

Older Adults Profile with Adult Social Care Outcomes Framework and Public Health Outcomes Framework

Key Messages

Population

- Projected 15% rise over the next 10 years in the 65 years and older population leading to increased demand in services.
- Healthy life expectancy much lower than the national average, older population spending more years in poor health.

Adult Social Care Outcome Framework (ASCOF)

- Improved performance against all the indicators updated in 2017/18.
- Birmingham highest ranking local authority for people using social care receiving self-directed support (100%).
- Birmingham ranks 2nd out of 152 local authorities for the overarching measure - Adjusted social care-related quality of life – impact of Adult Social Care Services.
- Still remain below the national average for most of the ASCOF indicators.
- Poor results for indicators relating to carers – satisfaction, quality of life, support.
- Below national and comparator average for delayed transfers of care.
- Poor performance on direct payments – service users and carers.
- Below national and comparator average for older people receiving reablement/rehabilitation after hospital.
- Below national and comparator average for older people still at home 91 days after hospital discharge.

Public Health Outcomes Framework (PHOF) – Older People

- Low life expectancy at age 65 years for males and females.
- High scores for fuel poverty and deprivation indicators.
- Lower than national and other comparators for end of life care indicator.
- Higher than average death rates for cardiovascular disease, cancer and respiratory conditions.
- Lower than national and other comparators for flu vaccination coverage for over 65 years age group.
- Performing well for NHS health checks.

Introduction

This report forms part of Birmingham’s Joint Strategic Needs Assessment. Outcome frameworks are a collection of indicators that help us understand how well public health is being improved and protected. The Public Health Outcomes Framework (PHOF) is a collection of indicators to enable us to benchmark our performance on health and wellbeing indicators against national and other comparators.

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress and strengthen transparency and accountability.

The PHOF and ASCOF indicators cover a range of factors across all age ranges. This report is mainly focusing on the outcomes for older adults. 65% of Adult Social Care (ASC) clients are aged 65 years or over.

Older People Population Profile

Current Population

According to the latest estimates there are 146,693 people in Birmingham aged 65 years and older, making up 13% of the total population of the city.

Table 1: Estimated current older adult population

Age Range	65-69	70-74	75-79	80-84	85-89	90+	Total 65+
Birmingham	41,174	35,444	27,021	21,664	13,635	7,755	146,693
Birmingham %	4%	3%	2%	2%	1%	1%	13%
England %	5%	5%	3%	2%	2%	1%	18%

Source: ONS mid-year estimates 2017

Projected Population

The population aged 65 years and over actually declined in Birmingham between the 2001 and 2011 Censuses. This was mainly due to effect the decline in the birth rate during WW2 (those aged 66-72 in 2011). Most recent population projections suggest a 15% increase in Birmingham’s population aged 65 and over by 2027. The biggest percentage increase is expected in the 90 years and over age range.

Table 2: Birmingham older adult population projections

Age Range	65-69	70-74	75-79	80-84	85-89	90+	Total 65+
2017 estimate	41,174	35,444	27,021	21,664	13,635	7,755	146,693
2027 projection	48,900	38,800	32,200	25,000	14,700	9,500	169,100
% change	19%	9%	19%	15%	8%	23%	15%

Source: ONS 2016 based population projections

Life Expectancy

Life expectancy in Birmingham is lower than the national average. Life expectancy for a man in Birmingham is 77.2 years compared to 79.5 years for England. Females in Birmingham can expect to live to 81.9 years compared to 83.1 years for England. Life expectancy increases have stagnated over the past 5 years both locally and nationally.

