

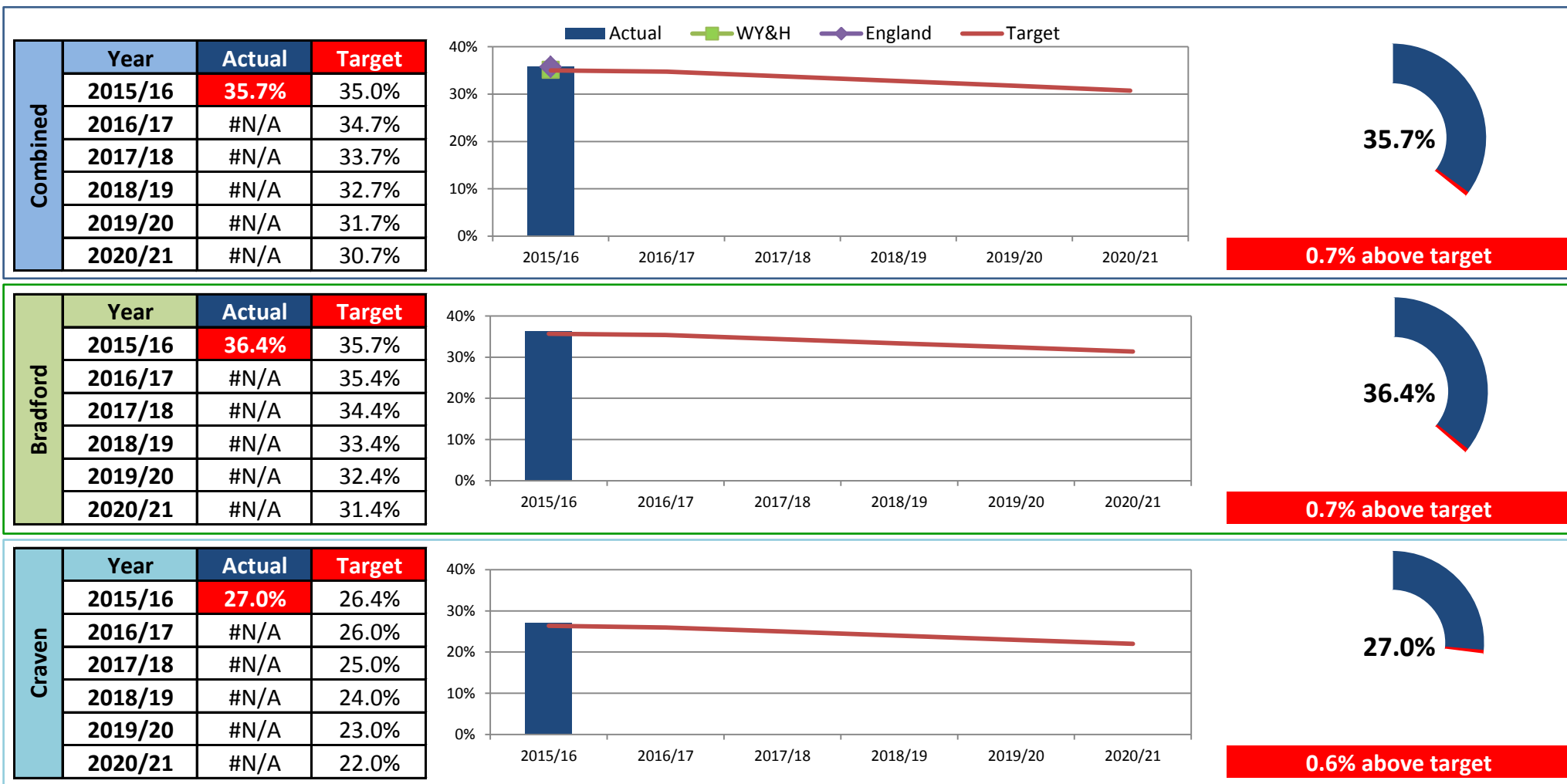


Health and Wellbeing



1.1 Reduce childhood obesity by 5%

Number of children in Year 6 (aged 10-11 years) classified as overweight or obese, attending participating state maintained schools in England, as a proportion of all children measured



*Data Source: NHS Digital - Data at UA/LA level using resident population

Excess weight in 10-11 year olds Current average prevalence of childhood obesity and overweight is 35.8%, which is extremely high in terms of numbers of children and long-term impact on their health. The highest prevalence is in Little Horton with 43.9% of the children overweight or obese. Currently 19 of the wards of the district are above the England average of 33.4. Current interventions that will help to deliver change include:

Breastfeeding support

Healthy Start Programme

Integrated Care Pathway (ICP)

Children's Centres

Health, Exercise and Nutrition for the Really Young (HENRY)

National Child Measurement programme (NCMP)

Healthy Active Play Partners (HAPP)

