HEALTH AND WELLBEING OUTCOMES REPORT **9TH JUNE 2016** DEVON HEALTH AND WELLBEING BOARD **UPDATES ONLY VERSION**

The Joint Health and Wellbeing Strategy has four priority areas and the selected indicators in this report align to these. Further to this, there are three types of indicators reflecting how the board will address the issue in question. These three types are:

Challenge Indicators – these cover areas where outcomes are poor, where inequalities are widening locally, or areas which are critical to future plans to improve health and wellbeing. The board will monitor these indicators and challenge current processes and practices in lead organisations in these areas.

Monitoring 'Watching Brief' Indicators – these cover areas where local outcomes are positive or where improvements have been made. The role of the board will be to monitor these indicators and intervene should outcomes deteriorate.

Commissioning Improvement Indicators – these are indicators for areas where joint working is required to improve outcomes and where the board will need to play a more active role in coordinating local commissioning.

Joint Health and Wellbeing Strategy indicators are set out in the grid on the next page, grouped against the four Joint Health and Wellbeing Strategy priorities and three indicator types. The outcomes framework they align to is identified within brackets. Given the remit of the board, the Public Health Outcomes Framework, Adult Social Care Outcomes Framework and NHS Outcomes Framework all figure prominently.

There are six main analyses in each individual indicator report:

South West Benchmarking – showing the position of Devon relative to other upper tier or unitary authorities in the South West, the South West rate and the national rate.

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.

Clinical Commissioning Group and Locality Comparison – highlighting differences within Devon between the Clinical Commissioning Groups and sub localities.

Trend and Future Trajectory – showing change over time on the selected indicator compared to the South West and England, and where available a future trajectory based on local targets or ambitions.

Inequalities – illustrating the extent of inequalities within Devon for the selected indicator. These will typically focus on social deprivation, but may relate to age, sex or other factors as appropriate.

Indicators which have been updated since the last report are marked as:

UPDATED INDICATOR

Any queries on this report should be directed to the Devon Public Health Intelligence Team at publichealthintelligence@devon.gov.uk



Indicator List

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

RAG Ratings

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

Priority Area Summaries

- **1. A Focus on Children and Families** Child poverty levels continued to fall in 2013. Recorded levels of child development are above the South West and England averages. Rates of smoking at delivery are falling over time and are amongst the lowest in the South West. Conception rates have fallen sharply, 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 significantly. Devon has relatively low levels of injuries due to falls. A higher proportion feel supported to manage their long-term condition in Devon. Reablement 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 consistent with 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 below the national average. Quality of life for carers is in line with the national average. Devon had lower levels of people with learning disabilities in stable and appropriate accommodation than the national average, but higher rates for people with mental health issues.

	Rate			Significa	nce	LACG Rank / Position	
Measure	Devon	LACG	England	LACG England		Rank	Position
Life Expectancy Gap in Years (Male)	5.6	7.0	9.2	Similar	Better	1 / 16	
30 Day Readmissions to Hospital (%)	10.3	11.0	11.8	Better	Better	1 / 16	
Feel Supported to Manage own Condition (%)	67.8%	63.9%	63.0%	Better	Better	1 / 16	
Reablement Services Effectiveness (%)	88.8%	82.8%	82.1%	Better	Better	1 / 16	
Low Happiness Score (%)	6.3%	8.0%	9.0%	Similar	Better	1 / 16	
Life Expectancy Gap in Years (Female)	3.1	5.4	7.0	Better	Better	1 / 16	
Early Years Good Development (%)	71.6%	67.1%	66.3%	Better	Better	2 / 16	
Circulatory Disease Deaths, under 75	59.1	65.4	75.7	Better	Better	2 / 16	
Excess Weight in Year Six (%)	28.7%	31.0%	33.2%	Better	Better	2 / 16	
Adult Smoking Rate (%)	13.8%	16.8%	18.0%	Better	Better	2 / 16	
Physical Activity (%)	60.3%	58.9%	57.0%	Similar	Better	3 / 16	
Carer Reported Quality of Life	8.100	7.806	7.900	Better	Better	3 / 16	
Teenage Conception Rate per 1,000	17.1	19.8	22.8	Better	Better	4 / 16	
Admission Rate for Accidental Falls	1763.7	1903.5	2124.6	Better	Better	4 / 16	
Child Poverty (%)	12.4%	14.1%	18.6%	Better	Better	5 / 16	
Cancer Deaths, under 75	129.7	132.1	141.5	Similar	Better	6 / 16	
Alcohol Admission Rate (Broad Definition)	1792.8	1968.8	2150.3	Better	Better	6 / 16	
Stable Accommodation - MH (%)	60.9%	55.2%	59.7%	Better	Better	8 / 16	
Smoking at Time of Delivery (%)	11.2	12.1	11.4	Better	Similar	9 / 15	
Dementia Diagnosis Rate (%)	56.5%	56.5%	60.8%	Similar	Worse	9 / 16	
Alcohol Admission Rate (Narrow Definition)	611.4	627.5	640.5	Similar	Better	10 / 16	
Excess Weight in Reception Year (%)	22.4%	21.8%	21.9%	Similar	Similar	10 / 16	
Social Connectedness	42.8%	45.4%	44.8%	Worse	Worse	12 / 16	
Stable Accommodation - LD (%)	65.6%	69.9%	73.3%	Worse	Worse	12 / 16	
Incidence of Clostridium Difficile	30.8	27.4	26.3	Worse	Worse	12 / 16	
Suicide Rate	10.4	9.6	8.9	Similar	Worse	13 / 16	
Hospital Admission Rate for Self-Harm	565.1	436.2	398.8	Worse	Worse	15 / 16	
Reablement Services Coverage (%)	1.4%	2.8%	3.1%	Worse	Worse	15 / 16	

