

Health and Wellbeing Board	January 2017
PERFORMANCE & IMPROVEMENT PLAN	
<ol style="list-style-type: none">1. Obesity2. Tobacco3. Alcohol and drugs4. Sexual health & HIV	

Health and Wellbeing Board			January 2017	
1. Child obesity – National Childhood Measurement Programme Yr R				
Definition	<p>Obesity Prevalence: % of children in reception or Year 6 whose weight is above the 95th centile of the population</p> <p>Excess Weight Prevalence: % of children in reception or Year 6 whose weight is above the 85th centile of the population</p>		How this indicator works	<p>Reception and Year 6 pupils have their height and weight measured to inform local planning and delivery of services for children and to provide population level surveillance data to analyse trends in growth patterns and obesity.</p> <p>The NCMP is an important source of data to support national and local work to address child hood obesity.</p>
What good looks like	<p><u>Reception Year Children</u></p> <ul style="list-style-type: none"> • Reduce the obesity prevalence to 11.3% by 2019/20 • Reduce the excess weight prevalence to 23.6% by 2019/20 		Why this indicator is important	<p>Southwark has some of the highest rates of overweight and obesity in the country, with 56% of adults and 42% of children (year 6) classified as obese or overweight. Our most vulnerable populations are at increased risk of becoming overweight and obese.</p>
History with this indicator	<p>Obesity prevalence (2015/16)</p> <ul style="list-style-type: none"> • Reception: 12.2% 	<p>Excess Weight prevalence (2015/16)</p> <ul style="list-style-type: none"> • Reception: 25.2% 		

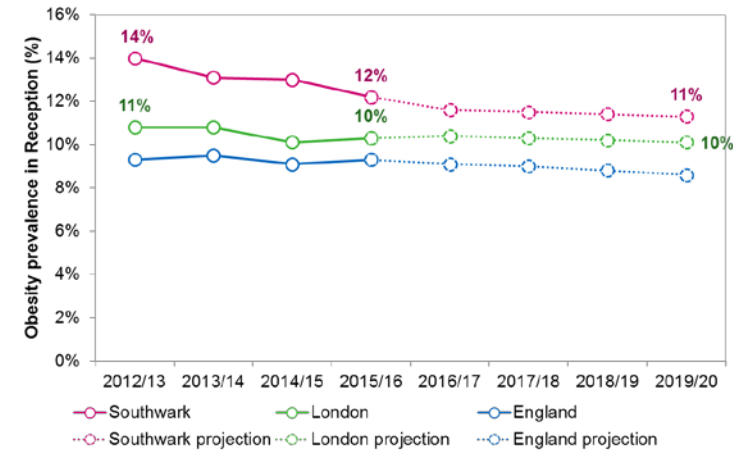
Reception Year (Obesity And Excess Weight)

Reception Year Obesity Prevalence figures (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20)

Period	2012/13	2013/14	2014/15	2015/16
Southwark (%)	14.0	13.1	13.0	12.2
London (%)	10.8	10.8	10.1	10.3
England (%)	9.3	9.5	9.1	9.3
Period	2016/17*	2017/18*	2018/19*	2019/20*
Southwark (%)	11.6	11.5	11.4	11.3
London (%)	10.4	10.3	10.2	10.1
England (%)	9.1	9.0	8.9	8.6

*Projected figures

Reception Year actual Obesity Trajectories (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20) for Southwark, London and England

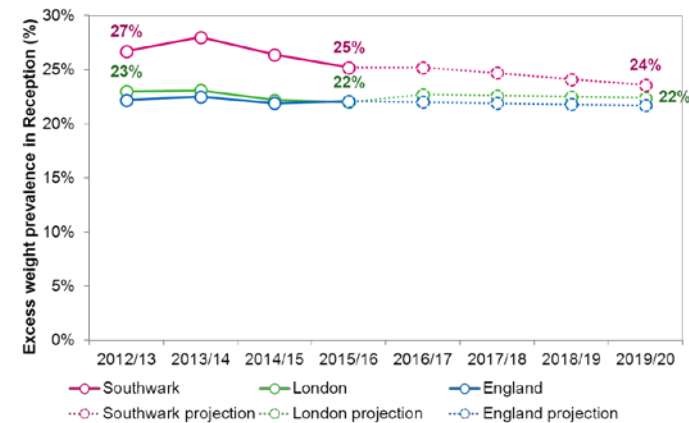


Reception Year Excess Weight Figures (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20)