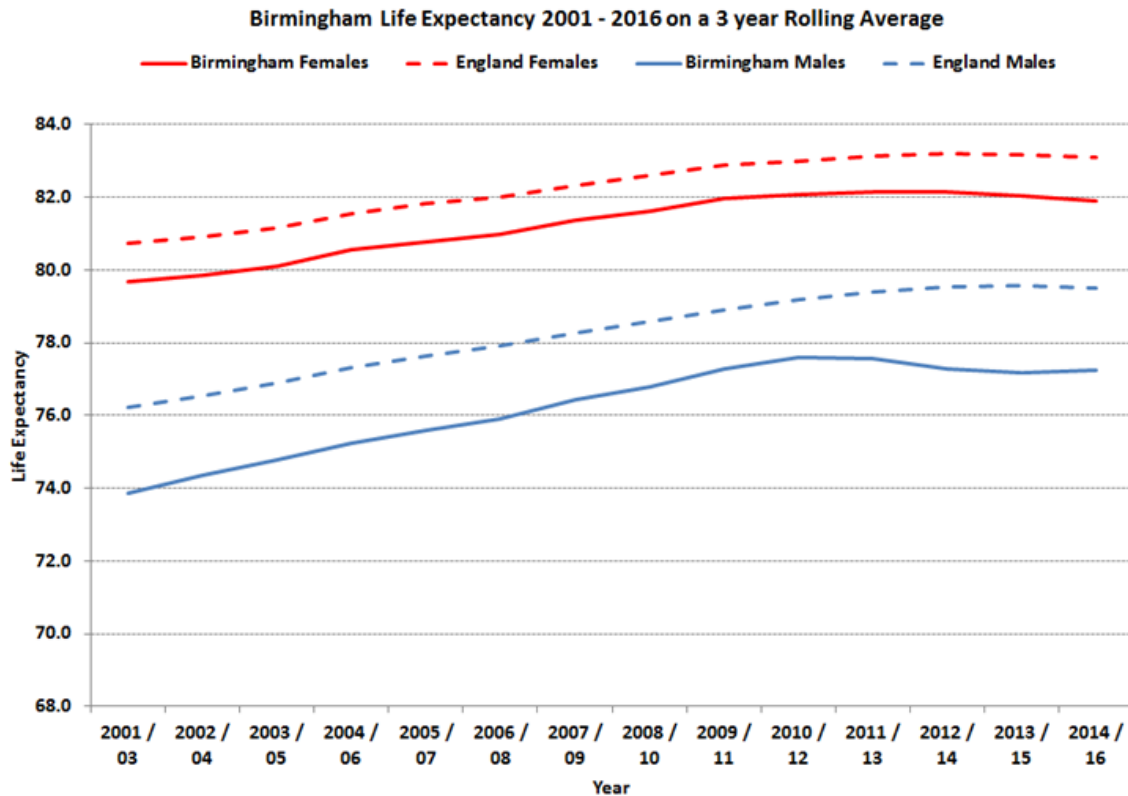


Figure 1: Life expectancy trend chart Birmingham and England 2011-2016. Source: ONS Deaths

Healthy Life Expectancy

Healthy life expectancy is the number of years a person can expect to live in good health. Healthy life expectancy in Birmingham is much lower than the national average with men in Birmingham expecting to live only 59 years in good health compared to 63 years nationally. The figures for Birmingham women are 59 years, compared to 64 years nationally. The gap between healthy life expectancy and life expectancy gives an estimate of how many years a person will be in need of health and social care. Healthy life expectancy is similar for males and females but on average females live approximately 5 years longer. Therefore females can expect to live more in years in poor health.

