Southwark's Joint Health and Wellbeing Strategy

2022 - 2027

Outcomes Framework

Southwark's Joint Health & Wellbeing Strategy Outcomes Framework

| How will we measure this? | Baseline | | Why measure this? |
	Southwark	London	
Drive 1: A whole family approach to giving children the best start in life			
Percentage of pregnant women who have their booking appointment with a midwife within 10 completed weeks of their pregnancy	63% (2020)	63% (2020) (England)	The National Institute for Health Care Excellence recommends antenatal booking by 10 weeks of pregnancy. The booking appointment allows scheduling of her ultrasound scan, identification of women who might need more than usual care, either because of medical history or social circumstances, for discussion of antenatal screening, taking blood pressure and measuring the woman's height and weight, identification of risk factors such as smoking and offering support, discussion of mood and mental health.
Low birth weight of term babies	3.1% (2020)	3.3% (2020)	Low birth weight increases the risk of childhood mortality and of developmental problems for the child and is associated with poorer health in later life. Inequalities measures will be identified in future iterations of this outcomes framework.
Percentage of 12 month development reviews (health review 1) completed by the time the child turned 12 months	77% (2020/21)	53% (2020/21)	Health visiting is one way that families are supported during the first years of a child's life. Health visitors can provide advice and support on a range of developmental issues, and signpost to services which may be helpful as well as providing a safeguarding function.
Percentage of children achieving a good level of development by the end of Early Years Foundation Stage	Asian – 72% Black – 70% Chinese – 77%	Asian – 76% Black – 71% Chinese – 84%	School readiness is identified though a wide range of developmental areas assessed at the end of Early Years Foundation Stage. Children from areas of social and economic disadvantage are at greater risk of poorer development. Educational outcomes vary by ethnicity across Southwark and London and must be reduced as one way of reducing health inequalities longer term.

	Mixed – 79% White – 80% Total – 74% (2018/19)	Mixed – 77% White – 76% Total – 74% (2018/19)	
Percentage of Y6 children who are very happy or happy with their life	75% (2016)	NA	Measuring how happy children self-report to be with their life at the moment can give a picture of wellbeing for children who attend schools in Southwark. Children's wellbeing is both a cause and a consequence of issues such as body image, self-esteem and poor mental health.
Percentage of Y8 and Y10 children who are very happy or happy with their life	60% (2016)	65% (2016) (National survey sample)	
Percentage of pupils achieving a good pass (>5) in English and Maths GCSE, by broad ethnic group	Asian – 75% Black – 56% Chinese – 83% Mixed – 55% Other – 54% Unclassified – 68% White – 62% Total – 59%	Asian – 69% Black – 51% Chinese – 83% Mixed – 53% Other – 57% Unclassified – 52% White – 56% Total – 57%	A good education is key to ensuring the best start in life for children and will influence their ability to secure healthy employment in adult life. Educational outcomes vary by ethnicity across Southwark and London and must be reduced as one way of reducing health inequalities longer term.

	(2021/22)	(2022/22)	
Percentage of school pupils with social, emotional and mental health needs	2.8% (2021)	2.5% (2021)	Information is collected on primary type of need for children with special educational needs; social, emotional and mental health needs is recorded as one of the needs. Local activities can be informed by this prevalence. This only captures children where these needs have been identified as a special educational need, and won't show children with lower level, but still present, need.
Hospital admissions as a result of self-harm (10-24 years old)	191.5/100,000 (2020/21)	210.5/100,000 (2020/21)	Hospital admissions for self-harm can act as one indicator for prevalence of mental health conditions, although not all acts of self-harm will lead to hospitalisation. With links to other mental health conditions such as depression, the emotional causes of self-harm may require psychological assessment and treatment. Future iterations of the outcomes framework will work to have more mental health indicators, beyond the acute crisis stage.

