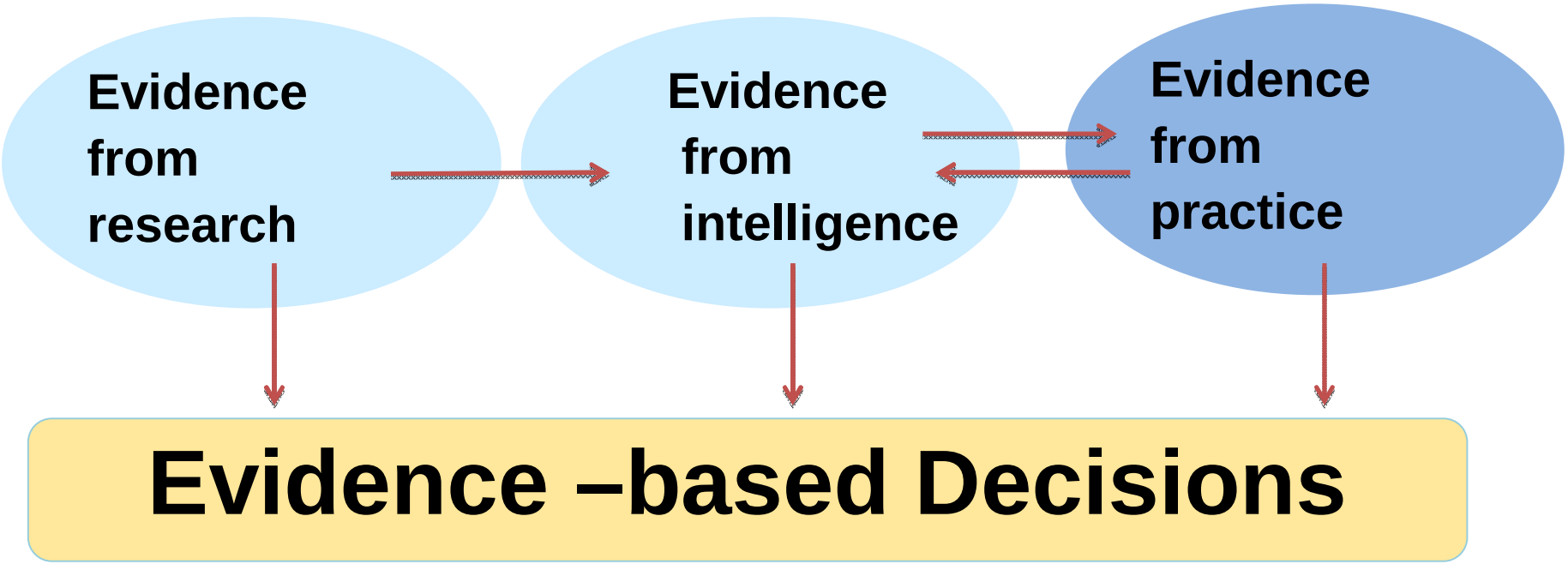
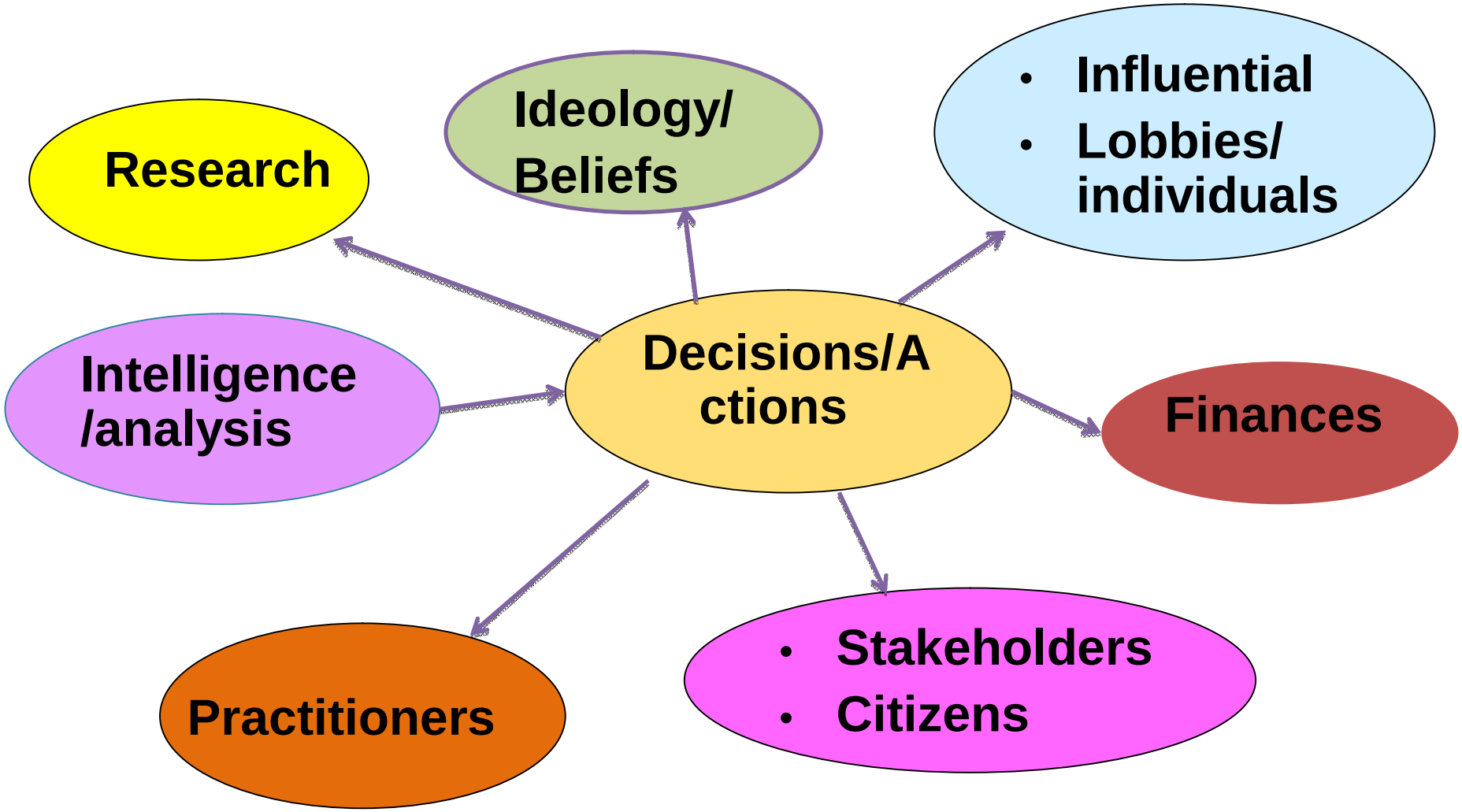
Evidencing, improving and measuring local public health

