

**From:** Graham Gibbens, Cabinet Member for Adult Social Care and Public Health

Andrew Scott-Clark, Director of Public Health

**To:** Adult Social Care and Health Cabinet Committee

14 March 2017

**Subject:** Public Health Performance - Adults

**Classification:** Unrestricted

**Previous Pathway:** This is the first committee to consider this report

**Future Pathway:** None

**Electoral Division:** All

**Summary:** This report provides an overview of key performance indicators for Public Health commissioned services relating to adults, and a range of Public Health Outcome Framework indicators.

Performance has improved or remained stable on NHS Health Checks, Health Trainers and Sexual Health Services. Performance on adult drug and alcohol services has deteriorated slightly in Q3 although providers are putting a range of measures in place to deliver improvement.

The adult lifestyle programmes are being extended to help ensure an effective public health contribution to the Kent and Medway Sustainability and Transformation Plan (STP).

**Recommendation:** The Adult Social Care and Health Cabinet Committee is asked to **CONSIDER** and **COMMENT** on current performance of Public Health commissioned services.

## **1. Introduction**

1.1. This report provides an overview of the key performance indicators for Kent's Public Health services for adults.

## **2. Performance Indicators of Commissioned Services**

2.1. The table below sets out the performance indicators for the key public health commissioned services which deliver services primarily for adults. The RAG status relates to the targets outlined in the business plans.

Table 1: Commissioned services quarterly performance, RAG against target

Indicator Description	Q2 15/16	Q3 15/16	Q4 15/16	Q1 16/17	Q2 16/17	Q3 16/17
Number of target population with completed NHS Health Check (rolling 12 month basis)	41,328	38,072	36,685	37,175 (a)	39,039 (a)	41,057 (a)
% of clients accessing GUM services offered an appointment to be seen within 48 hrs	100 (g)	100 (g)	100 (g)	100 (g)	100 (g)	100 (g)
% of smokers successfully quitting, having set a quit date	57 (g)	54 (g)	54 (g)	54 (g)	52 (g)	Not yet available
% of adult drug and alcohol treatment population that successfully completed treatment	31	34	33	31 (g)	29 (a)	28 (a)
% of new clients seen by the Health Trainer Service from the two most deprived quintiles (and NFA)	56 (a)	55 (r)	56 (a)	64 (g)	59 (a)	61 (a)

2.2. Public Health continues to work on the transformation programme for adult lifestyle services and NHS Health Checks. Current contracts have been extended for 6 months to ensure alignment with the prevention strand of the STP and changing landscape of providers across the health service in Kent. From April 2017, adult healthy lifestyle services will move towards a more integrated model of delivery and be branded as 'One You Kent'.

### NHS Health Checks

2.3. Over 41,000 checks were delivered in the 12 months to the end of Q3; this was an increase on the previous figure although it remains slightly below the target of 42,000.

2.4. The NHS Health Check programme has been working towards continuous improvement in delivery and quality, with the number of invalid checks reducing considerably over the last 12 months. The outreach services have been delivering checks in areas most at risk of health inequalities and cardiovascular disease. The outreach service can provide a lifestyle 'Health MOT' to any adult as well as a full NHS Health Check to those who are eligible. More than 2,800 Health MOTs have been delivered since April 2016 to January 2017.

### Sexual Health

2.5. Community sexual health clinics in Kent have continued to exceed the target of offering an urgent genito-urinary medicine (GUM) appointment within 48 hours. Community sexual health services are available across Kent and provide sexual health testing and treatment, contraception and HIV outpatient services. Most clinics offer walk-in clinics as well as appointment-based systems.

2.6. KCC has an obligation to ensure provision of open access sexually transmitted infection (STI) testing and treatment for the Kent population. There is already a facility on the KCC website to request tests for Chlamydia or HIV. Public Health will be working with service providers in the coming weeks to expand this offer to a wider range of STIs in order to target the most vulnerable groups.

### Smoking

2.7. There is no additional data on Smoking Cessation since the last performance report presented to the Committee. As highlighted in the previous report, the service continues to meet and also regularly exceed the 52% 'quit-rate' target.

2.8. Stop smoking services will be delivered in the new high street One You shop in Ashford where smokers can drop in and seek support with or without an appointment. Public Health and the stop smoking services are supporting Hospital Trusts to ensure their grounds are smoke free and provide support to help patients, visitors and hospital staff give up smoking.

### Health Trainers

2.9. The Health Trainer Service has seen over 1,000 new clients this quarter and have increased the number and proportion of clients from quintiles 1 and 2. They have supported 30 people to register with a GP and continue to deliver NHS Health Checks and health MOT's for eligible clients to support behaviour change.

