic Violence incidents per 1,000 population Stable/Appropriate Accommodation (Learn. Dis.) *	78.4%		
4. Strong and		Re-offending rate	22.7%	\sim	
Supportive	A	Rough sleeping rate per 1,000 households	0.22	\sim	
Communities	Ā	Dwellings with category one hazards	15.4%	. ~	
Communics	A	Private sector dwellings made free of hazards	1.0%		
	R	Fuel Poverty	12.2%		
	Α	Emotional Wellbeing Looked After Children	16.7	\sim	
	R	Hospital Admissions for Self-Harm, aged 10 to 24	614.1		
5. Life Long Mental Health	Α	Gap in employment rate (mental health clients)	73.2%		
	G	Stable/Appropriate Accommodation (Mental Hlth) *	60.0%	\sim	
	G	Self-Reported Wellbeing (low happiness score %)	7.7%	\sim	
	Α	Suicide Rate *	10.8	\sim	
	Α	Social Contentedness *	44.0%	\sim	
	R	Estimated Dementia Diagnosis Rate (65+)	60.6%	-	

* updated indicators

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Red	R	Major cause for concern in Devon, benchmarking poor and/or trend sharply worsening
Amber	Α	Possible cause for concern in Devon, benchmarking average and/or trend not improving
Green	G	No major cause for concern in Devon, benchmarking good and/or trend improving

Table 2: Priority Area Summaries, December 2017

Priority	Summary		
1. Children, Young	Teenage conception rates are falling and levels of development at school entry are		
People & Families	improving. Variations in excess weight, poverty, GCSE attainment and alcohol harm persist.		
2. Living Well	Smoking rates and deaths from preventable causes are falling, and levels of excess weight, physically activity and fruit and vegetable consumption compare favourably with similar areas.		
3. Good Health and Wellbeing in Older Age	Deaths at home, healthy life expectancy, falls and GP support compare well in Devon. However, whilst the service is effective, the coverage of re-ablement services is lower.		
4. Strong and	Housing-related measures, including fuel poverty, dwelling hazards and rough sleeping levels		
Supportive	are a cause of concern in Devon.		
Communities			
5. Life Long Mental	Whilst general wellbeing is better, poorer outcomes are evident for those with mental health		
Health problems, including suicide rates, self-harm, and the mental wellbeing of local service			

Table 3: Devon compared with the Local Authority Comparator Group for all Health and Wellbeing outcome measures, December 2017

