

REPORT TO THE HEALTH & WELLBEING BOARD

Performance / Activity Update

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Received by SSDG:	12/11/18

1. Purpose of Report

To provide the board with an updated performance dashboard and a summary of key progress against HWBB action plan updates (April to November 2018).

2. Recommendations

2. Health & Wellbeing Board members are asked to:-
- Note the performance and action plan updates

3. Introduction/ Background

- 3.1 The document attached at appendix 1 provides the board with a headline summary of performance, alongside action plan highlights. This supports the board to challenge the respective leads, where progress may not be on track to achieve priorities.
- 3.2 Appendix 2 provides a more detailed analysis of performance against any updated whole population level indicators. Trend and benchmarking data to support the analysis is now presented via an online dashboard, available via the following [link](#).
- 3.3 SSDG was consulted on this approach and identified indicators that align with the priorities in the 2016-20 Health and Wellbeing Strategy. The indicators are drawn from nationally available datasets (such as the Public Health Outcome Framework). This allows Barnsley's position amongst comparators to be identified. However, it does also mean that data used is often subject to a time lag in reporting.
- 3.4 When the last performance and activity update was presented to the board in April, members raised queries regarding the alignment of activity and accountability for performance.

This report does not identify definitive links between activities delivered and shifts in population level indicators. One option to address this in future reports would be to adopt an Outcome Based Accountability approach, which helps to draw stronger links between activity and population level change.

4. Link to Joint Strategic Needs Assessment

- 4.1 The performance indicators included within this report are aligned with data from the current JSNA. The board will be provided with updates as and when the updated JSNA is available.

5. Conclusion / Next Steps

5.1 This report sets out an approach to tracking progress against board priorities. Further updates will be provided, which continue to review key indicator data alongside activity updates.

6. Financial Implications

6.1 No direct financial implications have been outlined in this report. However, this approach is intended to provide an overview of the impact of activities and interventions on headline indicators, which would encompass discussions regarding the effective use of resources.

7. Alignment / Delivery of the Health & Wellbeing Strategy

7.1 This report supports the board to review progress against the strategy.

8. Alignment / Delivery of the Barnsley Place Based Plan

8.1 This report aligns with key issues identified within the Place Based Plan.

9. Stakeholder engagement / co-production

9.1 The proposed approach has previously been shared with key partners via SSDG.

10. Appendices

10.1 Appendix 1 – Health & Wellbeing Board Strategic Priorities – Performance & Action Plan summary

Officers: Will Boyes (willboyes@barnsley.gov.uk) **Date:** 05/11/18
Karen Sadler (karensadler@barnsley.gov.uk)

Reducing harm caused by smoking and alcohol

Performance Summary	<p>November 2018</p> <p style="text-align: center;"><u>Areas for Improvement</u></p> <p>March 2018</p> <ul style="list-style-type: none"> • Admission episodes – alcohol related conditions <p>October 2017</p> <ul style="list-style-type: none"> • Smoking prevalence – routine/manual occupations • Admission episodes – alcohol related conditions 	<p style="text-align: center;"><u>Areas of Strength</u></p> <ul style="list-style-type: none"> • Smoking prevalence – routine/manual occupations • Smoking status at time of delivery • Smoking status at time of delivery
Activity	<ul style="list-style-type: none"> • The ‘Make Smoking Invisible’ programme of work was awarded ‘Highly Commended’ at the LGC Awards. An e-poster on this also won an award at the 2018 National Public Health England conference. • A toolkit for schools and branded smokefree schools signage has been delivered to all primary schools in Barnsley, with initial positive responses. • The Smoking in Pregnancy team is being strengthened to provide designated staff to support women through their whole pregnancy journey, until handover to health visitors. The team are also exploring options for using the Baby Clear Accreditation. • 13 town centre bars accredited by the Best Bar None Scheme in September 2018. • An Alcohol Plan has been developed. A stakeholder workshop to agree priorities will be held in December. 	

