

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

Andrew Scott-Clark, Director of Public Health

**To:** Health Reform and Public Health Cabinet Committee

15 January 2019

**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 key performance indicators (KPIs) for Public Health commissioned services. 11 of the 15 KPIs were RAG rated Green in the latest quarter, 4 were Amber, and none were Red.

In the case of the 4 Amber KPIs, providers have been looking to focus delivery towards those Kent residents who are most deprived or in most need.

**Recommendation:** The Health Reform and Public Health Cabinet Committee is asked to **NOTE** the performance of Public Health commissioned services in Q2 2018/19

## 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 performance of the public health services that are commissioned by KCC. It focuses on the key performance indicators (KPIs) that are included in the Strategic and Corporate Services Directorate 2018-19 Directorate Business Plan and presented to Cabinet via the KCC Quarterly Performance Report (QPR). Appendix 1 contains the full table of KPIs and the performance over the previous 5 quarters.

## 2. Overview of Performance

- 2.1. Of the 15 targeted KPIs for Public Health commissioned services 11 achieved target (Green), none were below the floor standard and Red. 4 KPIs were below target but achieved the floor standard (Amber), these were for:
  - the number of NHS Health Checks delivered
  - the percentage of antenatal visits delivered by the Health Visiting Service

- the percentage of those engaged with One You Kent Advisors being from the most deprived areas in Kent
- the percentage of people successfully completing drug and/or alcohol treatment.

#### Health Visiting

- 2.2. The Health Visiting Service met all but one of the mandated contact targets in Q2. Delivery of antenatal contacts continues to be challenging for the provider.
- 2.3. The provider has advised that this reduction in antenatal contacts in Q2 has been due to the reduced capacity of the workforce. The service undertakes targeted recruitment, has a robust retention policy, flexible working arrangements and a collaboration with Canterbury Christchurch University to train qualified nurses in the Community Public Health Nurse role to improve succession planning and recruitment. The service is also completing an antenatal SBAR (Situation, Background, Assessment, Recommendation) review to identify any additional actions that can be taken to further improve performance.

#### Adult Health Improvement

- 2.4. The number of NHS Health Checks delivered has been steadily increasing following a drop in delivery in early 2018 with the roll-out of a new IT system across Kent. The numbers remain lower than last year and as a result action plans to provide targeted outreach in areas of deprivation are underway to increase uptake and increase awareness. The Provider has committed to target males aged over 50 years, in line with the findings of the Health Equity audit and will be working in Thanet and Swale, focussing on local pubs, during December and January
- 2.5. KCC is working proactively with the provider and GP's across the county to ensure that 100% of those eligible for a Health Check receive an invite by the end of the financial year.
- 2.6. There has been an increase in the proportion of individuals engaged with One You Kent Advisors being from the most deprived areas in the county, from 49% in Q1 to 52% in Q2. All providers delivering One You Kent continue to work together and with KCC to increase targeted uptake of this service.

#### Sexual Health

- 2.7. 100% of the 10,000 appointments requiring an urgent genito-urinary medicine (GUM) appointment in Kent were offered within 48 hours. Contracts for Sexual Health Services expire in March 2019 and work is underway to transform and remodel services in line with findings of the needs assessment in order to meet the changing demand and needs of users

#### Drug and Alcohol Services

- 2.8. The number of adults accessing structured treatment for substance misuse has increased in the 12 months to September 2018 to 4,587 from 4,445 in the same time period last year. Analysis of these figures has identified increases in clients using opiate and/or non-opiates. The number of opiate clients has increased to 2,159, the highest number since August 2017.
- 2.9. The proportion of people successfully completing treatment has decreased from 26% to 25%. Providers are seeing a reduction in service users with very-low to low levels of complexity and an increase in medium and very-high levels of complexity for opiate clients. Providers are reviewing their offer to support service users in finding employment and stable housing which can aid recovery.

#### Mental Wellbeing Service

- 2.10. The Live Well Kent providers continue to ensure that the services deliver high levels of satisfaction with 98% of clients completing the NHS Friends and Family Test (FFT) indicating that they would recommend the service to family, friends or someone in a similar situation.

### **3. Conclusion**

- 3.1. 11 of the 15 KPIs with targets stated in the Strategic and Corporate Services Directorate 2018-19 Directorate Business Plan were RAG rated Green and 4 were Amber, none were Red.
- 3.2. Services continue to innovate and focus delivery to ensure they meet targets and support Kent residents who are most deprived or in most need.

### **4. Recommendations**

**Recommendation:** The Health Reform and Public Health Cabinet Committee is asked to **NOTE** the Q2 2018/19 performance of Public Health commissioned services

### **5. Background Documents**

Strategic and Corporate Services Directorate 2018-19 Directorate Business Plan  
<http://www.kent.gov.uk/about-the-council/strategies-and-policies/corporate-policies/business-plans>

### **6. Appendices**

Appendix 1 - Public Health Commissioned Services KPIs and Key.