Dr Bobbie Jacobson OBE , Director
Nick Coyle, Senior analyst

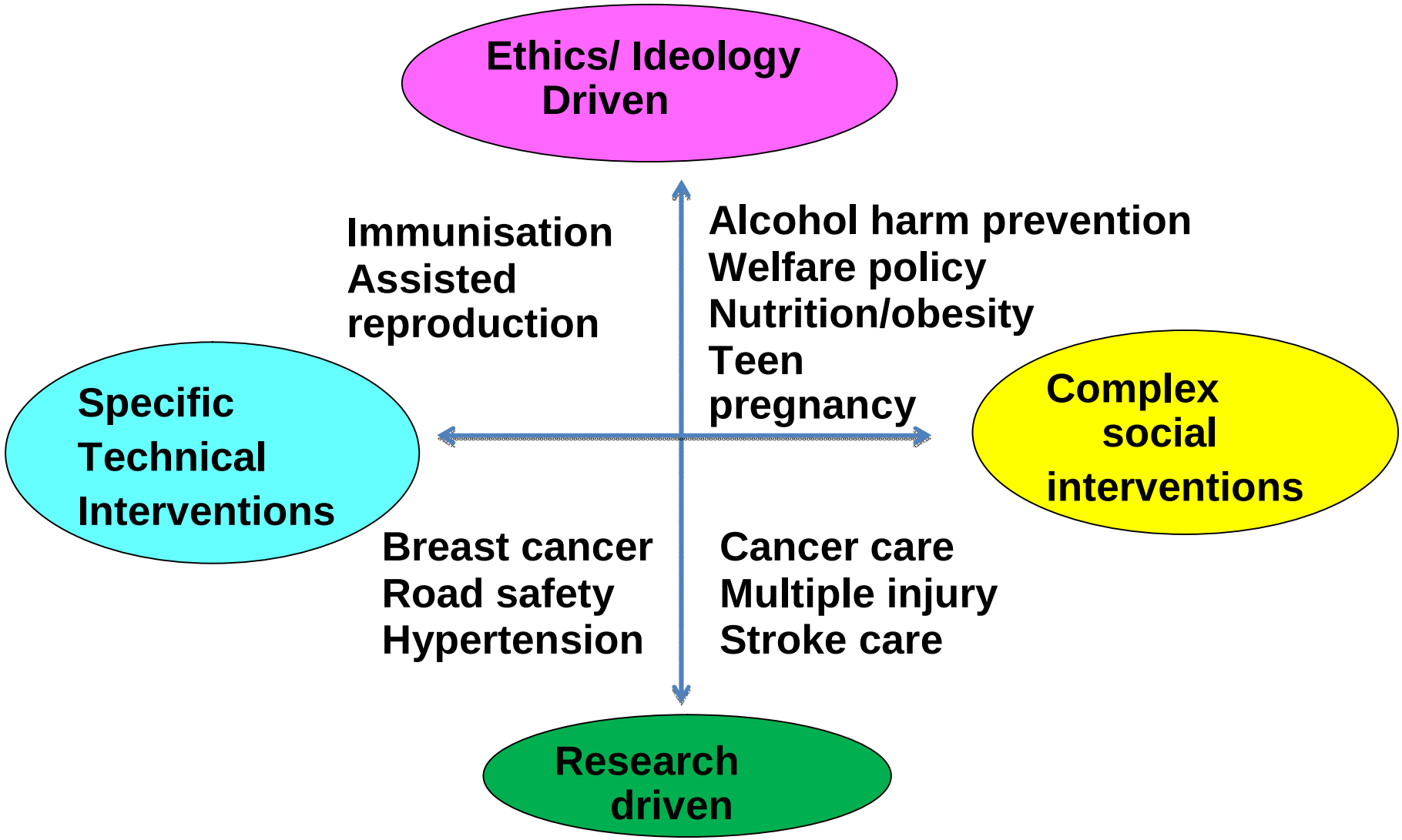
What do we mean by evidence?