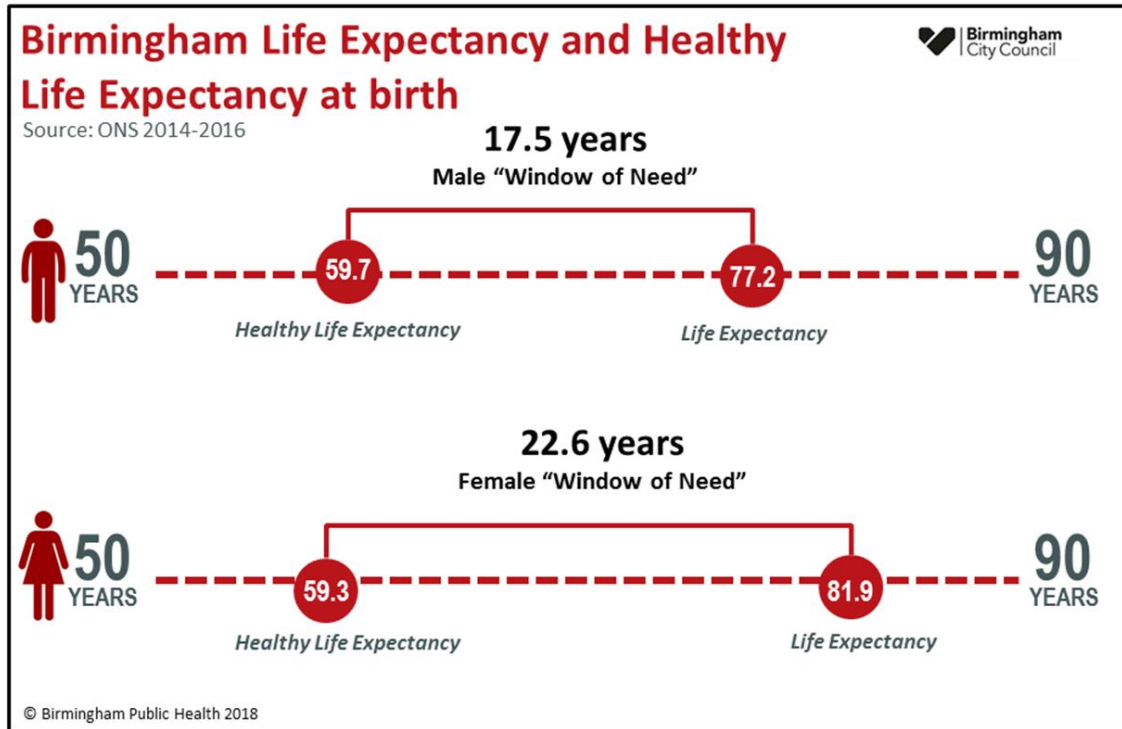


Figure 2: Life expectancy and healthy life expectancy gap for Birmingham. Source: ONS Deaths

What does this mean for older adults' social care?

Birmingham a relatively young city, but ageing quickly, and our population will see its largest growth in the over 65 age group over coming years (15% between 2017 and 2027). As people age, they are progressively more likely to live with complex co-morbidities, disability and frailty. Despite increasing life expectancy, there remains a significant gap in healthy life expectancy. This in turn presents a series of health and care challenges at older age.

If trends in healthy life expectancy continue as they are, and population projections for older people continue as expected, we are likely to see considerable and potentially unsustainable demands for adult health and social care services in the future, given that the majority of adult social care clients are older citizens.

We must, therefore, become increasingly efficient and effective at preventing care needs from arising, as well as managing these needs when they do arise. To achieve this, strong partnerships will be needed across the system, including with primary and acute health services, care providers, the third sector, communities, families and carers.

Areas of focus for ASC include:

- 'Before' - Primary Prevention – reducing the healthy life expectancy gap by supporting strategies around healthy ageing through improving lifestyles and environments (reducing volume)

- ‘During’ - Cost-effective Care – integrated, innovate and effective interventions for meeting care needs in the right place to improve timeliness and reduce waste (reducing cost)
- ‘After’ - Secondary Prevention – effective and integrated pathways of rehabilitation and enablement to promote independence and maintain or reduce care needs (reducing complexity)

ASCOF Performance

ASCOF is a collection of indicators that help us understand how well adult social care services are performing. The full set of indicators can be found in Appendix 1. The data used for the indicators is the most recently available, some of which may not reflect the current performance. Most of the indicators have been refreshed for 2017-18 with the exception of 1D, 1I, 3B, 3C and 3D2 which are 2016-17. The indicators that have not been updated relate to carers.