### **7. Contact Details**

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## Appendix 1: Public Health Commissioned Services – Key Performance Indicators Dashboard

Service	KPI's	Q2 17/18	Q3 17/18	Q4 17/18	Target 18/19	Q1 18/19	Q2 18/19	DoT**
Health Visiting	PH04: No. of mandated universal checks delivered by the health visiting service (12 month rolling)	68,837 (g)	70,456 (g)	71,495 (g)	65,000	71,287 (g)	70,639 (g)	↓
	PH14: No. and % of mothers receiving an antenatal contact with the health visiting service	2,457 54% (g)	2,282 52% (g)	1,755 43% (g)	50%	2,078 48% (a)	1,804 41% (a)	↓
	PH15: No. and % of new birth visits delivered by the health visitor service within 30 days of birth	4,459 97% (g)	4,346 98% (g)	3,954 98% (g)	95%	4,094 98% (g)	4,294 98% (g)	↔
	PH16: No. and % of infants due a 6-8 week who received one by the health visiting service	3,989 89% (g)	4,199 92% (g)	3,809 91% (g)	80%	3,628 89% (g)	3,771 86% (g)	↓
	PH23: No. and % of infants who are totally or partially breastfed at 6-8 weeks (health visiting service)	2,025 49%*	2,041 47%	1,788 46%*	-	1,833 49%*	1,852 48%*	-
	PH17: No. and % of infants receiving their 1-year review at 15 months by the health visiting service	3,751 88% (g)	3,878 89% (g)	3,723 87% (g)	80%	3,609 86% (g)	3,907 87% (g)	↑
	PH18: No. and % of children who received a 2-2½ year review with the health visiting service	3,520 84% (g)	3,634 83% (g)	3,725 82% (g)	80%	3,546 80% (g)	3,703 82% (g)	↑
Structured Substance Misuse Treatment	PH13: No. and % of young people exiting specialist substance misuse services with a planned exit	79 92% (g)	76 92% (g)	55 85% (g)	85%	87 94% (g)	54 89% (g)	↓
	PH03: No. and % of people successfully completing drug and/or alcohol treatment of all those in treatment	1,143 26% (a)	1,126 25% (a)	1,073 24% (a)	26%	1,160 26% (g)	1,139 25% (a)	↓
Lifestyle and Prevention	PH01: No. of the eligible population aged 40-74 years old receiving an NHS Health Check (12 month rolling)	43,677 (g)	42,943 (g)	41,677 (g)	41,600	38,021 (a)	33,617 (a)	↓
	PH11: No. and % of people quitting at 4 weeks, having set a quit date with smoking cessation services	761 49% (a)	746 54% (g)	809 49% (a)	52%	699 57% (g)	684 54% (g)	↓
	PH21: No. and % of clients engaged with One You Kent Advisors being from the most deprived areas in the County	New Service, New Metric			60%	413 49% (a)	391 52% (a)	↑
Sexual Health	PH02: No. and % of clients accessing GUM services offered an appointment to be seen within 48 hours	100% (g)	100% (g)	100% (g)	90%	9,772 100% (g)	10,024 100% (g)	↔
Mental Wellbeing	PH22: No. and % of Live Well Kent clients who would recommend the service to family, friends or someone in a similar situation	New Metric			90%	210 98% (g)	252 96% (g)	↓

\*Coverage above 85% however quarter did not meet 95% for robustness expected for national reporting

## Commissioned services annual activity

Indicator Description	2013/14	2014/15	2015/16	2016/17	2017/18	DoT
PH09: Participation rate of Year R (4-5 year olds) pupils in the National Child Measurement Programme	96% (g)	96% (g)	97% (g)	97% (g)	93% (g)	↓
PH10: Participation rate of Year 6 (10-11 year olds) pupils in the National Child Measurement Programme	94% (a)	95% (g)	96% (g)	96% (g)	96% (g)	↔
PH05: Number receiving an NHS Health Check over the 5-year programme (cumulative from 2013/14 to 2017/18)	32,924	78,547	115,232	157,303	198,980	-
PH06: Number of adults accessing structured treatment substance misuse services	4,652	5,324	5,462	4,616	4,466	-
PH07: Number accessing KCC commissioned sexual health service clinics	-	-	73,153	78,144	75,694	-

### Key:

#### RAG Ratings

<b>(g) GREEN</b>	Target has been achieved
<b>(a) AMBER</b>	Floor Standard*** achieved but Target has not been met
<b>(r) RED</b>	Floor Standard*** has not been achieved
nca	Not currently available

#### DoT (Direction of Travel) Alerts

↑	Performance has improved
↓	Performance has worsened
↔	Performance has remained the same

\*\*Relates to two most recent time frames

\*\*\* Floor Standards are set in Directorate Business Plans and if not achieved must result in management action

### Data quality note

All data included in this report for the current financial year is provisional unaudited data and is categorised as management information. All current in-year results may therefore be subject to later revision