

From: Peter Oakford, Deputy Leader and Cabinet Member for Strategic Commissioning and Public Health

Andrew Scott-Clark, Director of Public Health

To: Health Reform and Public Health Cabinet Committee

30th June 2017

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. All KPIs were green or amber and there were improvements in performance in Q4 2016/17 across most services. There were increases in delivery of the mandated universal Health Visiting checks and the number of NHS Health Checks provided.

Public Health campaigns have been targeted at key priorities with the 'Release the Pressure' campaign aimed at helping to reduce male suicides in Kent and the 'What the Bump' campaign aimed at working with mothers smoking whilst pregnant, specifically in Swale.

Recommendation: The Health Reform and Public Health Cabinet Committee is asked to:

- i) **NOTE** the Q4 performance of Public Health commissioned services;
- ii) **AGREE** the proposed selection of KPIs to be included in future performance reports for the committee; and
- iii) **AGREE** a split in reporting between performance of the Public Health commissioned services and Public Health outcomes, as described in the Public Health Outcomes Framework.

1. Introduction

1.1. This report provides an overview of the performance of the key public health services that are commissioned by KCC. It focuses on the key performance indicators (KPIs) that are included in the Public Health Business Plan and presented to Cabinet via the KCC Quarterly Performance Report (QPR).

1.2. The report also includes a summary of some key population health measures; Public Health are proposing that in future these measures are presented in a separate report to the Cabinet Committee.

2. Key Performance Indicators

2.1. The KPIs presented in the table below provide an overview of quarterly and annual performance of public health commissioned services for children and adults in Kent. The Red, Amber, Green (RAG) status reflects performance against the targets in the Public Health business plan.

Table 1: Commissioned services quarterly performance

Indicator Description – Commissioned Services	Q1 16/17	Q2 16/17	Q3 16/17	Q4 16/17	Target 17/18
No. of mandated universal checks delivered by the health visiting service (12 month rolling)	-	63,016	65,088	64,633	65,000
% of mothers receiving an antenatal visit/contact with the health visiting service	32%	34%	37%	36%	30%
% of new birth visits delivered by the health visitor service within 30 days of birth	92%	99%	95%	97%	95%
% of infants due a 6-8 week who received one by the health visiting service	79%	84%	88%	88%	80%
% Total or partial breastfeeding status at 6-8 weeks (health visiting service)	47%*	45%*	48%*	49%*	95% coverage
Percentage of infants receiving their 1 year review at 15 months by the health visiting service	78%	81%	81%	83%	80%
% of children who received a 2-2½ year review with the health visiting service	76%	78%	74%	81%	80%
% of young people exiting specialist substance misuse services with a planned exit	89% (a)	94% (g)	89% (g)	93% (g)	85%
No. of the eligible population aged 40-74 years old receiving an NHS Health Check (12 month rolling)	37,078 (a)	39,039 (a)	41,057 (a)	42,071 (g)	41,600
% of people quitting at 4 weeks, having set a quit date with smoking cessation services	54% (g)	52% (g)	52% (g)	nca	52%
% of clients accessing GUM services offered an appointment to be seen within 48 hours	100% (g)	100% (g)	100% (g)	100% (g)	90%
No. of new clients accessing the health trainer service being from the 2 most deprived quintiles & NFA	64% (g)	59% (a)	61% (a)	59% (a)	62%
% Successful completion of drug and/or alcohol treatment of all those in treatment	31% (g)	29% (a)	28% (a)	27% (a)	28%
		13/14	14/15	15/16	16/17
Participation rate of Year R (4-5 year old) pupils in the National Child Measurement Programme		96% (g)	96% (g)	97% (g)	nca
Participation rate of Year 6 (10-11 year old) pupils in the National Child Measurement Programme		94% (a)	95% (g)	96% (g)	nca
No. receiving an NHS Health Check over the 5 year programme (cumulative from 2013/14)		32,924	78,547	115,232	157,303
No. of adults accessing structured treatment substance misuse services		4,652	5,324	5,462	4,616
No. of people accessing KCC commissioned sexual health services		-	-	77,158	77,791