School Travel Programme

Be Healthy Schools programme

Daily Mile

Greenline Mile

Ministry of Food

School Cooks Programme

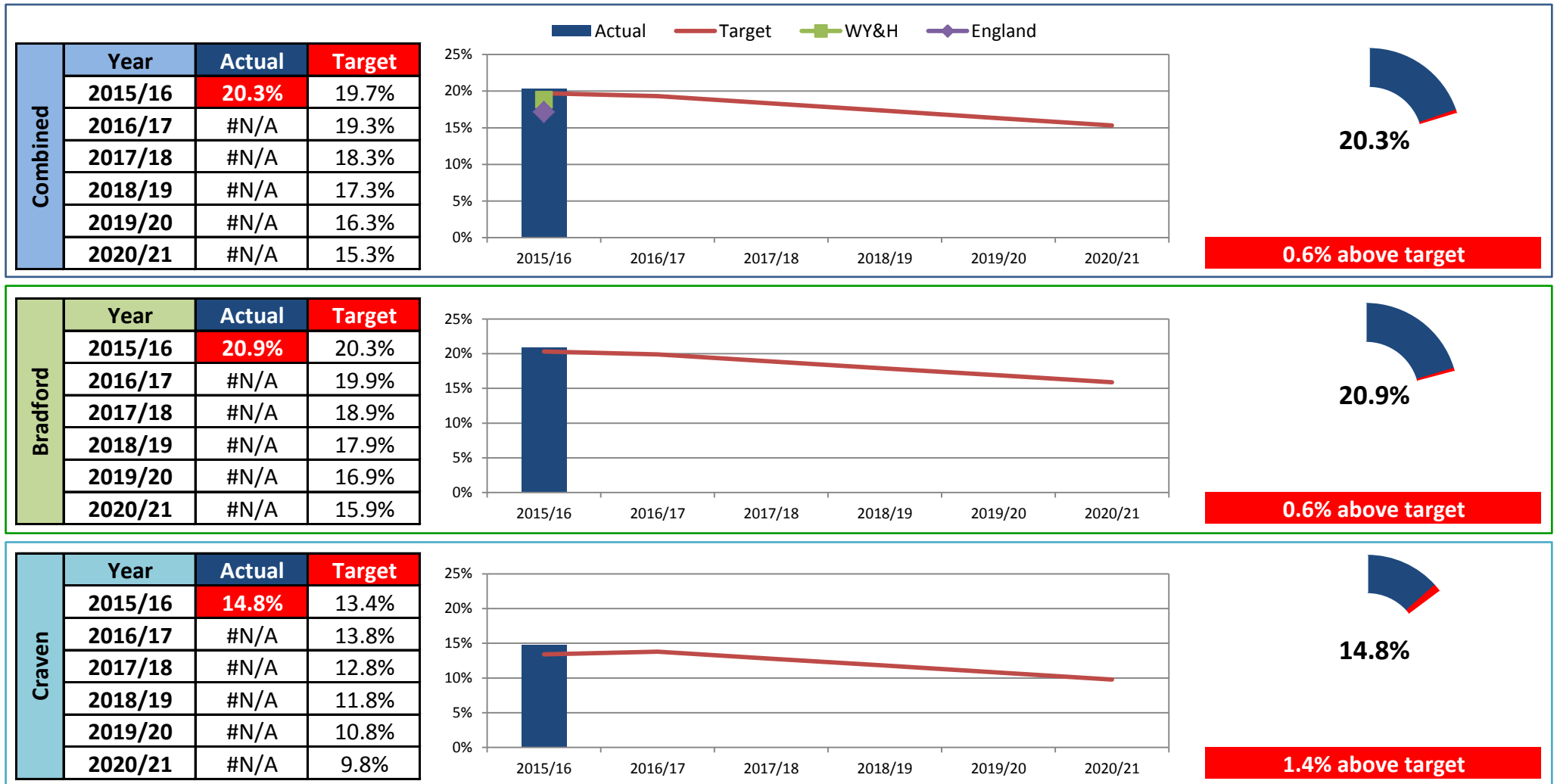
Voluntary Community Sector

Good Food Award

Health Improvement Training

1.2 Reduce smoking prevalence by 5%

Prevalence of smoking among persons aged 18 years and over



*Data Source: Public Health England - Data at UA/LA level using resident population

Smoking prevalence - adults (over 18s)

There are a range of actions in place and in planning to reduce smoking prevalence with a focus on smoking in pregnancy, secondary care, mental health, and communities with higher smoking prevalence. Reducing smoking in pregnancy is a key priority for Bradford Council and NHS partners, Public Health have commissioned a stop smoking specialist midwife (BTHFT) to implement an evidence based programme into the maternity care pathway to ensure a consistent intervention and rapid referral for women identified as smoking in pregnancy.

Within Secondary Care smokers are referred to the stop smoking service with access to medication and support to quit provided on the ward. Public Health have worked in partnership with the Mental Health acute setting to achieve a smokefree site, training staff to stop smoking practitioner level to ensure smokers have access to medication and support on admission, with a pathway in place to maintain support on discharge.

Within Primary Care Public Health deliver and commission stop smoking services from GP practices and pharmacies across the district to ensure smokers have a range of venues and times to access support to quit.

The illegal trade in cheap tobacco undermines the effectiveness of efforts to reduce smoking. Working as a West Yorkshire LA partnership '*Keep it Out*' is a West Yorkshire programme to tackle illicit and illegal tobacco. WY Trading Standards have been commissioned creating economies of scale and to prevent driving illegal tobacco over neighbouring borders.

Two areas of developing work are:

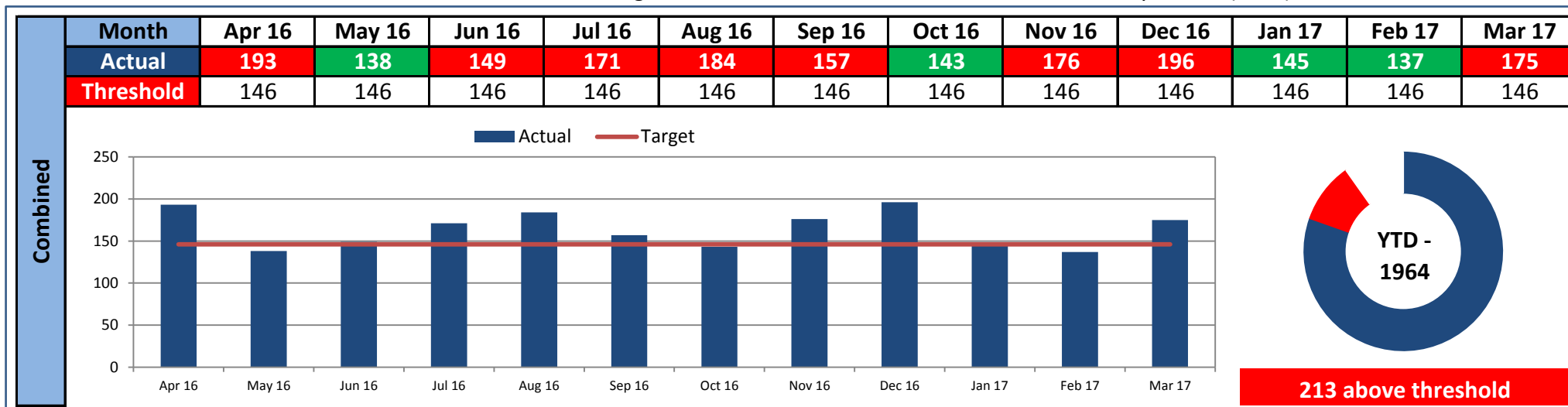
Tobacco Control - a work stream for the West Yorkshire & Harrogate Cancer Alliance STP – The main purpose of this work stream is to strengthen existing tobacco controls and smoking cessation services across West Yorkshire and Harrogate in line with reducing smoking prevalence to below 13% nationally by 2020.

Partnership work with Bradford City and Districts CCGs to embed smoke free interventions, actions and pathways in to the Bradford Breathing Better respiratory programme.

1.4 Prevent cardiovascular events for 600 people

Current saving: -213

Non Elective Admissions following Heart Attack or Stroke - Links to Bradford Healthy Hearts (QIPP)



PLEASE NOTE: The Thresholds are provisional only - the projected number of events to be prevented is currently being calculated.

Bradford Districts CCG: *Bradford's Healthy Hearts*

Bradford has one of the worst mortality rates from heart disease in England. That is why one of our main priorities – through *Bradford's Healthy Hearts (BHH)* – is to reduce the risk of heart attack and stroke. BHH involves wide-ranging engagement with a broad range of healthcare stakeholders including hospital consultants, GPs, other healthcare professionals and patients. Through BHH, clinicians working with the BHH programme have:

used the QRISK2 assessment (a calculator to work out the risk of heart attack and stroke) to identify people with more than a 10% risk of having a stroke and to start them on statin medication worked to prevent strokes for people with atrial fibrillation (an abnormal heart rhythm that increases the risk of stroke). This programme has assisted people to start oral anticoagulation (blood thinning) therapy to reduce the risk of stroke started, in February 2016, a programme to improve blood pressure control for patients with high blood pressure Already through *BHH* we have reduced non-elective cardiovascular admissions by 10%; prevented 74 strokes and 137 heart attacks; and cost savings associated with this represent approximately £1.2 million. This excellent work was recognised when *BHH* won the BMJ award for clinical leadership team of the year in May 2016 and was commended for “*Inspirational leadership at scale, taking forward ambitious targets to tackle long-standing public health challenges, and the engagement with the public whilst balancing demands on the clinical workforce was impressive.*” In addition, *BHH* was held up as an example of good practice in the NHS RightCare commissioning for value long-term conditions pack in December 2016.