Period	2012/13	2013/14	2014/15	2015/16
Southwark (%)	26.7	28.0	26.4	25.2
London (%)	23.0	23.1	22.2	22
England (%)	22.2	22.5	21.9	22.1
Period	2016/17*	2017/18*	2018/19*	2019/20*
Southwark (%)	25.2	24.7	24.1	23.6
London (%)	22.7	22.6	22.5	22.4
England (%)	22.0	21.9	21.8	21.7

*Projected figures

Reception Year actual Excess Weight Trajectories (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20) for Southwark, London and England



Health and Wellbeing Board 1. Child obesity – National Childhood Measurement Programme Yr 6			January 2017	
Definition	<p>Obesity Prevalence: % of children in reception or Year 6 whose weight is above the 95th centile of the population</p> <p>Excess Weight Prevalence: % of children in reception or Year 6 whose weight is above the 85th centile of the population</p>		How this indicator works	<p>Reception and Year 6 pupils have their height and weight measured to inform local planning and delivery of services for children and to provide population level surveillance data to analyse trends in growth patterns and obesity.</p> <p>The NCMP is an important source of data to support national and local work to address child hood obesity.</p>
What good looks like	<p><u>Year 6 Children</u></p> <ul style="list-style-type: none"> • Reduce the obesity prevalence to 24.9% by 2019/20. • Reduce the excess weight prevalence to 38.9% by 2019/20. 		Why this indicator is important	<p>Southwark has some of the highest rates of overweight and obesity in the country, with 56% of adults and 42% of children (year 6) classified as obese or overweight. Our most vulnerable populations are at increased risk of becoming overweight and obese.</p>
History with this indicator	<p>Obesity prevalence (2015/16)</p> <ul style="list-style-type: none"> • Year 6: 26.7% 	<p>Excess Weight prevalence (2015/16)</p> <ul style="list-style-type: none"> • Year 6: 42.1% 		

Year 6 (Obesity And Excess Weight)

Year 6 Obesity Prevalence Figures (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20)

Period	2012/13	2013/14	2014/15	2015/16
Southwark (%)	26.7	26.7	27.9	26.7
London (%)	22.4	22.4	22.6	23.2
England (%)	18.9	19.1	19.1	19.8

Period	2016/17*	2017/18*	2018/19*	2019/20*
Southwark (%)	26.6	26.0	25.5	24.9
London (%)	23.2	23.6	23.7	23.9
England (%)	19.8	19.9	20.1	20.3

*Projected figures

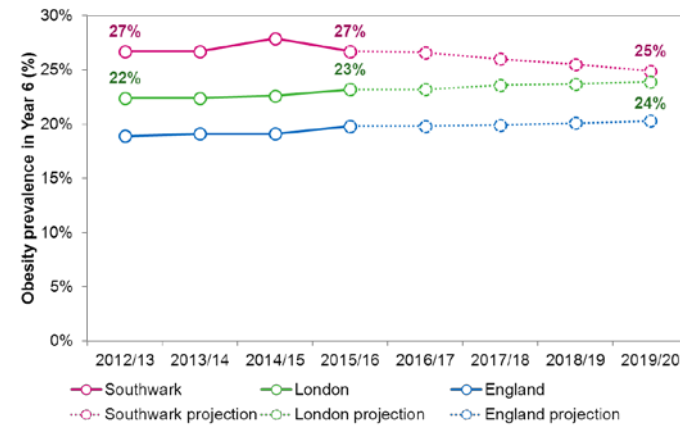
Year 6 actual excess weight figures (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20)

Period	2012/13	2013/14	2014/15	2015/16
Southwark (%)	44.2	43.8	43.6	42.1
London (%)	37.4	37.6	37.2	38.1
England (%)	33.3	33.5	33.2	34.2

