



Havering

LONDON BOROUGH



Quarter 3 Performance Report 2017/18

Health O&S Sub-Committee

1 March 2018



About the Health O&S Committee Performance Report

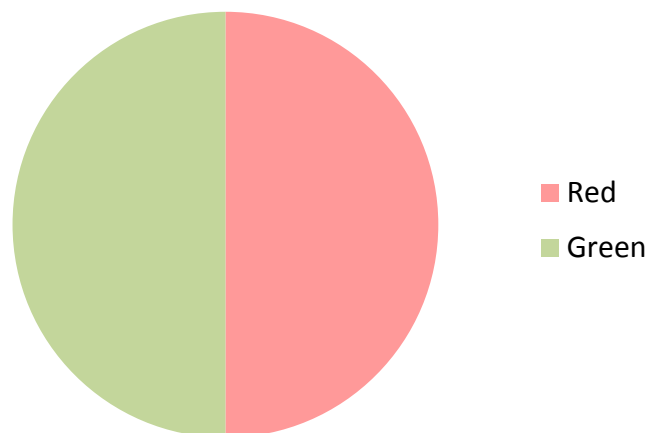
- Overview of the key performance indicators as selected by the Health Overview and Scrutiny Sub-Committee
- The report identifies where the Council is performing well (**Green**) and not so well (**Red**).
- Where the RAG rating is '**Red**', '**Corrective Action**' is included. This highlights what action the Council will take to address poor performance.



OVERVIEW OF HEALTH INDICATORS

- 3 Performance Indicators are reported to the Health Overview & Scrutiny Sub-Committee.
- Performance ratings are available for 2 of the 3 indicators.

Q3 Indicators Summary



In summary, of the 2 indicators:

1 (50%) has status of **Green** (on target)

1 (50%) has a status of **Red** (off target)

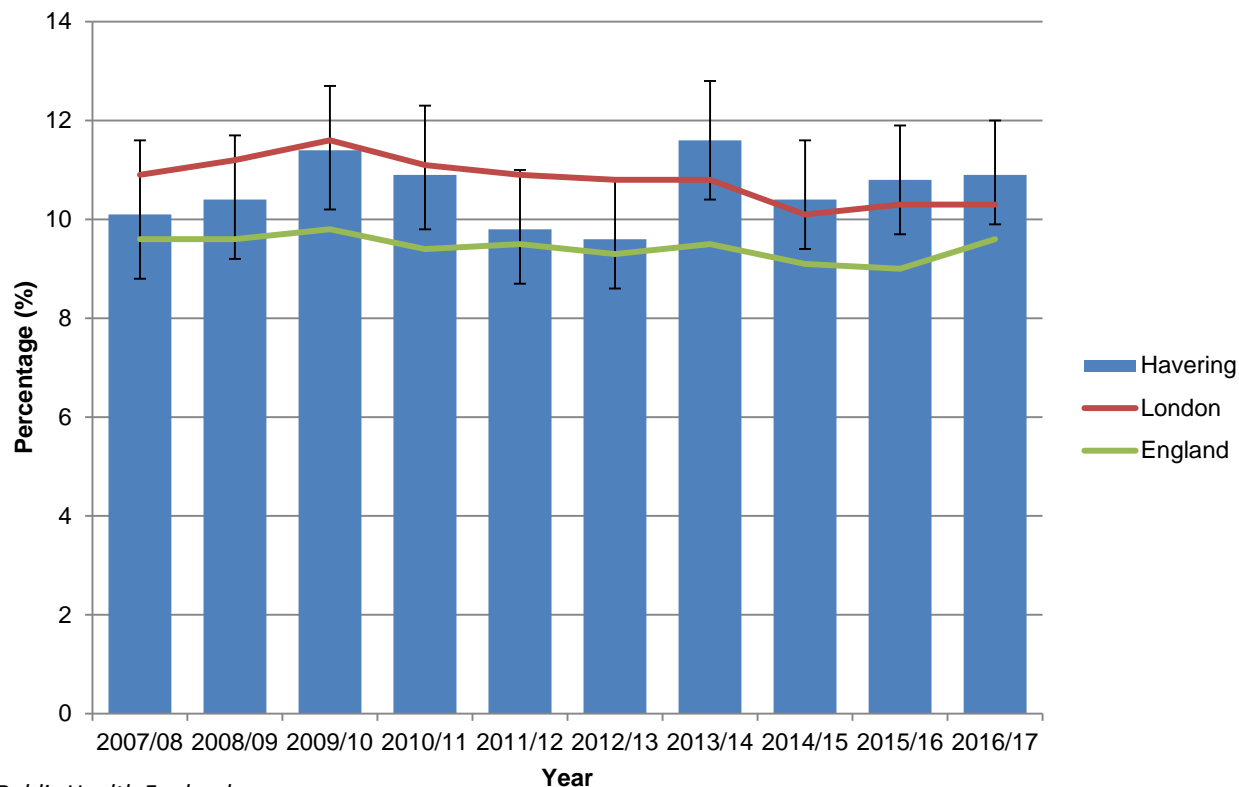
Quarter 3 Performance

Indicator and Description	Value	2017/18 Annual Target	2017/18 Q3 Target	2017/18 Q3 Performance	Short Term DOT against Q2 2017/18		Long Term DOT against Q3 2016/17		Service
Obese Children (4-5 years) (Annual)	Smaller is better	Similar to or better than England (9%)	N/A	10.9% (2016/17) RED	↓	10.8% (2015/16)	↓	10.4% (2014/15)	Public Health
Percentage of patients whose overall experience of out-of-hours services was good (Partnership PI) (Annual)	Bigger is better	Better than England (66%) (TBC by Havering CCG)	N/A	67% (2017) GREEN	-	N/A	→	67% (July 2016) (National rate 67%)	Havering CCG
The number of instances where an adult patient is ready to leave hospital for home or move to a less acute stage of care but is prevented from doing so, per 100,000 population (delayed transfers of care)	Smaller is better	TBC	TBC	5.92 (as at end of Nov 2017)	↑	6.3	-	N/A	Adult Social Care