EVIDENCE IN THE REAL WORLD



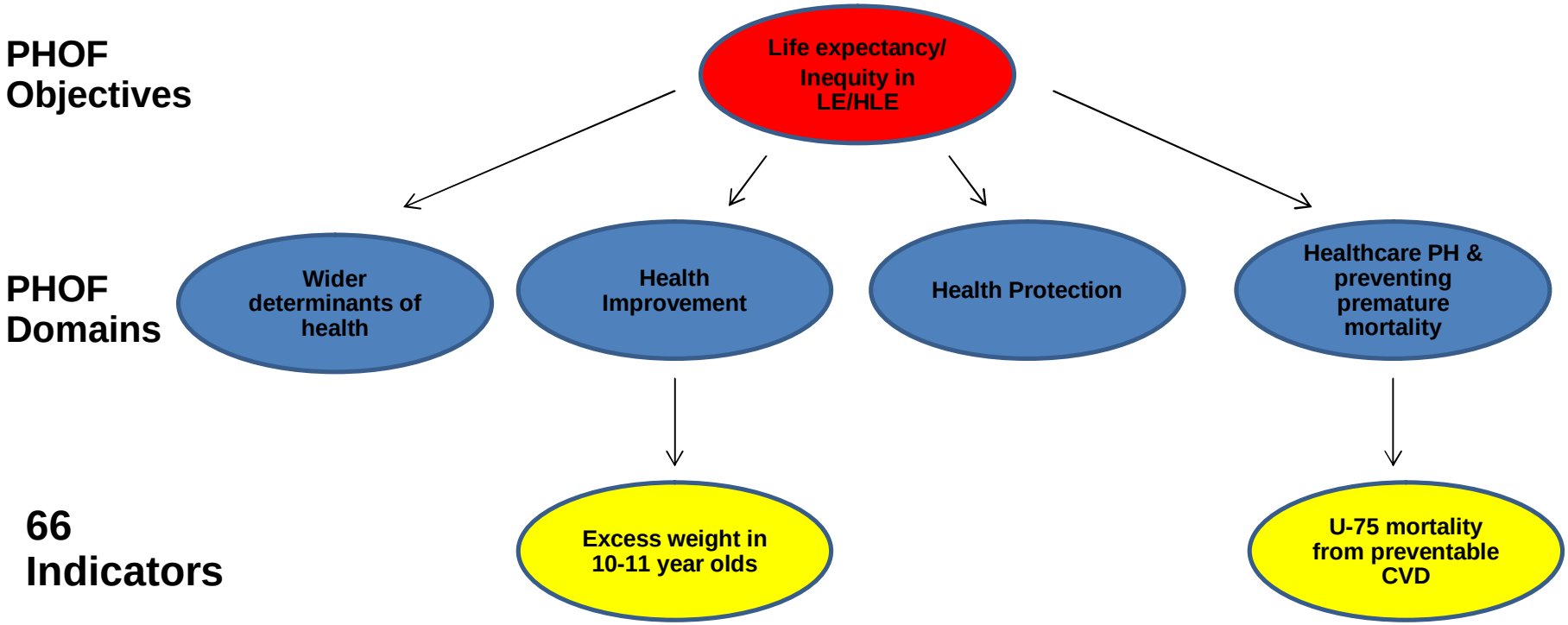
Which evidential sources carry most sway?