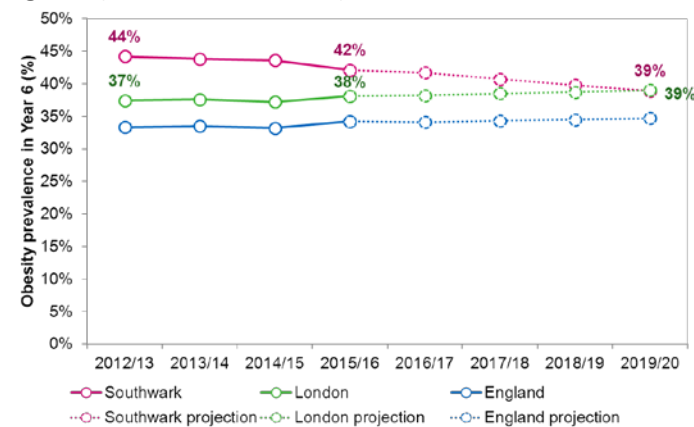
Period	2016/17*	2017/18*	2018/19*	2019/20*
Southwark (%)	41.7	40.7	39.8	38.9
London (%)	38.2	38.5	38.7	39.0
England (%)	34.1	34.3	34.5	34.7

*Projected figures

Year 6 Obesity Prevalence Trajectories (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20)



Year 6 Excess Weight Trajectories (2012/13 – 2015/16) and Projected Figures (2016/17 – 2019/20)



Performance Overview			RAG rating	Amber
Benchmarking	Reception – London Average Obesity: 10.3% Excess Weight: 22%	Year 6 – London Average Obesity: 23.2% Excess Weight: 38.1%		
Actions to sustain or improve performance			By when	Partner agency
Develop comprehensive healthy weight strategy			Completed – July 2016	All partners
Continue engagement with stakeholders (including voluntary sector) and general public including Southwark Great Weight Debate stakeholders event.			Stakeholder event held 1 November. General engagement - ongoing	Southwark Council
Implementation of the Baby Friendly Initiative: Achievement of Stage 1			March 2017	Southwark Council, CCG and GSTT
Work to continue successful implementation of the NCMP programme to identify children of excess weight and support into healthy weight care and referral pathways.			Ongoing	Southwark Council GSTT
Commission training for frontline staff on management of healthy weight.			June 2017	Southwark Council
Review and recommission tier 2 weight management service for unhealthy weight children			April 2017	Southwark Council
Commission adult healthy weight pathway			February 2017	Southwark CCG
Support schools to promote healthy eating, physical activity and health and wellbeing through the London Healthy Schools Programme Award			Ongoing	Southwark Council & schools

Health and Wellbeing Board
2. Tobacco

January 2017

Definition	Prevalence: % of smoking among persons aged 18 and over	How this indicator works	Annual Population Survey - analysed by PHE
What good looks like	Smoking Prevalence of 14.5% by 2019/20	Why this indicator is important	Smoking is the single biggest preventable cause of ill health, health inequalities and premature mortality in the borough
History with this indicator	Smoking prevalence (adults) 2015: 15.9%		

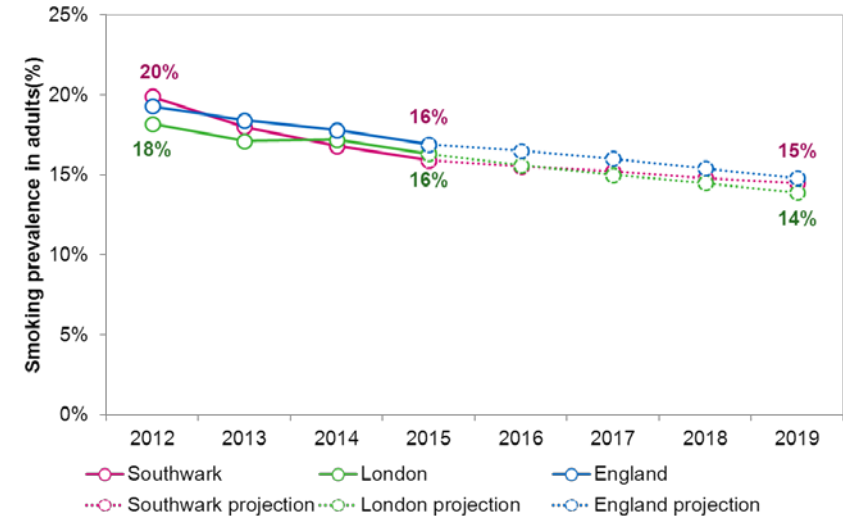
Actual Smoking Prevalence (2010-2015) and Projected Smoking Prevalence (2016-2019) for the Adult Population

Period	2012	2013	2014	2015
Southwark (%)	19.9	18.0	16.8	15.9
London (%)	18.2	17.1	17.2	16.3
England (%)	19.3	18.4	17.8	16.9

