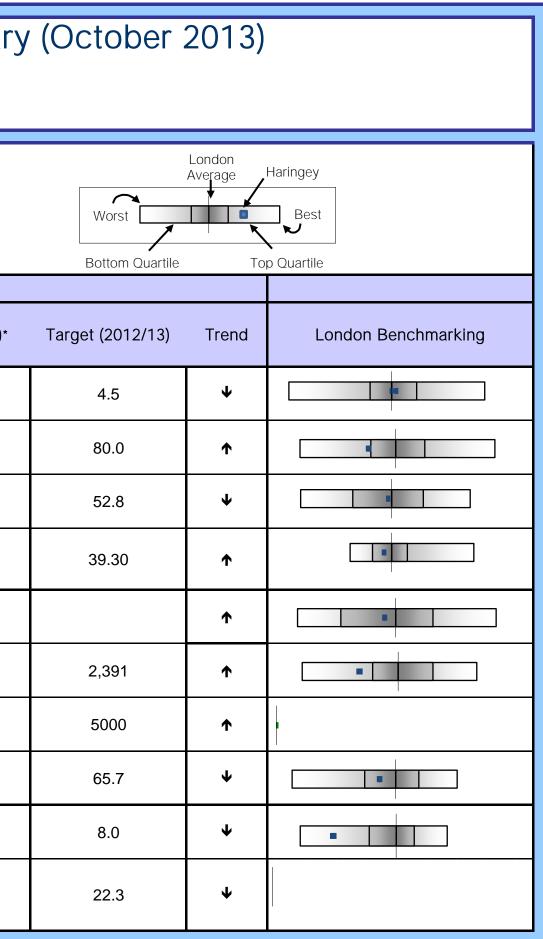
	Produced by Public Health and Strategy and Business Intelligence Team										
	Health and Wellbeing's Key Service Measures										
	The table below shows the most recent benchmarking data available for Health and Wellbeing's key service measures. The 'Range' column shows where Haringey sits in comparison to the other London Boroughs. Anything left of the centre line is worse than the London average, anything right of the line is better than the London average.										
	Outcome Indicator					Local Data					
		2009/10	2010/11	2011/12	2012/13	Haringey (most recer					
unu nas in life	Infant mortality rate	4.8	4.3			4.3					
start in life	Early access for women to maternity services(%)	73.9	67.2	69.2	76.9	76.90					
the best st	Under 18 conception (PHOF)	41.2	49.2	36.2		36.20					
in life expectancy	Prevalence of overweight and obesity in 10 and 11 years old (PHOF)	38.6	35.4	39.3		39.30					
	Male Life expectancy	78.0	78.9			78.90					
	Alcohol related hospital admissions (PHOF)	1,949	2,257	2,253	2,350 Provisional	2,350					
	Take up of health checks (PHOF)			6,047	6,464	6,464					
	Cardiovascular mortality (under 75)	78.7	65.7 Provisional			65.7					
	Mortality rate for suicide and undertermined injury (PHOF)	9.9	8.7 Provisional			8.7					
Improved mental health	Mortality rate for suicide and undertermined injury (PHOF) % successfully completing drug treatment (as a proportion of all adults in treatment	16.7	22.3	18.4		18.4					



active recreation.		Good pe	rformance	e IS		High						
Percentage of the adult population (aged 16 years and over) in a local area who paricipate in sport and active recreation, at moderate intensity, for at least 30 minutes on at least 12 days out of the last 4 weeks (equivalent to 30 minutes on 3 or more days a week)												
			0010/10			ed Targets						
Long term trend2008/092009/10Haringey rate23.1	2010/11 21.3	2011/12 21.5	2012/13	Performance Better	2012/13 23.1	2015 25.0						
London rate 21.5	21.0	20.2		Detter	Local	Local						
The percentage of adults participating past 3 years from 23.1% to 21.5% but	Statistical neighbours rank (1st is best)											
percentage. The target is to increase the rate to 25	.0% by 201	5.				NA						
What are we doing? We are running a number of programm	nes targettir	ng adults v	vho are pł	nysically inactive	e as they wi	ll benefit ma	ost fron					

Projects include 'Tottenham Active' and 'Active with Ease'.

In addition, the Health Trainer Service provides one-to-one personalised support and advice to people who want to increase their levels of physical activity to improve their health.

Health Champions raise awareness about the benefits of increasing physical activity and signpost local people to a range of physical activity programs in the borough.

We are also in the process of commissioning a provider to train a range of frontline staff in brief interventions to support them in their efforts to encourage clients to increase their levels of physical activity.

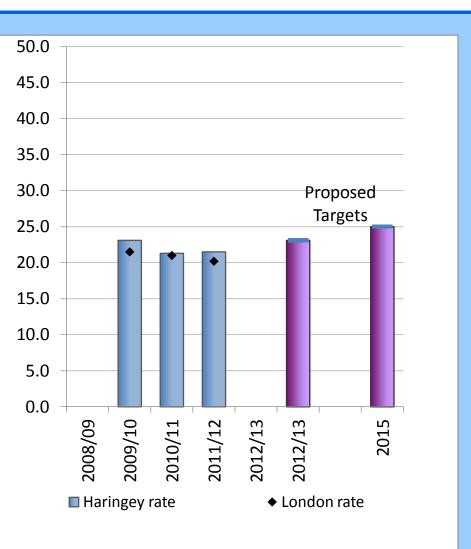
We will also be rolling out physical activity promotion training to ensure that those promoting it are giving out correct and consistent messages. We are also increasing the use of open spaces, ie. green gyms and walking and cycling projects

What needs to be done?

Adult narticination in sport ar

A communications campaign (eg. social marketing) to encourage people to increase their levels of physical activity. Workplace health initiatives to increase physical activity. Public Health will work closely with the new lesiure providers, namely Fusion Lifestyle to improve access to local people with a specific focus on those who are the least active.

Health and Wellbeing Partnership Board Exception Report - Physical Activity (October 2013)



n increasing their levels of physical activity.

Rationale

Lack of sufficient physical activity costs the NHS over £1bn per year -£6.5bn per year to the wider economy - and is one of the top few rislk factors for premature mortality.