Priority 1: A Focus on Children and Families

Indicator: Teenage Conception Rate

Period: 2014 *LIDDATED INDIC

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RAG Rating				
G	Green			
	Amber			
	Red			

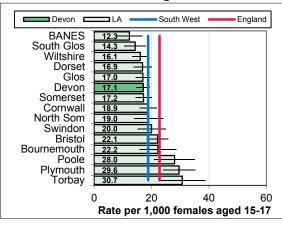
Overview

There were 211 conceptions in Devon in 2014 for females aged under 18, with around half leading to a birth. The latest rate (17.1 per 1,000 females) was below South West (18.8), local authority comparator group (19.8) and England (22.8) rates. Rates have fallen significantly over recent years. The teenage conception rate in West Devon (6.5) is significantly below the Devon rate.

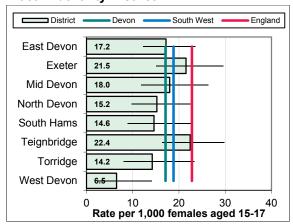
Equalities

There is a very clear link between area deprivation and teenage conception, with higher rates in the most deprived areas both locally and nationally, although rates have fallen more rapidly in the most deprived wards in recent years. Most teenage conceptions occur at the age of 17, and there are only a small proportion under the age of 16 (around 30 per annum), with less than 10 under 16 births per year.

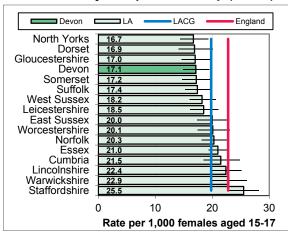
South West Benchmarking



Local Authority District



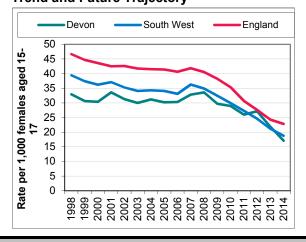
Local Authority Comparator Group (LACG)



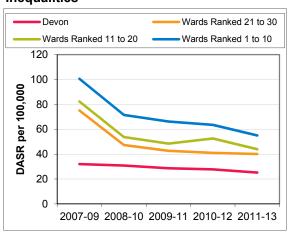
CCG and Locality Comparison



Trend and Future Trajectory



Inequalities



Priority 1: A Focus on Children and Families

Indicator: Teenage Conception Rate

Period: 2014

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Description	Conceptions in women aged under 18 per 1,000 females aged 15-17.
Source	Office for National Statistics
Update Frequency	Quarterly - 16 months in arrears (Q1 2015 due July 2016)
Outcomes Framework	Public Health Outcomes Framework Indicator 2.04
Detailed Specification	Number of pregnancies that occur to women aged under 18, that result in either one or more live or still births or a legal abortion under the Abortion Act 1967. Population aged 15 to 17 derived from Office for National Statistics Mid Year Population Estimates. Conceptions are divided by population and then multiplied by 1,000.
Chart Notes South West	Compares Upper Tier / Unitary Local Authorities in the South West Region. Error bar is 95% confidence interval.
Chart Notes Local Authority	Compares Local Authority Districts in the Devon County Council area. Error bar is 95% confidence interval.
Chart Notes Comparator	Compares Devon to similar upper tier / unitary local authorities using the 15 closest comparator councils from the Institute of Public Finance (IPF) statistical neighbours. Error bar is 95% confidence interval.
Chart Notes CCG/Locality	Rates are not currently available at a Clinical Commissioning Group and locality level.
Chart Notes Trend	Compares Devon rate with South West region and England over time. Trajectory is based on 0.5 fall in rate per annum from 2009 baseline.
Chart Notes Inequalities	Compares rates in the wards with the highest teenage conception areas with the Devon average over time.