The council is continually striving to improve performance and recent improvements may not be reflected in these indicators.

Each of the outcomes for Birmingham has been collated according to our performance relative to national comparators. As with assessing other outcome frameworks, the criteria used is based on: whether the performance is statistically better than the national average ‘Performing well’ (green in the spine chart), whether the performance is statistically the same as the national average ‘Performing the same’ (orange in the spine chart) or is performing statistically worse than England ‘Performing poorly’ (red in the spine chart). The groupings are:

Table 3: ASCOF indicator performance

Performance compared to national average	ASCOF indicator
Performing well	<ul style="list-style-type: none"> • People using services who receive self-directed support • Adjusted social care-related quality of life – impact of adult social care • People who use services say that those services make them feel safe and secure
Performing the same (or no comparison can be made)	<ul style="list-style-type: none"> • Social care-related quality of life score • People using services who have control over their daily life • Adults in contact with a secondary mental health service in paid employment • Adults with secondary mental health services living independently • People using services who have as much social contact as they would like • Long-term support needs of younger adults met by residential or nursing homes

Performance compared to national average	ASCOF indicator
	<ul style="list-style-type: none"> • Delayed transfers of care that are attributable to NHS and adult social care • Overall satisfaction of people who use services • People who use services and carers who find it easy to find information about support • People who use services who feel safe
Performing poorly	<ul style="list-style-type: none"> • Carers who receive self-directed support • People using services receiving direct payments • Carers who receive direct payments • Carer-reported quality of life • Adults with a learning disability in paid employment • Adults with a learning disability who live in their own home or with their family • Long-term support needs of older adults met by residential and nursing homes • Older people still at home 91 days after discharge from hospital into reablement/rehabilitation services • Older people receiving reablement/rehabilitation after discharge from hospital • Delayed transfers of care • Delayed transfers of care attributable to adult social care • Short-term service outcomes: sequel to service • Overall satisfaction of carers • Carers who have included or consulted with about the person they care for • Carers who find it easy to find information about support

There has been improvement in all the indicators that have been updated for 2017/18. Birmingham continues to have the highest ranking score of 100% for people using social care who receive self-directed support. Birmingham now ranks 2nd out of 152 local authorities for one of the overarching measures - Adjusted social care-related quality of life – impact of Adult Social Care Services. This measure is based on the quality of life scores arising from responses to the Adult Social Care Survey relating to: control, dignity, personal care, food and nutrition, safety, occupation, social participation and accommodation. However, Birmingham still performs significantly worse than the national average for most indicators. The lowest ranked indicator is for delayed transfers of care relating to adult social care where Birmingham ranks 147th out of 152 local authorities.

PHOF Performance

The PHOF sets out a vision for public health, that is to improve and protect the nation's health and improve the health of the poorest fastest. The indicators help focus our understanding of how well we are doing in comparison to England and other benchmark comparators e.g. English core cities, CIPFA statistical neighbours, West Midlands Combined Authority (WMCA).

In this report we are focusing on outcomes for Birmingham's older adults. The indicators have been collated according to our performance relative to national comparators. The indicators used can be found in Appendix 2. As with assessing other outcome frameworks, the criteria used is based on: whether the performance is statistically better than the national average 'Performing well' (green in the spine chart), whether the performance is statistically the same as the national average 'Performing the same' (orange in the spine chart) or is performing statistically worse than England 'Performing poorly' (red in the spine chart). The groupings are:

Table 4: PHOF indicator performance

Performance compared to national average	PHOF indicator (65 years and over unless otherwise stated)
Performing well	<ul style="list-style-type: none"> • Excess winter deaths (85 years and over) • Dementia emergency admissions • Eligible population receiving an NHS health check (40-74 years)
Performing the same (or no comparison can be made)	<ul style="list-style-type: none"> • Deprivation • Dementia prevalence • Preventable sight loss • Hip fractures • Fuel poverty • PPV vaccination • Winter fuel payments • Receiving attendance allowance • Health related quality of life • Hip fractures – females • Excess winter deaths • Suicide crude rate
Performing poorly	<ul style="list-style-type: none"> • Life expectancy at age 65 years (males and females) • Deaths in usual place of residence • Death rate for cardiovascular disease • Death rate for cancer • Death rate for respiratory disease • Flu vaccination coverage • Hip fractures - males

