

Social Prescribing Data Dictionary

Introduction

What is a data dictionary?

In November 2008, Professor Sir Michael Marmot was asked by the then Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010.

The review produced the report 'Fair Society, Healthy Lives' which proposed a cradle-to-grave approach to reduce inequalities, commonly referred to as the Life Course Framework. This broke down people's lives into a number of different life phases.

It concluded that, to have a significant impact on health inequalities, action needs to be taken on six policy objectives. These policy objectives are listed below against their applicable life phase and focus area:

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	Policy Objective:	Life Phase:	Focus Area:			
	Give every child the best start in life.	Starting Well	Pre-Natal - Pre-School			
	Enable all children, young people and adults to maximise their capabilities and have control over their lives.	Developing Well	School			
	Create fair employment and good work for all.	Working Well	Training and Employment			
	Ensure a healthy standard of living for all.	Living Well	Family			
	Create and develop healthy and sustainable places and communities.	Living Well	Community			
	Strengthen the role and impact of ill health prevention.	Ageing Well	Retirement			

This document has been created to support Social Prescribing projects. It is a synthesis of a number of the existing Inside Outcomes data dictionaries but primarily calls on Living Well and Ageing Well Dictionaries.

How does the data dictionary work?

The measures defined in this dictionary work with a preventative model of support. One of the most effective methods of measurement, when delivering preventative services, is that of risk and protective factors. The removal of risks and the addition of protective factors provides a statistical basis for evidence of impact.

The definitions in this dictionary result from the analysis of the relevant national outcome frameworks, programmes and clinical guidelines. These have then been combined to form a single document listing measures that are relevant to the Social Prescribing programmes.

For each measure there is a definition (taken from one or more of the source documents), an explanation of why the measure is recorded, a description of the data that is collected and the survey point(s) at which the data is recorded. There is also a separate table showing which framework or policy records the measure.

The dictionary is separated into three areas of risk: Personal Circumstances, Lifestyle and Behaviour, and finally, Status.

Personal Circumstances - related to the factor(s) that are relevant to the support people need. Personal circumstances are non-clinical factors that are likely to have an adverse effect on health. Many of these types of risk are unchangeable or may take a long time to resolve.

For example: Social isolation is a personal circumstance. Being socially isolated can cause stress and anxiety, increased risk of misusing alcohol or substances, and increased visits to the GP or Accident and Emergency.

Lifestyle and Behavioural factors - something that increases the likelihood of a poor long-term health outcome. These will form the basis of the support provided and are able to be reduced with the right support and services. The removal of this type of risk can be achieved in a shorter period.

For example: smoking is a lifestyle and behavioural factor that increases the risk of heart, lung and respiratory disease.

Status - the result of a lifestyle and behavioural factor. The removal or reduction of these risks is likely to be a long-term outcome.

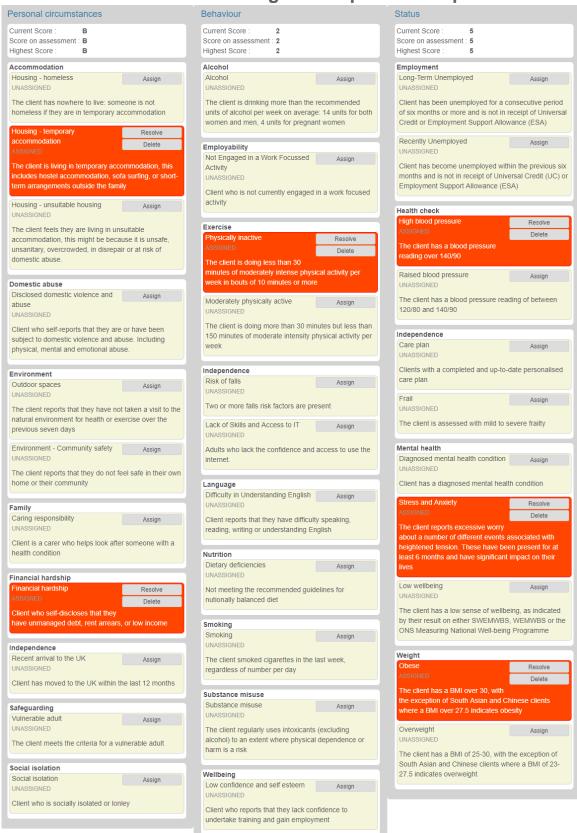
For example: A person who has been diagnosed as pre-diabetic as a result of poor lifestyle and behavioural factor(s) now has 'pre-diabetic' as a status, however the focus of support will be on the removal and reduction of the lifestyle and behaviour issues.

