High Level Messages from JSNA

Mortality

Birmingham has lower life expectancy than England, particularly for men. The major causes of the excess of premature years of life lost are:

- Infant mortality
- Cardiovascular diseases
- Respiratory diseases
- Alcohol misuse

Children & young people

Children in Birmingham have particularly poor outcomes related to:

- Childhood obesity
- Indicators related to adverse experiences in childhood
- Vaccination coverage
- The effects of poverty

Working age adults

Adults in Birmingham have particularly poor outcomes related to:

- Unemployment
- Households in temporary accommodation
- The impact of unhealthy behaviours such as substance misuse and physical inactivity
- Mental and physical health of our most vulnerable adults
- Cancer screening and chlamydia detection
- Incidence of TB

Older people

Older people in Birmingham have particularly poor outcomes related to:

- Social isolation of care users and carers
- Health related quality of life

- Enhancing quality of life for people with care and support needs¹
- Delaying and reducing the need for care and support
- Ensuring that people have a positive experience of care

¹ Birmingham JSNA 2017/18 Strategic Overview Chapter. Adult Social Care Outcomes Framework. https://www.birmingham.gov.uk/downloads/file/8894/adult social care outcomes framework december 2 017

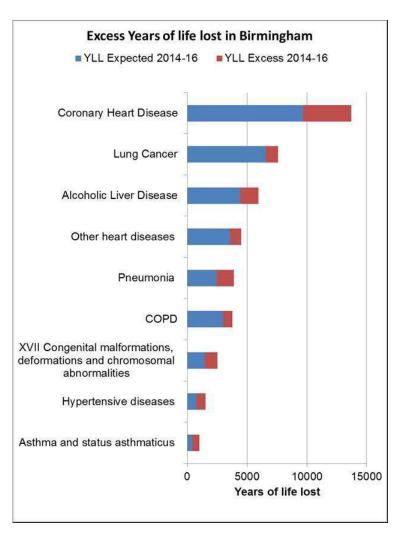
Gap in life expectancy

Infant mortality is the major cause of the increased number of premature years of life lost between Birmingham and England.

The major causes excluding infant mortality are shown in the figure opposite. This method compared the years of life lost in Birmingham in 2014-16, with the number that would be expected if Birmingham experienced the average rates for England. An expected number of life years lost have been calculated, for each gender and age group, for deaths from every condition published in the ONS Vital Statistics tables. These calculations focussed on the 1-74 age groups.

The majority of these can be grouped as;

- Cardiovascular disease
- Respiratory disease
- Alcohol misuse



Public Health Outcomes Framework Indicators

The Public Health Outcomes Framework (PHOF) is a collection of indicators that help us understand how well public health is being improved and protected. It was last updated in August 2018.

The framework concentrates on two high-level outcomes to be achieved across the public health system, and groups further indicators into four 'domains' that cover the full spectrum of public health. The outcomes reflect a focus not only on how long people live, but on how well they live at all stages of life.

Overarching indicators:

• Life expectancy and healthy life expectancy

Domains:

- Improving the wider determinants of health
- Health improvement
- Health protection
- Healthcare public health and preventing premature mortality

Each of the outcomes for Birmingham has been collated according to our performance relative to national, core city and Chartered Institute of Public Finance and Accountancy (CIPFA) nearest neighbour comparators. Although many of the indicators will be influenced by the underlying social and economic environment, highlighting those where Birmingham performs worse than similar areas may suggest outcomes that are more likely to be improved by better service provision. The indicators are collated into groups as follows:

Performing well	Indicators are significantly better than national comparators
Performing poorly	Indicators are significantly worse than the national average and also worse than the average for other core cities and CIPFA nearest neighbours
Worse than average (1)	Indicators are significantly worse than the national average, but better than the average for one of core city or CIPFA nearest neighbour comparators

Performing poorly

Indicators that are significantly worse than national, core city and CIPFA nearest neighbour comparators are shown below:

Mortality

- Birmingham has the highest infant mortality rate in the country and the rate is increasing, whereas nationally there is a decline
- Life expectancy at birth for males
- Under 75 mortality for cardiovascular disease considered preventable for females and respiratory disease for males.
- Mortality from communicable disease, including influenza

Children & young people

- Low birth weight of term babies
- Children in low income families
- School readiness for all children
- First time entrants to youth justice
- NEETs
- Child excess weight at reception and Year 6

Older people

- Social isolation of care users and carers
- Health related quality of life for older people
- Hip fractures in males

Wider determinants of health

- Unemployment
- Households in temporary accommodation
- Healthy eating
- Adult physical activity

Vulnerable groups

- · Accommodation for adults with a learning disability
- Proportion of adults in contact with secondary mental health services

Health protection

- Childhood vaccination coverage
- HPV vaccination for teenage girls
- Flu vaccination for at risk individuals
- Shingles vaccination
- Breast, cervical and bowel cancer screening
- Chlamydia detection
- Incidence of TB

Service provision

- Rates of emergency readmission within 30 days of hospital discharge
- Successful completion of non-opiate drug treatment
- Adults with substance misuse treatment need who successfully engage in community-based structured treatment following release from prison