

# HEALTH AND WELLBEING OUTCOMES REPORT 2016-19 (December 2018)







Priority and Indicator	Time Period	Devon	SW	LACG	Eng	Devon Trend	Change	East Devon	Exeter	Mid Devon	North Devon	South Hams	Teignbridge	Torridge	West Devon	Guide	Source
<b>1. Children, Young People and Families</b>																	
Children in Poverty	2015	11.9%	13.7%	12.9%	16.8%			10.3%	13.2%	11.3%	12.7%	10.1%	11.9%	15.1%	11.7%	Lower is better	PHOF 1.01
Early Years Foundation Score	2017	71.0%	70.5%	71.1%	70.7%			74.7%	70.2%	70.3%	74.0%	74.1%	72.1%	63.9%	69.1%	Higher is better	DforE/Babcock LDP
Excess Weight in Four / Five Year Olds	2016/17	22.7%	23.1%	22.9%	22.6%			22.3%	19.8%	24.2%	24.3%	20.9%	23.6%	25.4%	21.9%	Lower is better	PHOF 2.06(i)
Excess Weight in 10 / 11 Year Olds	2016/17	29.1%	30.1%	31.3%	34.2%			26.5%	30.0%	34.0%	28.8%	27.9%	30.0%	31.3%	27.1%	Lower is better	PHOF 2.06(ii)
GCSE Attainment	2016/17	65.0%	64.1%	65.2%	59.1%			60.7%	64.2%	69.9%	61.4%	77.7%	59.2%	64.2%	72.0%	Higher is better	D for E
Teenage Conception Rate	2016	16.40	15.80	16.66	18.8			20.10	18.00	14.30	15.00	13.70	18.40	17.20	8.20	Lower is better	PHOF 2.04
Alcohol-Specific Admissions in under 18s	2016/17	45.53	44.41	36.92	34.2			59.33	60.95	-	47.49	41.38	50.38	48.86	-	Lower is better	LAPE


<b>2. Living Well</b>																	
Adult Smoking Prevalence	2017	13.5%	13.7%	13.8%	14.9%			9.2%	12.4%	16.9%	15.3%	16.2%	16.3%	15.4%	4.9%	Lower is better	PHOF 2.14
Excess Weight Adults	2016/17	57.4%	60.3%	61.4%	61.3%			61.4%	54.0%	63.5%	59.0%	56.5%	55.5%	56.8%	55.1%	Lower is better	PHOF 2.12
Proportion of Physically Active Adults	2016/17	73.9%	70.4%	67.6%	66.0%			74.6%	78.8%	67.0%	74.2%	72.4%	75.2%	72.0%	71.4%	Higher is better	PHOF 2.13
Alcohol-Related Admissions	2016/17	601.20	650.41	678.40	636.40			540.1	655.3	541.2	734.5	542.2	633.8	680.1	566.4	Lower is better	PHOF 2.18
Fruit and Vegetable Consumption (Five-a-day)	2016/17	66.4%	63.1%	60.6%	57.4%			70.9%	64.2%	61.4%	66.3%	70.4%	64.7%	66.0%	65.1%	Higher is better	PHOF 2.11
*Mortality Rate from Preventable Causes	2015-17	161.03	165.96	164.60	181.55			143.23	197.45	151.97	184.46	136.58	158.52	175.96	153.75	Lower is better	PHOF 4.03
Male Life Expectancy Gap	2014-16	5.80	7.50	7.08	9.30			5.40	7.00	6.00	7.30	2.40	3.90	7.20	1.60	Lower is better	PHOF 0.02 (iii)
Female Life Expectancy Gap	2014-16	4.00	5.20	5.41	6.40			2.70	6.70	2.70	4.00	3.40	5.50	5.10	2.80	Lower is better	PHOF 0.02