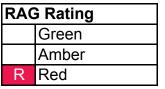


Priority 1: A Focus on Children and Families

Indicator: Hospital Admissions for Self-Harm, Aged 10 to 24

Period: 2014-15

UPDATED INDICATOR



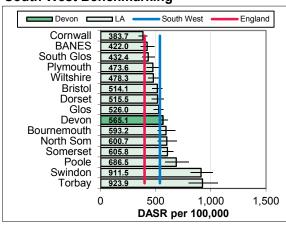
Overview

There were 736 hospital admissions for self-harm in persons aged 10 to 24 in Devon in 2014-15. The rate per 100,000 in Devon was 565.1, which is above the South West (537.9), local authority comparator group (436.2) and England (398.8) rates. Admission rates increased from 376.6 in 2007-08 to 565.1 in 2014-15. Within Devon rates were highest in Exeter, and lowest in the South Hams.

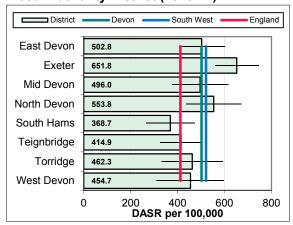
Equalities

Rates of hospital admission for self-harm are three times higher in females than males and the gap has widened in recent years. Within the 10 to 24 age group admission rates were highest in those aged 15 to 19 (775.8). Admission rates also are higher in more deprived areas, with a rate of 1031.1 in the most deprived areas compared with 427.8 in the least deprived areas in 2013-14.

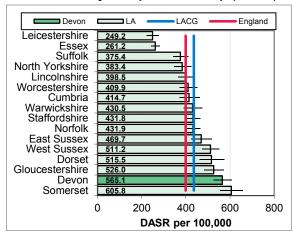
South West Benchmarking



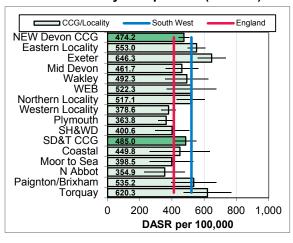
Local Authority District (2013-14)



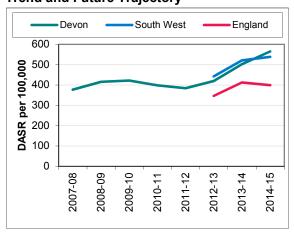
Local Authority Comparator Group (LACG)



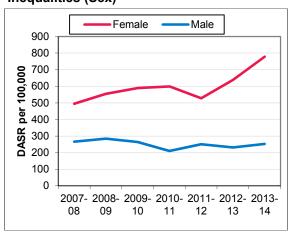
CCG and Locality Comparison (2013-14)



Trend and Future Trajectory



Inequalities (Sex)



INDICATOR SPECIFICATION

Priority 1: A Focus on Children and Families

Indicator: Hospital Admissions for Self-Harm, Aged 10 to 24

Period: 2014-15

Description	Direct Age Standardised Rate of finished admission episodes for self-harm per 100,000 population aged 10 to 24 years
Source	Source: CHIMAT Child Health Profiles http://www.chimat.org.uk/profiles Uses Hospital Episode Statistics from Health and Social Care Information Centre
Update Frequency	Annual, 2015-16 due mid-2017
Outcomes Framework	Local Proxy Indicator based on CHIMAT Child Health Profiles. Full Indicator will appear as: Public Health Outcomes Framework Indicator 2.10 when finalised.
Detailed Specification	Numerator is number of finished admission episodes in children aged between 10 and 24 years where the main recorded cause is between 'X60' and 'X84' (Intentional self-harm). Population for people aged 10 to 24, aggregated into quinary age bands. Age specific rates are calculated and multiplied by the standard population for each age group and aggregated to give the age adjusted count of deaths for the area, and divided by the total standard population and multiplied by 100,000 to give the age standardised mortality rate for the area. The 2013 revision to the European Standard Population has been used.
Chart Notes South West	Compares Upper Tier / Unitary Local Authorities in the South West Region. Error bar is 95% confidence interval.
Chart Notes Local Authority	Compares Local Authority Districts in the Devon County Council area. Error bar is 95% confidence interval.
	Compares Devon to similar upper tier / unitary local authorities using the 15 closest
Chart Notes Comparator	compares Devon to similar upper tier / unitary local authorities using the 13 closest comparator councils from the Institute of Public Finance (IPF) statistical neighbours. Error bar is 95% confidence interval.
Chart Notes CCG/Locality	Displays rates for the two Clinical Commissioning Groups in the wider Devon area, their localities, and their sub-localities. This is based on the geographic areas defined at Lower Super Output Area level www.devonhealthandwellbeing.org.uk/library/maps . Error bar is 95% confidence interval.
Chart Notes	Compares Devon rate over time. South West region and England rates not available
Trend	as historical information has been been published for the indicator.
Chart Notes Inequalities	Compares rates within Devon by sex.