Evidence from Measurement –what it can and can't tell us.

- The example of the Public Health Outcomes Framework "PHOF"

The Public Health Outcomes Framework



Principles Underpinning the PHOF

- Focussed on causes and outcomes
- A “cradle to grave” approach
- Incorporates inequality measurement
- Designed to support localism/measure progress
- Alignment between PHOF and the NHSOF

Access via PHOF Webtool

- Produced by the Network of Public Health Observatories in England led by LHO
- Baseline year 2010 or 2010/11
- First release of 39/66 indicators in an interactive data tool:www.phoutcomes.info
- Spread across all 4 domains
- New indicators on preventable mortality and preventable sight loss.

Indicator Measurement: how much can it tell us?

Two examples :

- **U75 mortality from CVD considered preventable**
- **Inequalities in excess weight in 10-11 year olds**

U-75 mortality from cardiovascular disease considered preventable (provisional)

Public Health Outcomes Framework Data Tool

The network of Public Health Observatories

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Indicator keywords

Overarching indicators | Wider determinants of health | Health improvement | Health protection | Healthcare and premature mortality

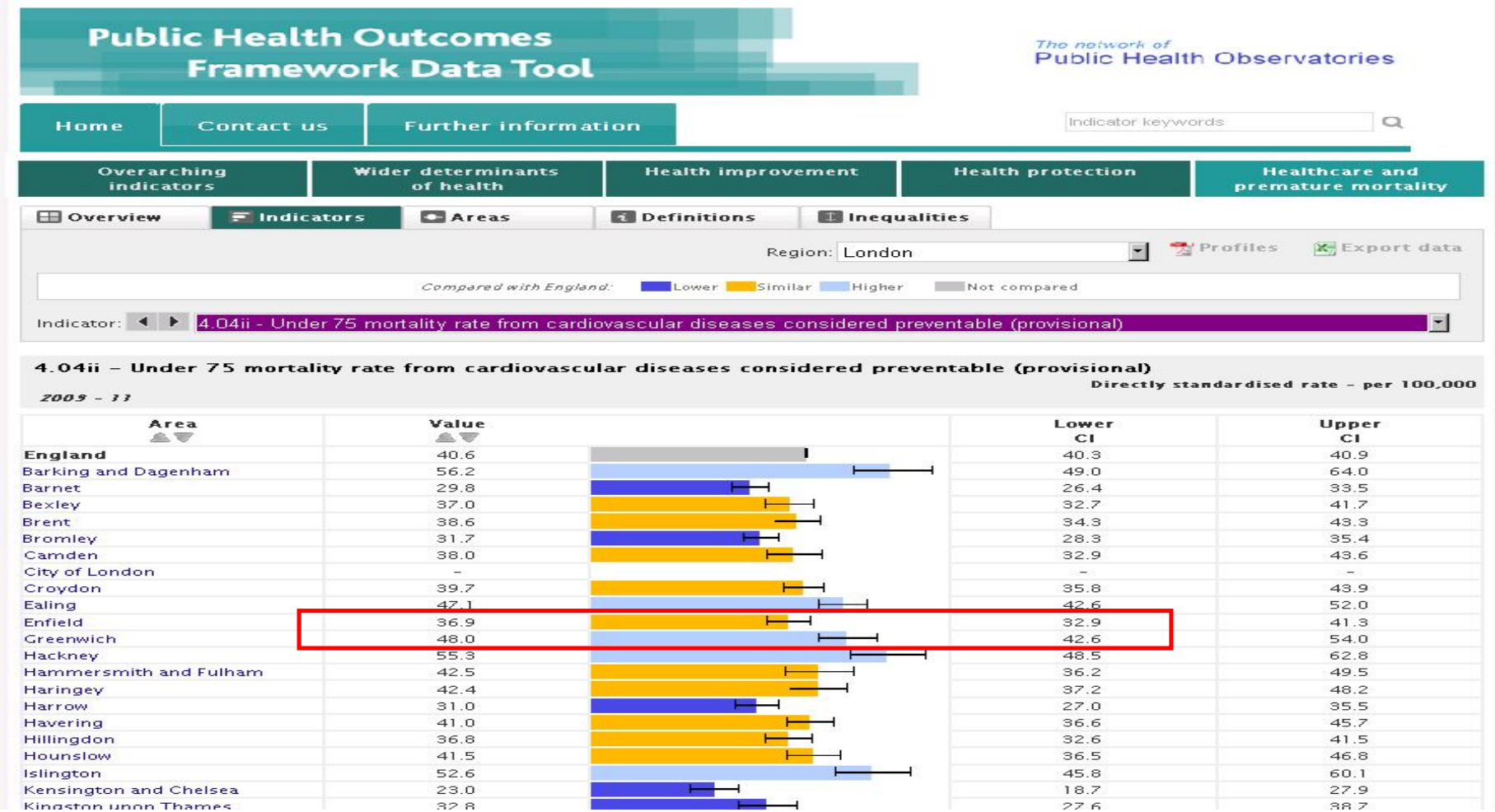
Overview | Indicators | Areas | Definitions | Inequalities