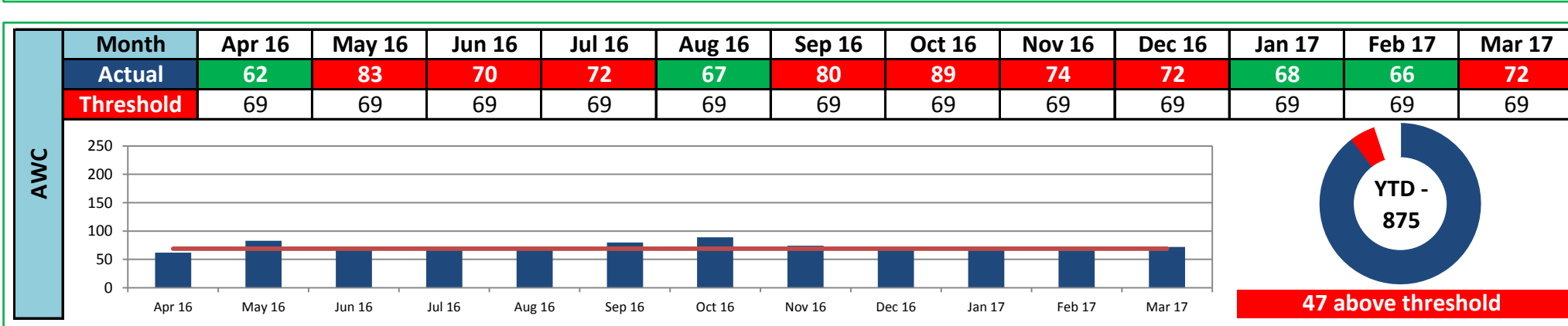
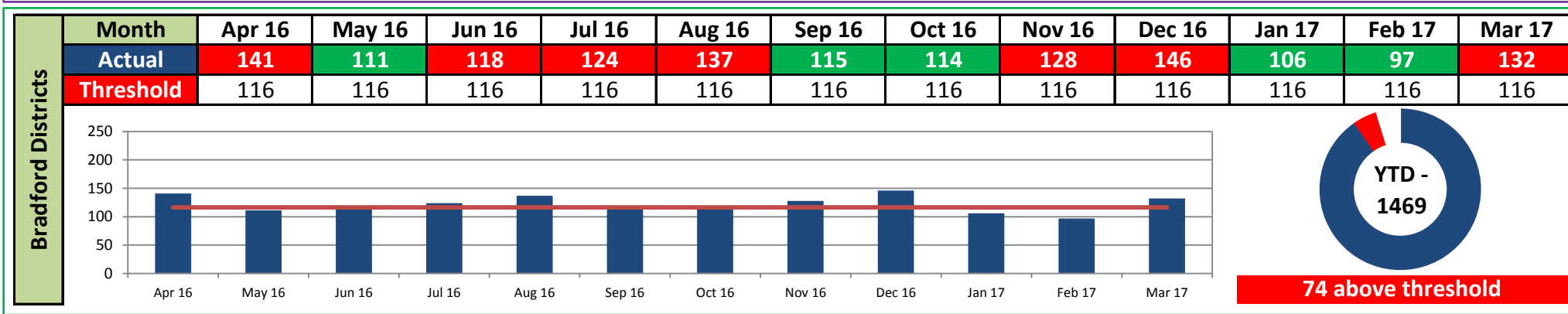
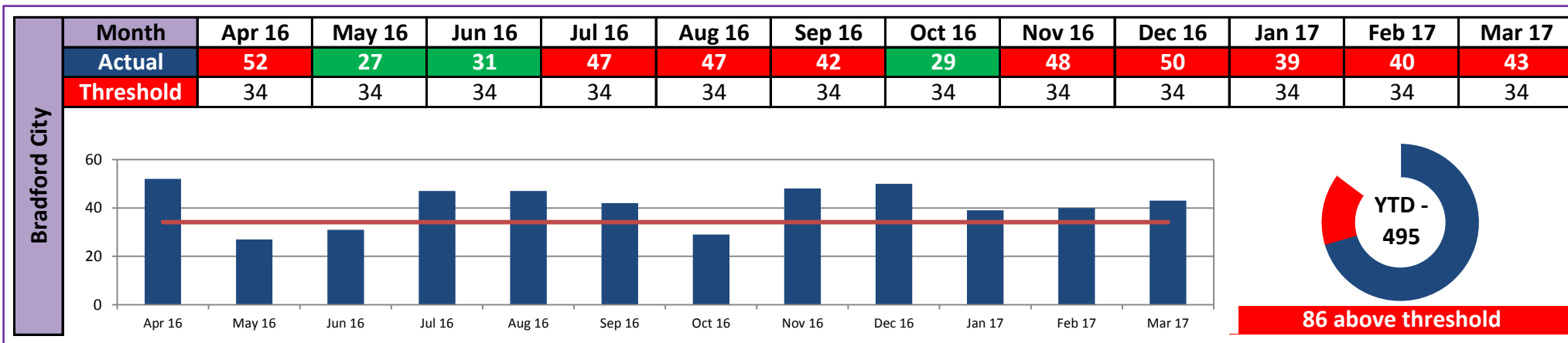
The [BHH website](#) is an excellent resource for patients and professionals with lots of helpful information. *BHH* also lent its support to the district’s successful Guinness World Records™ title for “Longest chain of people making heart-shaped hand gestures” (2,331 people) which was achieved on 15 September 2016, at City Park. BHH gave the event a healthy twist by encouraging adults to get their blood pressure checked to cut their risk of stroke.

Starting at the end of October 2016, Bradford’s Healthy Hearts ran a six weeks campaign to encourage people to get their blood pressure checked, using Pulse radio and social media to publicise.

