REPORT TO: Health Policy and Performance Board

DATE: 8 June 2010

REPORTING OFFICER: Strategic Director- Resources

SUBJECT: Sustainable Community Strategy Performance Report

WARDS: Borough-wide

1.0 PURPOSE OF REPORT

1.1 To provide information on the progress towards meeting Halton's Sustainable Community Strategy targets to 2009 – 10 financial year-end.

2.0 RECOMMENDED THAT:

i. The report is noted

ii. The Board considers whether it requires any further information concerning the actions being taken to achieve Halton's LAA targets.

3.0 SUPPORTING INFORMATION

- 3.1 The revised Local Area Agreement, which comprises and element of the Councils Sustainable Community Strategy, was signed off by the Secretary of State in June 2008. The LAA contains a set of measures and targets agreed between the Council, local partner agencies (who have a duty of co-operation in achieving targets) and government. There are 32 indicators within the LAA along with statutory and education and early years targets. The current agreement covers the period April 2008 to March 2011.
- 3.2 The Agreement was refreshed in March 2010 following a review with Government Office North West. Any changes to performance targets that resulted from this review have been reflected in the enclosed report.
- 3.3 Attached as Appendix 1 is a report on progress to the 2009 10 financial year-end, which includes those indicators and targets that fall within the remit of this Policy and Performance Board.
- 3.4 In considering this report Members should be aware that:
 - a) All of the measures within the National Indicator Set are monitored through Quarterly Departmental Service Plan Monitoring Reports. The purpose of thus report is to consolidate information on all measures and targets relevant to this PPB in order to provide a clear picture of progress.

b) In some cases outturn data cannot be made available at the midyear point and there are also some Place Survey based indicators for which information will not become available until 2010 i.e. the next date the survey is due to be undertaken.

4.0 CONCLUSION

4.1 The Sustainable Community Strategy for Halton, and the Local Area Agreement contained within it, is the main mechanism through which government will performance manage local areas. It is therefore important that we monitor progress and that Members are satisfied that adequate plans are in place to ensure that the Council and its partners achieve the improvement targets that have been agreed.

5.0 POLICY IMPLICATIONS

5.1 The Local Area Agreement acts as the delivery plan for the Sustainable Community Strategy for Halton and is therefore central to our policy framework.

6.0 OTHER IMPLICATIONS

6.1 The achievement of Local Area Agreement targets has direct implications for the outcomes in relation to Comprehensive Area Assessment judgements.

7.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

7.1 This report deals directly with the delivery of the relevant strategic priority of the Council.

8.0 RISK ANALYSIS

8.1 The key risk is a failure to improve the quality of life for Halton's residents in accordance with the objectives of the Sustainable Community Strategy. This risk can be mitigated thorough the regular reporting and review of progress and the development of appropriate actions where underperformance may occur.

9.0 EQUALITY AND DIVERSITY ISSUES

9.1 One of the guiding principles of the Local Area Agreement is to reduce inequalities in Halton.

10.0 LIST OF BACKGROUND PAPAERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document Local Area Agreement 2008 – 11

Place of Inspection 2nd Floor, Municipal Building, Kingsway, Widnes

Contact Officer Rob MacKenzie (0151 471 7416)



The Sustainable Community

Strategy For Halton

2006 - 2011

Year End Progress Report 01st April 2009 – 31st March 2010



This report provides a summary of progress in relation to the achievement of targets within Halton's Sustainable Community Strategy.

It provides both a snapshot of performance for the period 01st April 2009 to 31st March 2010 and a projection of expected levels of performance to the period 2011.

The following symbols have been used to illustrate current performance against 2010 and 2011 target levels.

- Target is likely to be achieved or exceeded.
- ? The achievement of the target is uncertain at this stage
- Target is highly unlikely to be / will not be achieved.

HEALTHY HALTON

Page	NI	Descriptor	09/10 Target	2011 Target
6	8	Adult participation in sport	x	?
9	53	Prevalence of breastfeeding at 6 - 8 weeks from birth	×	?
11	120	All-age all-cause mortality	x	?
14	123	16+ Smoking rate prevalence	✓	✓
15	139	People > 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently	N/A	?
15	142	Number of vulnerable people supported to maintain independent living	✓	✓
16	150	Adults in contact with secondary mental health services in employment	✓	~

Non Local Area Agreement Measures / Targets

18	121	Mortality rate from all circulatory diseases at ages under 75 (proxy for local indicator H1)	x	?
19	122	Mortality from all cancers at ages under 75 (proxy for local indicator H2)	×	?