Improving services for older people

Performance Summary	<p>November 2018</p> <p style="text-align: center;"><u>Areas for Improvement</u></p> <ul style="list-style-type: none"> • Permanent admissions to residential / nursing care (2017/18 data) • Dementia: Rate of Emergency Admissions <p>March 2018</p> <ul style="list-style-type: none"> • Emergency hospital admissions due to falls • Permanent admissions to residential / nursing care (2016/17 data) <p>October 2017</p> <ul style="list-style-type: none"> • Dementia: Rate of Emergency Admissions • Emergency hospital admissions due to falls 	<p style="text-align: center;"><u>Areas of Strength</u></p> <ul style="list-style-type: none"> • Permanent admissions to residential / nursing care (2015/16 data)
Activity	<ul style="list-style-type: none"> • A dementia webpage is now available. It provides easy access to information and events relevant to people with dementia and their carers. It links to Live Well Barnsley and provides an events page for easy access to local activities. • The Integrated Care Partnership Group has identified frailty as one of its programmes for 2018. This is being supported locally by a multi-stakeholder group. The Falls work contributes to the wider agenda of the frailty programme. • The Safe & Well Checks pilot was launched from Cudworth fire station in October 2018. This will run for 6 months before evaluation. • Carers are currently being consulted on the development of a set of short films to be made as a result of the Barnsley Dementia Summit. The films will address the ‘here and now’ for carers caring for people with dementia. The mayor has allocated funds to this project. 	

Improving early help for mental health

Performance Summary	November 2018	<u>Areas for Improvement</u>	<u>Areas of Strength</u>
			<ul style="list-style-type: none"> Hospital admissions as a result of self-harm (10 to 24 year olds)
	March 2018		
		<ul style="list-style-type: none"> Suicide rate 	
	October 2017		
		<ul style="list-style-type: none"> Prevalence of depression and anxiety Long term mental health problems Employment of people with mental illness or learning disabilities Hospital admissions as a result of self harm (10 to 24 year olds) 	<ul style="list-style-type: none"> Self-reported wellbeing Prevalence of severe mental illness Positive satisfaction with life amongst 15 year olds
Activity	<ul style="list-style-type: none"> Schools-led mental health therapeutic team (MindSpace) has a website, designed by young people for young people and their parents. Schools have a link to the MindSpace site on their pupil login page. The council's educational psychology team, in partnership with MindSpace, have delivered emotional literacy support assistant (ELSA) training to 20 primary and secondary school staff. This was successful and plans are in place to deliver further training. Chilypep deliver Youth Mental Health First Aid (YMHFA) training, as well as bespoke mental health training to school staff. All but two secondary schools have at least one YMHFA trained member of staff. The council's Public Health service, MindSpace, CCG and Chilypep were successful in a bid for Beyond Places of Safety funding. The bid aims to develop an app to complement the MindSpace website, enhancing the website for a wider audience and offering a digital form of counselling. Suicide Prevention Day campaign, #AlrightPal?, supported by mental health services locally and Barnsley Football Club, hit a social media audience of 60,000. The campaign also featured in Barnsley Chronicle, BBC Look North and BBC Radio Sheffield. Since March, the Barnsley Crisis Care Concordat and Suicide Prevention (CCCSP) partnership has operated as an alliance to improve the mental health of Barnsley residents. The partnership is mapping training available to staff, which will identify any gaps. It is also working with not for profit charities and service users (Mental Health Forum and OASIS) to design a local mental health webpage and Crisis Cards. The More and Better Jobs Taskforce is now promoting Work Readiness Competencies. These are being rolled out across educational institutions and employment support services in Barnsley. Northern College are piloting a first step engagement programme, targeted at individuals with the most complex barriers to work (including mental health). The competencies have been translated into a signed video and easy read format, both of which are on the council website. 		

Building strong and resilient communities

Performance Summary	November 2018	<u>Areas for Improvement</u>	<u>Areas of Strength</u>
		<ul style="list-style-type: none"> Patient experience of accessing primary care Proportion of workless households 	<ul style="list-style-type: none"> Childhood obesity
	March 2018		
		<ul style="list-style-type: none"> Excess winter deaths 	<ul style="list-style-type: none"> Childhood obesity
	October 2017		
		<ul style="list-style-type: none"> Childhood obesity Utilisation of outdoor space for exercise / health reasons Children in low income households Patient experience of accessing primary care 	