Period	2016*	2017*	2018*	2019*
Southwark (%)	15.5	15.2	14.8	14.5
London (%)	15.6	15.0	14.5	13.9
England (%)	16.5	16.0	15.4	14.8

*Projected figures

Trajectories showing historical Smoking Prevalence (2010 – 2015) and Projected Prevalence (2016 - 2019) for Southwark, London and England



Health and Wellbeing Board
2. Tobacco

January 2017

Definition	Prevalence: % of smoking among persons aged 18 and over – routine and manual occupations	How this indicator works	Annual Population Survey - analysed by PHE
What good looks like	Smoking Prevalence of 20.2% by 2019/20	Why this indicator is important	Smoking is the single biggest preventable cause of ill health, health inequalities and premature mortality in the borough
History with this indicator	Smoking prevalence (adults – routine and manual) 2015: 25.3%		

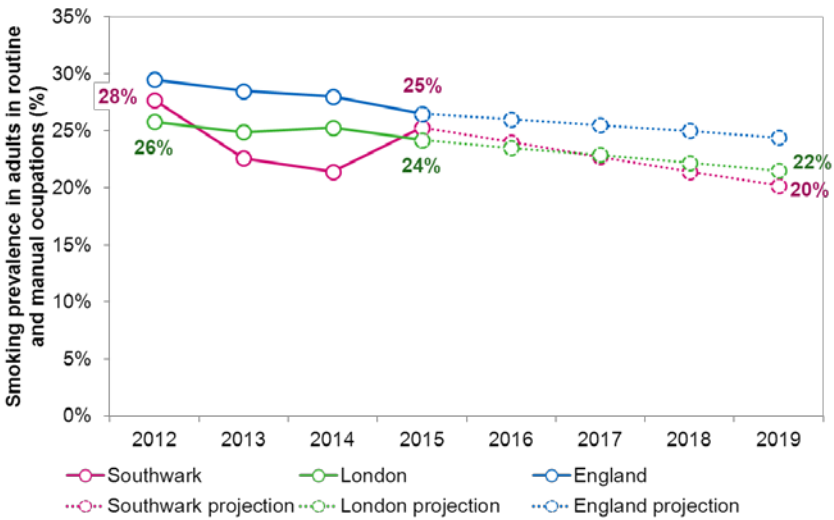
Actual Smoking Prevalence (2010-2015) and Projected Smoking Prevalence (2016-2019) for Routine and Manual Occupations

Period	2012	2013	2014	2015
Southwark (%)	27.7	22.6	21.4	25.3
London (%)	25.8	24.9	25.3	24.2
England (%)	29.5	28.5	28.0	26.5

Period	2016*	2017*	2018*	2019*
Southwark (%)	24.0	22.7	21.4	20.2
London (%)	23.5	22.9	22.2	21.5
England (%)	26.0	25.5	25.0	24.4

*Projected figures

Historical Smoking Prevalence for Routine and Manual Occupations (2010 – 2015) and Projected Prevalence (2016 - 2019) for Southwark, London and England



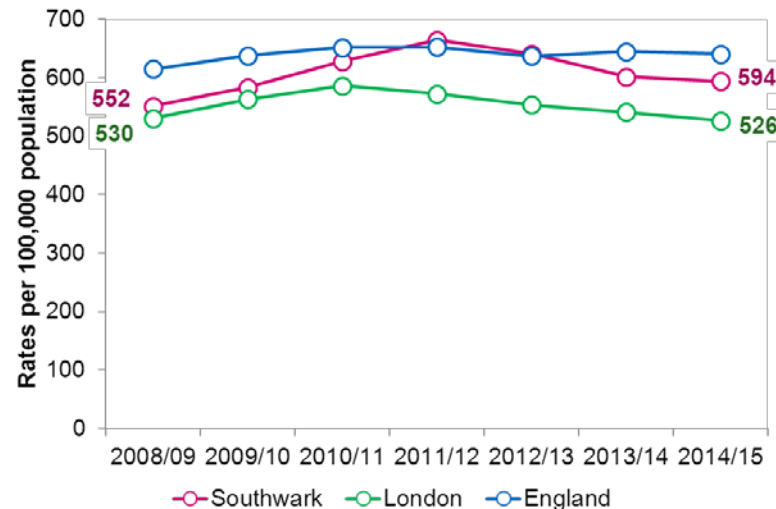
Performance Overview		RAG rating	AMBER
Benchmarking	London Smoking prevalence – adults (2015): 16.3% London Smoking prevalence - adults – routine and manual (2015): 24.2%		
Actions to sustain or improve performance		By when	Partner agency
Tobacco Control Review		Completed - 2015	Southwark Council and Southwark CCG
New tobacco control strategy developed and agreed		Completed - October 2016	Southwark Council
Regulation of tobacco sales including test purchasing for under age sales		Ongoing	Southwark Council
Monitoring of compliance with plain packaging legislation		May 2017	Southwark Council
Review and update training and referral mechanisms for pregnant smokers.		March 2017	Southwark Council, KCH and GSTT
Re-commission stop smoking service to provide targeted support to identified key groups.		April 2017	Southwark Council and Southwark CCG