21	124	Increase the number of people with a long term	N/A	N/A
		condition supported to be independent and in control		
		of their condition		

NI 8 Adult participation in sport

Baseline	2009 - 10			2011	
(2006)	Target	Actual	Progress	Target	Projected
20.13%	22.13%	21.4% (Q.3 figure)	×	24.13%	?

Data Commentary

This report covers 1 October–31 December 2009. The results of the Active People Survey 3 by which this indicator is now measured were released on 17 December 2009. Active People Survey years - October to October full year data available each December.

LAA reporting years

Data for NI 8 Year 1 is based on a 1000 sample in each Local Authority drawn from Active People between Oct 07 and Oct 09 and reported in Dec 09.

NI 8 indicator is determined by adding Active People Survey 2 (APS2) results (Dec 2008 - 18.7%) with Active People Survey 3 (APS3) result.

If a local authority has achieved a statistically significant increase from APS1 (2006) to APS3 or APS2/3 combined this is a real increase and indicates a positive direction of travel. Halton's APS1 was 19.62% and APS3 result 24.9% thus a statistically significant increase.

Breakdown of NI 8 data and Active People Diagnostic

The data will be incorporated into Sport England's Active People Diagnostic as soon as possible after the data has been released. It is anticipated that this will be available interactively in April 2010.

Data result for Halton's KPI 1 3 \times 30 mins per week adult participation rate in APS3 showed a good increase to 24.9%. 19.62% was the 2006 baseline. Thus Halton has achieved its LPSA target (however, this has not yet been verified)

Our NI 8 LAA target for this year has not been achieved, but our direction of travel is good.

General Performance Commentary

Our performance has improved and local interventions should be viewed as having a direct contribution to this result. Targeted projects have received increased resources from Working Neighbourhoods Fund, Sport England and DCMS free swim scheme. This has allowed increased delivery within community settings through commissioning of voluntary sector sports clubs. Small amounts of money have seen huge benefits. Clubs have provided taster sessions; new targeted sessions and free sessions to attract new participants and the clubs have been supported to improve their infrastructure, through coach education and development workshops.

The Active People Survey from which the data is sourced is conducted annually (Oct to Oct), with results published December. Quarterly reporting is not possible at this time however there are suggestions that regular quarterly interim results may be published in the future.

For this reason local proxy indicators have been introduced to gauge progress:

- Leisure Centre usage can be monitored on a monthly basis. Adult participation is being monitored and contractor has been set a 1% increase target for adult participation at the Council's 3 Leisure Facilities.
- Free swim campaign for those aged 60 years and over can be monitored monthly.
- Sports Participation Project is targeted intervention recording participants' details and has annual targets set to increasing participation. This is a multi agency project to get more people active.

All of the above are reported Quarterly through Sports Participation Project reporting to Health SSP.

Summary of key activities undertaken / planned during the year

The following activities took place in the last quarter:

Community sessions:

6 new community classes set up and running this quarter following consultation: 2 Tai chi classes in partnership with cancer support centre, adult gym follow-on class, Adults t dance, Fitness through dance and Gentle circuits at Heath.

Six Green Flag walks launched inc ½ page press. Free step-o-metres distributed linked to green walks 100+

Health walks program delivered by volunteers.

Risk assessments and instructor evaluations carried out.

General enquiries and sign posting to other services.

New participant monitoring and questionnaires administered.

Get Active 2010 Leaflet drops to 4 wards via probation service.

Equipment supplied to St Ambrose church re older adult new age bowls.

Family Focus Activity MNT areas:

Meeting Stobart Stadium re new family activity

Targeted Outreach:

Get Active 2010 Leaflet drops to 4 wards via probation service.

Sport tasters delivered to Halton College foundation studies students (disability)

Health Trainer events attended Brookvale and Palacefields.

Palacefields community-walking group supported and funding sourced (£2600) for Palacefields walk maps.

