Public Health Outcomes Framework – Key changes and updates for Cambridgeshire and its districts: August 2019

Introduction and overview

The Department of Health first published the Public Health Outcomes Framework (PHOF) for England in January 2012, setting out a vision for progress in public health. The framework was revised in November 2016, presenting a refreshed PHOF for England 2016-2019; a set of indicators helping us to understand how well public health is being improved and protected.

> The latest technical specification can be found at:
> https://www.gov.uk/government/publications/public-health-outcomes-framework-2016-to-2019

The PHOF focuses on the overarching indicators of **healthy life expectancy** and **life expectancy**, key measures of the overall health of the population.

These overarching indicators are supported by further indicators across four domains, helping local systems to view the context and drivers of healthy life expectancy:

1. Wider determinants of health
2. Health improvement
3. Health protection
4. Healthcare public health and premature mortality

Public Health England present data for the PHOF in an Interactive Fingertips Data Tool at www.phoutcomes.info.

Data in the PHOF are updated quarterly in February, May, August and November. Each update refreshes indicators for which new figures have become available. Few indicators actually show quarterly data, with the majority presenting annual or 3-yearly rolling data, often guided by the stability of the numbers available.

Most indicators in the PHOF are benchmarked against the England average, but some are compared with a national target, goal or percentile. Indicators in this summary are colour coded to indicate their current rating (RAG-ratings):

Statistically significantly worse than the England average or below target
Statistically similar to the England average or similar to target
Statistically significantly better than the England average or above target

This local summary:

- Highlights indicators with newly published/revised data or changed RAG-ratings
- Provides a summary of new indicators or new definitions introduced
- Provides a summary count of the number of indicators in each RAG-rating category (compared to England) at August 2019
- Lists all indicators which rate statistically significantly worse than the England average or below the national target (red rated indicators) at August 2019
- Lists 'Red-Red' indicators – those which are assessed as significantly worse than the England average and also have a negative recent trend (see glossary for full definition) *NEW*
- Lists all indicators updated this quarter

It is important to remember that indicators rating similar to or better than the national average do not necessarily mean that they are not important public health issues as they may affect large numbers of people or disproportionately affect particular vulnerable groups or deprived areas.

Main source: Public Health England. Public Health Outcomes Framework.
© Crown Copyright 2019.
Contact: Cambridgeshire County Council Public Health Intelligence:
PHI-Team@cambridgeshire.gov.uk

Images designed by Freepik. Available at http://www.flaticon.com

CAMBRIDGESHIRE

Overarching indicators

RAG-rating changes with the August 2019 update

None.

Wider determinants of health

RAG-rating changes with the August 2019 update: 'Better'

1.04 First time entrants to the youth justice system
2018 data added. The rate of first time entrants to the youth justice system per 100,000 population (10-17yrs) has declined to a level statistically significantly better than the England average.

RAG-rating changes with the August 2019 update: 'Worse'

None.

Health improvement

RAG-rating changes with the August 2019 update

None.

Health protection

RAG-rating changes with the August 2019 update

None.

Other indicator updates and revisions

3.02 Chlamydia detection rate (15-24 year olds)
2018 data added and 2017 data revised. The rate in Cambridgeshire remains worse than the national target (target is 1,900 to 2,299 per 100,000).

3.05i Treatment completion for tuberculosis (TB)
Data added and back series revised from 2001 to 2017. In 2017 the completion rate for Cambridgeshire was statistically similar to the rate for England.

3.05ii Incidence of tuberculosis (TB)
Data added and back series revised from 2000-02 to 2016-18. In 2016-18 the incidence rate for Cambridgeshire was statistically significantly better than the rate for England.

Healthcare and premature mortality

RAG-rating changes with the August 2019 update: 'Better'

4.16 Estimated dementia diagnosis rate (aged 65+)
2019 data added. The 2019 estimated dementia diagnosis rate in Cambridgeshire has improved to a level statistically similar to the national benchmark (benchmark – similar to a value of 66.7%).

RAG-rating changes with the August 2019 update: 'Worse'

None.

Summary count of RAG-ratings for Cambridgeshire

Overall, the PHOF indicators for Cambridgeshire when compared to the England average are assessed as;

106	Better
80	Similar
30	Worse
48	Not compared/other

Furthermore, 5 indicators are 'Red-Red' for Cambridgeshire (see glossary for definition).

Note: The summary count has limitations and does not consider the context or contributing factors impacting on local indicator values. The summary count represents the count for the latest data release period only (August 2019), and does not represent recent trends. Some indicators may be prone to period to period change.