Although no performance comparison can be made Birmingham has the one of the highest scores for fuel poverty in the country. Deprivation is also one indicator where Birmingham is amongst the least affluent local authorities. This may partly explain why life expectancy is low and there are higher than average death rates for cardiovascular disease, cancer and respiratory conditions. Hip fractures for males aged 65 and over are significantly worse than the national average and all the comparator groups e.g. core cities, CIPFA statistical neighbours and WMCA. This is also the case for deaths in usual place of residence i.e. home, care home and religious establishment, suggesting that end of life care is not good quality meeting individual's needs and wishes. Birmingham does perform well on delivery of NHS health checks, excess winter deaths for the 85 years and older age group and for dementia hospital admissions.

Useful Links

Local Performance Accounts information for the Directorate for People: Adults' Social Care Services

https://www.birmingham.gov.uk/downloads/download/40/local_performance_account_reports

Birmingham Public Health Older People JSNA theme

https://www.birmingham.gov.uk/info/50120/public_health/1337/jsna_themes/4

NHS Digital, Adult Social Analytical Hare Hub interactive version of ASCOF – [click here](#)

Public Health Outcomes Framework <http://www.phoutcomes.info/>

Date: December 2018

Service: Birmingham Public Health

Author(s): Susan Lowe

Version: 1.2

File path: P:\Intelligence\JSNA\Outcome Frameworks

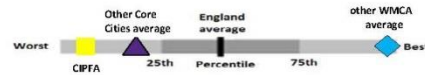
Status: ~~Draft~~/ Final/Agreed

Appendix 1 – Birmingham Adult Social Care Outcome Framework Indicators 2017-18

Birmingham Adult Social Care Outcomes Framework 2017-2018

Key:

- Significantly Better than England average
- Not significantly different from England average
- Significantly Worse than England average
- No significance can be calculated
- Significantly Lower than England average
- Significantly Higher than England average