Activity	<ul style="list-style-type: none"> • The Integrated Care Partnership Group (ICPG) has developed a workstream focused on neighbourhoods. The group held a system-wide workshop to establish understanding and direction of travel. Since then, the Dearne area has been a pilot area for developing arrangements, which could be rolled out across Barnsley. The group are holding a workshop in November to develop this further. • Live Well Barnsley continues to go from strength to strength. Further promotion is needed to encourage staff and organisations to access it. It is expected to be a key feature of the neighbourhoods workstream; empowering people to find appropriate services and support within their local communities. • The principles of self-care will be embedded into the neighbourhoods workstream, with the aim of empowering and enabling local communities to manage their health and wellbeing, where appropriate. This will ultimately reduce demand in the system. • A competitive procurement exercise to commission a new carers service has been completed. This follows consultation and scoping with the Carers Strategy Steering group, and the Carer and Friends Group. The contract was awarded to Making Space and the service, known as the Barnsley Carers Service, commenced in August. • Empty Homes programme has progressed significantly, with the establishment of dedicated resources. Funding has been secured to deliver the Stock Conditions Survey in 2019.
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Integrating Health & Social Care / Changing the way we work together

Performance Summary	<p>February 2018 update</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;"><u>Areas for Improvement</u></td> <td style="text-align: center; border: none;"><u>Areas of Strength</u></td> </tr> <tr> <td style="border: none;"> <ul style="list-style-type: none"> • Emergency admissions (65+) </td> <td style="border: none;"> <ul style="list-style-type: none"> • Delayed discharges </td> </tr> </table> <p>October 2017</p> <table style="width: 100%; border: none;"> <tr> <td style="border: none;"> <ul style="list-style-type: none"> • Emergency admissions (65+) </td> <td style="border: none;"> <ul style="list-style-type: none"> • Delayed discharges • Reablement </td> </tr> </table>	<u>Areas for Improvement</u>	<u>Areas of Strength</u>	<ul style="list-style-type: none"> • Emergency admissions (65+) 	<ul style="list-style-type: none"> • Delayed discharges 	<ul style="list-style-type: none"> • Emergency admissions (65+) 	<ul style="list-style-type: none"> • Delayed discharges • Reablement
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<ul style="list-style-type: none"> • Emergency admissions (65+) 	<ul style="list-style-type: none"> • Delayed discharges • Reablement 						
Activity	<ul style="list-style-type: none"> • Neighbourhood Nursing Service: The Core Offer to Care Homes is reaping dividends with clarity given to how the NNS can support care homes. The service is training care homes in areas such as: basic observations, sepsis training and blood glucose monitoring. • The Integrated Care Partnership Group (ICPG) has responded to the BCCG Strategic Outline Case on how commissioners and providers could work towards an ICO, through deepening partnership working and collaboration. This will be further explored at a workshop in November 2018. • The ICPG is supported by the Integrated Care Delivery Group, who are progressing 3 workstreams on fragility, CVD and neighbourhoods. • Local Digital Roadmap - a high level plan has been formulated and agreed by South Yorkshire and Bassetlaw Integrated Care System. It is anticipated that the Shared Care Record Solution for Barnsley Place (BHNFT, Primary Care, SWYFT, and BMBC) will go live in 2020/21, following approval of business cases in each organisation. • Migration of Map of Medicine pathways to the BEST website completed. Appropriate flags and referral forms have been incorporated in clinical systems. • Approach developed to deliver an Integrated Respiratory Service in Barnsley, BREATHE, covering primary, secondary and community healthcare. This involved healthcare providers (BHNFT, SWYFT and Barnsley Health Care Federation) working together as a single team, with a multidisciplinary approach, to integrate care and deliver a seamless service. 						

H&WB Strategic Priorities – Performance update

The [new online dashboard report](#) provides an overview of the latest position for Barnsley, against a range of whole population level indicators. This aligns with the priorities in the 2016-20 Health and Wellbeing Strategy and supports comparisons with national averages and our comparator groups.

The analysis below reflects the indicators where data has been updated since our last report. Analysis on the remaining indicators is available in previous reports.

Improving Population Health & Wellbeing and Reducing Inequalities

Reduce harm caused by smoking & alcohol

- 2017 Annual Population Survey data on **smoking prevalence in adults** (current smokers) shows an improved position for Barnsley. 18.2% of adults were current smokers in Barnsley; a reduction from 20.6% in 2016 and a narrowing of the gap to the national average of 14.9%. Amongst statistical neighbours, Barnsley sits in a group of local authorities with higher levels of smoking; only Doncaster had a higher figure in 2017 (19.7%). The best performing area amongst statistical neighbours is Dudley (13.7%).
- The same data source shows a sharp decrease in Barnsley in **smoking amongst adults in routine and manual occupations**; the first decrease in 4 years. The gap to the national average has narrowed significantly. 27.5% of adults in routine and manual occupations were current smokers in 2017, compared to a national average of 25.4%. Amongst our statistical neighbours, Barnsley now sits outside the group of worst performing local authorities, ranking 6th of 16. The best performing area amongst our comparators is Halton (17.7%).