Foyer status open days attended and taster sessions delivered to YMCA and Belvedere Housing.

Advice and instructor contacts given to Children's centres to hire their own activity coaches.

Get Active Forum Halton:

Meetings with PCT exercise referral schemes re referral participants assessing the Get Active programme activities.

Get Active forum meeting, funding info disseminated to all forum members

Men's Health:

On-going support to Men's health circuits, and Jog programme.

Meeting Age Concern re men's 50+ activity.

New men's-health football session (after work) at Kingsway Leisure Centre.

Girls & Women's Blitz:

Women's yoga and Ladies morning supported.

Case studies completed re women's yoga and depression/mental health.

Innovation:

Frail older adult chair-based exercise level 2 training course delivered to 12 individuals. Training delivered (level 2) frail older adult chair-based exercise organised and delivered to care staff/coaches x 11.

In Pursuit of Sport promotions disseminated and taster activity/sports arranged including golf, tennis, skiing etc.

Support given to PCT re workplace health checks.

Sports Relief event supported and info disseminated to attendees.

NI 53 Prevalence of breastfeeding at 6 – 8 weeks from birth

Baseline		2009 - 10	2011		
(Q.2 2008)	Target	Actual	Progress	Target	Projected
12.1%	21%	19.26%	×	23%	?

Data Commentary

The data has been calculated using total and partial breastfeeding numbers over the number of infants due a 6-8 week check.

Breastfeeding is recommended for a period of 6 months. Performance data is measured at birth and at 6 weeks although local information is available for interim stages. The proportion of mothers breastfeeding has increased year on year in both boroughs and over the last year has stabilized at around 48%.

General Performance Commentary

Breastfeeding performance continues to improve although the end of year target is still challenging. Progress against the breastfeeding action plan has continued with 49 premises receiving the baby welcome award and peer support groups are operating in children's centres. Support is available to women through maternity support workers and community parents at King's Cross have been trained to provide peer support. The Children's Trust has started the UNICEF Baby Friendly process in December 09.

Summary of key activities undertaken / planned during the year

Evidence suggests that a whole system approach is needed to increase the uptake and maintenance of breastfeeding. Over the past 2 years an action plan based on evidence of best practice has been implemented by a multiagency steering group. Successes include:

- Development of robust measures to capture the new dataset. The recording of breastfeeding performance is consistently above target and is one of the highest in the country.
- Development and implementation of Get Closer- a social marketing approach to breastfeeding and promotion throughout the boroughs which has been well received and promoted nationally as good practice.
- Extensive training of all health visitors and midwives, particularly in St Helens on a 3-5 day intensive course
- Increased capacity of infant feeding coordinators in the PCT.

- Training of La Leche peer support counsellors 7 in Halton with a further 12 to be trained in 2010.
- Establishment and promotion of breastfeeding support groups in children's centres 9 across the two boroughs.
- Improved acceptability of breastfeeding in public through the Baby Welcome Award received by 61 in Halton exceeding targets.
- Maternity support workers providing breastfeeding support in Halton up to 6 weeks.
- Training of community parents to become breastfeeding buddies in Halton with Kings Cross Parents programme.

Barriers to progress

Breastfeeding performance can be affected by the capacity of services to support women through the first few days and weeks of breastfeeding.

Some resources are available for paid peer support for breastfeeding but due to recruitment issues this is unlikely to be in place for several months.

Children's Centre staff have been trained as La Leche Administrators and have traditionally supported the breastfeeding support groups and breastfeeding volunteers. Due to recent changes in role the number available to support the breastfeeding agenda has reduced. If the time of these individuals were released to help support women on a one to one basis until permanent recruitment has taken place this would help to ensure capacity and performance over the coming months. Funding to backfill their role is available in this financial year.

Baby Friendly Initiative

UNICEF Baby Friendly is a whole system approach to ensure that women receive the right information and support at all stages of their journey to enable them to breastfeed. St Helens and Knowsley and Warrington & Halton hospitals are both working towards baby friendly status. The process usually takes 2-4 years.

