

**Public Health Directorate****Finance and Performance Report – October 2016****1 SUMMARY****1.1 Finance**

<b>Previous Status</b>	<b>Category</b>	<b>Target</b>	<b>Current Status</b>	<b>Section Ref.</b>
Green	Income and Expenditure	Balanced year end position	<b>Green</b>	2.1

**1.2 Performance Indicators**

<b>Monthly Indicators</b>	<b>Red</b>	<b>Amber</b>	<b>Green</b>	<b>No Status</b>	<b>Total</b>
September (No. of indicators)	9	7	13	6	35

**2. INCOME AND EXPENDITURE****2.1 Overall Position**

<b>Forecast Variance - Outturn (Sep) £000</b>	<b>Directorate</b>	<b>Current Budget for 2016/17 £000</b>	<b>Current Variance £000</b>	<b>Current Variance %</b>	<b>Forecast Variance - Outturn (Oct) £000</b>	<b>Forecast Variance - Outturn (Oct) %</b>
0	Health Improvement	8,459	-175	-4.8%	-190	-2.3%
0	Children Health	9,276	16	-0.3%	0	0%
0	Adult Health & Well Being	916	-50	-16.8%	0	0%
0	Intelligence Team	13	-8	-100.0%	0	0%
0	Health Protection	6	1	22.5.8 %	0	0%
0	Programme Team	136	-37	-45.1%	0	0%
0	Public Health Directorate	2,395	109	7.8%	0	0%
<b>0</b>	<b>Total Expenditure</b>	<b>21,202</b>	<b>-145</b>	<b>-1.4%</b>	<b>-190</b>	<b>-0.9%</b>
0	Public Health Grant	-20,457	-61	-0.4%	0	0%
0	Other Income	-343	165	157.1%	0	0%
<b>0</b>	<b>Total Income</b>	<b>-20,776</b>	<b>104</b>	<b>1.4%</b>	<b>0</b>	<b>0%</b>
	Planned drawdown from Public Health Reserves	-244	-58	-40.3%	0	0%
<b>0</b>	<b>Net Total</b>	<b>182</b>	<b>-99</b>	<b>-1.4%</b>	<b>-190</b>	<b>-104.4%</b>

The service level budgetary control report for October 2016 can be found in [appendix 1](#).

Further analysis of the results can be found in [appendix 2](#).

## **2.2 Significant Issues**

The savings for 2016/17 will be tracked on a monthly basis and any significant issues reported to the Health Committee.

An in year underspend of £190k has been identified in the Stop Smoking and Intervention budgets due to a reduction in activity through pharmacies.

## **2.3 Additional Income and Grant Budgeted this Period (De minimus reporting limit = £160,000)**

The total Public Health ring-fenced grant allocation for 2016/17 is £27.6m, of which £20.457m is allocated directly to the Public Health Directorate.

The allocation of the full Public Health grant is set out in [appendix 3](#).

## **2.4 Virements and Transfers to / from Reserves (including Operational Savings Reserve) (De minimus reporting limit = £160,000)**

There have been no virements made in the year to date, and this can be seen in [appendix 4](#).

## **3. BALANCE SHEET**

### **3.1 Reserves**

A schedule of the Directorate's reserves can be found in [appendix 5](#).

## **4. PERFORMANCE SUMMARY**

### **4.1 Performance overview (Appendix 6)**

- Performance of contract sexual health and contraception service remains good with all monthly key performance indicators achieved.
- Smoking cessation performance, whilst still a red indicator has improved with 85% of the quitter target achieved, compared with 70% the previous month.
- Performance of the Integrated Lifestyles and Weight Management contract remains mixed. From the 15 KPIs that are reported on this month 6 green KPIs, 3 amber KPIs and 6 red KPIs (with 5 of the red indicators on an upward trend).
- There are no changes to the Health Checks KPIs but quarter 2 data is reported on in Appendix 6.
- Health Visiting and School Nursing quarter 2 performance is available. From the 6 KPIs that are reported on we have an improved position of 3 green KPIs and 3 amber KPIs with improved performance around the percentage of infants being breastfed at 6-8 weeks.

### **4.2 Health Committee Priorities (Appendix 7)**

Quarterly reporting due in January 2017

### **4.3 Health Scrutiny Indicators (Appendix 8)**

Quarterly reporting due in January 2017

### **4.4 Public Health Services provided through a Memorandum of Understanding with other Directorates (Appendix 9)**

The update provided remains unchanged from November's Health Committee meeting. Quarterly reporting is due in January 2017.