Improving services for older people

- 2017/18 data (from the 2017/18 Adult Social Care Outcomes Framework) shows a significant increase in the rate of **permanent admissions to residential and nursing care** for those aged over 65 in Barnsley. Reporting against this indicator was brought in line with the national definition in 2017/18; this involved including those adults who fund their own care, but where the local authority has completed an assessment. The national average has been falling for a number of years, resulting in the gap to the Barnsley average (and that of most of our comparators) widening in 2017/18. Amongst our comparators, Barnsley had by far the highest rate at 932.7 per 100,000, with the next local authority (Durham) having a markedly lower average of 751.3.
- **Dementia related emergency admissions** in Barnsley and nationally have increased continually over the four year years between 2012/13 and 2016/17. Data for the latter year shows a marked increase and widening of the gap between Barnsley and the national average. Amongst our comparators, only one local authority (Telford and Wrekin) has a rate below the national average. Barnsley ranks 5th in the comparator group.
- 2018 data shows a decline in the **estimated dementia diagnosis rate** for Barnsley, falling to 68.6% from 70.6% in 2017. This has narrowed the gap to the national average (67.5% in 2018). Barnsley's average sits towards the lower end of our comparator group range, which varies from 62.7% in Telford & Wrekin to 90.2% in Doncaster.

Improving early help for mental health

- After decreasing in 2015/16, the latest data (2016/17) shows an increase in the **prevalence of depression and anxiety** in Barnsley, rising to 16.9% from 15.6%. The national average has been increasing for some time and increased at a higher rate in 2016/17, ensuring the gap to Barnsley is largely consistent. Amongst our comparator group, Barnsley ranks 4th of 16.

- The recorded **prevalence of severe mental illness** rises steadily each year, locally and nationally. Barnsley continues to have the lowest prevalence amongst our comparator group.
- There remains a higher rate of **long-term mental health problems** in Barnsley, compared to the national average, although the gap narrowed in 2016/17. Barnsley remains amongst the group of worst performing areas in our comparator group, ranking 2nd of 16.
- **Adults with a mental illness or learning disability** in Barnsley are less likely to be **in employment**, when compared to the national average. Quarterly data for 2016 does however show a significant narrowing of the gap to the national average. Barnsley's position amongst our comparators has improved and no longer sits in the group of worst performing areas. Barnsley now ranks 4th best the 15 areas.
- The rate of **hospital admissions as a result of self-harm** (10 to 24 year olds) fell both locally and nationally in 2016/17, with respective figures for both returning to levels seen in 2014/15. Barnsley sits well outside the group of worst performing areas in our comparator group, ranking 5th of 16.

Building strong and resilient communities

- The latest **childhood obesity** data (2017/18) shows increases in the proportions of reception and year 6 pupils with excess weight. However, Barnsley maintains a very strong position amongst comparators, ranking 16th out of 16 for both age groups.
- Data published for 2015 shows marked decreases in the proportion of **children in low income families**, both nationally and locally. The rate of decrease nationally was slightly higher, widening the gap to Barnsley. Amongst our comparator group, Barnsley ranks 4th out of 16.
- Barnsley continues to have a higher proportion of **workless households**, when compared to the national average. The gap widened noticeably in 2017, with an increase in Barnsley to 21.1%, and a continued decrease nationally to 14%. Amongst our closest comparators, Barnsley ranks 2nd of 16, with only St. Helens having a higher proportion of workless households. Neighbouring Wakefield has the lowest proportion of workless households at 13.6%.
- The latest data from the GP Patient Survey continues to highlight unsatisfactory **experiences related to making GP appointments** in Barnsley. Changes in methodology were introduced for the 2018 survey, which mean comparisons with historical data are no longer appropriate. The latest data shows Barnsley to have the lowest ranking amongst our closest comparators, with 62% reporting a good experience, below the national average of 68.6%.

Integrating Health & Social Care / Changing the way we work together

The data presented in the dashboard is taken from the NHS Social Care Interface dashboard. Two indicators within the dashboard were updated in August 2018. The analysis below reflects those updates.

- Barnsley has the lowest number of **delayed discharges** (total) per 100,000 population (over 18) amongst our closest comparators.
- Conversely, Barnsley continues to have the highest rate of **emergency admissions** (over 65s) amongst our closest comparators.