Halton and St Helens PCT in conjunction with St Helens Children's Trust and Halton Children's have expressed an interest in being accredited as Baby Friendly boroughs. An action planning visit has recently taken place and a draft action plan developed. This plan needs to be endorsed and adopted by the Children's Trusts. Key actions that will make the most difference to the performance over the next year are:

- Ensuring capacity to support breastfeeding in the first 6 weeks through maternity support workers, peer support counselors and breastfeeding buddies working closely with midwives and health visitors.
- Action Plan agreed by all partners for co-ordination of services and programs to achieve UNICEF Baby Friendly stage 1 and to increase breastfeeding rates.
- New social marketing campaign to increase initiation and maintenance of

breastfeeding

- Developing team level performance feedback mechanisms for midwifery and health visiting teams to enable them to manage their performance and including service performance measures within contracts.
- Strengthening breastfeeding links with children's centres and releasing trained staff to support the breastfeeding agenda.

NI 120 All-age all cause mortality

Baseline	2009 - 10			2011	
(2007/08)	Target	Actual	Progress	Target	Projected
Male - 906	780	803.8	×	755	?
Fem - 673	590	597.3		574	

Data Commentary

Quarters 1 to 3 have been refreshed. Quarter 4 is the position as of February 2010 - March 2010 data will not available until May 2010 from ONS.

General Performance Commentary

Mortality rates in Halton are fluctuating for men and gradually decreasing for women. The key causes of mortality in Halton are heart and circulatory disease, cancer, smoking and obesity.

2009 data for Halton indicates deaths from CVD had reduced by 42% and it is projected Halton will achieve the 2010 spearhead target of a 57% reduction even though it is not expected to meet the LAA target.

Death rates from cancer under age 75 have fallen steadily from 171 per 100,000 people in the year 1993, to 131 in 2007. There was a rise in 2008 to 140 deaths per 100,000. We expect to see improvement in the 2009 results when available. Recent data results indicate survival from lung cancer in Halton and St Helens is 30% after one year: one of the eight best rates in the North West. Survival from bowel cancer at one year is excellent at 71%. Survival from breast cancer at one year is high at 96%.

Halton has improved its smoking quit rate year on year for the past 5 years. Halton and St Helens now has the 4th highest quit rate in the North west at 1104.74 per 100,000. Halton and St Helens has stretched their smoking target for next year and will have the second highest target in the North West.

Obesity rates in Halton are increasing. Halton Borough Council and Halton

and St Helens PCT recognise obesity as an urgent priority. To address high obesity rates the PCT and borough council have followed Department of Health recommendations on tackling deep seated areas of health inequalities and are increasing financial resources to £2.9m in March 2010, scaling up current services, procuring services to address gaps and being more systematic.

Summary of key activities undertaken / planned during the year

- The Get Checked for cancer campaign is based on successful messages in local communities that highlight any changes for normal experience or symptoms.
- Under the targeted Get Checked campaign more cancers were diagnosed (up by 68% for bowel cancer, 13% for breast cancer and 10% for lung cancer)
- Under the Get Checked campaign more GPs referred cases early for diagnosis under the "two week" rule (up by 82%, 19% and 16%)
- Under the Get Checked campaign there was less spread of the cancer at the time of diagnosis.
- The campaign is extending across all practices from 2010.
- The 2 week wait rapid access referral for cancer symptoms has been very successful across Halton and St Helens: GPs in Halton and St Helens now refer 191 patients per 10,000 population using the 2 week rule.
- Half of people in their sixties in Halton and St Helens now take up a simple home screening test for bowel cancer, leading to much earlier diagnosis. This screening was introduced just two years ago.
- Widnes GPs are running a programme to encourage women who have not attended before, to go for cancer screening.
 - GP registers for patients at high risk of CVD are in place to address the problem of under diagnosis of CVD patients. Out of patients assessed for risk of CVD Halton GPs are finding more, earlier 4,309 patients found needing treatment in 08/09 compared to 1,533 in 06/07. These figures are expected to have increased for 2009/10.
 - Health Checks PLUS Scheme established in 2009 was developed to build upon the work of the GP high risk registers and respond to NST Health Inequalities recommendations to launch an additional 'casefind' scheme that included a broader scope. 20% of the adult population of Halton is invited for a Health Checks PLUS assessment on an annual basis.
 - Out of 24 patients assessed through Health Checks PLUS In Beechwood Medical Centre in Halton between October 2009 and January 2010 16 were found to be at risk of CVD.
 - Management of blood pressure is important to address CVD the PCT has incentivised GPs to deliver on this. Blood pressure management has improved for patients treated from 12,517 patients in 2004/5 to 13,617 patients in 2008/9. These figures are expected to have increased for 2009/10.