By 2020, we will have prevented 150 strokes and 340 heart attacks helping to reduce health inequalities, improve health and wellbeing and reduce spend on preventable hospital

* Data Source: SUS - Data at CCG level using registered population

** NHS Airedale, Wharfedale & Craven CCG not included as it's not part of the QIPP plan for Cardiovascular Disease.



* Data Source: SUS - Data at CCG level using registered population

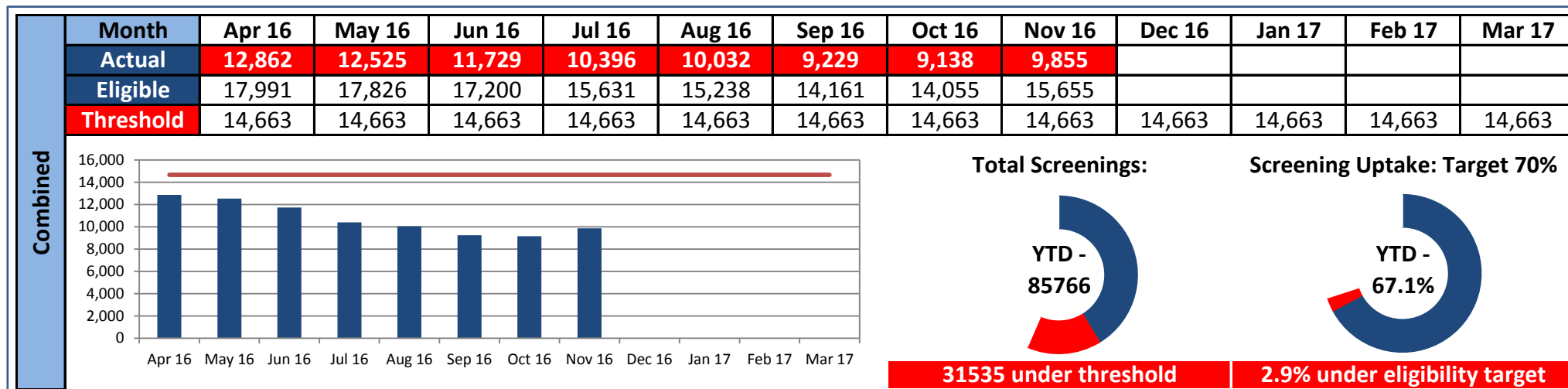
** NHS Airedale, Wharfedale & Craven CCG not included as it's not part of the QIPP plan for Cardiovascular Disease.

1.5i Screen an additional 5500 women for breast cancer

Additional Screenings: -31535

Females, 50–70, screened for breast cancer within 6 months of invitation - National Target 70%

1-year screening uptake %: the number of females registered to the practice aged 50-70 invited for screening in the previous 12 months who were screened within 6 months of invitation divided by the total number of females aged 50-70 invited for screening in the previous 12 months.



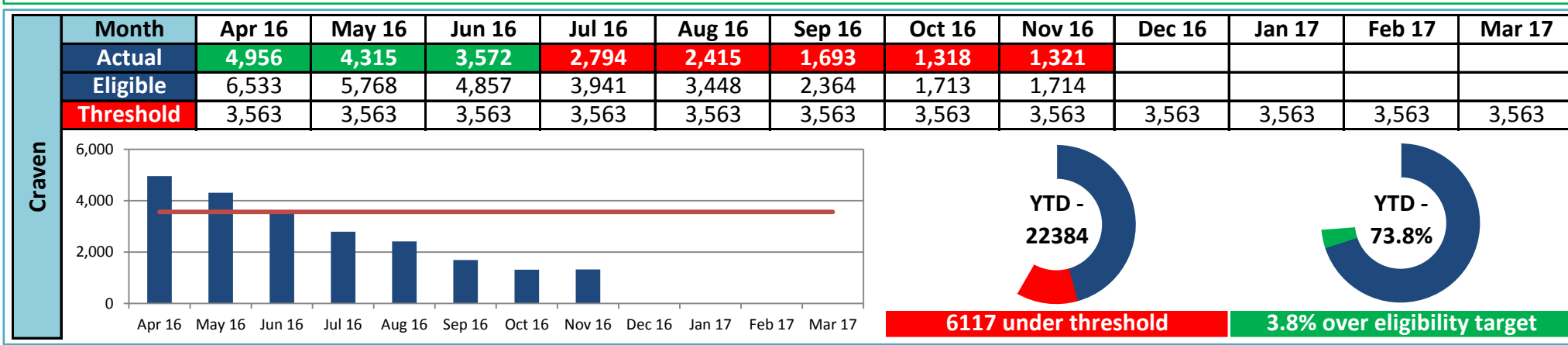
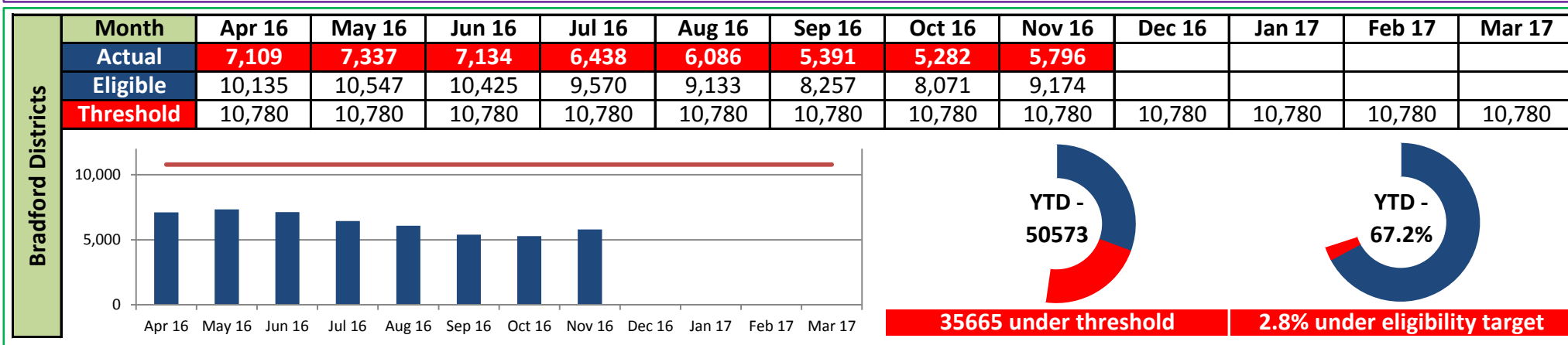
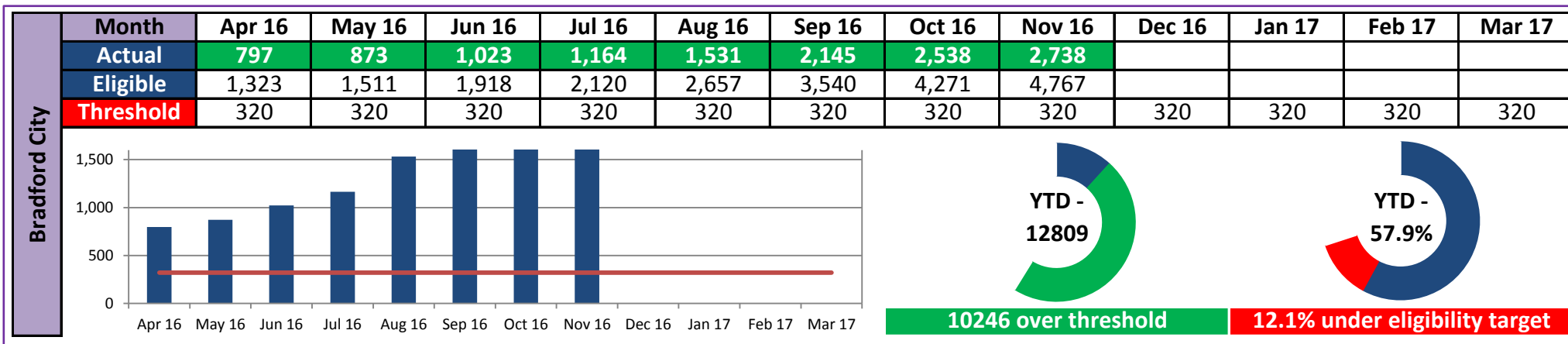
Bradford City