The data dictionary is a shared reference document that describes what should be recorded. This is because it is important that everybody who collects the data has the same understanding of what is being collected.

The measures to be recorded are taken from the following frameworks:

Organisation:	Framework Title:
National Institute for Health and Clinical Excellence	PH24: Alcohol use disorders CG161: Falls in older people CG113: Generalised anxiety disorders CG110: Pregnancy and complex factors CG127: Hypertension PH35: Diabetes Type 2 PH25: Prevention of CVD CG43: Obesity PH38: Guidelines for vulnerable groups NG22: Older People – Multiple Long-Term Conditions
Department of Health	Improving Outcomes and Supporting Transparency
NHS England	CCG Improvement & Assessment Framework
Department of Work and Pensions	Social Justice Outcomes Framework
Department of Health	A framework for sexual health in England
Department of Health	NHS Outcome Framework
Department of Health	Adult Social Care Outcome Framework
Skills Funding Agency	New Language Requirements
Cabinet Office	<u>Digital Inclusion Strategy</u>
Department of Work and Pensions	Helping people to find and stay in work
Department of Work and Pensions	Simplifying the benefits system and making sure work pays

Social Prescribing - Example Risk Map



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Personal Circumstances

Personal circumstances are measures of socio-economic factors that are present in a person's life. These can be quite profound factors that are have an impact on a person's ability to manage health lifestyle choices or even to make changes that can change clinical factors.

Measure:	Caring Responsibility
Definition:	A carer is someone who helps look after a relative who has a condition such as a disability, illness, mental health condition, or a drug or alcohol problem.
Reason for Collecting:	There is a clear relationship between poor health and providing care that increases with the duration and intensity of the caring role. Those providing high levels of care are twice as likely to have poor health compared with those without caring responsibilities.
	Lack of access to replacement or respite care poses a greater risk of ill health and low wellbeing for the carer.
Data Collected:	Number of clients with a caring responsibility.

Outcome Framework:	Reference:
Adult Social Care Outcome Framework	<u>1D</u>
Public Health Outcome Framework	<u>1.18</u>
National Strategy For Carers	Reference
NHS Outcome Framework	<u>2.4</u>
CCG Improvement and Assessment Framework	Reference

Measure	Disclosed domestic violence and abuse
Definition	The cross-government definition of domestic violence and abuse is: any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:
	 psychological physical sexual financial emotional Where this is historic then it will be recorded if that abuse still affects the client's life presently.
Reason for collecting	People experiencing domestic violence and abuse may experience additional physical and mental health needs as a result of abuse. In addition, people may have additional support needs during their training and early employment. Domestic violence and abuse are safeguarding issues where children are involved.
Data collected	Number of people who self-report that they are or have been subject to domestic violence and abuse.

Outcome Framework	Reference
NICE Guidance	PH50 CG110
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17 HCP – P45</u>
Public Health Outcome Framework	<u>1.11</u>
Social Justice Outcome Framework	<u>KI-1</u>

Meas	sure	Environment - Community Safety
Defin	ition:	 Adults who do not feel safe in their communities or homes: People who do not feel very or fairly safe walking alone in their local area during the day. People who do not feel very or fairly safe walking alone in their local area after dark. People who do not feel very or fairly safe being alone in their own homes at night. People who do not feel as adequately safe/as safe as they would like. People who do not feel safe at all.
	on for ecting:	Perception of safety is an important factor in helping people, particularly older people to avoid social isolation, increase activity and maintain their independence. This indicator will encourage good links between public health and other parts of local government (eg. the police) to encourage Health and Wellbeing Boards and public health professionals to consider perceptions of safety as key to improving health and well-being.
Data Colle	ected:	The numbers of adults who do not feel safe in their communities or homes

Measure:	Environment - Outdoor Space
Definition:	Clients report that they have not spent reasonable time outdoors other than routine shopping trips or their own garden.
Reason for Collecting:	Inclusion of this indicator is recognition of the significance of accessible outdoor space as a wider determinant of public health. There is strong evidence to suggest that outdoor spaces have a beneficial impact on physical and mental well-being and cognitive function through both physical access and use.
Data Collected:	Number of clients who self-report a limited time spent outdoors.