- Management of cholesterol is important to address CVD the PCT has incentivised GPs to deliver on this. Cholesterol management has improved for patients treated from 9931 patients in 2004/5 to 11420 patients in 2008/9. These figures are expected to have increased for 2009/10.
- A Cardiac Rehabilitation Programme for Halton residents set up in May 2009 by January 2010 60 Halton residents had completed the full Cardiac Rehabilitation programme.
- A Street Doctor style bus has been commissioned by Halton GPs to go out and case find hard to reach people with CVD.
- Stop smoking advisors now work in hospitals, pharmacies and 13 GP Practices in Halton.
- Pharmacists are incentivised to deliver stop smoking advice and have quitters.
- The stop smoking rate for pregnant women has improved this year with 22.5% staying quit at time of delivery in the first 2 quarters of 2009/10 compared to 25.5% in 2008/9.
- Advice and support on smoke free homes is given to pregnant women and significant others in the lives of pregnant smokers.
- Midwives have baby clear monitors and routinely test all babies in the womb for raised carbon monoxide levels due to a smoky atmosphere and then offer advice on smokefree homes.
- There is a 100% compliance with smoke free public places enforcement.
- Substantial investment is now in place to address obesity.
- A new brief intervention service has been commissioned to train up staff and patients in how to tackle overweight or obesity.
- The services for overweight and obese patients are being expanded.
- A weight awareness social marketing campaign called The Moment of Truth has been developed.
- Exercise on referral is being expanded.
- A number of health check programmes have been initiated that will invite 20% of the Halton population for examination. These include Health Checks Plus, QOF Plus, and WorkWell health checks.

NI 123 16+ stopping smoking

Baseline	2009 - 10			2011		
(2007/08)	Target	Actual	Progress	Target	Projected	
914 (per 100,000 population)	1082	888	★	1128	★	

Data Commentary

Figures for Q1,2 and 3 have been refreshed. Q4 figures are a snapshot as of April 7th and full outturn figures are not yet available.

General Performance Commentary

Smoking cessation services continue to be successful in meeting projected targets. Smoking cessation is seasonal with most smokers quitting in the last quarter of January to March. Figures for this period have not yet been collated but when they are we expect to have exceeded the set target. Halton has one of the highest quit rates in the northwest.

Summary of key activities undertaken / planned during the year

The business plan to support extra investment in tobacco control has been agreed. Job descriptions and service specifications are currently being drawn up and additional staff should be in place by July 2010. A new pathway for pregnant smokers is now in place and there is currently a 3% improvement on the number of pregnant quitters compared to 2009/10. The majority of smokers quitting in Halton are within the DH key target groups of workless or routine and manual labour people. Tobacco control has been cited as an area of good practice for World Class Commissioning.

People over 65 who say that they receive the information, assistance and support needed to exercise choice and control to live independently

Baseline		2009 - 10	2011		
(2008 survey)	Target	Actual	Progress	Target	Projected
30.4%	N/A	N/A	N/A	32.8%	?

Data Commentary

This is collected through the Place Survey carried out every 2 years. The next planned Place Survey is during the Autumn of 2010.

General Performance Commentary

Not applicable

Summary of key activities undertaken / planned during the year

Plans are being developed to carry out a brief survey of older people using existing networks to assess direction of travel. This survey will be carried out initially through Halton Older People's Empowerment Network (OPEN) and the five local participation groups. The next stage will be to get the question incorporated into existing service feedback forms. The first phase of this will be through Halton Borough Council's existing Lifeline service.

NI 142	Number of	vulnerable	people	supported	to	maintain
	independent	living				

Baseline (2007/08)	2009 - 10			2011	
	Target	Actual	Progress	Target	Projected
98.17%	98.69%	98.95%	✓	99.04%	✓

Data Commentary

This report covers the period 6 April 2009 to 4 April 2010. All performance indicator workbooks have been received from SP support providers.