Drive 2: Healthy employment and good health for working age adults

Proportion of those who are economically inactive who want a job (involuntary unemployment)	30% (2021)	21% (2021)	The economically inactive population mainly includes students, people who are long-term sick and those who are looking after family/home. However, some people want a job but cannot get one, known as involuntary unemployment. Increased job opportunities, access to skills development and inclusive employment will all reduce involuntary unemployment.
Gap in the employment rate between those with a long-term health condition and the overall employment rate	9.4% (2019/20)	12% (2019/20)	The gap in employment rate demonstrates the impact limiting long-term illness has on employment for those in the Live Well life stage. Inclusive employment which focuses on stable and healthy jobs will reduce this gap.
Gap in the employment rate between those in contact with secondary mental health services and the overall employment rate	75% (2019/20)	68% (2019/20)	The gap in employment demonstrates the impact mental illness has on employment for those in the Live Well life stage. Inclusive employment which focuses on stable and healthy jobs will reduce this gap.
Gap in the employment rate between those who are in receipt of long term support for a learning disability (aged 18 to 64) and the overall employment rate	70% (2020/21)	68% (2020/21)	The gap in employment demonstrates the impact a learning disability has on employment for those in the Live Well life stage. Inclusive employment which focuses on stable and healthy jobs will reduce this gap. There are many barriers that face people with a learning disability to access employment including lack of support, employers' attitudes, and a general lack of understanding of what someone can achieve with the right support, from education through to employment.
Percentage of physically active adults	71% (2020/21)	61% (2020/21)	Physical activity reduces risk of many physical health conditions (e.g. cardiovascular disease, coronary heart disease, stroke, diabetes, obesity) and is associated with improved mental health. An individual is deemed physically active if they do at least 150 moderate intensity equivalent minutes of physical activity per week.

Smoking prevalence in adults	16% (2019)	13% (2019)	Smoking is the most important cause of preventable ill health and premature mortality in the UK. Smoking is a major risk factor for many diseases including heart disease, chronic obstructive pulmonary disorder, and lung and many other types of cancer.
Smoking prevalence among adults aged 18-64 in routine and manual occupations	24% (2020)	19% (2020)	Smoking is the most important cause of preventable ill health and premature mortality in the UK. Smoking is a major risk factor for many diseases including heart disease, chronic obstructive pulmonary disorder, and lung and many other types of cancer. In 2019 in UK, around 1 in 4 people in routine and manual occupations smoked compared with just 1 in 1 people in managerial and professional occupations. Focus on smoking prevalence in the population group with highest smoking rates is needed to make the biggest change in overall smoking prevalence.
Proportion of those receiving Universal Credit who are employed (proxy for in-work poverty)	35% (2021)	38% (2021) (Inner London)	In-work poverty affects people based on the sector they work in, their hourly pay and number of hours worked, age, gender, ethnicity and disability. Barriers like access to childcare and transport can also determine whether those working can earn enough to not need to claim Universal Credit to subside their income (<£15,000).

Drive 3: Early identification and support to stay well			
Cancer screening coverage – bowel cancer	57% (2021)	59% (2021)	Bowel cancer screening supports early detection of cancer and polyps which are not cancers but may develop into cancers overtime. About one in 20 people in the UK will develop bowel cancer during their lifetime. This indicator provides an opportunity to incentivise screening promotion and other local initiatives to increase coverage of bowel cancer screening. Current work between Public Health and NHS colleagues aims to identify inequalities in screening coverage.
Cancer screening coverage – cervical cancer (aged 25 to 49 years old)	60% (2021)	59% (2021)	Cervical screening supports detection of cell abnormalities that may become cancer and is estimated to save 4,500 lives in England each year. Improvements in coverage would mean more cervical cancer is prevented or detected at earlier, more treatable stages. Current work between Public Health and NHS colleagues aims to identify inequalities in screening coverage.
Cancer screening coverage – breast cancer	48% (2021)	55% (2021)	Breast cancer screening supports early detection of cancer, at more treatable stages. Screening is estimated to save 1,400 lives in England each year. Current work between Public Health and NHS colleagues aims to identify inequalities in screening coverage.
Cumulative percentage of the eligible population aged 40-74 who received an NHS health check	50% (2016/17-2020/21)	37% (2016/17-2020/21)	The NHS health check programme aims to help prevent heart disease, stroke, diabetes and kidney disease. Everyone between the ages of 40-74, who has not already been diagnosed with one of these conditions, will be invited to have a check. A high uptake is important to identify early signs of poor health leading to opportunities for early interventions.