Region: London | Profiles | Export data

Compared with England: Lower | Similar | Higher | Not compared

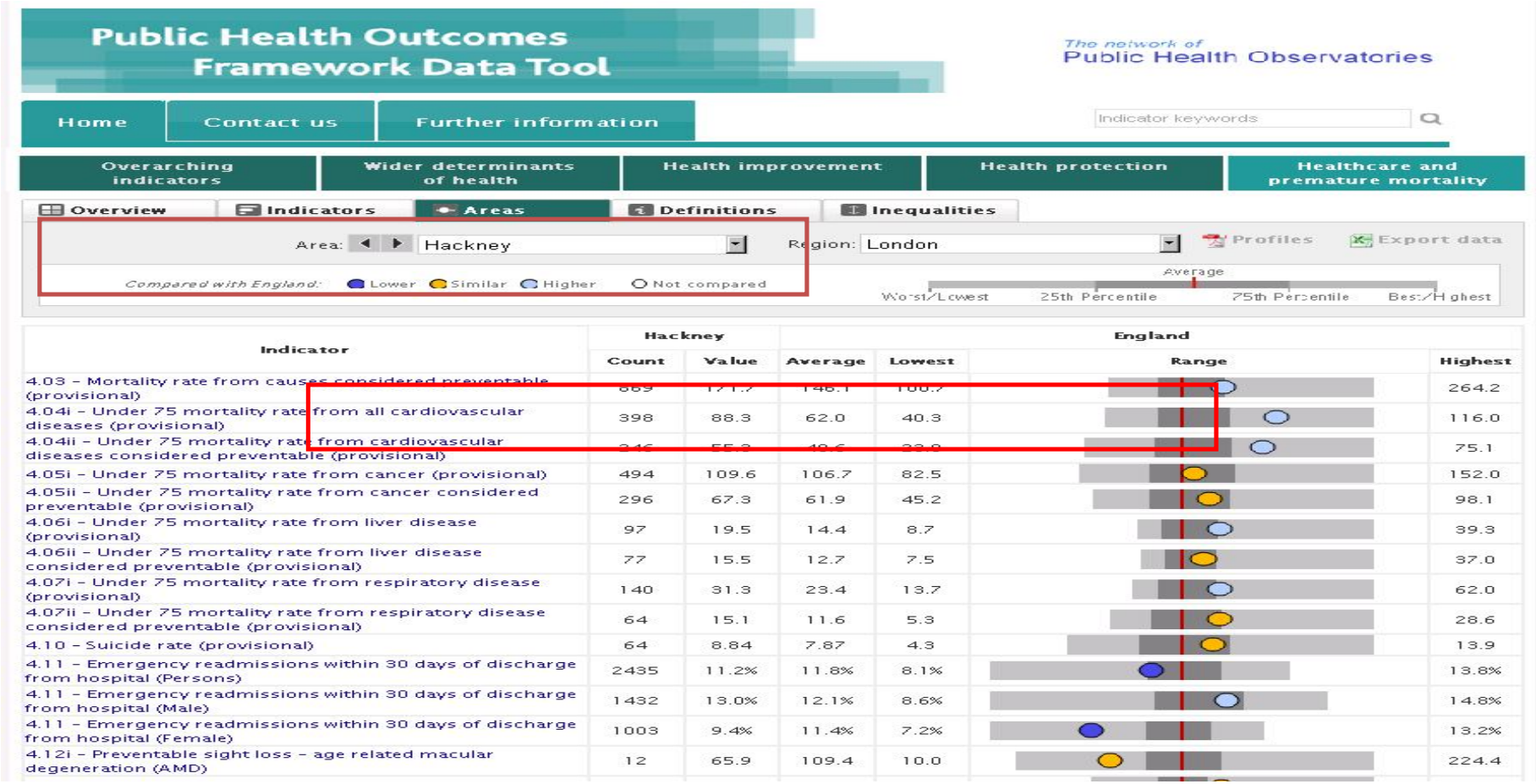
Indicator	Period	England	Barking and Dagenham	Barnet	Bexley	Brent	Bromley	Camden	City of London	Croydon	Ealing	Enfield	Greenwich	Hackney	Hammersmith and Fulham
4.03 - Mortality rate from causes considered preventable (provisional)	2009 - 11	146.1	182.9	113.2	127.0	125.1	111.2	148.2	104.3	129.6	147.8	123.2	161.6	171.7	169
4.04i - Under 75 mortality rate from all cardiovascular diseases (provisional)	2009 - 11	62.0	83.7	46.5	55.6	66.0	50.8	66.1	-	65.5	70.5	58.7	72.0	88.3	67
4.04ii - Under 75 mortality rate from cardiovascular diseases considered preventable (provisional)	2009 - 11	40.6	56.2	29.8	37.0	38.6	31.7	38.0	-	39.7	47.1	36.9	48.0	55.3	42
4.05i - Under 75 mortality rate from cancer (provisional)	2009 - 11	106.7	135.3	96.0	103.1	96.2	93.1	100.1	-	97.2	[illegible]	94.5	108.1	109.6	115
4.05ii - Under 75 mortality rate from cancer considered preventable (provisional)	2009 - 11	61.9	80.0	52.1	59.1	52.7	52.4	63.1	-	53.2	56.0	55.9	64.8	67.3	73
4.06i - Under 75 mortality rate from liver disease (provisional)	2009 - 11	14.4	18.7	9.9	10.5	14.5	10.3	22.1	-	13.1	17.2	13.3	14.6	19.5	24
4.06ii - Under 75 mortality rate from liver disease considered	2009 - 11	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