List of all red rated indicators as at August 2019

1.02i School readiness: the percentage of children with free school meal status achieving a good level of development at the end of reception (male, female, persons)

1.02ii School readiness: the percentage of Year 1 pupils achieving the expected level in the phonics screening check (male, persons)

1.02ii School readiness: the percentage of Year 1 pupils with free meal status achieving the expected level in the phonics screening check (male, female, persons)

1.06i Adults with a learning disability who live in stable and appropriate accommodation (male, female, persons)

1.08ii Gap in the employment rate between those with a learning disability and the overall employment rate (male, female, persons)

1.10 Killed and seriously injured (KSI) casualties on England's roads

2.05ii Proportion of children aged 2-2½yrs receiving ASQ-3 as part of the Healthy Child Programme or integrated review

2.07ii Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)

2.10ii - Emergency hospital admissions for intentional self-harm (male, female, persons)

2.15ii Successful completion of drug treatment - non-opiate users

2.18 Admission episodes for alcohol-related conditions (Narrow) (female)

2.20ii Cancer screening coverage - cervical cancer

2.22iv Cumulative percentage of the eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check

3.02 Chlamydia detection rate (15-24 year olds)

3.03x Population vaccination coverage - MMR for two doses (5 years old)~

3.03xiv Population vaccination coverage - Flu (aged 65+)~

3.03xv Population vaccination coverage - Flu (at risk individuals)~

3.03vi Population vaccination coverage - Hib / Men C booster (5 years old)

3.03xvii Population vaccination coverage – Shingles vaccination coverage (70 year olds)~

3.04 HIV late diagnosis~

3.08 Adjusted antibiotic prescribing in primary care by the NHS

4.08 Mortality rate from a range of specified communicable diseases, including influenza (female)

4.09ii Proportion of adults in the population in contact with secondary mental health services

4.16 Estimated dementia diagnosis rate (aged 65 and over)

~assessed as below the national target, not statistically significantly worse compared to England average

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

List of all red-red indicators as at August 2019

1.06i   Adults with a learning disability who live in stable and appropriate accommodation
2.07ii Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)
2.20ii Cancer screening coverage - cervical cancer
3.02   Chlamydia detection rate / 100,000 aged 15-24
3.03vi Population vaccination coverage - Hib / Men C booster (5 years old)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's [Fingertips](#) website, such as additional break-down of males and females, where available.

CAMBRIDGE

Overarching indicators

RAG-rating changes with the August 2019 update

None.

Wider determinants of health

RAG-rating changes with the August 2019 update

None.

Health improvement

RAG-rating changes with the August 2019 update

None.

Health protection

RAG-rating changes with the August 2019 update: 'Better'

None.

RAG-rating changes with the August 2019 update: 'Worse'

3.05ii Incidence of tuberculosis (TB)
Data added and back series revised from 2000-02 to 2016-18. In 2016-18 the incidence rate for Cambridge has increased to a level assessed as statistically significantly worse than the rate for England.

Other indicator updates and revisions

3.02 Chlamydia detection rate (15-24 year olds)
2018 data added and 2017 data revised. Rates in Cambridge remain worse than the national target (target is 1,900 to 2,299 per 100,000).

Healthcare and premature mortality

RAG-rating changes with the August 2019 update: 'Better'

None.

RAG-rating changes with the August 2019 update: 'Worse'

4.11 Emergency readmissions within 30 days of discharge from hospital
2017/18 data added. The proportion of emergency readmissions for Cambridge has increased to a level assessed as statistically significantly worse than the rate for England.

Summary count of RAG-ratings for Cambridge

Overall, the PHOF indicators for Cambridge when compared to the England average are assessed as;

37	Better
71	Similar
28	Worse
25	Not compared/other

Furthermore, 4 indicators are 'Red-Red' for Cambridge (see glossary for definition).

Note: The summary count has limitations and does not consider the context or contributing factors impacting on local indicator values. The summary count represents the count for the latest data release period only (August 2019), and does not represent recent trends. Some indicators may be prone to period to period change.