*Coverage above 85% however no quarter met 95% for robustness

Health Visiting

- 2.2. The KPIs show that performance of the health visiting service has steadily improved since commissioning responsibility for the service transferred from NHS England to KCC in 2015. The percentage of checks delivered has risen across all of the mandated visits.
- 2.3. The greatest improvements were seen in the delivery of the 6-8 week visit and 1 year review. KCC is working with the provider to continue to improve uptake of these visits to ensure better recording of breastfeeding status at the 6-8 week check and to attain 95% coverage.

Adult Health Improvement

- 2.4. There was an increase in the number of people receiving an NHS Health Check in the twelve months to March 2017 compared to the previous year. This meant that the programme met its overall target for 2016/17. Most NHS Health Checks are delivered in GP practices, pharmacies or community clinics although some are delivered through targeted outreach in areas of greatest need and poorest health outcomes.
- 2.5. KCC, Kent Community Health NHS Foundation Trust (KCHFT) and district councils will be supporting the roll out of the *One You Kent* brand which will improve visibility and awareness of the range of adult health improvement services. The One You website will continue to develop and will help people to navigate a range of resources or local services which will help people to live healthy lives.
- 2.6. The health trainer service continues to target areas of deprivation and greatest need. The service provides motivational support and healthy lifestyles advice and works closely with other lifestyle services to enable a smooth pathway for clients who have increased their motivation and are ready to engage in these services. Examples of this can be seen with the One You Shop in Ashford which is supported by stop smoking, health trainers and healthy weight teams, or through the Dover hub model which offers a flexible drop in service offering health checks, lifestyle support and weight loss groups.

Sexual Health

- 2.7. KCC commissions sexual health services which provide clinic sessions and outreach services across the county. There are approximately 6,500 clinic attendances each month which provide testing and treatment of sexually transmitted infections (STIs) and provision of contraception as well as outpatient treatment for people with HIV. The services have continued to ensure rapid access for urgent cases in recent months. All patients requiring an urgent genito-urinary medicine (GUM) appointment have been offered a clinic appointment within 48 hours. A number of important developments over the past two years have prompted some reconfiguration of sexual health services. This has included commissioning services that enable Kent residents to order tests for some STIs online.

- 2.8. Public Health are planning to expand this offer in order to improve online access to sexual health screening, testing and results management and deliver better value for money.

Drug and Alcohol Services

- 2.9. In the 12 months to the end of March 2017, there were 4,616 adults accessing structured drug and alcohol treatment, a decrease on the previous year. 27% of those in treatment successfully completed treatment free from dependence on drugs or alcohol. This was below the target of 30% although performance in Kent is higher than the national average. Achieving sustained recovery from drug and alcohol dependence is a significant challenge for individuals and service providers are continually working to develop ways to provide effective treatment and follow-up support.
- 2.10. Performance on successful completion of treatment has been falling across the country and presents an on-going challenge as services are working with people with increasingly complex needs. KCC has re-commissioned adult drug and alcohol services across the county over the past 18 months and will be working with providers to find innovative ways to meet these needs and to improve rates of successful completion as much as possible.
- 2.11. A separate paper on the Kent Drug and Alcohol Strategy is being presented to the Committee. The strategy includes a clear focus on prevention of problematic drug or alcohol misuse. An example of this prevention work is the *Know Your Score* quiz, an online self-assessment Identification and Brief Advice (IBA) tool, available at kent.gov.uk/knowyourscore. On completion of the quiz an advisory video is shown which is appropriate to the individual's score.
- 2.12. The second wave of campaign activity launched in February 2017 and a number of digital media channels were used, including social media and YouTube. The 8 week activity resulted in 2,790,627 impressions, with 24,566 visits to the webpage, and over 9,000 people completing the quiz. Since the launch of the Know Your Score tool in October 2015, over 15,000 have completed the online quiz.
- 2.13. During 2016/17, 419 young people (under 18) accessed structured drug and alcohol treatment. At the end of Quarter 4, 93% of young people exited treatment in a planned way, having completed treatment free from dependence; where a young person exits treatment in an unplanned way, for example dropping out, the provider has robust actions in place, with appropriate partners, to try and re-engage them back into treatment.