						Now 2016			
					Significance		LACG Rank / Position		
Measure	Devon	LACG	England	LACG	England	Rank	Position		
Life Expectancy Gap in Years (Female)	3.9	5.4	6.4	Better	Better	1 / 16			
Domestic Violence incidents per 1,000 pop'n	12.0	19.3	22.1	Better	Better	1 / 16			
Deaths in usual place of residence (%)	54.9%	48.9%	45.8%	Better	Better	1 / 16			
Physical Activity (%)	69.9%	66.4%		Better	Better	1 / 16			
Feel Supported to Manage own Condition (%)	67.5%	64.3%	63.3%	Better	Better	2 / 16			
Fruit and Veg 5-a-day (%)	64.3%	60.5%	56.8%	Better	Better	3 / 16			
Life Expectancy Gap in Years (Male)	5.9	6.8	8.2	Better	Better	3 / 16			
Early Years Good Development (%)	72.2%	70.2%		Better	Better	3 / 16			
Excess Weight in Year Six (%)	29.3%	31.4%	34.2%	Better	Better	3 / 16			
Adult Smoking Rate (%)	12.6%	15.3%		Better	Better	4 / 16			
Admission Rate for Accidental Falls	1788.0	1954.8			Better	5/16			
Private sector dwellings made free of hazards	1.0%	0.9%		Better	Worse	5/16			
Reablement Services Effectiveness (%)	86.8%	82.7%	82.5%	Better	Better	5 / 16			
Child Poverty (%)	14.3%	15.2%		Better	Better	6 / 16			
Re-offending rate (%)	22.7%	23.7%		Similar	Better	6 / 16			
Teenage Conception Rate per 1,000	16.3	17.5			Better	6 / 16			
Stable Accommodation - LD (%)	78.4%	75.9%			Better	6 / 16			
Preventable Deaths, under 75	159.7	164.7		Better	Better	7 / 16			
Low Happiness Score (%)	7.7%	8.1%			Similar	7 / 16			
GCSE Attainment (%)	58.6%	58.0%			Similar	7 / 16			
Healthy Life Expectancy (Female)	66.5			Similar	Better	7 / 16			
Healthy Life Expectancy (Male)	65.3	65.2		Similar	Better	8 / 16			
Stable Accommodation - MH (%)	60.0%			Better	Better	9 / 16			
Alcohol Admission Rate (Narrow Definition)	605.0				Better	9 / 16			
Suicide Rate	10.7	10.8			Similar	9 / 16			
Excess Weight in Reception Year (%)	22.8%	22.8%		Similar	Similar	9 / 16			
Excess Weight in Adults (%)	61.6%	61.5%			Similar	10 / 16			
Reablement Services Coverage (%)	1.8%	2.1%		Worse	Worse	10 / 16			
Social Connectedness	44.0%	47.2%		Worse	Worse	13 / 16			
Rough Sleeping rate per 1,000 dwellings	0.22	0.15		Worse	Similar	13 / 16			
Alcohol-specific Admissions in under 18s	51.8			Worse	Worse	13 / 16			
Hospital Admission Rate for Self-Harm	614.1	507.6		Worse	Worse	13 / 16			
Fuel Poverty (%)	12.2%	10.4%		Worse	Worse	13 / 16			
Mental Health Looked After Children	16.7	14.8		Worse	Worse	14 / 15			
Dementia Diagnosis Rate (%)	60.6%			Worse	Worse	14 / 16			
Dwellings with category one hazards	15.4%	11.5%		Worse	Worse	14 / 16			
Gap in employment rate (mental health clients)	73.2%	68.4%	67.2%	Worse	Worse	15 / 16			

3. Further analysis: self-harm admissions

3.1 A summary of the findings from the Public Health England South West Knowledge and Information Service investigation of high levels of self-harm admissions in the region was due to be included in this report. However, the report, originally due for an Autumn publication, has been delayed and is now expected in early 2018. A detailed summary of these findings will be included in this paper as soon as this is available.

3.2 Pending this detailed review, the following issues have been identified to date through local analysis and the Devon Self-Harm Health Needs Assessment:

- Rates of both self-harm admissions and average lengths of stay are significantly above the national average in Devon
- Self-harm admission rates in the South West are similar to Devon and higher than the England average, with the highest rates in Torbay, Poole, Swindon and Somerset

- Initial regional analysis has revealed a higher level of repeat admissions in the region influence higher admission rates, rather than a higher prevalence of self-harm
- Admission rates are significantly higher in more deprived areas and in females, with females in the most deprived areas of Devon 10 times more likely to be admitted for self-harm than males in the least deprived areas
- Analysis of individual cases and pathways highlight specific challenges including the interrelationships between services, and the impact of delays in connecting support services together which both increase the risk of repeat admission
- The Devon Self-Harm Health Needs Assessment 2015 made a number of observations regarding the local situation highlighting the importance of:
 - Clear care pathways and joint working protocols shared between agencies
 - A focus on prevention and intervention, focused on children and families
 - o Support for professionals in terms of staff training and awareness raising
 - o Appropriate levels of out-of-hours psychiatry services and acute inpatient beds
 - Monitoring of data on self-harm and further research into needs and risk factors.

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.

Dr Virginia Pearson

CHIEF OFFICER FOR COMMUNITIES, PUBLIC HEALTH, ENVIRONMENT AND PROSPERITY DEVON COUNTY COUNCIL

Electoral Divisions: All

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Background Papers Nil