Definition	Admission episodes for alcohol-related conditions (narrow definition); directly standardised admission rate per 100,000 population. <i>Data source: Public Health England from NHS Digital and Office of National Statistics for period 2014/15; last updated September 2016.</i>	How this indicator works	This indicator comprises the estimated number of admissions among Southwark’s population that can be attributed to alcohol, and is calculated on the basis of actual hospital admission data.
What good looks like	Statistically lower than London average. <i>London as a comparator is a more stretching target than England as mean alcohol consumption per head is lower in London than nationally. Moreover, Southwark is an inner London borough and call-outs are generally higher within inner-London boroughs.</i>	Why this indicator is important	This metric quantifies the impact of alcohol across a number of different conditions.
History with this indicator	At present we are developing a system that will enable quarterly reporting with lag of 9 months; this is expected to go-live once the information governance compliance and IT infrastructure have been implemented (expected winter 2016/17).		

Admission episodes for alcohol-related conditions (Narrow definition)

Rate of admissions per 100,000 population

Period	2008/09	2009/10	2010/11	2011/12
Southwark	551.7	583.5	628.4	664.6
London	530.4	563.0	586.6	572.0
England	614.6	638.1	651.9	652.8
Period	2012/13	2013/14	2014/15	2015/16
Southwark	640.7	601.4	593.8	
London	553.8	541.2	526.2	
England	636.9	645.1	640.8	



Performance Overview	Southwark has a downward trend (since 2011/12). Although, the Southwark rate is higher than London, the gap is narrowing. The rate is statistically lower than the national average.	RAG rating	AMBER
Actions to sustain or improve performance		By when	Partner agency
Increase commitment and resource to Identification and Brief Advice (IBA) through general practice or broader 'Make Every Contact Count' (MECC) work in hospitals and elsewhere; introduced into Southwark CCG's commissioning intentions for primary care in September 2016.		On-going	CCG and Acute Trusts
On-going active involvement and leadership in licensing and other regulatory activity. <i>Evaluation of Southwark's cumulative impact policy completed and reported, Winter 2016.</i>		On-going	Southwark Council and partner Responsible Authorities including Metropolitan Police
Refresh alcohol strategy into alcohol action plan; process agreed at Southwark Alcohol Summit in July 2016.		March 2017	Southwark Council, CCG and partners
Through participation in the Home Office's Local Alcohol Action Areas program, assess and optimise the value of assault data collected by emergency departments (EDs) with a view to reduce alcohol related crime, disorder and harms. <i>Application submitted November 2016; result awaited February 2017.</i>		End of 2018	Southwark Council and Acute Trusts
Conduct a brief alcohol health needs assessment (HNA); this will form part of the Joint Strategic Needs Assessment (JSNA).		February 2017	Southwark council DAAT