Sadly overall health outcomes continue to be poorer in Bradford City's communities. Cancer survival rates are causing concern: we have high birth rates resulting in neonatal mortality or still birth; emergency admissions for urgent care sensitive conditions are too high. We are part of a West Yorkshire, Craven and Harrogate approach to improve cancer outcomes including increasing capacity of diagnostic services. Locally we are trying to improve uptake of cancer screening programmes and increase awareness so that late presentations can be minimised

Bradford Districts

We aim to improve the uptake of screening programmes locally to support earlier diagnosis of cancer at stage one and two. We will continue to engage with GP practices to support best practice, including work with GP practice nurse forums which has been supported by visits from Cancer Research UK. By reaching out to people and increasing awareness of the early symptoms of cancer we aim to reduce the proportion of cancers diagnosed following an emergency hospital admission. We held an engagement event in conjunction with Cancer Research UK in June 2016 to understand the issues and barriers that affect uptake of cancer screening in Bradford. Following this, NHSE has set up a working group - including NHS commissioners and providers, the local authority, third sector organisations and patient groups - to spread the message about cancer screening throughout our population with the aim of diagnosing more cancers at early stages, thus improving patient outcomes and survival rates.

* Data Source: Open Exeter - Data at CCG level using registered population



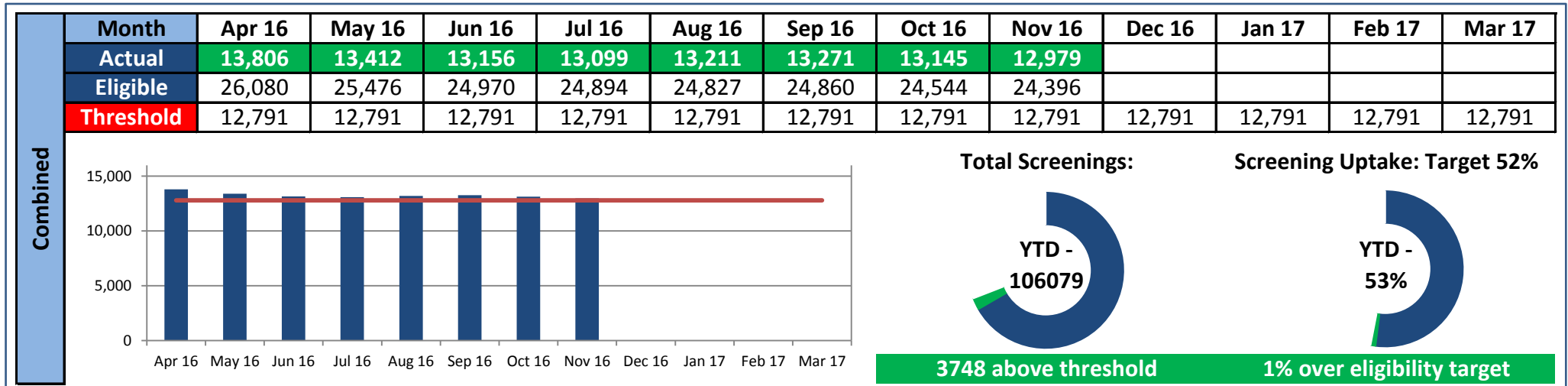
* Data Source: Open Exeter - Data at CCG level using registered population

1.5ii Screen an additional 1500 people for bowel cancer

Additional Screenings: 3748

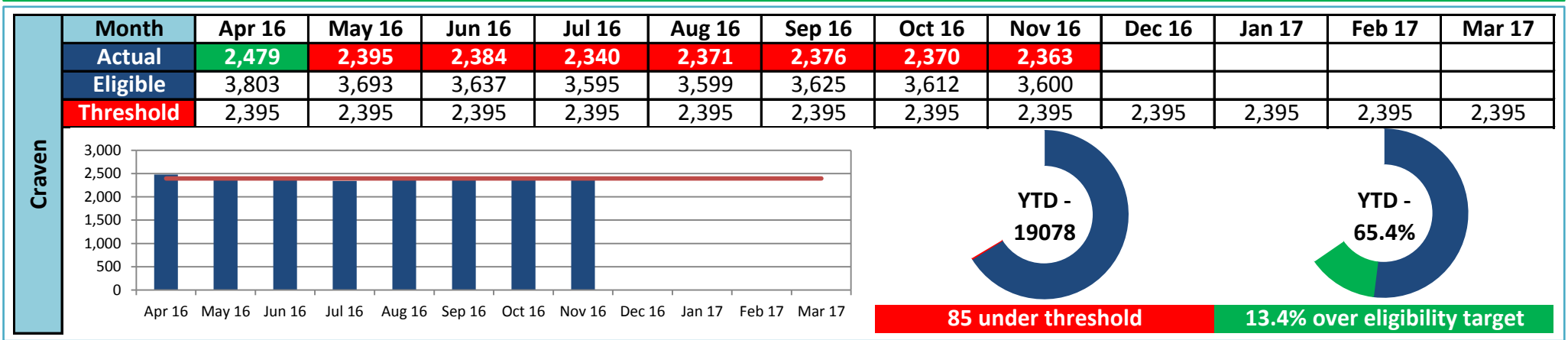
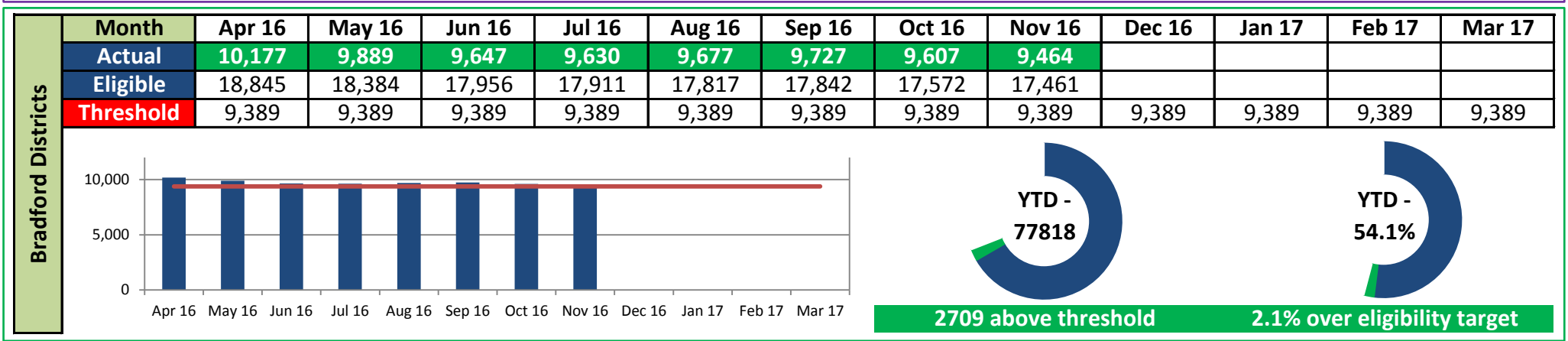
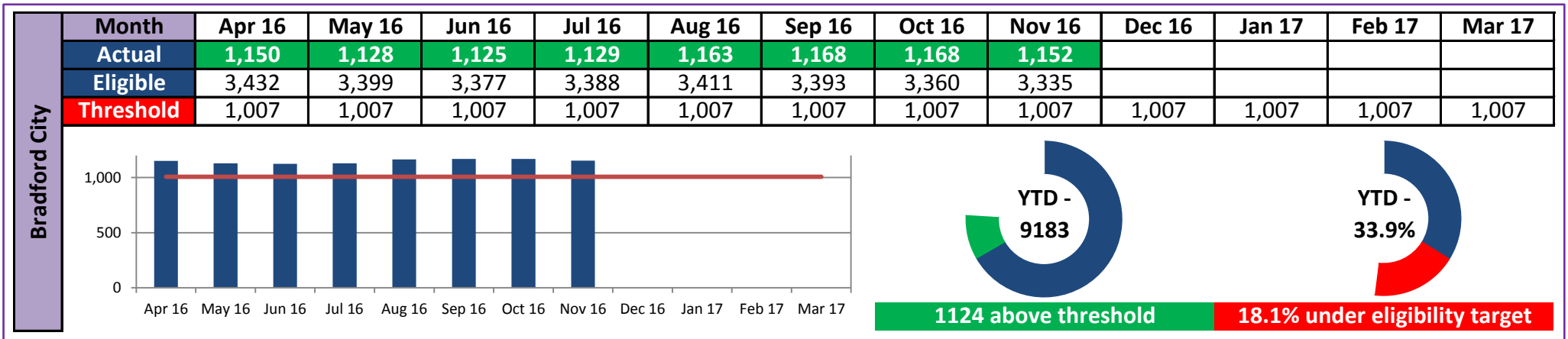
Persons, 60-74, screened for bowel cancer within 6 months of invitation - National Target 52%