List of all red rated indicators as at August 2019

1.08i	Gap in the employment rate between those with a long-term health condition and the overall employment rate
1.10	Killed and seriously injured (KSI) casualties on England's roads
1.14i	The rate of complaints about noise
1.15i	Statutory homelessness - Eligible homeless people not in priority need
2.07i	Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)
2.10ii	Emergency hospital admissions for intentional self-harm (male, female, persons)
2.17	Estimated diabetes diagnosis rate
2.18	Admission episodes for alcohol-related conditions - narrow definition (male, female, persons)
2.20i	Cancer screening coverage - breast cancer
2.20ii	Cancer screening coverage - cervical cancer
2.20iii	Cancer screening coverage - bowel cancer
2.20iv	Abdominal aortic aneurysm screening – coverage (male)
2.24i	Emergency hospital admissions due to falls in people aged 65 and over(male, female, persons)
2.24ii	Emergency hospital admissions due to falls in people aged 65-79 (male, persons)
2.24iii	Emergency hospital admissions due to falls in people aged 80+ (female, persons)
3.02	Chlamydia detection rate (15-24 year olds)
3.05ii	Incidence of tuberculosis (TB)
4.11	Emergency readmissions within 30 days of discharge from hospital
4.15iv	Excess winter deaths index (3 years, age 85+) (female)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

List of all red-red indicators as at August 2019

1.15i   Statutory homelessness - Eligible homeless people not in priority need
2.07ii   Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)
2.20ii   Cancer screening coverage - cervical cancer
3.02   Chlamydia detection rate / 100,000 aged 15-24

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

EAST CAMBRIDGESHIRE

Overarching indicators

RAG-rating changes with the August 2019 update

None.

Wider determinants of health

RAG-rating changes with the August 2019 update: 'Better'

None.

RAG-rating changes with the August 2019 update: 'Worse'

1.03 Pupil absence
2017/18 data added. The percentage in East Cambridgeshire has increased to a level statistically similar to the England average.

Health improvement

RAG-rating changes with the August 2019 update

None.

Health protection

RAG-rating changes with the August 2019 update

None.

Other indicator updates and revisions

3.02 Chlamydia detection rate (15-24 year olds)
2018 data added and 2017 data revised. Rates in East Cambridgeshire remain worse than the national target (target is 1,900 to 2,299 per 100,000).

3.05ii Incidence of tuberculosis (TB)
Data added and back series revised from 2000-02 to 2016-18. In 2016-18 the incidence rate for East Cambridgeshire remains statistically significantly better than the national rate.

Healthcare and premature mortality

RAG-rating changes with the August 2019 update: 'Better'

4.16 Estimated dementia diagnosis rate (aged 65+)
2019 data added. The rate in East Cambridgeshire has increased to a level statistically similar to England.

RAG-rating changes with the August 2019 update: 'Worse'

None.

Summary count of RAG-ratings for East Cambridgeshire

Overall, the PHOF indicators for East Cambridgeshire when compared to the England average are assessed as;

50	Better
68	Similar
8	Worse
35	Not compared/other

Furthermore, 1 indicator is 'Red-Red' for East Cambridgeshire (see glossary for definition).

Note: The summary count has limitations and does not consider the context or contributing factors impacting on local indicator values. The summary count represents the count for the latest data release period only (August 2019), and does not represent recent trends. Some indicators may be prone to period to period change.

List of all red rated indicators as at August 2019

1.09ii	Sickness absence - the percentage of working days lost due to sickness absence
1.10	Killed and seriously injured (KSI) casualties on England's roads
2.07ii	Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)
2.10ii	Emergency Hospital Admissions for Intentional Self-Harm (female, persons)
3.02	Chlamydia detection rate (15-24 year olds)
3.08	Adjusted antibiotic prescribing in primary care by the NHS
4.16	Estimated dementia diagnosis rate (aged 65 and over)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

List of all red-red indicators as at August 2019

2.07ii   Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

FENLAND

Overarching indicators

RAG-rating changes with the August 2019 update

None.
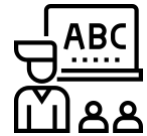
Wider determinants of health

RAG-rating changes with the August 2019 update: 'Better'

None.

RAG-rating changes with the August 2019 update: 'Worse'

1.03 Pupil absence
2017/18 data added. The percentage in Fenland has increased to a level statistically significantly worse than the England average.

Health Improvement

RAG-rating changes with the August 2019 update

None.

Health protection

RAG-rating changes with the August 2019 update

None.

Other indicator updates and revisions

3.02 Chlamydia detection rate (15-24 year olds)
2018 data added and 2017 data revised. Rates in Fenland remain worse than the national target (target is 1,900 to 2,299 per 100,000).

3.05ii Incidence of tuberculosis (TB)
Data added and back series revised from 2000-02 to 2016-18. In 2016-18 the incidence rate for Fenland remains statistically significantly better than the national rate.

Healthcare and premature mortality

RAG-rating changes with the August 2019 update: 'Better'

None.

RAG-rating changes with the August 2019 update: 'Worse'

4.11 Emergency readmissions within 30 days of discharge from hospital
2017/18 data added. The proportion of emergency readmissions for Fenland has increased to a level assessed as statistically significantly worse than the rate for England.

