

Report to HEALTH AND WELLBEING BOARD

Greater Manchester Common Standards for Population Health: Update

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Purpose of the Report

For the Board to receive an update on the local work on the Greater Manchester Common Standards for Population Health.

Executive Summary

Greater Manchester Health and Social Care Partnership has coordinated a programme of work to develop a suite of core standards for population health. Public Health Practitioners and subject matter experts from the 10 Greater Manchester localities have co-designed a suite of *Greater Manchester Standards for Population Health* describing the evidence-based activities proven to improve population health outcomes for 7 core population health themes:

- Mental Health and Wellbeing
- Oral Health
- Sexual and reproductive health
- Drug and Alcohol service standards
- Physical activity
- Health Protection
- Tobacco Control

The Standards provide localities with an evidence-based tool to review current local activity and identify any gaps in evidence.

The standards were presented to the Oldham Health and Wellbeing Board in June 2019 and since then Oldham Public Health team have been developing ways to use them locally in line with existing standards, and measures.

Recommendations/Requirement from the Health and Wellbeing Board

There is no compulsion for localities to adopt or implement Greater Manchester Common Standards for Population Health. However, this document provides an update on how they are being used in Oldham to review current practice and identify any gaps in evidence.

Oldham Health and Wellbeing Board are requested to:

- Note the use of the GM Population Health Common Standards by key topic partnership boards as a mechanism for prioritisation and quality improvement
- Review the assessment of the local position against the 'Prescribed and Non-Prescribed Functions standard and note plans to take action where the standard is not being met

Greater Manchester Common Standards for Population Health

1. Background

- 1.1. In March 2017, following a [review of the current public health system across Greater Manchester](#), Greater Manchester Health & Social Care Partnership (GMHSCP) committed to the reduction of unwanted variation in standards and outcomes and an ambition to see a more consistent adoption of evidence-based practice and the use of benchmarking data.
- 1.2. In order to reduce variance, enhance consistency and improve population health outcomes across Greater Manchester, a programme of work has been undertaken to develop a suite of core **Common Standards for Population Health in Greater Manchester**.
- 1.3. The **Common Standards for Population Health in Greater Manchester** were developed by existing and new Greater Manchester task groups for key areas of population health activity. The standards are designed to support localities to achieve the best health gain for their population, and to reduce unwanted variation in population health outcomes across Greater Manchester.
- 1.4. These standards were presented to the Oldham Health and Wellbeing Board in June 2019. It was then agreed for further work be undertaken locally to ensure that they are being taken forward by the appropriate groups and consider how these are linked to local outcomes and services.

2. Current Position

- 2.1. This first publication of GM Common Standards for Population Health provides standards for 7 population health themes.
 - Mental Health and Wellbeing
 - Oral Health
 - Sexual and reproductive health
 - Drug and Alcohol service standards
 - Physical activity
 - Health Protection
 - Tobacco Control
- 2.2. In addition, there is an overarching standard covering prescribed and non-prescribed public health functions. Review of this standard has identified that Oldham meets or partially meets all aspects of the standard with the exception of having a documented weight management offer for children and families. This will be addressed through the new healthy weight strategy and review of weight management commissioning.
- 2.3. The Oldham Public Health Team have carried out a desktop exercise to assess provision and outcomes against the overarching indicators. They have also been working to identify ways that the standards can be used to support local partnership

groups and workplans. The local partnerships will also review the applicability of those standards to Oldham.

- 2.4. The mental health and wellbeing standards have already been reviewed by the Mental Health Partnership and are being used to inform development of the Partnership's workplan.
- 2.5. This approach will be replicated by relevant groups for sexual health, substance misuse, health protection, physical activity and oral health.

Initial work on the standards has highlighted that Oldham does not currently have a group which meets to discuss action on tobacco control. The need for such a group will be reviewed to ensure that there is an appropriate governance structure in place to coordinate and oversee work on this agenda.

3. Data and Intelligence

- 3.1. Greater Manchester Common Standards for Population Health seek to drive improvements in population health outcomes for thematic areas by describing evidence-based activities known to improve population health.
- 3.2. The evidence-base used to develop Common Standards is drawn from a range of publications which include clinical expertise, current best practice evidence, and client/patient perspectives.

4. Links to Health and Wellbeing Outcomes

- 4.1. The standards describe the activity required in any defined place / locality to support continuous improvement in population health outcomes.

5. Key Issues for Health and Wellbeing Board to Discuss

Oldham Health and Wellbeing Board are requested to:

- 5.1 Note the use of the GM Population Health Common Standards by key topic for partnership boards as a mechanism for prioritisation and quality improvement.
- 5.2 Review the assessment of the local position against the 'Prescribed and Non-Prescribed Functions' standard and note plans to take action where the standard is not being met.

6. Key Questions for Health and Wellbeing Board to Consider

- 6.1. Does the Board wish to receive further updates from the identified partnership groups that will be overseeing work against the standards?

7. Additional Supporting Information

- 7.1 GM Common Standards for Population Health align with population health outcomes detailed in the [Greater Manchester Population Health Outcomes Framework](#)

8. Consultation

8.1. Not applicable

9. Appendices

Appendix 1 - GM Common Standards for Population Health Section 1: Prescribed and non-prescribed public health functions

Scoring on the table below is using the following key

Score	Assessment	Findings / Conclusion	Action Required
1	Standard not met	Significant gaps / weaknesses exist (generally non-compliant)	Actions are identified to secure improvements and move towards compliance.
2	Standard partially met	Some gaps / weaknesses exist (partial compliance)	Evidence is signposted in support of areas of compliance. Actions are identified to secure improvements and achieve compliance.
3	Standard fully met	Very few or no gaps / weaknesses exist (compliant)	Evidence is signposted in support of areas of compliance.