About Childhood Obesity

- Prevalence of obesity amongst 4-5 year olds in Havering has seen no significant change over the past 9 years. In 2016/17 Havering's rate of childhood obesity remained significantly worse than England's but similar to London's

Percentage of Obese Children, Havering, London & England, 2007/08 – 2016/17



Source: Public Health England



Improvements Required: Childhood Obesity

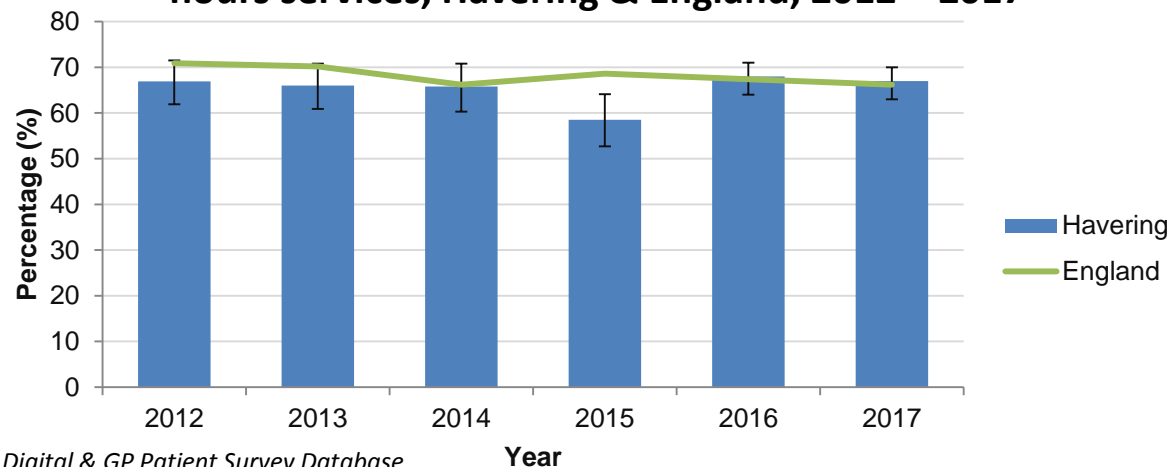
- Directed by Havering's 'Prevention of Obesity Strategy 2016-19', our borough working group continues to progress actions that are within the gift of the local authority and partners, and within available budgets.
- Progress on actions since the last update are as follows:
 - Webpages are currently being drafted and promotional materials have been ordered for the Breastfeeding Welcome scheme for local venues and businesses to sign up to.
 - The session plan and resources for the 'Starting Solid Foods' workshop are being finalised. The first session was co-delivered by Health Visitors and Early Help Practitioners at Collier Row Children's Centre on 31st January.
 - The Health and Wellbeing in Schools Service, Havering Catering Services, Havering Sports Collective and School Nursing Service have met for a second time to progress streamlining of the healthy eating and physical activity support they offer to children and families via schools.
 - A local social media campaign began in January 2018 to promote the new Change4Life healthy snacks campaign, and additional publicity coincided with the Change4Life roadshow visiting The Brewery shopping centre on 24th and 25th January.
- The group meets quarterly and at the March meeting will be reviewing progress of actions over the past year, and refreshing the action plan for 2018/19.
- Work continues at national level, guided by 'Childhood Obesity: A Plan for Action' and we continue to link with national campaigns and programmes where appropriate.



About Patient Experience of GP Out-of-Hours Services

- The latest available data (July 2017) shows no significant difference between the percentage of patients who are satisfied with the service in Havering (67%) and the England average (66%). Use of out-of-hours services includes contacting an NHS service by phone (e.g. 111) and going to A&E - which a vast proportion (55% and 33% respectively) of the 882 Havering respondents who answered this question say they did.

The percentage of patients who are satisfied with the GP out of hours services, Havering & England, 2012 – 2017



Considerations for: Patient feedback on Out of Hours Services

- When practices are closed (outside of 8 am – 6.30 pm) they can provide their own Out of Hours cover or 'opt-out'. If a practice 'opts out' the commissioner is responsible for ensuring appropriate OOHs cover is in place.
- In Havering, all practices have opted out of OOHs, therefore the CCG commissions PELC to provide OOHs cover in which the clinical responsibility for patients is transferred to the OOHs provide
- The survey results are now collected only once per annum rather than every six months and are therefore slower to reflect changes
- Changes took place in questions used in July-Sept 2015 reflecting changes to the way OOH services were provided. Looking at the longer term chart can therefore be misleading. Trends are only shown on OOHs from the July 2017 data collection point on.
- At 67%, the CCG's experience is in line with national results . The performance of local CCGs ranges from 51-74%.



About Delayed Transfers of Care

- There is no target for this indicator as the definition was not approved until well into 2017/18. There is also no long term direction of travel as the measurement methodology for this indicator changed from 2016/17 to 2017/18.
- To the end of November 2017, there has been an average of 11.69 days delayed (5.92 per 100,000). This is an improvement on Q2, when there was an average of 12.4 days delayed (6.3 per 100,000).
- Data for this indicator is likely to change for the positive going forward due to resubmissions of Non Acute data.



Any questions?