Summary count of RAG-ratings for Fenland

Overall, the PHOF indicators for Fenland when compared to the England average are assessed as;

10	Better
88	Similar
35	Worse
28	Not compared/other

Note: The summary count has limitations and does not consider the context or contributing factors impacting on local indicator values. The summary count represents the count for the latest data release period only (August

9

2019), and does not represent recent trends. Some indicators may be prone to period to period change.

List of all red rated indicators as at August 2019

0.1ii	Life expectancy at birth (Male, Female)
0.1ii	Life expectancy at 65 (males)
0.2iv	Gap in life expectancy at birth between each local authority and England as a whole (Male, Female)
1.01i	Children in low income families (all dependent children under 20)
1.01ii	Children in low income families (under 16s)
1.03	Pupil absence
2.02i	Breastfeeding - breastfeeding initiation (female)
2.07ii	Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female)
2.10ii	Emergency Hospital Admissions for Intentional Self-Harm (male, female, persons)
2.11ii	Average number of portions of fruit consumed daily (adults)
2.12	Percentage of adults (aged 18+) classified as overweight or obese
2.13i	Percentage of physically active adults
2.13ii	Percentage of physically inactive adults
2.18	Admission episodes for alcohol-related conditions - narrow definition (male, female, persons)
2.20iii	Cancer screening coverage - bowel cancer
3.02	Chlamydia detection rate (15-24 year olds)
3.08	Adjusted antibiotic prescribing in primary care by the NHS
4.03	Mortality rate from causes considered preventable (male, female, persons)
4.05i	Under 75 mortality rate from cancer (female)
4.07i	Under 75 mortality rate from respiratory diseases (male, persons)
4.07ii	Under 75 mortality rate from respiratory disease considered preventable (male, persons)
4.08	Mortality rate from a range of specified communicable diseases, including influenza (female, persons)
4.11	Emergency readmissions within 30 days of discharge at hospital

4.16   Estimated dementia diagnosis rate (aged 65+)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

List of all red-red indicators as at August 2019

None.

HUNTINGDONSHIRE

Overarching indicators

RAG-rating changes with the August 2019 update

None.

Wider determinants of health

RAG-rating changes with the August 2019 update

None.

Health improvement

RAG-rating changes with the August 2019 update

None.

Health protection

RAG-rating changes with the August 2019 update: 'Better'

3.08 Adjusted antibiotic prescribing in primary care by the NHS
2018 data added. The ratio (indirectly standardised ratio per STAR-PU) for Huntingdonshire has decreased to a level assessed as statistically significantly better (lower) than the national benchmark (benchmark – mean England prescribing 2013/14).

RAG-rating changes with the August 2019 update: 'Worse'

None.

Other indicator updates and revisions

3.02 Chlamydia detection rate (15-24 year olds)
2018 data added and 2017 data revised. Rates in Huntingdonshire remain worse than the national target (target is 1,900 to 2,299 per 100,000).

3.05ii Incidence of tuberculosis (TB)
Data added and back series revised from 2000-02 to 2016-18. In 2016-18 the incidence rate for Huntingdonshire remains statistically significantly better than the national rate.

Healthcare and premature mortality

RAG-rating changes with the August 2019 update

None.

Summary count of RAG-ratings for Huntingdonshire

Overall, the PHOF indicators for Huntingdonshire when compared to the England average are assessed as;

55	Better
73	Similar
5	Worse
28	Not compared/other

Furthermore, 1 indicator is 'Red-Red' for Huntingdonshire (see glossary for definition).

Note: The summary count has limitations and does not consider the context or contributing factors impacting on local indicator values. The summary count represents the count for the latest data release period only (August 2019), and does not represent recent trends. Some indicators may be prone to period to period change.

List of all red rated indicators as at August 2019

1.10   Killed and seriously injured (KSI) casualties on England's roads
2.11ii   Average number of portions of fruit consumed daily (adults)
3.02   Chlamydia detection rate (15-24 year olds)
3.04   HIV late diagnosis~
3.08   Adjusted antibiotic prescribing in primary care by the NHS
4.08   Mortality rate from a range of specified communicable diseases, including influenza (female)

~assessed as below the national target, not statistically significantly worse compared to England average

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

List of all red-red indicators as at August 2019

3.02   Chlamydia detection rate / 100,000 aged 15-24 (female)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

SOUTH CAMBRIDGESHIRE

Overarching indicators

RAG-rating changes with the August 2019 update

None.

Wider determinants of health

RAG-rating changes with the August 2019 update

None.

Health improvement

RAG-rating changes with the August 2019 update

None.

Health protection

RAG-rating changes with the August 2019 update

None.