<b>3. Good Health and Wellbeing in Older Age</b>																	
Feel Supported to Manage Own Condition	2017/18	85.1%	82.7%	81.8%	79.4%	-	- ^	83.3%	86.1%	85.5%	85.6%	84.1%	85.7%	84.1%	86.9%	Higher is better	NHS OF 2.1
*Re-ablement Services (Effectiveness)	2017/18	82.6%	80.2%	82.3%	82.9%			77.5%	79.5%	79.5%	76.1%	97.8%	81.9%	87.1%	94.6%	Higher is better	ASCOF 2B Part 1
*Re-ablement Services (Coverage)	2017/18	1.8%	2.6%	2.1%	2.9%			-	-	-	-	-	-	-	-	Higher is better	ASCOF 2B Part 2
Healthy Life Expectancy Male	2014-16	66.69	64.50	64.99	63.33			-	-	-	-	-	-	-	-	Higher is better	PHOF 0.01
Healthy Life Expectancy Female	2014-16	65.85	65.10	65.49	63.85			-	-	-	-	-	-	-	-	Higher is better	PHOF 0.01
Injuries Due to Falls	2016/17	1731.2	2009.0	1881.2	2113.81			1563.4	1779.6	1448.9	1729.3	1770.7	2057.7	1765.7	1687.0	Lower is better	PHOF 2.24 (i)
Deaths in usual place of residence	2016	54.9%	51.8%	49.2%	45.8%			56.4%	50.2%	53.4%	57.6%	55.0%	52.1%	55.8%	61.5%	Higher is better	End of Life CP/PCMD

<b>4. Strong and Supportive Communities</b>																	
Domestic Violence incidents per 1,000 population	2016/17	14.79	18.53	19.44	22.53			13.01	20.1	13.5	18.9	9.3	15.4	13.2	10.9	Lower is better	PHOF 1.11
*Stable/Appropriate Accommodation (Learn. Dis.)	2017/18	76.0%	75.5%	74.2%	77.2%			82.1%	84.3%	77.0%	76.5%	81.5%	80.9%	80.0%	68.2%	Higher is better	ASCOF 1G, PHOF 1.6
Re-offending rate	2014	22.7%	24.5%	23.7%	25.4%			24.5%	28.0%	19.4%	24.0%	17.2%	23.6%	16.7%	11.0%	Lower is better	Ministry of Justice
Rough sleeping rate per 1,000 households	2017	0.23	0.24	0.16	0.20			0.10	0.65	0.09	0.49	0.18	0.05	0.13	0.00	Lower is better	DCLG
Dwellings with category one hazards	2014/15	15.4%	15.6%	11.5%	10.4%			14.7%	9.4%	17.3%	17.7%	15.8%	13.4%	26.2%	13.8%	Lower is better	LAHS
Private sector dwellings made free of hazards	2014/15	1.0%	1.0%	0.9%	1.2%			1.1%	1.7%	1.1%	1.9%	0.4%	1.5%	0.1%	0.5%	Higher is better	LAHS
Fuel Poverty	2016	10.9%	10.2%	10.4%	11.4%			9.6%	11.6%	11.0%	11.6%	10.1%	10.5%	12.4%	11.7%	Lower is better	PHOF 1.17


<b>5. Life Long Mental Health</b>																	
Emotional Wellbeing Looked After Children	2016/17	16.80	15.40	15.01	14.10			-	-	-	-	-	-	-	-	Lower is better	PHOF 2.08(i)
Hospital Admissions for Self-Harm, aged 10 to 24	2016/17	609.61	581.84	461.22	404.62			658.73	433.7	402.4	812.9	490.9	706.8	1032.5	721.8	Lower is better	PHOF 2.10
Gap in employment rate (mental health clients)	2015/16	73.2%	68.0%	68.4%	67.2%			-	-	-	-	-	-	-	-	Lower is better	APS
*Stable/Appropriate Accommodation (Mental Hlth)	2017/18	60.0%	66.0%	54.1%	54.0%			-	-	-	-	-	-	-	-	Higher is better	ASCOF 1H, PHOF 1.6
Self-Reported Wellbeing (low happiness score %)	2016/17	7.2%	8.6%	8.1%	8.5%			-	-	-	-	-	-	-	-	Lower is better	PHOF 2.23
*Suicide Rate	2015-17	10.46	10.62	10.49	9.57			7.94	14.30	8.64	13.19	7.88	10.58	12.39	11.48	Lower is better	PHOF 4.10
*Social Contentedness	2017/18	42.8%	46.0%	46.8%	46.0%			-	-	-	-	-	-	-	-	Higher is better	PHOF 1.18
Estimated Dementia Diagnosis Rate (65+)	2018	59.4%	61.8%	63.5%	67.5%			62.9%	69.3%	50.5%	59.4%	44.7%	62.8%	58.0%	57.3%	Higher is better	PHOF 4.16