Health and Wellbeing Board		January 2017	
3. Drugs			
Definition	Proportion of successful completions of treatment for i. opiate clients and ii. non-opiate clients <u>and</u> who do not go on to re-present to services within 6 months. <i>Data source: Public Health England, for period 2014 last updated September 2016.</i>	How this indicator works	This indicator tracks the proportion of clients who complete the drug treatment programme for different classes of drug misuse. It is a measure of the retention of clients in the programme, with the assumption that as more people complete treatment, fewer will go on to have continued drug dependency or relapse. It is used nationally as a quality indicator for drug treatment services.
What good looks like	Achieving comparable levels of treatment with London (giving amber), leading to placement in the top quartile of national performance (giving green).	Why this indicator is important	This indicator assesses the outcomes of the drug treatment service commissioned by Southwark Council. It is however focused on those at the more severe end of the spectrum – typically already dependent.
History with this indicator	While this indicator is provided in a restricted format by Public Health England on a quarterly basis, the statistics are only available publically on an annual basis, and with an approximate 12 month lag. Public health and the drugs and alcohol commissioning team have discussed what alternatives, but have concluded that the nationally available data are the most robust data presently available for a public reporting. A new provider began operating on 4 January 2016.		
	<p>Successful completions of treatment for:</p> <p>Opiate Users 7.0% N=73; difference is not statistically significant to London. Target for top quartile $\geq 7.7\%^*$ Non-opiate Users 35.3% N=171; difference is not statistically significant to London. Target for top quartile $\geq 45.0\%^*$</p> <p><i>Top quartile target for completion statistics apply to current 2016 performance.</i> <i>Latest Period: Completion period: 01/04/2015 to 31/03/2016, Re-presentations up to: 30/09/2016</i></p>		
Performance Overview	Not applicable at this time.	RAG rating	AMBER
Benchmarking	Benchmarked against comparator boroughs.		
Actions to sustain or improve performance		By when	Partner agency
Public health is undertaking a deeper dive into substance misuse and will attempt to gain a clearer insight into the breadth of substance misuse issues in Southwark. This work will lead		June 2017	Southwark Council DAAT and Southwark CCG

to a better understanding of the epidemiology of misuse locally and inform service development for the future; this work will likely affect the non-opiate outcomes more than opiate users.		
The DAAT (commissioning) service meets regularly with the provider to monitor and improve services; Southwark public health with DAAT have proposed a budget for 2017/18 with appropriate mitigation and safeguards for service continuation in the context of financial pressures.	On-going	Southwark Council DAAT
A Drug Related Death (DRD), panel has been assembled and will meet every quarter to discuss deaths due to substance misuse in the borough	First panel meeting January 2017, then ongoing	Southwark Council DAAT, Lifeline