Outcome Framework:	Reference
Public Health Outcome Framework	<u>1.16</u>

Magazira	Financial Haydahin	
Measure	Financial Hardship	
Definition	The client reports that their household are on a low income (6 wages before housing costs) Indicators are: 1. The family cannot afford a number of food and clothin 2. They claim Job Seekers Allowance, Employment Sup or Income Support 3. They have required fuel costs that are above average spend that amount, it would leave them with a residual that the first poperty line.	ng items oport Allowance or, were they to
	the fuel poverty line. 4. They have unmanaged debt; this includes rent arrears	s
Reason for collecting	Clients may be perceived to be in a 'benefits trap' where they earn enough to equal or exceed their current rate of benefit. Recent legislation has capped benefits resulting in increased employment. Many clients may find the cost of training and work-focused a manage.	need to obtain
Data collected	Number of clients who self-disclose that they have unmanage arrears or low income.	ed debt, rent
Outcome Frame	ework	Reference
Public Health C	Outcomes Framework	<u>1.1, 1.17</u>
Social Justice Outcomes Framework		<u>KI-4</u>

Measure:	Housing - Homeless	
Definition:	You may be legally homeless if: 1. You've no legal right to live in accommodation world. 2. You can't get into your home - eg. your late It's not reasonable to stay in your home - abuse. 3. You're forced to live apart from your family live with because there's no suitable account you're living in very poor conditions - eg. of If you're legally homeless, your council must provide amount of help they give you will depend on If you became homeless through no fault If you're eligible for assistance If you're in priority need	ndlord has locked you out. eg. risk of violence or y or people you normally mmodation for you. overcrowding. vide you with help – this mmodation. things like:
Reason for Collecting:	Being homeless is an indication of social risk. This has implications for financial status.	
Data Collected:	a Collected: Number of people who are homeless and not living in temporary accommodation provided by their local authority.	
Outcome Fram	ework:	Reference:
Public Health Out	Public Health Outcome Framework <u>1.15i</u>	
Social Justice Outcome Framework KI-1		<u>KI-1</u>

Measure:	Housing - Temporary Accommodation
Definition:	Temporary accommodation includes sofa-surfing, hostel accommodation and short-term arrangements as a non-dependent.
Reason for Collecting:	Living in temporary accommodation is an indication of social risk. It often leads to a period of financial crisis for someone as benefits will usually be delayed.
Data Collected:	Number of clients who are living in temporary accommodation as defined above.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.15ii</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u> HCP - P17</u>
Social Justice Outcome Framework	<u>KI -1</u>

Measure:	Housing - Unsuitable Accommodation
Definition:	Accommodation is self-declared unsuitable by the client.
Reason for Collecting:	Unsuitable accommodation might include housing repairs or overcrowding. Typically, this will have an adverse effect on the client and the wider family's physical and mental health.
Data Collected:	Does the client feel that they are living in unsuitable accommodation? This might be because it is unsafe, unsanitary, overcrowded or in disrepair.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.15i</u>
Healthy Child Programme: Pregnancy and the First Five Year	<u>HCP – P17</u>
Social Justice Outcome Framework	<u>KI-1</u>

Measure	Recent Arrival to the UK
Definition	People who moved to the UK within the previous 12 months 1. Recent migrants 2. Asylum seekers 3. Refugees
Reason for collecting	People who are recent migrants, asylum seekers or refugees, or who have difficulty reading or speaking English, may not make full use of health and wellbeing services. This may be because of unfamiliarity with the health service, because they find it hard to communicate with healthcare staff or because their arrival status restricts that services they can access.
Data collected	Number of people who moved to the UK within the previous 12 months

Outcome Framework:	Reference:
NICE Guidance	CG110 PH38

Measure:	Social Isolation - Loneliness
Definition:	An adult is considered to be socially isolated if they have no support from either a partner, family or a friend. The client reports that they do not have as much social contact as they would like.
Reason for Collecting:	Social isolation may be a trigger for mental ill-health problems, reduction in physical activity and the inability to access services. Social isolation is all considered an indicator for higher risk of suicide.
Data Collected:	Number of adults who define themselves as socially isolated or lonely.