General Performance Commentary

Services have exceeded the overall cumulative target set for 2009/10.

The overall target set of 98.69% has been exceeded for 2009/10. Four client groups have individual performance targets set. Services for older people with support needs, frail elderly and generic services have all exceeded their targets. The service for teenage parents has failed to meet it's overall target of 92.59% and performance has fell again in quarter 4.

Summary of key activities undertaken / planned during the year

The teenage parent service is being closely monitored to improve performance with a joint approach between Supporting People and Children's Services. By using this approach it is expected appropriate referrals will be made, service users will also be accessing other services so will engage with the support provider and that positive outcomes will be achieved. An action plan has been agreed and good progress is being made with receiving appropriate referrals into the service. However there is still an issue with service users who stop engaging with the service. A further monitoring meeting is being arranged with the support provider & childrens services representative to discuss this issue and overall progress, and measures will be put into place to address this matter and improve performance in 2010/11.

All services continue to be monitored on a quarterly basis and any issues identified will be addressed by the Quality Assurance team.

NI 150	Adults in contact with secondary mental health services in
	employment

Baseline	2009 - 10			2011	
(Jan 2010)	Target	Actual	Progress	Target	Projected
11.1%	11.1%	11.1%	✓	12.1%	✓

Data Commentary

In January 2010 there were 640 people in Halton receiving secondary mental health services, 71 of these were recorded as in employment and this was used to agree the baseline. The baseline agreed as part of LAA review in March 2010.

General Performance Commentary

It has been agreed that a further 1% of this group of 640 will be in employment by March 2011. The 71 already in employment will be seen as the baseline even if for example, they retire during the next 12 months. The list of people newly into employment will be available (assuming success) by March 2011.

Summary of key activities undertaken / planned during the year

A strategy has been developed and actions have been identified to achieve the target for next year.

Non Local Area Agreement Measures contained within Halton's Sustainable Community Strategy (2006 – 2011)

NI 121 Mortality rate from all circulatory diseases at ages under 75

Baseline (2007/08)	2009 - 10			2011	
	Target	Actual	Progress	Target	Projected
64.3	83.21	88.8	×	78.3	?

Data Commentary

Quarters 1 to 3 have been refreshed. Quarter 4 is the position as of February 2010 - March 2010 data will not available until May 2010 from ONS.

General Performance Commentary

2008/9 data for Halton indicates deaths from circulatory disease had reduced by 42% and although it is unlikely we will achieve the LAA target it is projected Halton will achieve the 2010 spearhead target of a 57% reduction. Circulatory disease is impacted on via treatment for existing disease and a reduction in smoking and obesity levels.

Summary of key activities undertaken / planned during the year

- GP registers for patients at high risk of CVD are in place to address the problem of under diagnosis of CVD patients. Out of patients assessed for risk of CVD Halton GPs are finding more, earlier 4,309 patients found needing treatment in 08/09 compared to 1,533 in 06/07.
- Health Checks PLUS Scheme established in 2009 was developed to build upon the work of the GP high risk registers and respond to NST Health Inequalities recommendations to launch an additional 'case-find' scheme that included a broader scope. 20% of the adult population of Halton is invited for a Health Checks PLUS assessment on an annual basis.
- Out of 24 patients assessed through Health Checks PLUS In Beechwood Medical Centre in Halton between October 2009 and January 2010 16 were found to be at risk of CVD.
- Management of blood pressure is important to address CVD the PCT has incentivised GPs to deliver on this. Blood pressure management has improved for patients treated from 12,517 patients in 2004/5 to 13,617 patients in 2008/9. These figures are expected to have increased in 2009/10.
- Management of cholesterol is important to address CVD the PCT has incentivised GPs to deliver on this. Cholesterol management has improved for patients treated from 9931 patients in 2004/5 to 11420

patients in 2008/9. These figures are expected to have increased in 2009/10.