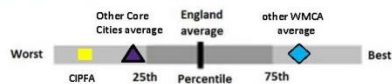
Domain	Indicator	B'ham Number	B'ham Stat	Eng Avg	Eng Worst	England Range	Eng Best	other Core cities average	CIPFA average	other WMCA average
Enhancing Quality of Life for people with care and support needs	1A - Social care-related quality of life score (2017-18)	n/a	19.2	19.1	17.3	[Visual representation of England range and benchmarks]	20.1	18.9	19.0	19.0
	1B - The proportion of people who use services who have control over their daily life (2017-18)	n/a	78.3	77.7	66.8	[Visual representation of England range and benchmarks]	85.2	75.9	76.6	75.6
	1C(1) - Proportion of people using social care who receive self-directed support (2013-14)	12,315	48.4	61.9	25.3	[Visual representation of England range and benchmarks]	106.1	65.1	64.7	62.4
	1C(1A) - The proportion of people who use services who receive self-directed support (2017-18)	8,307	100.0	89.7	32.6	[Visual representation of England range and benchmarks]	100.0	84.3	88.7	92.8
	1C(1B) - The proportion of carers who receive self-directed support (2017-18)	83	37.6	83.4	5.0	[Visual representation of England range and benchmarks]	100.0	95.9	70.5	28.4
	1C(2) - Proportion of people using social care who receive direct payments (2013-14)	3,845	15.1	19.1	6.1	[Visual representation of England range and benchmarks]	47.1	22.6	20.6	21.0
	1C(2A) - The proportion of people who use services who receive direct payments (2017-18)	2,024	24.4	28.5	8.9	[Visual representation of England range and benchmarks]	58.3	24.4	30.0	30.0
	1C(2B) - The proportion of carers who receive direct payments (2017-18)	75	33.9	74.1	1.8	[Visual representation of England range and benchmarks]	100.0	89.5	64.3	25.4
	1D - Carer-reported quality of life (2016-17)	n/a	7.0	7.7	6.8	[Visual representation of England range and benchmarks]	8.9	7.4	7.4	7.2
	1E - The proportion of adults with a learning disability in paid employment (2017-18)	21	1.0	6.0	0.2	[Visual representation of England range and benchmarks]	20.2	4.6	4.8	3.1
	1F - The proportion of adults in contact with secondary mental health services in paid employment (2017-18)	n/a	4.0	7.0	1.0	[Visual representation of England range and benchmarks]	23.0	6.1	6.3	7.0
	1G - The proportion of adults with a learning disability who live in their own home or with their family (2017-18)	1,406	64.1	77.2	32.2	[Visual representation of England range and benchmarks]	97.0	80.6	80.5	72.8
	1H - The proportion of adults in contact with secondary mental health services living independently, with or without support (2017-18)	n/a	64.0	57.0	4.0	[Visual representation of England range and benchmarks]	88.0	59.7	58.4	48.3
	1I(1) - The proportion of people who use services who reported that they had as much social contact as they would like (2017-18)	n/a	46.5	46.0	34.3	[Visual representation of England range and benchmarks]	55.1	46.5	45.7	45.5
1I(2) - The proportion of carers who reported that they had as much social contact as they would like (2016-17)	n/a	28.3	35.5	21.5	[Visual representation of England range and benchmarks]	55.0	31.6	32.5	31.5	
1J - Adjusted Social care-related quality of life – impact of Adult Social Care services (2017-18)	n/a	0.5	0.4	0.3	[Visual representation of England range and benchmarks]	0.5	0.4	0.4	0.4	