Outcome Framework:	Reference:
Public Health Outcome Framework	<u>1.18</u>
Adult Social Care Outcome Framework	<u>1L</u>
Preventing Suicide in England	Reference
WHO - Preventing Suicide - A Global Imperative	Reference

Measure:	Vulnerable Adult	
Definition:	A "vulnerable adult" is aged 18 or over; receives or may no care services because of a disability, age or illness; and we be unable to take care of themselves or protect themselves significant harm or exploitation.	vho is/or may
	"A person lacks capacity in relation to a matter if, at the m is unable to make a decision for himself (in relation to the because of an impairment of, or disturbance in the function mind or brain." [Definition of a 'vulnerable adult' from the Mental	matter) oning of, the
Reason for Collecting:	Vulnerable people are at particular risk of being able to ac services that can improve their mental and physical wellbe	
	In addition, vulnerable people are at greater risk of being abuse and violence.	victims of
Data Collected:	Number of clients who meet the criteria for being a vulner	able adult.
		Defende
Outcome Fram	ework:	Reference
Adult Social Care Outcome Framework		<u>4B</u>

Behavioural Factors

These are issues that increase the likelihood of a poor long-term health outcome. These will form the basis of the support provided and are able to be reduced with the right support and services. The removal of this type of risk can be achieved in a shorter period.

	Measure:	Alcohol Misuse
١	Definition:	Clients who regularly exceed the advised maximum amount of alcohol. For both men and women: 2 - 3 units per day (guideline: <14 units per week)
	Reason for Collecting:	Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol can be a contributory factor to falls in older people. As the metabolic rate slows down with ageing the effect of alcohol is greater.
١	Data Collected:	The number of clients who regularly exceed the advised maximum amount of alcohol units per day.

Outcome Framework:	Reference:
NICE Guidance	CG110, CG45, CG100, PH24, CG127
Public Health Outcome Framework	<u>2.1, 2.15</u>
Social Justice Outcome Framework	<u>KI5</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u> <u>HCP – P45</u>

Measure	Dietary Deficiency
Definition	The proportion of the population not meeting the recommended '5-A-Day' is used as a proxy for the proportion consuming a balanced diet – this is one which is lower in saturated fat, trans fats, sugar, salt and calories and higher in fruit and vegetables. Activities to improve consumers' diets should span these nutrients and foods.
Reason for collecting	Diet and nutrition is a fundamental contributor to public health. Diet makes an important contribution to health outcomes such as the prevalence of obesity, stroke and cardiovascular disease and some cancers.
	Additionally, a good diet is important during pregnancy to provide the developing baby with essential nutrients.
Data collected	Number of people self-reporting dietary deficiencies

Outcome Framework	Reference:
NICE Guidance	<u>PH47</u>
Public Health Outcome Framework	<u>2.11</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P22</u> <u>HCP – P18</u>

Measure	Difficulty in Understanding English
Definition	Self-reported indicator whereby the client says they have difficulty with reading, writing or speaking English
Reason for collecting	Having a difficulty in understanding English can lead to social isolation and make it more difficult for a client to access services on their own.
Data collected	Number of people who self-report having difficulties with reading, writing or speaking English

Outcome Framework	Reference
NICE Guidance	CG110 CG62
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u>
BIS - Skills Funding Statement 2012 - 2015	Reference

Measure:	Lack of Skills and Access to IT	
Definition:	Adults who lack the confidence and access to use the internet.	
Reason for Collecting:	Being digitally capable can make a significant difference to individuals and organisations day to day. For individuals, this can mean cutting household bills, finding a job, or maintaining contact with distant friends and relatives. Reducing digital exclusion can help address many wider equality, social, health and wellbeing issues such as isolation. 81% of people over 55 say being online makes them feel part of modern society and less lonely.	
Data Collected:	Number of adults who lack the confidence and access to use the internet.	
Outcome F <u>ram</u>	Outcome Framework: Reference:	