Screening uptake %: the number of persons aged 60-74 invited for screening in the previous 12 months who were screened adequately following an



See 1.5i

* Data Source: Open Exeter - Data at CCG level using registered population



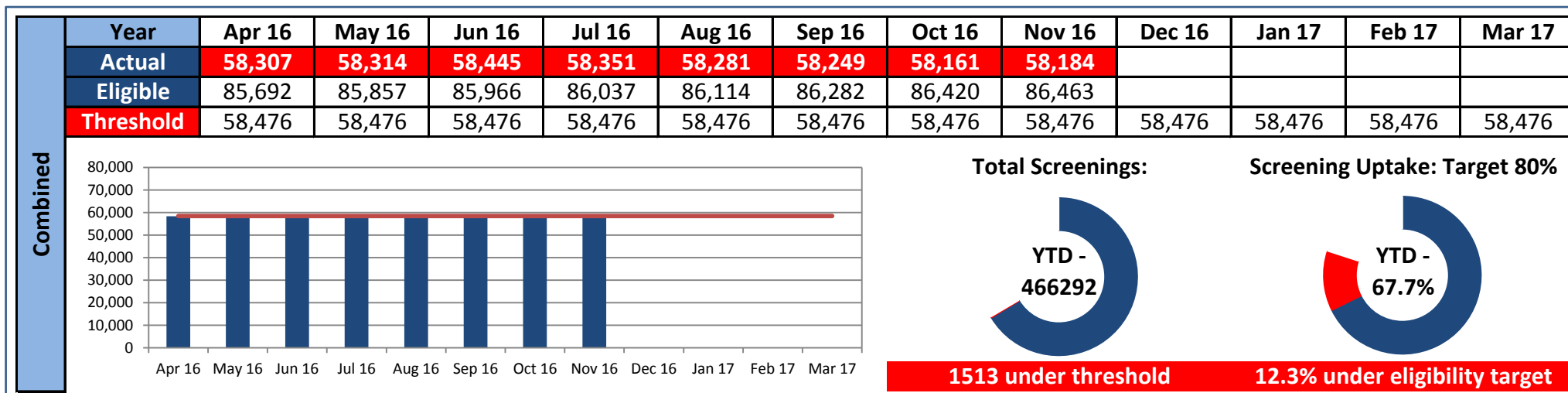
* Data Source: Open Exeter - Data at CCG level using registered population