Delaying and reducing the need for care and support	2A(1) - Long-term support needs of younger adults (aged 18-64) met by admission to residential and nursing care homes, per 100,000 population (2017-18)	83	11.8	14.0	43.9	[Visual representation of England range and benchmarks]	0.9	18.8	18.2	14.2
	2A(2) - Long-term support needs of older adults (aged 65 and over) met by admission to residential and nursing care homes, per 100,000 population (2017-18)	949	646.9	585.6	1512.8	[Visual representation of England range and benchmarks]	204.2	733.1	693.1	699.3
	2B(1) - The proportion of older people (aged 65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (2017-18)	432	73.1	82.9	50.0	[Visual representation of England range and benchmarks]	96.8	81.7	81.1	79.6
	2B(2) - The proportion of older people (aged 65 and over) who received reablement/rehabilitation services after discharge from hospital (2017-18)	591	2.3	2.9	0.5	[Visual representation of England range and benchmarks]	11.2	4.3	3.7	3.7
	2C(1) - Delayed transfers of care from hospital, per 100,000 (2017-18)	155	18.3	12.3	33.3	[Visual representation of England range and benchmarks]	2.6	15.3	11.9	10.4
	2C(2) - Delayed transfers of care from hospital that are attributable to adult social care, per 100,000 population (2017-18)	89	10.5	4.3	17.7	[Visual representation of England range and benchmarks]	0.1	5.5	3.7	3.8
	2C(3) - Delayed transfers of care from hospital that are attributable to NHS and adult social care, per 100,000 population (2017-18)	6	0.9	0.9	9.7	[Visual representation of England range and benchmarks]	0.1	1.1	1.0	1.0
	2D - The outcome of short-term services: sequel to service (2017-18)	1,103	49.7	77.8	24.2	[Visual representation of England range and benchmarks]	96.6	65.8	65.3	71.4
Ensuring that people have a positive experience of care	3A - Overall satisfaction of people who use services with their care and support (2017-18)	n/a	62.1	65.0	47.3	[Visual representation of England range and benchmarks]	83.3	64.5	64.0	62.7
	3B - Overall satisfaction of carers with social services (2016-17)	n/a	25.9	39.0	25.1	[Visual representation of England range and benchmarks]	62.1	37.6	37.3	35.5
	3C - The proportion of carers who report that they have been included or consulted in discussion about the person they care for (2016-17)	n/a	59.0	70.6	56.9	[Visual representation of England range and benchmarks]	84.6	69.3	70.9	67.3
	3D(1) - Proportion of people who use services and carers who find it easy to find information about services (2017-18)	n/a	74.5	73.3	63.0	[Visual representation of England range and benchmarks]	85.0	73.1	72.8	73.5
	3D(2) - The proportion of carers who find it easy to find information about support (2016-17)	n/a	47.9	64.2	47.5	[Visual representation of England range and benchmarks]	85.4	60.9	63.9	59.6
Safeguarding adults	4A - The proportion of people who use services who feel safe (2017-18)	n/a	70.9	69.9	54.3	[Visual representation of England range and benchmarks]	79.2	66.4	67.8	72.3
	4B - The proportion of people who use services who say that those services have made them feel safe and secure (2017-18)	n/a	90.1	86.3	65.7	[Visual representation of England range and benchmarks]	98.3	86.6	88.4	89.9