U-75 mortality from cardiovascular disease considered preventable (provisional)



Area	Value	Lower CI	Upper CI
England	40.6	40.3	40.9
Barking and Dagenham	56.2	49.0	64.0
Barnet	29.8	26.4	33.5
Bexley	37.0	32.7	41.7
Brent	38.6	34.3	43.3
Bromley	31.7	28.3	35.4
Camden	38.0	32.9	43.6
City of London	-	-	-
Croydon	39.7	35.8	43.9
Ealing	47.1	42.6	52.0
Enfield	36.9	32.9	41.3
Greenwich	48.0	42.6	54.0
Hackney	55.3	48.5	62.8
Hammersmith and Fulham	42.5	36.2	49.5
Haringey	42.4	37.2	48.2
Harrow	31.0	27.0	35.5
Havering	41.0	36.6	45.7
Hillingdon	36.8	32.6	41.5
Hounslow	41.5	36.5	46.8
Islington	52.6	45.8	60.1
Kensington and Chelsea	23.0	18.7	27.9
Kingston upon Thames	32.8	27.6	38.7

U-75 mortality from cardiovascular disease considered preventable (provisional)



Indicator	Hackney		England			
	Count	Value	Average	Lowest	Range	Highest
4.03 – Mortality rate from causes considered preventable (provisional)	889	171.7	146.1	100.7		264.2
4.04i – Under 75 mortality rate from all cardiovascular diseases (provisional)	398	88.3	62.0	40.3		116.0
4.04ii – Under 75 mortality rate from cardiovascular diseases considered preventable (provisional)	246	55.2	48.6	33.8		75.1
4.05i – Under 75 mortality rate from cancer (provisional)	494	109.6	106.7	82.5		152.0
4.05ii – Under 75 mortality rate from cancer considered preventable (provisional)	296	67.3	61.9	45.2		98.1
4.06i – Under 75 mortality rate from liver disease (provisional)	97	19.5	14.4	8.7		39.3
4.06ii – Under 75 mortality rate from liver disease considered preventable (provisional)	77	15.5	12.7	7.5		37.0
4.07i – Under 75 mortality rate from respiratory disease (provisional)	140	31.3	23.4	13.7		62.0
4.07ii – Under 75 mortality rate from respiratory disease considered preventable (provisional)	64	15.1	11.6	5.3		28.6
4.10 – Suicide rate (provisional)	64	8.84	7.87	4.3		13.9
4.11 – Emergency readmissions within 30 days of discharge from hospital (Persons)	2435	11.2%	11.8%	8.1%		13.8%
4.11 – Emergency readmissions within 30 days of discharge from hospital (Male)	1432	13.0%	12.1%	8.6%		14.8%
4.11 – Emergency readmissions within 30 days of discharge from hospital (Female)	1003	9.4%	11.4%	7.2%		13.2%
4.12i – Preventable sight loss – age related macular degeneration (AMD)	12	65.9	109.4	10.0		224.4

Excess weight in 10-11 year olds - Inequalities

Fingertips - Health and Wellbeing
http://fingertips.erpho.org.uk/key

Public Health Outcomes Framework Data Tool

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Public Health Observatories

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Indicator keywords

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Profiles | Export data

Inequalities

The Public Health Outcomes Framework focuses the whole system on achieving positive health outcomes for the population and reducing inequalities in health. The majority of indicators in this framework have the potential to impact on inequalities and we aspire to make it possible for all indicators to be disaggregated by equalities characteristics and by socioeconomic analysis wherever possible in order to support work locally to reduce in-area health inequalities where these persist. However, in this first publication, as well as breaking down some of the local authority level indicators by gender or age, we are also presenting data by equalities characteristics for a small number of indicators at national level only. These indicators are presented in this section.

Data downloads:

- Indicator 1.03 – Pupil absence by deprivation
- Indicator 1.03 – Pupil absence by ethnicity
- Indicator 1.03 – Pupil absence by gender
- Indicator 1.06i – Adults with a learning disability who live in stable & appropriate accommodation by gender
- Indicator 2.06i – Excess weight in 4-5 year olds by deprivation
- Indicator 2.06i – Excess weight in 4-5 year olds by ethnicity
- Indicator 2.06ii – Excess weight in 10-11 year olds by deprivation
- Indicator 2.06ii – Excess weight in 10-11 year olds by ethnicity
- Indicator 3.02 – Chlamydia diagnoses by gender
- Inequalities at national level

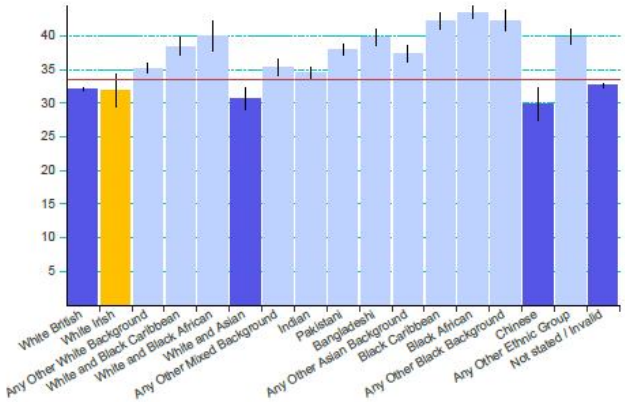
Useful links:

- The Lesbian & Gay Foundation's Evidence Exchange
- Stonewall's reports for each PCT/Local Authority on the specific health of lesbian, gay and bisexual people in their community

Excess weight in 10-11 year olds–Inequalities

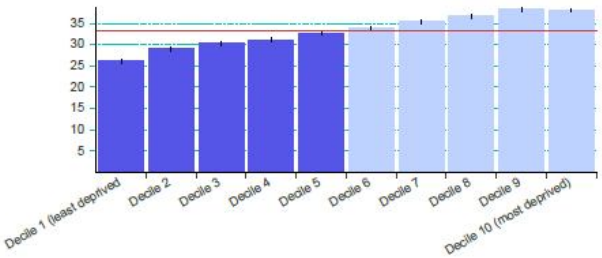
2.06ii - Percentage of children aged 10-11 classified as overweight or obese - by ethnicity England 2010/11