1.5iii Screen an additional 500 women for cervical cancer

Additional Screenings: -1513

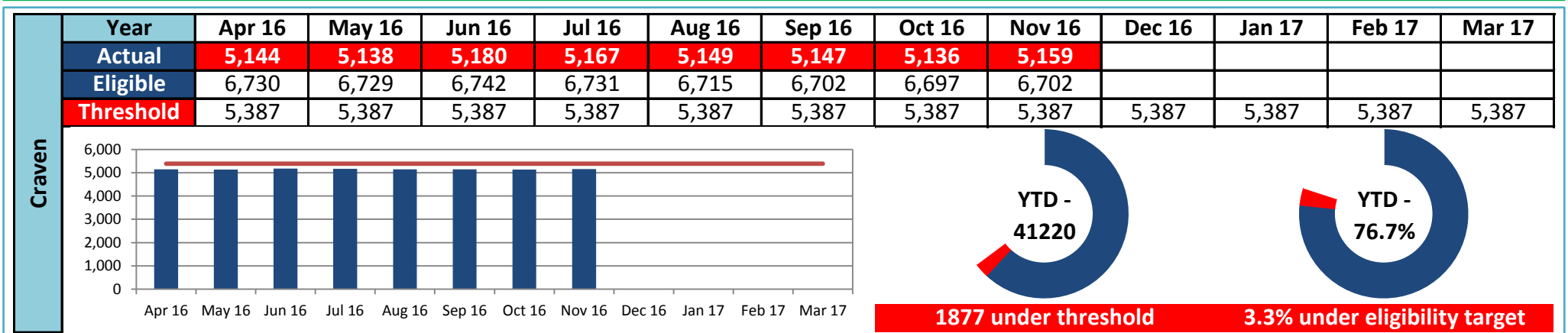
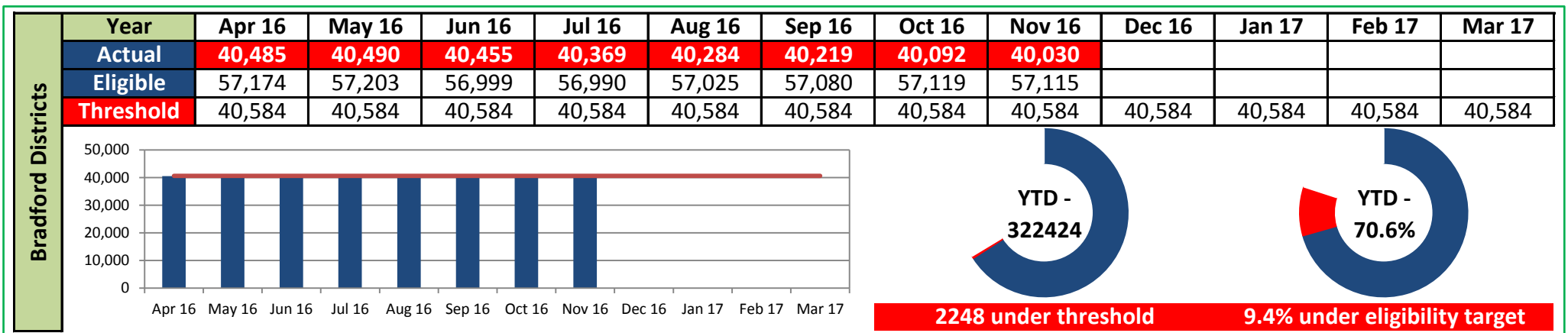
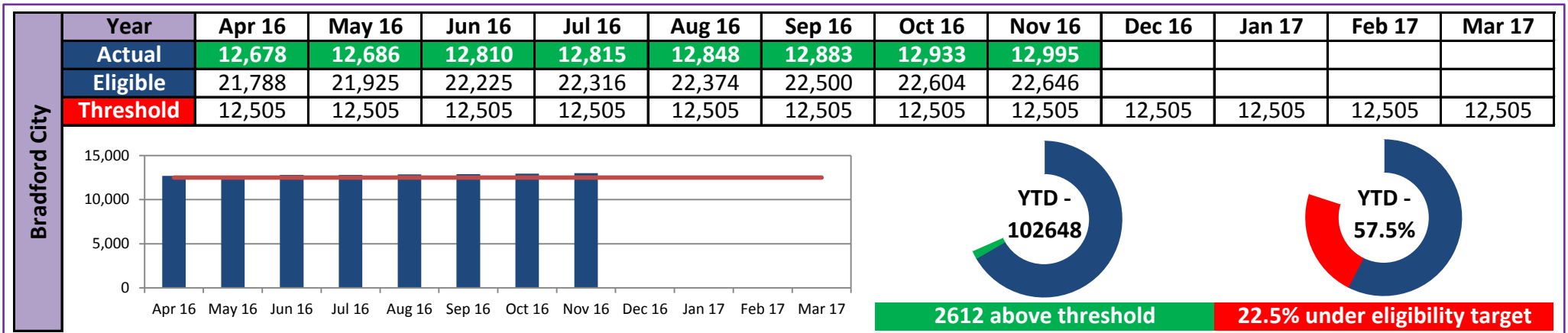
Females, 25–64, attending cervical screening within target period - National Target 80%

The overall cervical screening coverage: the number of women registered at the practice screened adequately in the previous 42 months (if aged 24-49)



See 1.5i

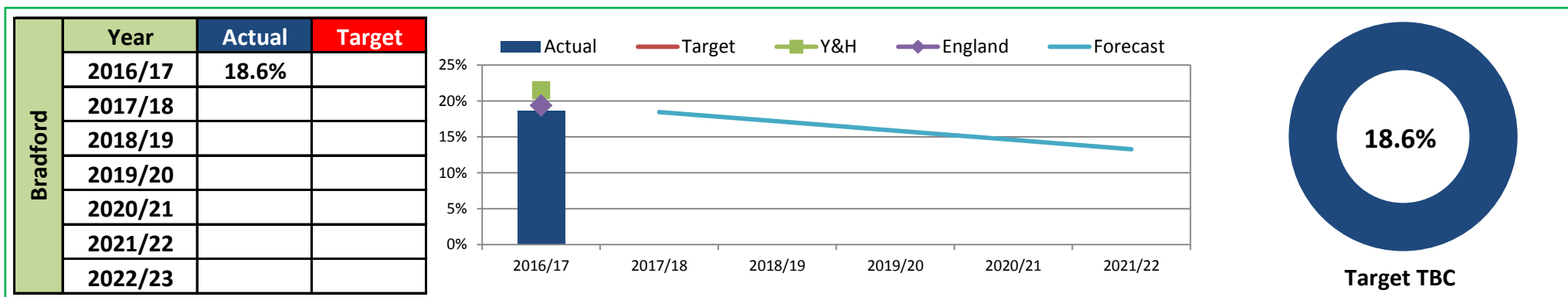
* Data Source: Open Exeter - Data at CCG level using registered population



* Data Source: Open Exeter - Data at CCG level using registered population

1.6i Recognise and value peoples mental wellbeing and take early action to maintain their mental health

PHOF 2.23iv self-reported wellbeing - people with a high anxiety score. The percentage of respondents scoring 6-10 to the question "Overall, how anxious did you feel yesterday?" - Target to Be Confirmed.



Mental wellbeing is much more than simply not being mentally ill. It is about having positive self-esteem, good coping mechanisms and feeling empowered and in control. In Bradford district and Craven we actively promote mental wellbeing through addressing social and environmental factors and offering support before problems lead to mental ill-health.

A new Mental Health Strategy was recently launched across Bradford – bringing together the health and care economy. The strategic priorities are given as:

Our wellbeing - We will build resilience, promote mental wellbeing and deliver early intervention to enable our population to increase control over their mental health and wellbeing and improve their quality of life and mental health outcomes.

Our mental and physical health - Mental health and wellbeing is of equal importance with physical health. We will develop and deliver care that meets these needs through the integration of mental and physical health and care.

Care when we need it - When people experience mental ill health the strategy will ensure they can access high quality, evidence based care that meets their needs in a timely manner, provides seamless transitions and care navigation.

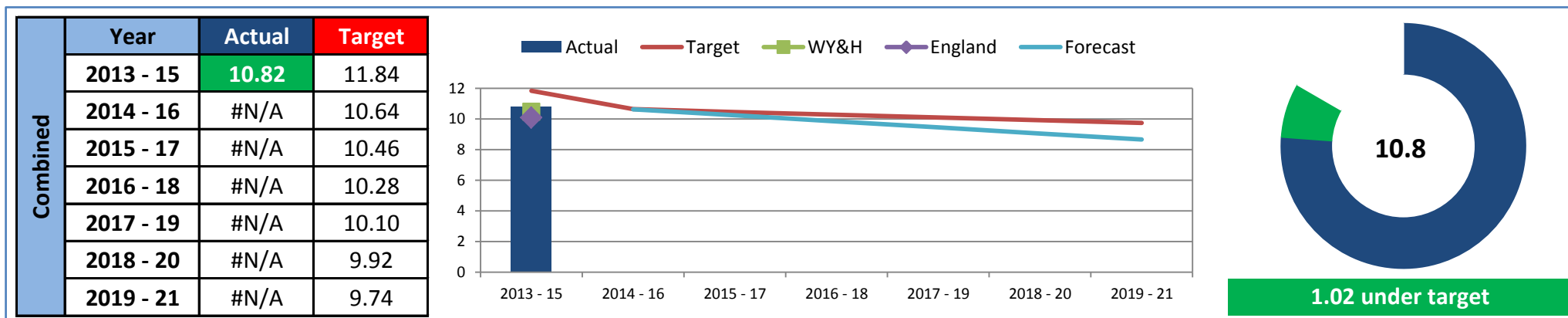
The strategy is comprehensive for Bradford district and Craven 2016-2020 and covers all ages. It provides an innovative focus on promoting mental wellbeing and tackling wider determinants of mental ill-health, and is aligned with national guidance. It was developed through close engagement with local people, carers, VCS, NHS providers and local authorities in Bradford area and Craven

Work is now underway to implement the strategy with the close involvement of a wide range of partners in strategy development and implementation.