Priority 2: Healthy Lifestyle Choices

Indicator: Alcohol-Related Admissions (narrow definition)

Period: 2015-16 Q3 *UPDATED INDICATOR*

RAG Rating				
	Green			
Α	Amber			
	Red			

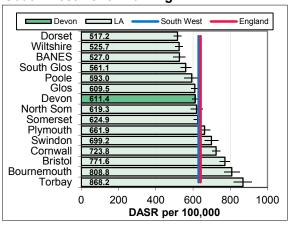
Overview

Using the narrow definition from the Public Health Outcomes Framework, there were around 4,900 alcohol-related admissions to hospital for Devon residents in the year to December 2015. The Direct Age Standardised Rate of admissions (611.4 per 100,000) is below South West (630.4), local authority comparator group (627.5) and England (640.5) rates. Rates within Devon are highest in Torridge, North Devon and Exeter. Rates are higher in more deprived areas.

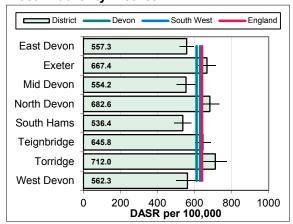
Equalities

Alcohol-Related Admission rates vary by age, with the highest rates in older age groups, reflecting the long-term effects of alcohol-use through life. Acute admissions (accidents and poisonings) are most common in young adults, mental health admissions in persons in their 40s and 50s, and admissions for chronic conditions in older age groups. Admission rates are higher for males than females.

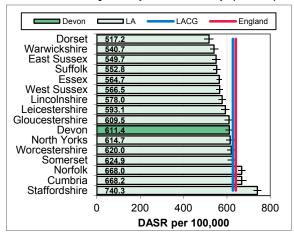
South West Benchmarking



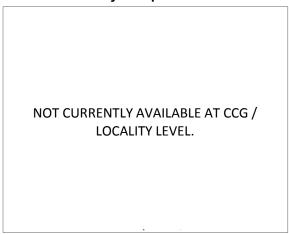
Local Authority District



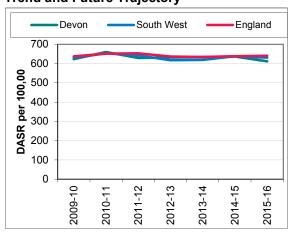
Local Authority Comparator Group (LACG)



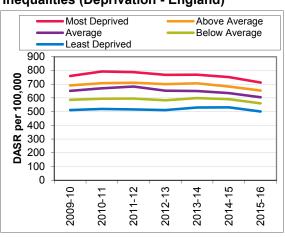
CCG and Locality Comparison



Trend and Future Trajectory



Inequalities (Deprivation - England)



INDICATOR SPECIFICATION

Priority 2: Healthy Lifestyle Choices

Indicator: Alcohol-Related Admissions (narrow definition)

