From: Clair Bell, Cabinet Member for Adult Social Care and Public Health

Andrew Scott-Clark, Director of Public Health

To: Health Reform and Public Health Cabinet Committee

Date: 14 January 2020

Subject: Performance of Public Health commissioned services

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 the key performance indicators (KPIs) for Public Health commissioned services. Thirteen of the fifteen KPIs were RAG rated Green in the latest available quarter, one was Amber and one was Red.

The Red KPI is a continuing measure performing below the floor standard and is the number of antenatal contacts made by the Health Visiting service. All other Health Visitor contacts/checks have delivered to target levels.

Delivery of NHS Health Checks, sexual health services, the Live Well Kent service and the substance misuse services have all delivered at or above target levels.

Recommendation:

The Health Reform and Public Health Cabinet Committee is asked to NOTE the performance of Public Health commissioned services in Q2 2019/20.

1. Introduction.

- 1.1 A core function of the Cabinet Committee is to review the performance of services which fall within its remit.
- 1.2 This report provides an overview of the key performance indicators (KPIs) for the public health services that are commissioned by Kent County Council (KCC) and includes the KPIs presented to Cabinet via the KCC Quarterly Performance Report (QPR). Appendix 1 contains the full table of KPIs and performance over the previous 5 quarters.

2.0 Overview of Performance

2.1 Of the fifteen targeted KPIs for Public Health commissioned services thirteen achieved target (Green), one was below target but achieved the floor standard (Amber), and one did not achieve the floor standard (Red). This KPI relates to delivery of the antenatal visits by the Health Visiting Service.

2.2 Health Visiting

Delivery of the face-to-face antenatal contact continues to prove challenging for the provider, with a small increase in the number of visits delivered in the three months to September counteracted by an increase in the number expected to have received one. Families who are not prioritised for a face to face contact receive an introductory letter from the service.

- 2.3 Recruitment and retention of staff remain a priority; a new social media recruitment campaign is promoting the opportunities within the Kent Health Visiting Team and the benefits of working in Kent, specifically Swale, and the service are continuing to recruit Community Public Health Nurses who are training with Canterbury Christ Church University who will support the delivery of the service and increase capacity within the workforce.
- 2.4 <u>National Child Measurement Programme (NCMP)</u>
 The NCMP for 2018/19 has been delivered and the results recently published.
 For Kent, 95% of children in Reception Year (4-5 year olds) and 94% in Year 6 (10-11 year olds) were measured, exceeding the target of 90%.
- 2.5 The proportion of Reception Year children with excess weight was 24.7% and 32.2% for Year 6. Where a child is identified as underweight or overweight the provider makes pro-active phone calls to engage parents, utilising the NCMP conversation framework developed by Public Health England. Where a need is identified, families are offered an intervention that supports them to make positive healthy lifestyle changes.

2.6 Adult Health Improvement

The NHS Health Check Programme continues to deliver higher numbers of checks in 2019/20 in comparison to the previous year, and the service is on track to deliver the target of 41,600 checks.

2.7 The proportion of clients seen by a One You Kent (OYK) advisor continues to be below the challenging target, however both the number and proportion for Q2 2019/20 are higher than Q2 2018/19.

2.8 Sexual Health

Sexual health services ensure that access to services across Kent are open; the providers continue to offer all who require an urgent Genito Urinary Medicine (GUM) appointment, an appointment to be seen within 48 hours, despite the challenge of embedding a new model in June 2019.

2.9 Demand for services not only continue to increase currently but are estimated to increase in the future, commissioners are putting in place strategies which seek

to address demographic pressures and increasing service costs with alternative methods of delivery or other sexual health services to ensure future activity can be delivered within budget. The future commissioning strategy makes use of new technologies and funding available through the NHS to offer different ways for care and treatment to be delivered. Examples include digital consultation which will be rolled out following a pilot. Webchat for advice and signposting, and postal options for both testing and treatment.

2.10 <u>Drug and Alcohol Services</u>

The numbers of adults accessing structured treatment for substance misuse has continued to increase, and there are now over 5,000 Kent residents accessing treatment. Commissioned services continue to ensure clients exiting treatment do so in a planned way and the proportion of those in treatment existing successfully was 27% in the 12 months to September 2019.

2.11 Commissioners are currently working on a strategy to utilise the OYK service or increase digital interventions for those with low to high risk levels of alcohol misuse, ensuring that structured services have increased capacity to focus on those with severe levels of dependency.

2.12 <u>Mental Wellbeing Service</u>

The Live Well Kent Service continues to deliver services producing high levels of satisfaction, with 100% of clients asked in the three months to September 2019 saying that they would recommend the service to family, friends or someone in a similar situation.

3.0 Conclusion

3.1 Thirteen of the fifteen KPIs remain above target and were RAG rated Green, which is an increase on the previous report. Commissioners across all the service areas are exploring other forms of delivery, for example digital services, to compliment traditional delivery mechanisms, to ensure current provision is fit for purpose and able to account for increasing demand levels in the future.

4.0 Recommendations

4.1 The Health Reform and Public Health Cabinet Committee is asked to **NOTE** the performance of Public Health commissioned services in Q2 2019/20.

5.0 Background Documents

5.1 None

6.0 Appendices

6.1 Appendix 1 - Public Health Commissioned Services KPIs and Key

7.0 Contact Details

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