2.10. Health Trainers continue to work in partnership with a range of agencies and have carried out a range of targeted work with key groups. This includes newly released prisoners in Swale, parents attending Children Centres in Canterbury, learning disability clients in Gravesend, mental health clients in Ashford and Swale, and substance misuse treatment service users across Kent.

### Substance Misuse

2.11. In the 12 months to the end of Q3, 28% of those in treatment in the previous year successfully completed treatment free from dependence on drugs or alcohol. This is slightly lower than the 29% recorded for the previous quarter and below the target of 30% although these remain above the national average.

2.12. Service providers are putting in place a range of different measures to improve performance in this area and increase the proportion of people who complete treatment free from drug or alcohol dependence. Public Health commissioners will be monitoring progress of these action plans closely throughout the next quarter.

### 3. Annual Public Health Outcomes Framework (PHOF) Indicator

3.1. The table below presents the most recent nationally-verified and published data; the RAG is the published PHOF RAG and is in relation to National figures. There have been no updates to these figures since the previous Cabinet Committee report.

Table 2: Public Health Outcomes Framework Metrics

	2009-11	2010-12	2011-13	2012-14	2013-15
U75 mortality rate Cardiovascular diseases considered preventable per 100,000	55.9 (a)	52.3 (a)	49.3 (a)	46.0 (g)	42.3 (g)
U75 mortality rate Cancer considered preventable per 100,000	83.6 (g)	81.5 (g)	79.3 (g)	78.4 (g)	78.8 (a)
U75 mortality rate Liver disease considered preventable per 100,000	12.0 (g)	12.4 (g)	13.2 (g)	13.7 (g)	14.4 (g)
U75 mortality rate Respiratory disease considered preventable per 100,000	17.6 (a)	16.6 (a)	16.7 (a)	16.5 (a)	17.8 (a)
Suicide rate (all ages) per 100,000	9.3 (a)	9.0 (a)	10.3 (a)	11.4 (r)	12.0 (r)
People presenting with HIV at a late stage of infection (%)	48.8 (a)	46.4 (a)	50.7 (a)	54.5 (r)	54.2 (r)
Adults classified as overweight or obese (%)	Not available			65.1 (a)	65.5 (r)
	2011	2012	2013	2014	2015
Smoking prevalence in adults – current smokers (%)	Not available	20.7 (a)	19.2 (a)	18.6 (a)	17.0 (a)
Opiate clients successfully completing drug treatment and not re-presenting within 6 months (%)	14.7 (g)	11.0 (g)	10.4 (g)	9.3 (g)	8.5 (g)
	2011/12	2012/13	2013/14	2014/15	2015/16
Alcohol-related admissions to hospital per 100,000. All ages	557 (g)	565 (g)	551 (g)	526 (g)	Not available
Adult patients diagnosed with depression (% - QOF Register)	Not available	5.6	6.4	7.3	8.5

3.2. As highlighted in the previous Cabinet Committee papers, the increase in the suicide rate was expected following local analysis, the campaign ‘Release the Pressure’ continues to support men in Kent to receive help and, following the first wave of activity, the Mental Health Matters helpline now receives around 500 male callers a month which is a 56% increase. Late diagnosis of HIV plateaued into 2013-15 with late 2014 the time period when KCC ran a campaign ‘It’s better to know’ in Kent to raise awareness of HIV testing.

### 4. Quality Exceptions

4.1. There are no quality exceptions to report.

## 5. Conclusions

5.1. Performance has improved on all the key performance indicators for adult public health services, with the exception of substance misuse services. The number of NHS Health Checks delivered has increased, as has the proportion of new clients from the most deprived quintiles accessing the Health Trainer Service. To ensure alignment with partnership work on prevention, the adult lifestyle programmes are being extended to allow transformation to work concurrently across the wider system and with the STP.

5.2. Further analysis of the substance misuse treatment population and the work of the commissioned treatment agencies is being conducted to understand further the decreasing performance of the measure.

## 6. Recommendations

**Recommendation:** The Adult Social Care and Health Cabinet Committee is asked to **CONSIDER** and **COMMENT** on current performance of Public Health commissioned services.

## 7. Background Documents

7.1. None

## 8. Appendices

8.1. Appendix 1 – Key to KPI rating used

## 9. Contact Details

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## Appendix 1

Key to KPI Ratings used:

(g) GREEN	Target has been achieved or exceeded; or is better than national
(a) AMBER	Performance at acceptable level, below target but above floor; or similar to
(r) RED	Performance is below a pre-defined floor standard; or lower than national
↑	Performance has improved
↓	Performance has worsened
↔	Performance has remained the same

Data quality note: Data included in this report is provisional and subject to later change. This data is categorised as management information.