Health and Wellbeing Board

4. Reduce the numbers of people contracting HIV and other sexually transmitted infections

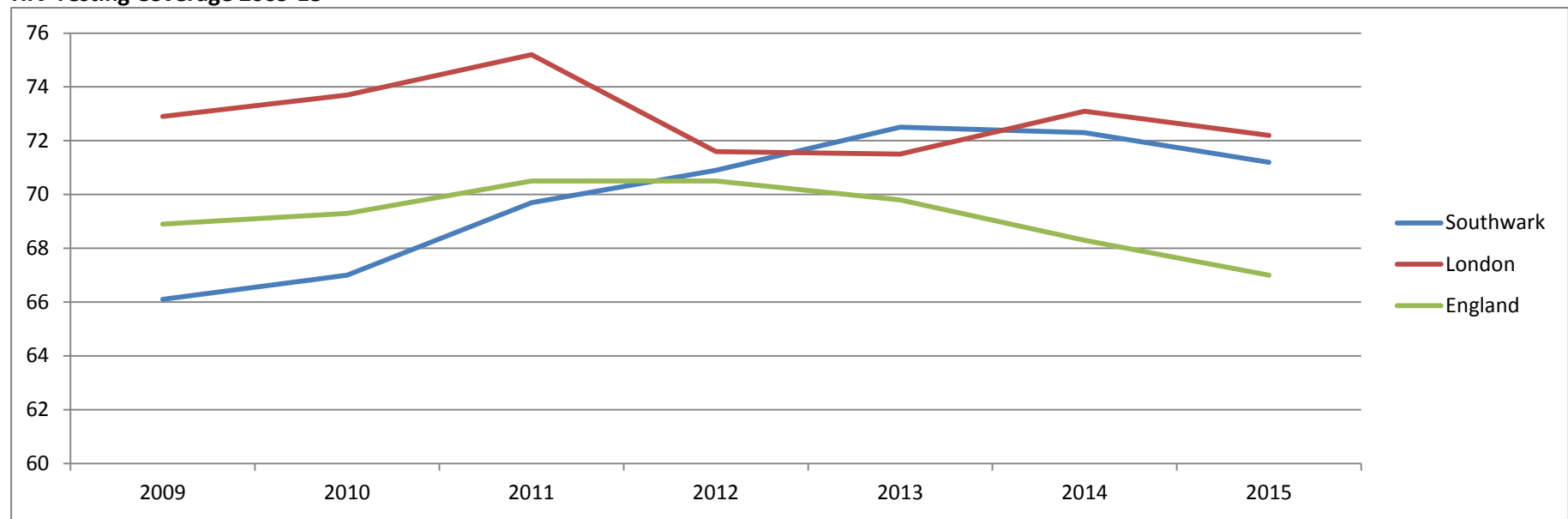
January 2017

Definition	Proportion of eligible people who access a sexual health testing service (clinic or online) who have an HIV test.	How this indicator works	The number of eligible new GUM episodes plus online contacts where a HIV test was accepted as a proportion of those where a HIV test was offered.
What good looks like	At least 77.5% of people eligible for an HIV test are tested when they access sexual health services.	Why this indicator is important	HIV testing is integral to the treatment and management of HIV. Knowledge of HIV status increases survival rates, improves quality of life and reduces the risk of transmission.
History with this indicator	76.7 of Southwark clinic residents who access a clinic have an HIV test		

	2015/16 Target	2015 Data	2016/17 Target	2016 Data
Proportion of eligible GUM patients who accepted an HIV test	76.5%	71.2%	77.5%	Released in October 2017

The proportion of people who accepted an HIV test is 71.2% against a target of 76.5%. Southwark performs similar to London and better than England.

HIV Testing Coverage 2009-15



	2015/16 Target	2016/17 Target	Q1 2016/17	Q2 2016/17	Q3 2016/17	Q4 2016/17
Proportion of eligible SH24 service users who have returned an HIV test	76.5%	77.5%	80.7%	85.5%	85.3%	Not available yet
Proportion of SH24 service users who have not been to an STI clinic previously	Monitor over time to get a baseline		18.6%	19.5%	18.3%	Not available yet
Total number of tests returned by SH24 service users (individual tests - Chlamydia, Gonorrhoea, Syphilis & HIV)	N/A	N/A	13336	20807	12232	Not available yet
<p>SH24 is a new Southwark and Lambeth service which provides free and confidential sexual health service online which can be accessed 24 hours a day. Data reported is for Southwark and Lambeth residents. SH24 is working with Kings College Hospital and Guys and St Thomas' Hospital to move more asymptomatic testing out of clinics and on-line. New clinic models and pathways are being implemented to support this and targets will be reviewed and set once these models have been fully established.</p>						

Performance Overview	Coverage of HIV testing measured in genitourinary medicine (GUM)	RAG rating	AMBER
Benchmarking	London (GUM services only) 72.2%		
Actions to sustain or improve performance		By when	Partner agency
Focused prevention and HIV testing awareness amongst black African groups through the new RISE NAZ partnership.		March 2017	NAZ and RISE
Increased uptake of HIV testing amongst eligible groups by examining current barriers to testing.		March 2017	SH24
To work with clinics and SH24 to collect data on Latin American community to ensure our services are reaching those who need them.		March 2017	GSTT & Kings

4. Sustain the reduction in teenage pregnancy

Definition	Under 18 conception rate (reduction trend).	How this indicator works	This indicator shows number of conceptions to women aged 15-17 per 100 women of that age.
What good looks like	No yearly increase in the conception rate amongst women aged 15-17.	Why this indicator is important	Teenage pregnancy is associated with poorer outcomes for young parents and their children. Teenage mothers are less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of poor mental health than older mothers. Infant mortality rates for babies born to teenage mothers are around 60% higher than for babies born to older mothers. The children of teenage mothers have an increased risk of living in poverty and poor quality housing and are more likely to have accidents and behavioural problems.
History with this indicator	Southwark now has the third greatest reduction in teenage conceptions within London. We want to sustain this trend.		