Proportion of all NHS health checks completed by residents from a Black, Asian or minority ethnicity background	TBC	NA	The NHS health check programme aims to help prevent heart disease, stroke, diabetes and kidney disease. Social and economic factors play a part in the risk of developing these diseases. By monitoring the proportion of all health checks who are completed by residents from a Black, Asian or minority ethnic background, an equitable service can be ensured in line with the strategy.
Dementia diagnosis rate for 65+ years old (recorded/ expected)	80% (Sept 21 – Sept 22)	67% (Sept 21- Sept 22)	Not everyone with dementia has a formal diagnosis. This measure compares the number of people thought to have dementia ith the number of people with a disgnosis, aged 65 and over. The target is for at least two thirds of people with dementia to be diagnosed
Proportion of adult carers who have found it easy to find information and advice about support, services or benefits	53% (2018/19)	60% (2018/19)	Unpaid or informal carers play an integral role in supporting the family members and friends they care for. Carers should be able to easily access information to aid their caring responsibilities. Better engagement with support and services will benefit both carers and their dependents.
Number of emergency hospital admissions due to falls in people aged 65 and over	2,005 per 100,000 (2020/21)	2,023 per 100,000 (2020/21)	Falls are the largest cause of emergency hospital admissions for older people and impact on long-term outcomes e.g. move from home to nursing or residential care. Measure shows the rate of patients with fall related emergency admissions entering a hospital setting – not all falls will result in emergency admission, and not all falls can be prevented within the falls prevention work.
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/ rehabilitation services	82% (2020/21)	84% (2020/21)	Reablement services (enablement, intermediate care and rehabilitation following a hospital episode) aim to help people to remain at home. This measure reflects the joint work of health and care services. Additional measures will be included to cover all aspects of reablement after a stay in hospital.

Drive 4: Strong and connected communities

Percentage of residents who say they belong to their local area	71% (2018/19)	73% (2018/19)	The Greater London Authority include a measure on belonging to local area in the annual Survey of Londoners to understand perceived relationships. Belonging promotes trust, safety and feeling supported.
Percentage of residents who say they feel lonely often or always	9% (2018/19)	8% (2018/19)	The Greater London Authority include a measure on loneliness in the annual Survey of Londoners to understand perceived relationships. In Southwark in 2019, people who were single and with no children, with long-term mental health conditions, with low and very low food security and living in social housing were more likely to report feeling lonely often.
Percentage of residents who have participated in formal volunteering in the last year	NA	28% (2018/19)	The Greater London Authority include a measure on volunteering in the annual Survey of Londoners to understand participation. Volunteering benefits the local community, can build self-esteem and new skills, and builds a sense of belonging. Volunteers are essential to support the role the voluntary and community sector play in promoting health and wellbeing.
Percentage of residents who agree that their local areas is a place where people from different backgrounds get on well together	76% (2018/19)	75% (2018/19)	The Greater London Authority include a measure on different backgrounds in the annual Survey of Londoners to understand perceived relationships. There are many economic and cultural benefits of diversity, and these can be experienced by everyone in the community to promote similar life opportunities for all.

Drive 5: Integration of Health and Social Care

Current work in Partnership Southwark to identify how to evaluate the effectiveness of partnership working will inform this section of the outcomes framework. A possible health and wellbeing survey will help to capture residents' views on how well this integration works for them.

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Find out more on the JHWS webpage.