3. Public Health population indicators

- 3.1. The Public Health Outcomes Framework (PHOF) sets out the vision for Public Health nationally and provides a range of measures that can be used to assess public health.

3.2. The table below highlights a number of these measures which relate to current mandated services or key priorities identified in the Public Health business plan.

Table 2: Population measures related to Public Health, RAG against national where published on PHOF

Indicator Description – Population Measures	National	Previous time frame	Recent time frame	DoT
% of pregnant women with a smoking status at time of delivery	11%	14% Q3 15/16	13% Q3 16/17	↑
% excess weight (overweight or obese) in 4-5 year olds	22.1%	22.5% (a) 2014/15	23.0% (r) 2015/16	↔
% excess weight (overweight or obese) in 10-11 year olds	34.2%	32.8% (a) 2014/15	32.9% (g) 2015/16	↔
Rate of conceptions per 1,000 females aged 15-17 years	20.8	22.2 (a) 2014	20.6 (a) 2015	↑
% of adults classified as overweight or obese	64.8%	65.1% (a) 2012-14	65.5% (r) 2013-15	↔
% of smoking amongst persons aged 18 years and over. Current smokers	16.9%	18.6% (a) 2014	17.0% (a) 2015	↑
Suicide Rate, per 100,000	10.1	11.4 (r) 2013-15	12.0 (r) 2013-15	↔

Source: Public Health Outcomes Framework & NCMP Local Authority profiles

3.3. As part of KCC's approach to reducing the number of women who smoke during their pregnancy, a pilot of the maternal smoking campaign called '*What the Bump*' was launched in Swale in February 2017. The campaign will run to August 2017 and will be evaluated by the Strategic Business Development and Intelligence team. The campaign will be implemented across a number of community settings with the support of the Swale CCG and midwifery team.

3.4. *Release the Pressure* is a Public Health campaign which aims to reduce the number of suicides in Kent, targeting males between 20 and 65 years of age. The campaign encourages men who are feeling under pressure to phone a free, confidential helpline, which has trained staff available 24 hours a day 7 days a week. Since the campaign launched initially in March 2016, the Mental Health Matters helpline report a 76% increase in the number of male callers, and a 37% increase in the total number of calls.

3.5. The second phase of the Release the Pressure campaign launched in March 2017. The campaign included a mix of media channels, including those which performed well in the previous campaign, and TV advertising. The campaign activity continued into 2016/17 and the initial 4 weeks of campaign activity resulted in over 6,100 views.

4. Quality Issues

4.1. Quality assurance for KCC Public Health commissioned and provided services is fundamental to delivering safe, high quality services and all commissioners are driving improvements in the quality and safety of commissioned services. The majority of providers are now achieving this.

4.2. There are no exception reports to report this quarter. An Annual Quality Report will be brought to a future meeting.

5. Conclusions

- 5.1. There were improvements in performance across the majority of KCC's commissioned public health services in Q4 2016/17 and performance on all service KPIs was green or amber during the quarter.
- 5.2. Current campaign work is targeting priority areas with the 'Release the Pressure' campaign aimed at reducing male suicides and the 'What the Bump' campaign aimed at working with Women in Swale who smoke during pregnancy.

6. Recommendations

Recommendation: The Health Reform and Public Health Cabinet Committee is asked to:

- i) **NOTE** the Q4 performance of Public Health commissioned services;
- ii) **AGREE** the proposed selection of KPIs to be included in future performance reports for the committee; and
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Background Documents

None

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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 national
(r) RED	Performance is below a pre-defined floor standard; or lower than national
	Performance has improved (by more than 1 point)
	Performance has worsened (by more than 1 point)
	Performance has remained the same (within 1 point either direction)
nca	Not currently available

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.