

**Meeting date:** Tue 19<sup>th</sup> Jan 2021  
**Report to:** Solihull Health & Wellbeing Board



**Subject/report title:** Health and Wellbeing Scorecard  
**Report from:** Ruth Tennant, Director of Public Health

**Report author/lead contact officer:** Robert Davies, Consultant in Public Health, Healthy People

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**Wards affected:**

All Wards |  Bickenhill |  Blythe |  Castle Bromwich |  Chelmsley Wood |  
 Dorridge/Hockley Heath |  Elmdon |  Kingshurst/Fordbridge |  Knowle |  
 Lyndon |  Meriden |  Olton |  Shirley East |  Shirley South |  
 Shirley West |  Silhill |  Smith's Wood |  St Alphege

**Public/private report:** Public

**Exempt by virtue of paragraph:** Select an Exemption paragraph from the Quick Parts drop-down list

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**1. Purpose of Report**

1.1 To provide an update on progress developing the Health and Wellbeing Scorecard and provide a performance update.

**2. Decision(s) recommended**

2.1 To note current developments and performance.

2.2 To endorse a proposal to include two new indicators as part of COVID-19 impact (Priority 5) when they become available; the first on COVID-19 vaccine roll-out; the second, on monitoring support to people with post-COVID syndrome, also known as Long COVID.

**3. Matters for Consideration**

3.1 The current Health and Wellbeing Strategy Scorecard (Appendix 1) summarises progress against key performance indicators related to the five Health and Wellbeing Strategy Priorities, agree in early 2020.

3.2 Performance commentary is provided for each indicator in Appendix 1 for reference. A brief overview of performance for each priority area is summarised below.

#### **4. Priority 1: Maternity, Childhood and Adolescence: A Healthy Start in Life**

- 4.1 Child development measures remain at or above target for four of five measures. The latest quarter for indicator 1.01 Proportion of all mothers who breastfeed their babies in the first 48 hrs after delivery, was not available. The CCG are working with maternity providers to resolve this data issue.

#### **5. Priority 2: Adulthood and Work: Promoting Health and Wellbeing**

- 5.1 Three of five indicators are at or above target. The remaining two are new for monitoring for 2020/21. We plan to use this year as a baseline in order to set an appropriate target for 2021/22.

#### **6. Priority 3: Ageing and Later Life: Ageing Well and Improving Health and Care Services for Older People**

- 6.1 Many of the 11 indicators for this priority are new; ownership is spread across multiple partners; and new data flows, reporting systems and targets have needed to be created and agreed. This is ongoing for seven indicators.
- 6.2 The largest underperformance concerns NHS Health Checks. These have been significantly affected by COVID. The proportion of the eligible population aged 40-74 who received an NHS health check is significantly down on target due to the service being stood down.

#### **7. Priority 4: All age: Social Connectedness**

8. All performance measures under this priority are annual, and based on national or local survey data. Two, based on the most recent Solihull Place Survey, October 2020, have been updated this quarter. Both show decreases in formal and informal volunteering from 2018 to 2020, and remain below target.

#### **9. Priority 5: All age: Impact of the COVID -19 Pandemic**

10. These indicators were included to track the broad impact of COVID-19. There are a detailed set of indicators on COVID recovery that Sarah Barnes (SMBC Business Intelligence) and team have developed and are monitored elsewhere, in addition to daily response updates.
- 10.1 In light of recent national developments, we are considering adding two new indicators in the future. The first: local vaccine uptake broken down by the Joint Committee on Vaccination and Immunisation priority groups (see below) and the second; around support arrangements for post COVID syndrome (Long COVID). Over the last week, both are starting to be monitored nationally and further discussions are underway nationally and locally around data including work to measure inequalities in take-up of vaccination.
- 10.2 The nine JCVI priority groups for vaccine roll out- which are determined nationally are, for information. Prioritisation is based on the key criteria of minimising COVID-related mortality with estimates suggesting that covering these groups would reduce 99% of preventable deaths.

1. residents in a care home for older adults and their carers
  2. all those 80 years of age and over and frontline health and social care workers
  3. all those 75 years of age and over
  4. all those 70 years of age and over and clinically extremely vulnerable individuals
  5. all those 65 years of age and over
  6. all individuals aged 16 years to 64 years with underlying health conditions which put them at higher risk of serious disease and mortality
  7. all those 60 years of age and over
  8. all those 55 years of age and over
  9. all those 50 years of age and over
- 10.3 Performance on preventing homelessness (indicator 5.03) has been significantly impacted by the pandemic. The response required to support households affected by Covid-19 has reduced the capacity of Solihull Community Housing (SCH) and wider partner organisations to deliver early intervention and prevention interventions. In particular, there has been an increase in households approaching at crisis stage and requiring temporary accommodation and associated difficulties in accessing suitable accommodation options, specifically during the first lockdown.
- 10.4 A comprehensive service improvement plan is in place to support the achievement of this target and additional resources have been put in place and continue to be reviewed by the Council in partnership with SCH and by SCH's Executive Management Team.

## 11. Implications and Considerations

11.1 State how the proposals in this report contribute to the priorities in the [Council Plan](#):

Priority:	Contribution:
People and Communities: 7. Take action to improve life chances in our most disadvantaged communities. 8. Enable communities to thrive. 9. Sustainable, quality, affordable provision for adults & children with complex needs.	The scorecard reflects impact across the five priority areas of the Health and Wellbeing Strategy. These aim to improve health outcomes across the full life-course, reduce inequalities and mitigate the impact of COVID-19.

11.2 Consultation and Scrutiny:

11.2.1 Indicators comprising the Scorecard were developed and agreed at previous Health and Wellbeing Board meetings.

11.3 Financial implications:

11.3.1 None

11.4 Legal implications:

11.4.1 None

11.5 Risk implications:

11.5.1 None

11.6 Equality implications:

11.6.1 None

**12. List of appendices referred to**

12.1 Appendix 1: HWBB Scorecard Q2 2020 Jan 21

**13. Background papers used to compile this report**

13.1 N/A

**14. List of other relevant documents**

14.1 N/A