Key Symbols		Significance		Trend over time difference	
*	Updated indicator		Significantly higher		Worsening
-	Data not available		Not significantly different		Little/no change
#	Value missing due to small sample size		Significantly lower		Improving
***	Value to be sourced	Significance compared to England figure			
^	Change in methodology				
^^	National method for calculating Confidence Intervals are being revised				



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# HEALTH AND WELLBEING OUTCOMES REPORT 2016-19 (December 2018)

## Overview

The public health outcomes framework sets the context and 'strategic direction' for the new public health system with the vision of 'improving and protecting the nation's health while improving the health of the poorest fastest'. There are two overarching indicators concerning healthy life expectancy and life expectancy, and four domains with 66 further indicators, and around 130 sub-indicators. The domains are improving the wider determinants of health, health improvement, health protection, and healthcare public health. A prioritisation exercise was completed in 2013 and updated in 2016 which looked at performance, human impact, and financial costs for these indicators and the prioritisation grid which lists out all indicators is available at [www.devonhealthandwellbeing.org.uk/jsna/performance/phof](http://www.devonhealthandwellbeing.org.uk/jsna/performance/phof)

Indicators which have a large impact in terms of numbers affected and impact, or which are high spend areas for Public Health Devon, as well as indicators for areas where performance is poorer than similar areas or deteriorating and improvements to outcomes are required were selected for be covered by this report.

Other indicators covering areas where local outcomes are positive and the scale, human impact and cost are not high are monitored through the Public Health Outcomes Tool: [www.phoutcomes.info](http://www.phoutcomes.info) and other sources.

There are six main analyses in each individual indicator report:

- Local Authority District – highlighting differences within Devon between local authority districts.
- Local Authority Comparator Group – showing Devon’s position relative to the national family of peer authorities
- Trend – showing change over time on the selected indicator compared to the South West and England,.

Indicators which have been updated since the last report are marked with an asterisk.

## LOCAL UPDATE - Current Actions

<b>2. Living Well</b>	<b>5. Life Long Mental Health</b>
<b>Mortality Rate from Preventable Causes</b> - There is a health improvement programme that provides a holistic approach to reducing risk factors for mortality from preventable causes supported by training including Making Every Contact Count (MECC) across the system and specialist services for substance misuse and stop smoking support underpinned by the One Small Step lifestyle service offer. This is supported by work to address the wider determinants of health and wider approaches to tobacco control, alcohol, healthy weight and nutrition.	<b>Stable/Appropriate Accommodation (Mental Hlth)</b> - It is recognised that there is learning from higher performing areas. We promote working between health, housing and social care to help people with a mental health need obtain stable and appropriate accommodation.
<b>3. Good Health and Wellbeing in Older Age</b>	
<b>Re-ablement Services (Effectiveness) and (Coverage)</b> - The short term services strategy includes the plan to upskill our in-house reablement teams to be able to support a wider cohort of people.	<b>Suicide Rate</b> - Public Health work closely in partnership with a wide range of statutory, voluntary and community groups and organisations to raise awareness around suicide. Suicide is preventable, so training is focussed upon dispelling myths, identifying people who may be in crisis, building confidence to have a conversation and having the knowledge to signpost and keep people safe. . We also continue to distribute the ‘It’s safe to talk about Suicide ’ leaflets, support charities delivering suicide bereavement and work in partnership to reduce the suicide rate by 10% by 2021. A topic overview report will be available on Devon's Health and Wellbeing Board website soon.
<b>4. Strong and Supportive Communities</b>	
<b>Stable/Appropriate Accommodation (Learn. Dis.)</b> - Housing plan in development with a set of commitments and actions which include reviewing information on pinpoint and proposed plans for housing survey. Commissioners and community teams developing more options for early intervention to support housing and accommodation for people with LD needs.	<b>Social Contentedness</b> - Social Isolation/Loneliness is a defined target cohort within the programme and work is being undertaken to understand this cohort better with regard to social prescribing. At least one pilot proposal has come forward under the iBCF/Life Chances banner specifically looking at Social Isolation. This proposal is going through an assessment process and requires re-submission. Several other Social Prescribing pilot projects that have come forward under the iBCF/Life Chances banner include a proportion of those who are socially isolated. These are a sub-set of another cohort i.e.: Isolated Carers or Lonely 2+Long Term conditions due to the challenges of identifying those who are ‘just isolated’. These proposals are also going through the assessment and approval process.