Appendix 2 – Birmingham Older Adults Public Health Outcome Framework Indicators 2017-18

Birmingham Older People's Outcomes Framework Nov 2018

Key:

- Significantly Better than England average
- Not significantly different from England average
- Significantly Worse than England average
- No significance can be calculated
- Significantly Lower than England average
- Significantly Higher than England average



Domain	Indicator	B'ham Number	B'ham Stat	Eng Avg	Eng Worst	England Range	Eng Best	Other Core cities average	CIPFA average	other WMCA average
Area Summary	Supporting information - % population aged 65+ (Persons) (2017)	146,693	12.9	18.0	6.2		28.6	13.7	15.0	17.1
	0.1ii - Life expectancy at 65 (Males) (2014 - 16)	n/a	17.8	18.8	15.8		22.1	17.4	17.7	18.2
	0.1ii - Life expectancy at 65 (Females) (2014 - 16)	n/a	20.8	21.1	18.7		24.4	20.0	20.3	20.8
	Supporting information - Deprivation score (IMD 2015) (2015)	n/a	37.8	21.8	42.0		5.7	32.6	31.0	27.7
	Percentage of deaths in usual place of residence among people aged 65 years and over (2016)	2,504	38.7	47.2	28.9		58.4	44.0	45.2	43.7
	Rate of deaths from Cardiovascular Disease among people aged 65 years and over (2014 - 16)	5,481	1203.8	1149.2	1571.6		789.6	1251.0	1248.1	1202.2
	Rate of deaths from Cancer among people aged 65 years and over (2014 - 16)	5,176	1159.8	1115.2	1512.0		869.1	1301.2	1209.4	1180.1
	Rate of deaths from Respiratory Disease among people aged 65 years and over (2014 - 16)	3,111	687.5	629.1	977.0		385.3	744.4	708.7	632.8
	Dementia: Recorded prevalence (aged 65+) (Sep 2017)	7,171	4.5	4.3	2.6		5.5	4.9	4.8	4.3
	4.12i - Preventable sight loss - age related macular degeneration (AMD) (2016/17)	179	122.8	111.3	299.9		11.7	122.8	115.6	110.2
	4.14i - Hip fractures in people aged 65 and over (Persons) (2016/17)	918	596.2	575.0	854.2		364.7	631.5	624.1	605.8
	4.15ii - Excess winter deaths index (single year, age 85+) (Persons) (Aug 2016 - Jul 2017)	272	28.6	30.8	72.2		5.3	32.2	30.7	32.6
	4.15iv - Excess winter deaths index (3 years, age 85+) (Persons) (Aug 2014 - Jul 2017)	666	23.2	29.3	44.5		11.1	31.1	28.6	30.1
Interventions	Dementia: DSR of emergency admissions (aged 65+) (2016/17)	6,903	4432.5	3482.3	2084.3		5777.6	4470.7	4424.8	4286.8
	2.22v - Cumulative percentage of the eligible population aged 40-74 who received an NHS Health check (2013/14 - 17/18)	154,337	56.7	44.3	18.1		98.9	37.0	46.8	54.8
	3.03xiii - Population vaccination coverage - PPV (2017/18)	104,202	66.8	69.5	48.2		78.1	71.1	70.8	68.2
	3.03xiv - Population vaccination coverage - Flu (aged 65+) (2017/18)	112,887	69.3	72.6	58.4		80.8	74.6	73.3	70.5
	% Social Care clients aged 65+ receiving Self Directed Support (2013/14)	6,845	68.6	66.3	49.8		81.1	64.1	65.2	69.5
	Proportion of people using social care who receive self-directed support, and those receiving direct payments (2015/16)	4,745	100.0	88.6	32.6		100.0	84.4	88.9	88.5
	Older people (65+) supported throughout the year per 100,000 (2013/14)	19,085	13388.5	9780.9	4186.9		22712.6	11312.0	10615.6	8147.2
	Permanent admissions to residential and nursing care homes per 100,000 aged 65+ (2013/14)	1,015	712.0	650.7	1246.5		189.9	691.9	661.9	660.8
	Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital (2013/14)	430	86.9	82.5	50.0		100.0	76.1	79.9	80.0
	The proportion of older people aged 65 and over offered reablement services following discharge from hospital. (2013/14)	495	2.2	3.3	0.6		25.8	2.8	3.2	4.0
Safe and Positive Experiences	1.17 - Fuel poverty (2016)	72,071	16.8	11.1	17.0		6.5	13.9	13.9	14.3
	4.13 - Health related quality of life for older people (2016/17)	n/a	0.7	0.7	0.6		0.8	0.7	0.7	0.7
	% of people aged 65+ receiving winter fuel payments (2011/12)	129,720	95.0	96.7	67.1		105.9	93.5	94.8	95.2
	People aged 65+ in receipt of Attendance Allowance per 1,000 (May 2014)	26,920	190.9	149.9	100.9		221.3	170.4	167.8	184.7
Equality	4.14i - Hip fractures in people aged 65 and over (Males) (2016/17)	292	476.7	407.9	814.7		244.6	441.1	460.4	455.6
	4.14i - Hip fractures in people aged 65 and over (Females) (2016/17)	626	673.6	693.2	1004.3		447.0	762.1	735.1	707.6
	4.15ii - Excess winter deaths index (single year, age 85+) (Males) (Aug 2016 - Jul 2017)	101	27.0	27.4	106.7		-14.6	26.9	25.3	31.9
	4.15ii - Excess winter deaths index (single year, age 85+) (Females) (Aug 2016 - Jul 2017)	171	29.7	33.0	84.4		4.5	35.4	33.9	32.9
	4.15iv - Excess winter deaths index (3 years, age 85+) (Males) (Aug 2014 - Jul 2017)	224	20.3	26.8	59.4		-0.3	27.0	26.4	28.7
	4.15iv - Excess winter deaths index (3 years, age 85+) (Females) (Aug 2014 - Jul 2017)	442	25.1	30.9	49.2		11.8	33.5	30.0	30.9
	Suicide crude rate 65+ years: per 100,000 (5 year average) (Males) (2013 - 17)	41	12.7	12.4	2.6		34.9	10.6	10.5	11.7
	Suicide crude rate 65+ years: per 100,000 (5 year average) (Females) (2011 - 15)	107	3.9	4.4	3.7		5.6	4.3	4.1	3.9

Note :- 1. For indicator 3.03xiii (ie Population vaccination coverage) the classification used is :-



2. For indicator 3.03xiv (ie Population vaccination coverage) the classification used is :-