- A Cardiac Rehabilitation Programme for Halton residents set up in May 2009 by January 2010 60 Halton residents had completed the full Cardiac Rehabilitation programme.
- A Street Doctor style bus has been commissioned by Halton GPs to go out and case find hard to reach people with CVD.
- Halton has improved its smoking quit rate year on year for the past 5 years. Halton and St Helens now has the 4th highest quit rate in the North west at 1104.74 per 100,000. Halton and St Helens has stretched their smoking target for next year and will have the second highest target in the North West.
- Stop smoking advisors now work in hospitals, pharmacies and 13 GP Practices in Halton.
- Pharmacists are incentivised to deliver stop smoking advice and have quitters.
- The stop smoking rate for pregnant women has improved this year with 22.5% staying quit at time of delivery in the first 2 quarters of 2009/10 compared to 25.5% in 2008/9.
- There is a 100% compliance with smoke free public places enforcement.
- Substantial investment is now in place to address obesity.
- A new brief intervention service has been commissioned to train up staff and patients in how to tackle overweight or obesity.
- The services for overweight and obese patients are being expanded.
- A weight awareness social marketing campaign titled *The Moment of Truth* has been developed.
- Exercise on referral is being expanded.
- A number of health check programmes have been initiated that will invite 20% of the Halton population for examination. These include Health Checks Plus, QOF Plus, and WorkWell health checks.

NI 122 Mortality from all cancers at ages under 75

Baseline (2007/08)	2009 - 10			2011	
	Target	Actual	Progress	Target	Projected
161.7	128.9	166.8	×	126.4	?

Data Commentary

Quarters 1 to 3 have been refreshed. Quarter 4 is the position as of February 2010 - March 2010 data will not available until May 2010 from ONS.

General Performance Commentary

Death rates from cancer under age 75 have fallen steadily from 171 per 100,000 people in the year 1993, to 131 in 2007. There was a rise in 2008 to 140 deaths per 100,000. We expect to see improvement in the 2009 results when available. Recent data results indicate survival from lung cancer in Halton and St Helens is 30% after one year: one of the eight best rates in the North West. Survival from bowel cancer at one year is excellent at 71%. Survival from breast cancer at one year is high at 96%. Cancer rates are mostly impacted on via early diagnosis, and reduction in smoking and obesity levels.

Summary of key activities undertaken / planned during the year

- The Get Checked for cancer campaign is based on successful messages in local communities that highlight any changes for normal experience or symptoms..
- Under the targeted Get Checked campaign more cancers were diagnosed (up by 68% for bowel cancer, 13% for breast cancer and 10% for lung cancer)
- Under the Get Checked campaign more GPs referred cases early for diagnosis under the "two week" rule (up by 82%, 19% and 16%)
- Under the Get Checked campaign there was less spread of the cancer at the time of diagnosis.
- The campaign is extending across all practices from 2010.
- The 2 week wait rapid access referral for cancer symptoms has been very successful across Halton and St Helens: GPs in Halton and St Helens now refer 191 patients per 10,000 population using the 2 week rule.
- Half of people in their sixties in Halton and St Helens now take up a simple home screening test for bowel cancer, leading to much earlier diagnosis. This screening was introduced just two years ago.
- Widnes GPs are running a programme to encourage women who have not attended before, to go for cancer screening.
- Stop smoking advisors now work in hospitals, pharmacies and 13 GP Practices in Halton.
- Pharmacists are incentivised to deliver stop smoking advice and have quitters.
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- A new brief intervention service has been commissioned to train up staff and patients in how to tackle overweight or obesity.
- The services for overweight and obese patients are being expanded.
- A weight awareness social marketing campaign called The Moment of

Truth has been developed.

- Exercise on referral is being expanded.
- A number of health check programmes have been initiated that will invite 20% of the Halton population for examination. These include Health Checks Plus, QOF Plus, and WorkWell health checks.

NI 124 Increase the number of people with a long term condition supported to be independent and in control of their condition

Baseline (2007/08)	2009 - 10			2011	
	Target	Actual	Progress	Target	Projected
43%	N/A	Refer comments below		49%	N/A

Data Commentary

We are working on putting together a robust system to properly measure patient experience (NI124) instead of using the proxy measurement of emergency bed days.

Due to changes of staff within the partnership a meeting has been arranged for mid May to explore in more detail an appropriative method of data acquisition.

General Performance Commentary

Refer comments above

Summary of key activities undertaken / planned during the year

Information not currently available