## Health and Wellbeing Board Indicator Set: 2018/19

The following high-level indicator set reflects the priorities and themes of the Health and Wellbeing Board Strategy. The first 10 core indicators provide an overview of the health of residents and the quality of care services available to them. Below the core indicators are additional indicators covering those topics of current and special interest to the Board which will change over time.

# Indicator (Healthy Life expectancy)		Trend	Havering		Comparators						Dariad	Lindata atatura	Update
# Indicator (Healthy Life expectancy)	What is <i>Good</i> ?		Number	of Years	London	RAG	England	RAG	Target	RAG	Period	Update status	commentary
1 Healthy life expectancy, male	High	-	6	6	64		63		-		2015-17	Unchanged	Remains similar
2 Healthy life expectancy, female	High	-	6	55	64		64		-		2015-17	Unchanged	Remains similar
# Indicator (Other)	What is <i>Good</i> ?	Trend	Hav Count	ering Rate (%)	London	RAG	Compar England		Target	RAG	Period	Update status	
3 Physically active adults	High		-	66	66		66		-		2017/18	Updated	sig improvement (10- 17: 59%). Now same as London, similar Fngland
4 Overweight (including) obese children, Year 6	Low		1053	37	38		34		-		2017/18	Unchanged	No sig difference from last year; long term worse
5 Achieving a good (or better) level of development at age 5 (EYFSP)	High		-	72	74		72		73		2017/18	Unchanged	RAG Significance added
6 Good blood sugar control in people with diabetes	High		-	56	60		60		-		2017/18	Unchanged	Remains similar
7 A&E attendees discharged with no investigation and no significant treatment	Low	➡	11,380	-	-		-		-		2017/18	Unchanged	
8 NHS friends and family recommendation of NHS Havering GPs	High	-	439	90	87		90		-		Feb-19	Unchanged	Remains similar
9 Satisfaction with Adult Social Care services	High	-	-	60	59		65		-		2017/18	Updated	(2015/16: 62) Remains similar to London, worse than England
10 Mortality attributable to air pollution	Low	-	-	6.1	6.5		5.1		-		2017 (Calendar year)	Unchanged	
11 Prescribed Long acting reversible contraception (LARC) excluding injections	High	-	1,195	2.4	3.4		4.7		-		2017 (Calendar year)	Unchanged	
12 Referral to treatment	High	➡	16,420	80					92		Jul-19	Updated	Performance worse
Trend rating functional function of the function of the steady of the st								mparator					



Decreasing / better
Decreasing / worse



Significantly worse than comparator

Comparison not made

There are over 250K Havering residents. An increase of 10% in the last 10 years, with similar growth projected for the coming decade. Havering has the oldest population in London (46K residents aged 65 and older, 14K aged 80 or older) but the number of births each year has increased by 33% in the last 10 years to nearly 3.3k. Havering is gradually becoming more ethnically diverse, but 83% of residents are White British; a higher proportion than both London (45%) and England (80%). Havering is relatively affluent, but 10K children and young people aged <20 live in low income families and there are pockets of significant deprivation to the north and south of the borough. Average life expectancy is better than the national average with a significant gap between the least deprived and deprived areas. Most residents enjoy good health but 18% of working age people have a disability or long term illness.

# Indicator	Description
1 Healthy life expectancy, male	The average number of years a male newborn w
2 Healthy life expectancy, female	The average number of years a female newborn reported good health
3 Physically active adults	Percentage of adults achieving at least 150 minu guidelines (current method)
4 Overweight (including) obese children, Year 6	Proportion of children aged 10-11 classified as of the 85th centile of the British 1990 growth refere
5 Achieving a good (or better) level of development at age 5 (EYFSP)	Percentage of pupils achieving at least the experimentation of pupils achieving at least the experimentation of pupils achieving a good level as having a good l
6 Good blood sugar control in people with diabetes	The percentage of patients with diabetes in who equivalent test/reference range depending on lo
7 A&E attendees discharged with no investigation and no significant treatment	Havering GP-registered patients who attend BHI that attendance at A&E was not appropriate
8 NHS friends and family recommendation of NHS Havering GPs	The Friends and Family Test asks patients how li service to their friends and family if they needed
9 Satisfaction with Adult Social Care services	The percentage of adult social care survey respo
10 Mortality attributable to air pollution	Percentage of annual all-cause adult mortality a
11 Prescribed Long acting reversible contraception (LARC) excluding injections	Percentage of LARC excluding injections prescrib high figure suggests that there is access to a cho
12 Referral to treatment	Percentage of Havering GP-registered patients r

Can **This is Havaring** for further key apparable and social aconomic facts and figures.

would expect to live in good health based on mortality rates and self-reported good health

n would expect to live in good health based on contemporary mortality rates and prevalence of self-

nutes of physical activity per week in accordance with UK Chief Medical Officer recommended

overweight or obese. Children are classified as overweight (including obese) if their BMI is on or above erence (UK90) according to age and sex

ected level in the Early Learning Goals within the three prime areas of learning and within literacy and level of development; The local target set by the Havering childrens team is 73%

nom the last IFCC-HbA1c is 59 mmol/mol (equivalent to HbA1c of 7.5% in DCCT values) or less (or local laboratory) in the preceding 12 months

HRUT A&E who are discharged without an investigation and with no significant treatment; this suggest

likely, on a scale ranging from extremely unlikely to extremely likely, they are to recommend the ed similar care or treatment

oondents who expressed strong satisfaction with the care and support services they received

attributable to human-made particulate air pollution (measured as fine particulate matter <2.5 $\mu$ m)

ribed by GP and Sexual and Reproductive Health Services per 100 resident females aged 15-44 years; a hoice of contraceptive methods

referred to BHRUT, treated within the expected timescales

see **This is mavering** for further key geographic and socio-economic facts and figures

https://www.haveringdata.net/joint-strategic-needs-assessment/