	Value	LCI	UCI
England	33.40	33.30	33.50
White British	32.00	31.80	32.20
White Irish	31.80	29.50	34.20
Any Other White Background	35.20	34.60	35.90
White and Black Caribbean	38.40	37.10	39.80
White and Black African	39.90	37.70	42.20
White and Asian	30.60	29.10	32.20
Any Other Mixed Background	35.30	34.00	36.60
Indian	34.50	33.60	35.40
Pakistani	37.90	37.20	38.70
Bangladeshi	39.70	38.60	40.90
Any Other Asian Background	37.30	36.10	38.60
Black Caribbean	42.20	41.00	43.50
Black African	43.50	42.60	44.40
Any Other Black Background	42.20	40.70	43.80
Chinese	29.80	27.50	32.20
Any Other Ethnic Group	39.80	38.70	40.90
Not stated / Invalid	32.60	32.30	32.90

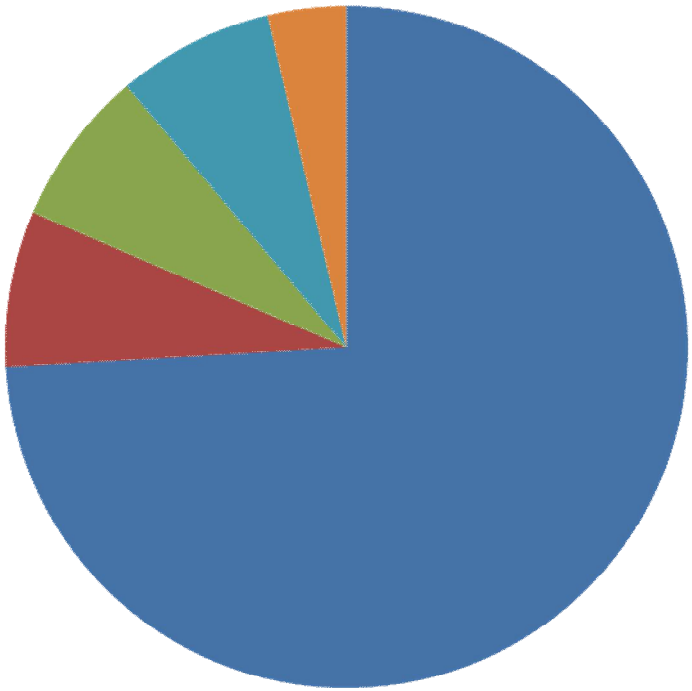


2.06ii - Percentage of children aged 10-11 classified as overweight or obese - by deprivation England 2010/11

	Value	LCI	UCI
England	33.40	33.30	33.50
Decile 1 (least deprived	26.10	25.70	26.50
Decile 2	29.00	28.60	29.40
Decile 3	30.30	29.90	30.70
Decile 4	31.10	30.70	31.60
Decile 5	32.60	32.20	33.00
Decile 6	33.90	33.40	34.30
Decile 7	35.40	35.00	35.80
Decile 8	36.70	36.20	37.10
Decile 9	38.30	37.90	38.70
Decile 10 (most deprived)	38.10	37.80	38.50



Who is thirsty for the PHOF evidence ... So far?



Health Professional/ Public health staff	20
Local government	2
Other government	2
Lay users	0
Press	1
Unknown background	2

3500 page views at launch

Initial Feedback from Users

We are really grateful

The tool is really very professional and the development team did a great job

Good work on the outcomes data tool

The light blue colour scheme has been Used ...regardless of whether a high value is good or bad. This is a mistake, or has this been done deliberately?

This is a broad and really helpful set of information

Not sure why RAG was abandoned - might lead to local Government confusion

The analysis tool is fantastic

This tool is a real boost for us

Evidence and Measurement: Key messages

- **Managing the interplay between "my evidence and your evidence" in the new Local authority public health leadership role will be crucial.**
- **Quantifiable evidence can inform progress , provide comparators, incentives for action and re-direction of resources/priorities**
- **Quantifiable evidence can't usually explain why there is variation or inequality-this needs local engagement and interpretation**
- **Our new users want evidence that is transparent and presented in ways that can be more easily understood.**

Further Evidence.....

- **PHOF Data tool – www.phoutcomes.info**
- **Latest from DH - http://www.dh.gov.uk/health/2012/11/phof-technical-refresh/**
- **Contact e-mail (for feedback or queries) – phoutcomes@sepho.nhs.uk**
- **Twitter - @phoutcomes**