Outcome Framework:	Reference:
Digital Inclusion Strategy	Reference
Digital Inclusion for Health and Social Care	Reference

Measure	Low Confidence and Self-Esteem
Definition	Clients that report low self-esteem and lack confidence.
Reason for collecting	Low confidence and self-esteem is widely reported to be associated with low educational attainment and non-participation in training and learning affecting the ability to obtain employment and manage health conditions. Improving self-esteem and confidence supports people to increase personal responsibility and is a key element in the prevention of mental illness and increasing wellbeing. Confidence and esteem is particularly important for young people as half of all mental health problems are already present in adolescence.

Outcome Framework:	Reference:
No Health Without Mental Health	Reference
Positive for Youth	Reference

Measure:	Physical Activity - Moderately Physically Active
Definition:	Adults (16+) doing less than 150 minutes, but more than 30 minutes, of at least moderate intensity physical activity per week in bouts of 10 minutes or more.
Reason for Collecting:	Increasing physical activity has the potential to improve physical and mental health, reduce the risk of developing a life limiting illness and improve life expectancy
Data Collected:	Number of adults doing less than 150 minutes, but more than 30 minutes, of at least moderate intensity physical activity per week in bouts of 10 minutes or more.

Outcome Framework:	Reference:
NICE Guidance	<u>CG43</u>
Public Health Outcome Framework	2.13

Measure:	Physical Activity - Inactive
Definition:	Adults (16+) who do less than 30 "equivalent" minutes of moderate intensity physical activity per week in bouts of 10 minutes or more.
	All adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.
Reason for Collecting:	Increasing physical activity has the potential to improve physical and mental health, reduce the risk of developing a life limiting illness and improve life expectancy
Data Collected:	Number of adults (16+) who do less than 30 "equivalent" minutes of moderate intensity physical activity per week in bouts of 10 minutes or more.

Outcome Framework:	Reference:
NICE Guidance	PH17 CG43
Public Health Outcome Framework	2.13
No Health Without Mental Health	Reference

Measure:	Poor Management of Long Term Condition(s)
Definition:	Client with a Long-Term Condition (LTC) who reports that they: 1. Have had two or more unplanned admissions to hospital, relating to that LTC, in the past 12 months. 2. Feel unsupported with managing their LTC.
Reason for Collecting:	LTCs have a significant impact on a person's ability to work and live a full life. People from lower socio-economic groups have increased risk of developing a LTC – better management can help to reduce health inequalities
Data Collected:	Number of clients with a long-term condition who report that they have had two or more unplanned admissions to hospital in the past 12 months or feel unsupported to manage their condition

Outcome Framework:	Reference:
NICE Guidance	<u>NG22</u>
NHS Outcome Framework	<u>1.08</u>

Measure:	Poor Mobility and Balance - Risk of Falls	
Definition:	There is a risk of falls when two or more of the following present: Living Alone Presence of an LTC Impaired Mobility and Gait Use of Sleeping Medication Sedentary Lifestyle Low BMI Impaired Cognition Visual Impairment Food Problems Poor Footwear Inappropriate Assisted-Living Aids	risk factors are
Reason for Collecting:	Falls and fall-related injuries are a common and serious older people. People aged 65 and older have the highes with 30% of people older than 65 and 50% of people old falling at least once a year. The human cost of falling includes distress, pain, injury, confidence, loss of independence and mortality. Falling family members and carers of people who fall. Falls are cost the NHS more than £2.3 billion per year - therefore impact on quality of life, health and healthcare costs.	loss of alling also affects the estimated to
Data Collected:	Number of clients who have two or more risk factors.	
Outcome Fram	nework:	Reference:
NICE Guidance		CG161
NHS Outcome Framework 2.24		<u>2.24</u>

