MIDDLESBROUGH: DRAFT LOCAL AREA AGREEMENT OUTCOMES FRAMEWORK

PRMOTING HEALTHIER COMMUNITIES FOR AND EFFECTIVE SOCIAL CARE FOR ADULTS

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STRATEGIC PRIORITIES

Ref	Priority
1	Help promote health, well-being, independence, inclusion and choice
2	Ensure that, when people fall ill, they get good quality care and are made better faster
3	Increase Life Expectancy, Improve Health and Reduce Health Inequalities
4	Jointly commission health and social care services with voluntary and independent sectors.

Ref	Strategic Priority	Priority Outcomes
1	Help promote health, well-being, independence, inclusion and choice	 Improve the mental health and well-being of people with mental illnesses Reduce the levels of deliberate self harm and suicide Improve the quality of life for carers by increasing the number of carers in receipt of services Improve access to primary health care for people with disabilities Improve the levels of employment for people with disabilities (physical, learning and mental health) Maximise the independence of older people Improve the health of older people
2	Ensure that, when people fall ill, they get good quality care and are made better faster	 Reduce hospital admissions and stays Supporting people with long term conditions
3	Ensure that we close the gap between levels of health of Middlesbrough residents and the national average, as well as the gap between priority neighbourhoods and the Middlesbrough average	 Improve life expectancy and reduce health inequalities within the local area, by narrowing the gap in all-age, all-cause mortality Improve the health of the population and reduced health inequalities Reduce premature mortality rates and reduce inequalities in premature mortality rates between wards/ neighbourhoods with a particular focus on reducing the risk factors for heart disease, stroke and related diseases (CVD) (smoking, diet and physical activity) Reduce premature mortality rates from heart disease and stroke and related diseases so that the absolute gap between the national rate and the rate for the district is reduced by [x]% by 2010 [x to be agreed as part of the contribution to the reduction in the gap between the Spearhead Group and the England average (national PSA target) Reduce the gap in premature mortality rates between the most deprived 20% of wards/ neighbourhoods with a particular focus

Ref	Strategic Priority	Priority Outcomes
		 on reducing the gap in smoking prevalence in those areas Reduce the mortality rate from cancer in people aged under 75 years per 100,000 (directly age standardized) population
4	Jointly commission health and social care services with voluntary and independent sector providers	 Produce a joint commissioning strategy

INDICATORS AND TARGETS

Strategic Priority 1 - H	elp promote health,	well-being,	independe	ence, inclu	usion and	choice			
Priority Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
Improve the mental health and well-being of the population	Mortality rate from suicide and undetermined injury per 100,000 directly age standardized				20%red uction from baseline				
Improve the quality of mental health services available to those with mental illness	population Percentage of people on enhanced CPA receiving follow up (by phone or face to face) within 7 days of hospital discharge								
Reduce the levels of deliberate self harm									How do we want to measure this
Improve the quality of	The number of	2004/05	Without						

Strategic Priority 1 - H	elp promote health,	well-being,	independ	ence, inclu	usion and	choice			
Priority Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
life for carers by increasing the number of carers in receipt of services.	carers receiving a specific carers service as a percentage of clients receiving community based services, as measured by PAF C62	5.1%	LSPA 10% With LPSA 18%						
Improve access to primary health care for people with disabilities									How do we want to measure this

Strategic Priority 1 - H Priority Outcome	Indicator	Baseline	Targets	Targets	1	Lead	Target	Data	Comments
		2005/06	2006/07	2007/08		partner	Source	source	
Increase employment	The number of	2004/05	Without						
of people with	people with a		LPSA						
disabilities (physical,	physical disability*	0							
learning and mental	or a learning		0						
health)	disability** or a								
	mental health		With						
	problem*** and in		LPSA						
	receipt of an		75						
	incapacity benefit								
	**** who obtain								
	permitted work								
	***** or regular								
	voluntary/supporte								
	d work that is								
	sustained for at								
	least 4 hours a								
	week for a period								
	of at least 13								
	consecutive weeks								
	or more with the								
	help of								
	Middlesbrough								
	Council, as								
	measured by								
	Middlesbrough								
	Council data								