Appendix 1

Function Category	Local Authority Function	Population Health Common Standard	SCORE			Measurement
			1	2	3	
PRESCRIBED FUNCTIONS	Statutory Post	Locality has a named Director of Public Health	<input type="checkbox"/>	<input type="checkbox"/>	X	Named Director of Public Health / Population Health
	Sexual health services - STI testing and treatment	Timely open access to STI advice and treatment service (appointment offered within 48 hours)	<input type="checkbox"/>	<input type="checkbox"/>	X	New HIV diagnosis rate / 100,000 people aged 15+
		Personalised risk reduction support and information for all who attend sexual health services & their partners	<input type="checkbox"/>	X	<input type="checkbox"/>	
		Routine offer of an HIV test in high prevalence areas and a regular, targeted offer to those in high risk groups	<input type="checkbox"/>	X	<input type="checkbox"/>	
	Sexual health services - Contraception	All under 18s within a locality are encouraged to access a sexual & reproductive health service or GP before engaging in sexual activity	<input type="checkbox"/>	X	<input type="checkbox"/>	Total Prescribed Long Acting Reversible Contraception (LARC) (Excluding Injections)
		Open access to specialised services for young people up to the age of 19	<input type="checkbox"/>	<input type="checkbox"/>	X	
		All women (15-44 years old) are fully informed about and, if clinically appropriate, encouraged to use Long-acting Reversible Contraception (LARC) as their form of contraception	<input type="checkbox"/>	X	<input type="checkbox"/>	
		For all women having a LARC removed and requiring contraception to have immediate access to an alternative, reliable method of contraception	<input type="checkbox"/>	X	<input type="checkbox"/>	
	NHS Health Check programme	All eligible individuals aged 40-74 to be offered an NHS Health Check once in every 5 years, with pilot areas prioritising people at greater risk, and for each individual to be recalled every 5 years if they remain eligible	<input type="checkbox"/>	X	<input type="checkbox"/>	Under 75 mortality rate from CVD considered preventable
		All identified at high risk to receive the advice and support to manage that risk	<input type="checkbox"/>	X	<input type="checkbox"/>	

Function Category	Local Authority Function	Population Health Common Standard	SCORE			Measurement
			1	2	3	
	Public Health advice to NHS Commissioners	Public Health specialist advice and support is available to NHS Commissioners, integrated commissioners and care organisations in all Localities and at a GM level	<input type="checkbox"/>	<input type="checkbox"/>	X	n/a
PRESCRIBED FUNCTIONS	National Child Measurement Programme	Completion of the National Child Measurement Programme with above average uptake	<input type="checkbox"/>	X	<input type="checkbox"/>	Prevalence of overweight children (including obese) as measured by NCMP
		Documented service offer for children and families identified as being overweight, obese or underweight identified through the NCMP	X	<input type="checkbox"/>	<input type="checkbox"/>	
	Prescribed Children's 0-5 services	Commissioning and delivery of the national 0-5 Healthy Child Programme in line with agreed targets	<input type="checkbox"/>	X	<input type="checkbox"/>	Breastfeeding Initiation
			<input type="checkbox"/>	X	<input type="checkbox"/>	Proportion of 5-year-old children free from dental decay
			<input type="checkbox"/>	<input type="checkbox"/>	X	% of children achieving a good level of development at the end of reception
NON-PRESCRIBED PH FUNCTIONS	Drug and Alcohol	All localities to demonstrate how they are meeting the local needs for the take up and the outcomes of its drug and alcohol treatment services	<input type="checkbox"/>	X	<input type="checkbox"/>	Alcohol-related hospital admissions (narrow definition)
	Tobacco	All pregnant women who smoke are referred to services which can help them to quit during their pregnancy	<input type="checkbox"/>	X	<input type="checkbox"/>	% of women who smoke at time of delivery; Smoking prevalence in adults - current smokers (APS)
		Publicised arrangements in place for smokers to access pharmacotherapy and motivational support in all areas (Including advice about nicotine inhaling products)	<input type="checkbox"/>	X	<input type="checkbox"/>	
	Oral Health	Commission oral health preventive programmes in line with Commissioning Better Oral Health guidance and ensure oral health is embedded within children's services	<input type="checkbox"/>	<input type="checkbox"/>	X	Proportion of 5-year-old children free from dental decay
Mental Health and Wellbeing	Localities to (1) support GM Suicide Prevention Strategy & GM/Locality suicide prevention action plans in place and adopt Mentally Healthy Schools and Colleges	<input type="checkbox"/>	<input type="checkbox"/>	X	Suicide Prevalence	

Function Category	Local Authority Function	Population Health Common Standard	SCORE			Measurement
			1	2	3	
		principles				
	Physical Activity	Every community will offer a range of high quality spaces and opportunities for people to live active lives, supported by welcoming leaders and suited to different motivations, attitudes and interests.	<input type="checkbox"/>	X	<input type="checkbox"/>	% of GM population who are Active or Fairly Active
			<input type="checkbox"/>	X	<input type="checkbox"/>	% of physically inactive adults (>30 minutes per week)