			·
	Measure:	Smoking	
	Definition:	Client who smokes, regardless of number of cigarettes. co-habit with smokers are at increased risk of smoking	•
	Reason for Collecting:	Smoking is a major cause of preventable morbidity and accounting for 79,100 deaths in England in 2011 and so all deaths of adults aged 35 and over.	•
	Data Collected:	a Collected: Number of clients who smoke, regardless of number per day.	
Outcome Framewo		ework:	Reference:
	NICE Guidance		<u>CG62, PH14,</u> <u>CG127</u>
Public Health Outcome Framework 2.3, 2		<u>2.3, 2.9, 2.14</u>	
, , , , ,		<u>HCP – P18</u> <u>HCP – P22</u>	

Measure:	Substance Misuse
Definition:	Adults who regularly use recreational drugs, misuse over-the-counter medications, misuse prescription medications or misuse volatile substances (such as solvents or inhalants) to an extent whereby physical dependence or harm is a risk.
Reason for Collecting:	Individuals misusing substances pose significant risks in terms of overall health and well-being, reduced life expectancy, increased blood-borne virus transmission and reduced physical and psychological health. Substance misuse can also be risk factor in increased suicide risk.
Data Collected:	Number of adults who report that they misuse substances.

Outcome Framework:	Reference:
NICE Guidance	CG110, NG64
Public Health Outcome Framework	2.15
Social Justice Outcome Framework	<u>KI-5</u>
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u> <u>HCP – P45</u>
No Health Without Mental Health	Reference
Preventing Suicide in England	Reference

Status

Status measures are generally more intractable issues such as clinical diagnosis or issues relating to skills and employment. These issues are likely to be heavily dependent on the resolution of things relating to healthy behaviours and socio-economic factors.

Measure:	Care Plan	
Definition:	A personalised care plan is a tool that records the outplanning discussion between an individual and their I professional. Plans are owned by individuals and cor information they need to manage their own care.	healthcare
Reason for Collecting:	Personalised care plans are essential tools for mana providers in relation to community-based care, menta substance misuse services and others. Plans minimis processes and promote integration.	al health services,
Data Collected:	Number of clients who have been identified as require care plan and have plan that is up-to-date.	ing a personalised
O (1220 F		D. Communication
Outcome Fram	ework:	Reference:
NICE Guidance		<u>QS13, NG21,</u> <u>NG58, NG53,</u> <u>NG67</u>
Public Health Outcome Framework 1.06, 4.16		<u>1.06, 4.16</u>
Adult Social Care Outcome Framework 1H		<u>1H</u>

Measure	Diagnosed with a Mental Health Condition
Definition	People who have a diagnosed mental health condition
Reason for collecting	Diagnosed mental health conditions can pose a risk for physical health and well-being as well as being a potential safeguarding issue.
Data collected	Number of people with a diagnosed mental health condition

Outcome Framework	Reference
NICE Guidance	CG45 1.1.1.1
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u>

Measure:	Frailty	
Definition:	A client who is assessed as having mild to severe frailty or Edmonton Frail Scale.	n the
Reason for Collecting:	People with frailty have a substantially increased risk of fal long-term care and death. Frailty develops as a consequer related decline in multiple body systems, which results in v sudden health status changes triggered by minor stress or as an infection or a fall at home. Between a quarter and half of people older than 85 are est frail, with overall prevalence in people aged 75 and over agents.	nce of age- rulnerability to events such imated to be
Data Collected:	Number of clients who have been assessed as having mile frailty on the Edmonton Frail Scale.	to severe
Outcome Fram	ework	Reference
CCG Improveme	nt and Assessment Framework 2017/18	Reference
Edmonton Frailty Scale Reference		<u>Reference</u>

Measure:	Low Reported Wellbeing
Definition:	 Scoring 40 or less on the Warwick-Edinburgh Mental Well-being Scale. Scoring 16 or less on the Short Warwick-Edinburgh Mental Well-being Scale Low sense of Wellbeing. ONS Measuring National Well-being Programme.
Reason for Collecting:	Low sense of wellbeing is an indicator of social risk.
Data Collected:	 Number of adults scoring 40 or less on the Warwick-Edinburgh Mental Well-being Scale. Number of people scoring 16 or less on the Short Warwick- Edinburgh Mental Well-being Scale Number of adults scoring 4 measures on ONS programme. Self-reported stress.