Priority Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08		Lead partner	Target Source	Data source	Comments
	The number of	2003/00	Without	2007/00	2000/03		Jource	Source	
	people with a	200 1,00	LPSA						
	physical disability*	0							
	or a learning		0						
	disability** or a								
	mental health		Without						
	problem*** and in		LPSA						
	receipt of an								
	incapacity benefit		20						
	**** who obtain								
	sustained								
	employment of 16								
	hours or more a								
	week for at least 13								
	consecutive weeks								
	or with the help of								
	Middlesbrough								
	Council, as								
	measured by								
	Middlesbrough								
	Council data								
Maximise the	The percentage of								
independence of older									
people	delivery of								
	equipment and								
	aids to daily living								
	within 7 workings								
	days (BVPI 56)								

Priority Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08		Lead partner	Target Source	Data source	Comments
	The number of	2003/00	2000/07	2007/00	2000/03	partite	Jource	Source	
	households								
	receiving intensive								
	home care per								
	1000 population								
	(BVPI 53)								
	Implementation of								
	the osteoporosis								
	and bone health								
	strategy								
	The number of								
	people taking up								
	direct payments								
	(BV201)								
Improve the health of	Ensure that all								
older people	patients in								
	appropriate age								
	groups have								
	access to flu								
	vaccination								
	services to achieve								
	a minimum								
	vaccination rate of 70%								
	10%								
	Implement the								
	osteoporosis								
	strategy and								
	pathways across								
	primary and								
	secondary care								

Strategic Priority 2 - Priority Outcome	Indicator	Baseline	Targets	Targets	Lead	Target	Data	Comments
,		2005/06	2006/07	2007/08	partner	Source	source	
Reduce hospital	Number of							
admissions and stays	emergency unscheduled acute and community hospital bed days occupied by a person aged 75 or more in NHS hospitals in Middlosbrough	2003/04 41174	Without LPSA 5% reduction With LPSA 8%					
	Middlesbrough		8% reduction					
	Number of people aged 75 or over admitted to hospital as a result of falls							
	Percentage of patients who receive their hospital treatment within 18 weeks of referral by a GP by 2008		100%					

Strategic Priority 2 -	Ensure that, when p	eople fall ill	, they get g	ood qualit	y care and	l are made	e better fas	ster	
Priority Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
Supporting people with long term conditions	Number of community modern matrons providing case management in primary and community settings for people with log term conditions and high intensity needs								

Strategic Priority 3 – Outcome	Indicator	Baseline			Targets	Lead		Data	Comments
Outcome	mulcator	2005/06	Targets 2006/07	Targets 2007/08	2008/09	partner	Target Source	source	Comments
Improve life expectancy and	Infant mortality:					•			
reduce health inequalities within the local area, by narrowing the gap in	Percentage of women smoking in pregnancy	43%	45%						
all-age, all-cause mortality	Percentage of new mothers known to have initiated breast feeding								
	Measures against sudden infant death syndrome								
	Adult mortality								
	Number of 4 week quitters	27%	25%						
	Reduce the incidence of smoking further than the national target								

Outcome	Increase Life Expecta Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
Improve the health of	Increase number of								
the population and	patients at risk of								
reduced health	hepatitis b								
inequalities	immunised for first								
	dose and all three								
	doses								
	Percentage of								
	patients attending								
	GUM clinics who are								
	offered an								
	appointment to be								
	seen within 48 hours								
	of contacting a								
	service								
	Percentage of								
	people aged 15-24								
	accepting screening								
	for Chlamydia								
	Percentage of new								
	diagnosis of								
	gonorrhoea per								
	100,000 population								
	Undertake a								
	comprehensive								
	health equity audit								
	across								
	Middlesbrough								

		Strategic Priority 3 – Increase Life Expectancy, Improve Health and Reduce Health Inequalities Outcome Indicator Baseline Targets Targets Targets Lead Target Data Comments							
Outcome	Indicator	2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
Reduce premature	Number of GP								
mortality rates and	practices with PCT								
reduce inequalities in	validated registers of								
premature mortality	patients without								
rates between wards/	symptoms of								
neighbourhoods with	cardiovascular								
a particular focus on	disease but who								
reducing the risk	have an absolute								
factors for heart	risk of CHD events								
disease, stroke and	greater than 30%								
related diseases	over the next 10								
(CVD) (smoking, diet	years								
and physical activity)									
Reduce premature	Percentage of								
mortality rates from	patients with CHD								
heart disease and	whose blood								
stroke and related	pressure reading								
diseases so that the	(measured in last 15								
absolute gap	months) is 150/90 or								
between the national	less								
rate and the rate for									
the district is reduced	Percentage of								
by [<i>x</i>]% by	patients with CHD								
2010 [x to be agreed	whose last								
as part of the	measured								
contribution to the	cholesterol								
reduction in the gap	(measured within								
between the	the last 15 months)								
Spearhead Group	is 5mmol/1 or less								
and the England									
average (national									