Other indicator updates and revisions

3.02 Chlamydia detection rate (15-24 year olds)
2018 data added and 2017 data revised. Rates in South Cambridgeshire remain worse than the national target (target is 1,900 to 2,299 per 100,000).

3.05ii Incidence of tuberculosis (TB)
Data added and back series revised from 2000-02 to 2016-18. In 2016-18 the incidence rate for South Cambridgeshire remains statistically significantly better than the national rate.

Healthcare and premature mortality

RAG-rating changes with the August 2019 update: 'Better'

None.

RAG-rating changes with the August 2019 update: 'Worse'

4.11 Emergency readmissions within 30 days of discharge from hospital
2017/18 data added. The proportion of emergency readmissions for South Cambridgeshire has increased to a level assessed as statistically similar to the rate for England.

Summary count of RAG-ratings for South Cambridgeshire

Overall, the PHOF indicators for South Cambridgeshire when compared to the England average are assessed as;

69	Better
56	Similar
9	Worse
27	Not compared/other

Furthermore, 2 indicators are 'Red-Red' for south Cambridgeshire (see glossary for definition).

Note: The summary count has limitations and does not consider the context or contributing factors impacting on local indicator values. The summary count represents the count for the latest data release period only (August 2019), and does not represent recent trends. Some indicators may be prone to period to period change.

List of all red rated indicators as at August 2019

1.10	Killed and seriously injured (KSI) casualties on England's roads
2.07ii	Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female, persons)
2.10ii	Emergency hospital admissions for intentional self-harm (female, persons)
2.17	Estimated diabetes diagnosis rate
2.18	Admission episodes for alcohol-related conditions (Narrow) (female)
3.02	Chlamydia detection rate (15-24 year olds)
4.16	Estimated dementia diagnosis rate (aged 65+)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

List of all red-red indicators as at August 2019

2.07ii	Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15-24 years) (female, persons)

Note: This list may include indicators not displayed on the PHOF visualisation on Public Health England's Fingertips website, such as additional break-down of males and females, where available.

All indicators updated in August 2019 (short titles)

Overarching indicators

0.1	Life expectancy*

Wider determinants of health

1.03	Pupil absence
1.04	First time entrants to the youth justice system
1.07	Proportion of people in prison aged 18 or over who have a mental illness

Health improvement

2.14	Smoking prevalence in adults*
2.22	NHS health checks*

Health protection

3.02	Chlamydia detection rate*
3.05	Treatment completion for Tuberculosis (TB)
3.08	Adjusted antibiotic prescribing in primary care by the NHS

Healthcare and premature mortality

4.11	Emergency readmissions to hospital
4.16	Estimated dementia diagnosis rate (aged 65+)

*Indicator updated in PHOF since the previous update, but before this quarterly update (August 2019).

Glossary of Key Terms

Indicator
The term indicator is used to refer to a quantified summary measure of a particular characteristic or health outcome in a population. Indicators are well-defined, robust and valid measures which can be used to describe the current status of what is being measured, and to make comparisons between different geographical areas, population groups or time periods.

Benchmark
The term 'benchmark' refers to the value of an indicator for an agreed area, population group or time period, against which other values are compared or assessed.

National average
The national average for England, which acts as the 'benchmark' for comparison of local values in the PHOF, represents the combined total summary measure for the indicator for all local authorities in England.

Statistical significance
Where possible, comparisons of local values to the national average in PHOF are made through an assessment of 'statistical significance'. For each local indicator value, 95% confidence intervals are calculated which provide a measure of uncertainty around the calculated value which arises due to random variation. If the confidence interval for the local value excludes the value for the benchmark, the difference between the local value and the benchmark is said to be 'statistically significant'.

Recent time trends
A number of PHOF indicators include statistical assessment of recent trends over time. Statistical trends in other indicators have been assessed locally using comparable methods where possible. It is not possible to assess trends for all indicators as there is not always enough time periods or it is not possible because of the measure.

14

RAG-rating
RAG-rating refers to the colour-coding of local indicator values according to a red-amber-green (RAG) system. Local indicator values that are significantly worse than the national benchmark are colour-coded red and local indicator values that are significantly better than the national benchmark are colour-coded green. Local indicator values that are not significantly different to the national benchmark are colour-coded amber.

Red-Red rating
A 'red-red' indicator is one that is statistically assessed as 'worse' than the England average and also has a recent adverse trend ('decreasing and getting worse', or 'increasing and getting worse' dependent on the indicator definition).

Please note, indicators which are assessed as below a national target with an adverse trend are not necessarily included in this count. Examples include vaccination coverage.