*Data Source: Public Health England - Data at UA/LA level using resident population

1.6ii Recognise and value peoples mental wellbeing and take early action to maintain their mental health

Age-standardised mortality rate from suicide and injury of undetermined intent per 100,000 population



Mental wellbeing is much more than simply not being mentally ill. It is about having positive self-esteem, good coping mechanisms and feeling empowered and in control. In Bradford district and Craven we actively promote mental wellbeing through addressing social and environmental factors and offering support before problems lead to mental ill-health.

A new Mental Health Strategy was recently launched across Bradford – bringing together the health and care economy. The strategic priorities are given as:

Our wellbeing - We will build resilience, promote mental wellbeing and deliver early intervention to enable our population to increase control over their mental health and wellbeing and improve their quality of life and mental health outcomes.

Our mental and physical health - Mental health and wellbeing is of equal importance with physical health. We will develop and deliver care that meets these needs through the integration of mental and physical health and care.

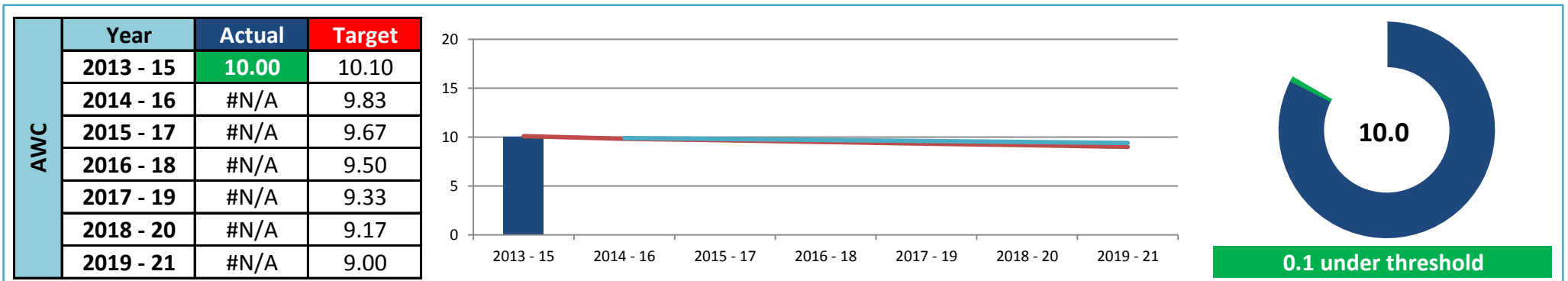
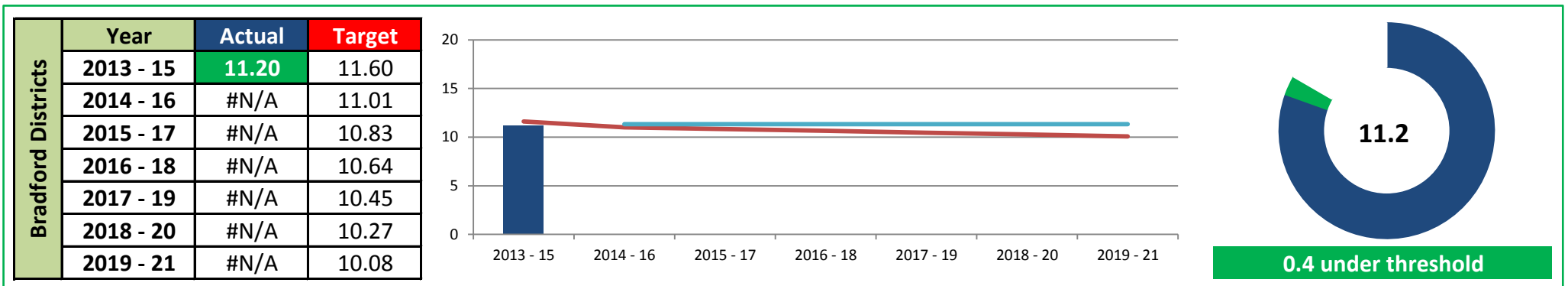
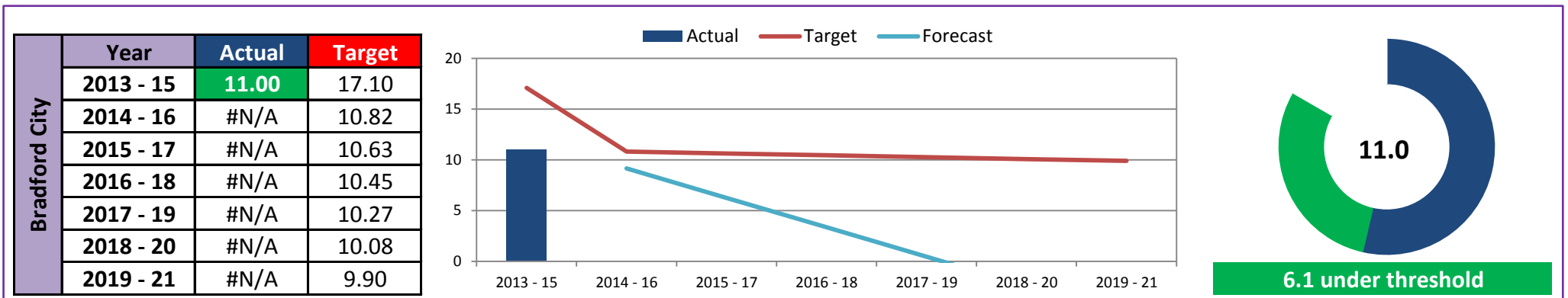
Care when we need it - When people experience mental ill health the strategy will ensure they can access high quality, evidence based care that meets their needs in a timely manner, provides seamless transitions and care navigation.

The strategy is comprehensive for Bradford district and Craven 2016-2020 and covers all ages. It provides an innovative focus on promoting mental wellbeing and tackling wider determinants of mental ill-health, and is aligned with national guidance. It was developed through close engagement with local people, carers, VCS, NHS providers and local authorities in Bradford area and Craven

Work is now underway

Our key achievements during 2016/17 include: working with colleagues in public health, NHS providers, social care and other teams on actions to reduce suicides or implement the strategy with the close involvement of a wide range of partners in strategy development and implementation.

* Data Source: Office for National Statistics - Data at CCG level using registered population



* Data Source: Office for National Statistics - Data at CCG level using registered population