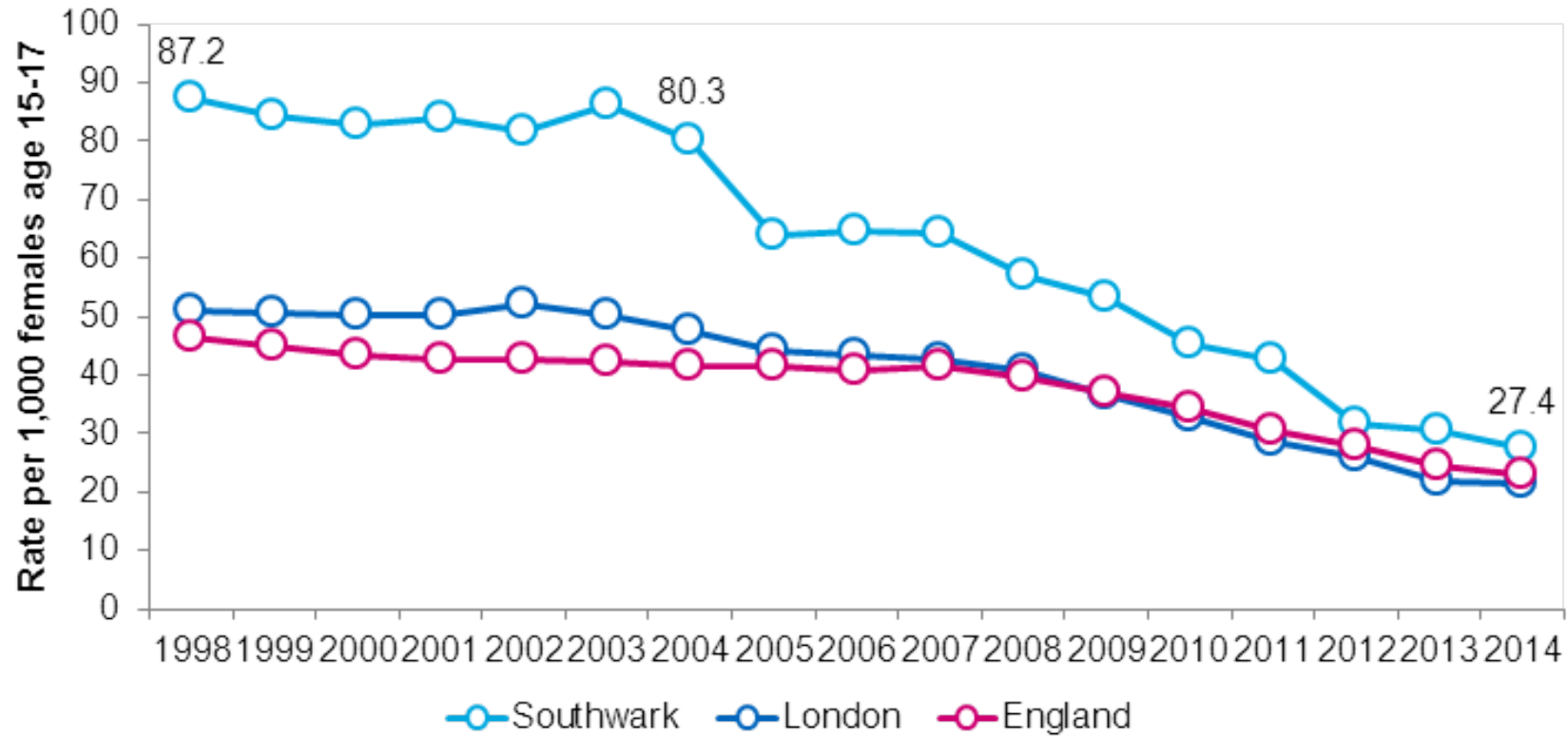
The latest quarterly rate is for September 2015 28.2/1000 which is higher than the previous quarter of 25.6/1000 but maintains the downward trend. The rolling annual rate for September 2015 is 24.3 which is a reduction on the rolling March 2014 rate of 28.7.

The provisional figures show a continuous downward trend: in Southwark there were 76 pregnancies in the first three quarters of the 2015 compared to 87 in the first three quarters of the 2014.

The 1998 to 2014 trend is shown below.

Under 18s Conceptions 1998-2014

Under 18 conceptions



Performance Overview		RAG rating	GREEN
Benchmarking	London		
Actions to sustain or improve performance	By when	Partner agency	
Healthy schools – increase the participation of Secondary Schools in the London Healthy Schools Programme	March 2018	Education, Schools, GLA	
Condom scheme – increase the number of venues distributing condoms and health promotion contacts with young people	March 2017	Brook	
Contraception – increase the number of women at risk of unplanned pregnancy on long acting reversible contraception	March 2017	Brook, GSTT, Kings, SH24, Primary Care and Pharmacy	