Period: 2015-16 Q3

Direct age-standarised rate of hospital admissions involving an alcohol-related
primary diagnosis or an alcohol-related external cause per 100,000 population.
North West Public Health Observatory (South West Benchmarking, Local Authority District, Trend and Local Authority Comparator Group). Devon Public Health ntelligence Team (Inequalities and CCG / Locality Comparison)
Quarterly - typically six months in arrears.
Public Health Outcomes Framework Indicator 2.18
Admissions to hospital involving an alcohol-related primary diagnosis or an alcohol-related external cause. Admissions of children under 16 were only included if they had an alcohol-specific diagnosis i.e. where the attributable fraction = 1, meaning that the admission is treated as being wholly attributable to alcohol. For other conditions, estimates of the alcohol-attributable fraction were not available for children. A detailed definition of the numerator data used for this indicator can be found at: www.lape.org.uk/downloads/Lape_guidance_and_methods.pdf
Compares Primary Care Trusts in the South West Region. Will be changed to upper iter / unitary local authority analysis in 2013-14. Error bar is 95% confidence interval.
Compares Local Authority Districts in the Devon County Council area. Error bar is 95% confidence interval.
Compares Devon to similar upper tier / unitary local authorities using the 15 closest comparator councils from the Institute of Public Finance (IPF) statistical neighbours. Error bar is 95% confidence interval.
Rates cannot currently be calculated at a Clinical Commissioning Group and locality evel.
Compares Devon rate with South West region and England over time.
Compares areas within England based on area deprivation. National deprivation quintiles from the 2010 Indices of Deprivation (Index of Multiple Deprivation) used.



Priority 2: Healthy Lifestyle Choices

Indicator: Alcohol-Related Admissions (broad definition)

Period: 2015-16 Q3

RAG	RAG Rating				
	Green				
Α	Amber				
	Red				

UPDATED INDICATOR

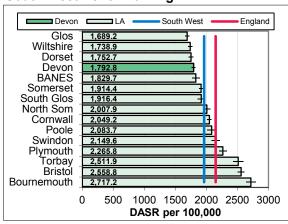
Overview

Using the broad definition from the Public Health Outcomes Framework, there were around 15,000 alcohol-related admissions to hospital for Devon residents in the year to December 2015. The Direct Age Standardised Rate (1792.8 per 100,000) was below the South West (1963.2), local authority comparator group (1968.8), and England (2150.3) rates. Rates within Devon are highest in Torridge, North Devon and Exeter. Rates are higher in more deprived areas.

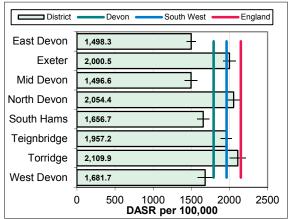
Equalities

Alcohol-Related Admission rates vary by age, with the highest rates in older age groups, reflecting the long-term effects of alcohol-use through life. Acute admissions (accidents and poisonings) are most common in young adults, mental health admissions in persons in their 40s and 50s, and admissions for chronic conditions in older age groups. Admission rates are higher for males than females.

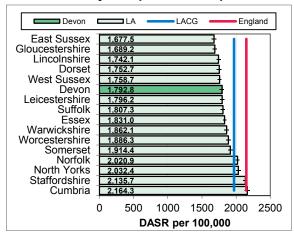
South West Benchmarking



Local Authority District



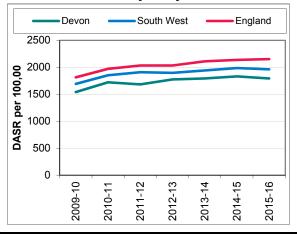
Local Authority Comparator Group



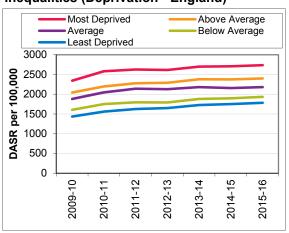
CCG and Locality Comparison



Trend and Future Trajectory



Inequalities (Deprivation - England)



INDICATOR SPECIFICATION

Priority 2: Healthy Lifestyle Choices

Indicator: Alcohol-Related Admissions (broad definition)

Period: 2015-16 Q3

Description	Direct age-standarised rate of hospital admissions involving an alcohol-related primary or secondary diagnosis per 100,000 population.
Source	North West Public Health Observatory (South West Benchmarking, Local Authority District, Trend and Local Authority Comparator Group). Devon Public Health Intelligence Team (Inequalities and CCG / Locality Comparison)
Update Frequency	Quarterly - typically six months in arrears.
Outcomes Framework	Public Health Outcomes Framework Indicator 2.18
Detailed Specification	Admissions to hospital involving an alcohol-related primary or secondary diagnosis. Admissions of children under 16 were only included if they had an alcohol-specific diagnosis i.e. where the attributable fraction = 1, meaning that the admission is treated as being wholly attributable to alcohol. For other conditions, estimates of the alcohol-attributable fraction were not available for children. A detailed definition of the numerator data used for this indicator can be found at: www.lape.org.uk/downloads/Lape_guidance_and_methods.pdf
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Chart Notes Inequalities	Compares areas within England based on area deprivation. National deprivation quintiles from the 2010 Indices of Deprivation (Index of Multiple Deprivation) used.