Strategic Priority 3 – Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
PSA target)									
Reduce the gap in premature mortality rates between the most deprived 20% of wards/ neighbourhoods and the least deprived 20% of wards/ neighbourhoods with a particular focus on reducing the gap in smoking prevalence in those areas	Broader strategy on obesity : obesity status amongst the GP registered population aged 15 -75 years. Reduction in the percentage of those aged 15-75 whose body mass index (as recorded on the GP system) is 30 or greater and increase the numbers recorded from our general registered population								
	Develop a comprehensive and intergrated exercise and dietary advice plan. To offer new lifestyle packages (12 week programme) to those patients with a BMI less than 29		1,000 patients receivin g lifestyle package s						

<u>Strategic Priority 3 –</u> Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	Targets 2008/09	Lead partner	Target Source	Data source	Comments
Reduce the mortality	Implement Tobacco								
rate from cancer in	control strategy in								
people aged under 75	line with national								
years per 100,000	legislation								
(directly age									
standardized)	Implementation of								
population	NICE Improving								
	Outcomes Guidance								
	(IOG) (including								
	Improving								
	Supportive and								
	Palliative Care								
	Services								
	Guidnance)								
	Roll out the NHS		25%	50%	100%				
	Bowel Cancer		coverag	coverag	coverag				
	Screening		е	е	е				
	Programme to all								
	60-69 year old adult								
	populations in								
	England by 2009								
	Achieve year on								
	year average breast								
	screening rates as								
	measured through 3								
	yearly programme								
	Achieve year on								
	year increases in								

Strategic Priority 3 – Increase Life Expectancy, Improve Health and Reduce Health Inequalities									
Outcome	Indicator	Baseline 2005/06	Targets 2006/07	Targets 2007/08	•	Lead partner	Target Source	Data source	Comments
	the number of women attending for cytology screening across all relevant age groups								

Strategic Priority 4 - Jointly commission health and social care services with voluntary and independent sector providers									
Outcome	Indicator	Baseline 2006/07	Targets 2007/08	Targets 2008/09	Targets 2009/10	Lead partner	Target Source	Data source	Comments
Jointly agreed commissioning	Partnership formed								
strategy across partners to implement the White Paper 'Our Health, Our Care, Our Say' 2005	Strategy developed								

PERFORMANCE REWARD ELEMENT (STRETCHED PERFORMANCE)

The following indicators are for stretched performance. Targets agreed xxx 2006

Increasing employment of people with disabilities (physical, learning and mental health), defined as training, work placement, voluntary work and paid employment for a period sustainable for 16 weeks.

Target agreed with DWP and cleared by ODPM

Indicators by which performance will be measured

- 1. The number of people with a physical disability* or a learning disability** or a mental health problem*** and in receipt of an incapacity benefit **** who obtain permitted work ***** or regular voluntary/supported work that is sustained for at least 4 hours a week for a period of at least 13 consecutive weeks or more with the help of Middlesbrough Council, as measured by Middlesbrough Council data
- 2. The number of people with a physical disability* or a learning disability** or a mental health problem*** and in receipt of an incapacity benefit **** who obtain sustained employment of 16 hours or more a week for at least 13 consecutive weeks or with the help of Middlesbrough Council, as measured by Middlesbrough Council data

Improve the quality of life for carers by increasing the number of carers in receipt of services

Target agreed with DH and cleared by ODPM

Indicator by which performance will be measured

The number of carers receiving a specific carers service as a percentage of clients receiving community based services, as measured by PAF C62

Reducing hospital admissions and stays.

Target agreed with DH and cleared by ODPM.

Indicator by which performance will be measured

Number of emergency unscheduled acute and community hospital bed days (defined in the Department of Health guidance for Local Delivery Plans 2005-2008*) occupied by a person aged 75 or more in NHS hospitals in Middlesbrough

FUNDING STREAM INFORMATION

Automatically pooled funding							
Funding stream	07/08	08/09	09/10				
Neighbourhood Renewal Fund		-					

Additional Pooled Funding			
Funding stream	07/08	08/09	09/10
	-	-	-

Aligned Funding			
Funding stream	07/08	08/09	09/10
	-	-	-

ENABLING MEASURES