Outcome Framework:	Reference:
Public Health Outcome Framework	2.23 2.24
Healthy Child Programme: Pregnancy and the First Five Years	<u>HCP – P17</u>
No Health Without Mental Health	Reference

Measure:	Screening - High Blood Pressure
Definition:	A blood pressure reading of over 140/90.
Reason for Collecting:	If you have high blood pressure, it puts extra strain on your heart and blood vessels. Over time, this extra strain increases your risk of a heart attack or stroke.
	High blood pressure can also cause heart and kidney disease and is closely linked to some forms of dementia.
Data Collected:	Number of clients who have been identified as having high blood pressure.

Outcome Framework:	Reference:
NICE Guidance	CG127

Measure:	Screening - Raised Blood Pressure
Definition:	A blood pressure reading between 120/80 and 140/90.
Reason for Collecting:	If you have high blood pressure, it puts extra strain on your heart and blood vessels. Over time, this extra strain increases your risk of a heart attack or stroke.
	High blood pressure can also cause heart and kidney disease and is closely linked to some forms of dementia.
Data Collected:	Number of clients who have been identified as having raised blood pressure.

Outcome Framework:	Reference:
NICE Guidance	PH25

Measure:	Stress and Anxiety
Definition:	General Anxiety Disorder can cause a change in behaviour and the way people think and feel about things, resulting in symptoms such as: Restlessness A Sense of Dread Feeling Constantly "On Edge" Difficulty Concentrating Irritability
Reason for Collecting:	Symptoms may cause withdrawal from social contact (seeing family and friends) to avoid feelings of worry and dread, and/or the inability to attend work. These actions can cause worry and increase a lack of self-esteem.
Data Collected:	Number of clients who report symptoms of general anxiety disorder.
0.1	
Outcome Fram	nework: Reference:
NICE Guidance	<u>CG45</u>

Healthy Child Programme: Pregnancy and the First Five Years

Recently Unemployed
The client has become unemployed within the previous six months and is not in receipt of Universal Credit or Employment Support Allowance (ESA).
This includes clients who:
 have been sanctioned, but would otherwise receive Universal Credit or ESA are not entitled to Universal Credit or ESA
Being unemployed, even for a relatively short period of time, is a risk to becoming employed.
Number of adults who have become unemployed within the previous six months and are not in receipt of Universal Credit or Employment Support Allowance (ESA)

<u>HCP - P17</u>

Measure	Long-Term Unemployed
Definition	The client has been unemployed for a consecutive period of six months or more and is not in receipt of Universal Credit or Employment Support Allowance (ESA).
	This includes clients who:
	 have been sanctioned, but would otherwise receive Universal Credit or JSA are not entitled to Universal Credit JSA
Reason for collecting	Being unemployed for a period of more than six months will make it harder for a client to find employment that it will for somebody who is recently unemployed
Data collected	Number of adults who have been unemployed for a consecutive period of six months or more and are not in receipt of Employment Support Allowance (ESA)

Measure:	Weight - Overweight
Definition:	Adults with a BMI between 25 - 30, now adjusted for South Asian and Chinese Adults to a BMI between 23 - 27.5.
Reason for Collecting:	People who are overweight have an increased risk of becoming obese which is linked to Cardiovascular Disease, Type 2 Diabetes and some cancers.
Data Collected:	Number of adults with a BMI between 25 - 30, now adjusted for South Asian and Chinese Adults to a BMI between 23 - 27.5.

Outcome Framework:	Reference:
Public Health Outcome Framework	2.12
NICE Guidance	CG43

	Measure:	Weight - Obese		
	measure.	Weight Obest		
	Definition:	Adults with a BMI over 30, now adjusted for South Asian and Adults to a BMI over 27.5.	d Chinese	
	Reason for Collecting:	Obesity is a priority area for the Government. The Governm Action" on obesity (published October 2011) included nation relating to excess weight in adults, which is recognised as a determinant of premature mortality and avoidable ill health.	al ambitions	
	Data Collected:	Number of adults with a BMI over 30, now adjusted for South Asian and Chinese Adults to a BMI over 27.5.		ı
	Outcome Framework:		Reference:	
	Public Health Out	come Framework	2.12	
1	NICE Guidance		<u>CG43</u>	

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