## APPENDIX 1 – Public Health Directorate Budgetary Control Report

Forecast Variance Outturn (Sep) £'000	Service	Current Budget for 2016/17 £'000	Expected to end of Oct £'000	Actual to end of Oct £'000	Current Variance £'000   %		Forecast Variance Outturn (Oct) £'000   %	
Health Improvement								
0	Sexual Health STI testing & treatment	4,074	1,640	1,571	-69	-4.23%	0	0.00%
0	Sexual Health Contraception	1,170	369	377	8	2.18%	0	0.00%
0	National Child Measurement Programme	0	0	0	0	0.00%	0	0.00%
0	Sexual Health Services Advice Prevention and Promotion	152	90	71	-19	-21.31%	0	0.00%
0	Obesity Adults	0	0	0	0	0.00%	0	0.00%
0	Obesity Children	82	49	41	-8	-16.63%	0	0.00%
0	Physical Activity Adults	84	50	63	13	26.61%	0	0.00%
0	Healthy Lifestyles	1,605	959	918	-40	-4.22%	0	0.00%
0	Physical Activity Children	0	0	0	0	0.00%	0	0.00%
0	1 Stop Smoking Service & Intervention	907	91	-10	-101	-111.08%	-190	-20.95%
0	Wider Tobacco Control	31	19	20	2	10.01%	0	0.00%
0	General Prevention Activities	272	360	409	49	13.71%	0	0.00%
0	Falls Prevention	80	48	39	-9	-18.15%	0	0.00%
0	Dental Health	2	1	0	-1	-100.00%	0	0.00%
0	Health Improvement Total	8,459	3,675	3,500	-175	-4.77%	-190	-2.25%
Children Health								
0	Children 0-5 PH Programme	7,531	3,782	3,782	0	0.00%	0	0.00%
0	Children 5-19 PH Programme	1,745	900	916	16	1.73%	0	0.00%
0	Children Health Total	9,276	4,682	4,698	16	0.33%	0	0.00%
Adult Health & Wellbeing								
0	NHS Health Checks Programme	716	180	211	30	16.89%	0	0.00%
0	Public Mental Health	164	98	39	-59	-60.19%	0	0.00%
0	Comm Safety, Violence Prevention	37	22	0	-22	-100.00%	0	0.00%
0	Adult Health & Wellbeing Total	916	300	249	-50	-16.77%	0	0.00%
Intelligence Team								
0	Public Health Advice	13	8	0	-8	-100.00%	0	0.00%
0	Info & Intelligence Misc	0	0	0	0	0.00%	0	0.00%
0	Intelligence Team Total	13	8	0	-8	-100.00%	0	0.00%
Health Protection								
0	LA Role in Health Protection	0	0	4	4	0.00%	0	0.00%
0	Health Protection Emergency Planning	6	3	0	-3	-100.00%	0	0.00%
0	Health Protection Total	6	3	4	1	22.54%	0	0.00%

Forecast Variance Outturn (Sept) £'000	Service	Current Budget for 2016/17 £'000	Expected to end of Oct £'000	Actual to end of Oct £'000	Current Variance £'000   %		Forecast Variance Outturn (Oct) £'000	
	Programme Team							
0	Obesity Adults	0	0	0	0	0.00%	0	0.00%
0	Stop Smoking no pay staff costs	31	19	9	-10	-53.44%	0	0.00%
0	General Prev, Traveller, Lifestyle	105	63	36	-27	-42.68%	0	0.00%
0	Programme Team Total	136	81	45	-37	-45.13%	0	0.00%
	Public Health Directorate							
0	Health Improvement	633	369	428	59	15.91%	0	0.00%
0	Public Health Advice	742	433	432	-1	-0.19%	0	0.00%
0	Health Protection	182	106	136	30	28.10%	0	0.00%
0	Programme Team	635	370	378	8	2.05%	0	0.00%
0	Childrens Health	76	44	45	1	1.50%	0	0.00%
0	Comm Safety, Violence Prevention	72	42	55	13	30.95%	0	0.00%
0	Public Mental Health	55	32	32	-0	-0.26%	0	0.00%
0	Public Health Directorate total	2,395	1,397	1,506	109	7.78%	0	0.00%
0	Total Expenditure before Carry forward	21,202	10,147	10,002	-145	-1.43%	-190	-0.90%
0	Anticipated contribution to Public Health grant reserve	0	0	0	0	0.00%	0	0.00%
	Funded By							
0	Public Health Grant	-20,457	-17,116	-17,177	-61	-0.36%	0	0.00%
0	S75 Agreement NHSE - HIV	-144	0	144	144	0.00%	0	0.00%
0	Other Income	-175	-105	-84	21	20.00%	0	0.00%
	Drawdown From Reserves	-244	-144	-202	-58	-40.28%		
0	Income Total	-21,020	-17,365	-17,319	46	0.26%	0	0.00%
0	Net Total	182	-7,218	-7,317	-99	-1.37%	-190	-104.40%

## APPENDIX 2 – Commentary on Expenditure Position

Number of budgets measured at service level that have an adverse/positive variance greater than 2% of annual budget or £100,000 whichever is greater.

Service	Current Budget for 2016/17 £'000	Current Variance		Forecast Variance - Outturn	
		£'000	%	£'000	%
<b>(1) Stop Smoking Service &amp; Intervention</b>	<b>907</b>	<b>-101</b>	<b>-111%</b>	<b>-190</b>	<b>-21%</b>
The underspend relates to GP and Community Pharmacy providers of stop smoking who are paid for each quit attempt they support. Their activity has fallen but it is being picked up by the core CAMQUIT Stop Smoking Team. Consequently fewer payments are made. Secondly the Clinical Commissioning Group re-charges Public Health for the prescribed medications that support quit attempts and these invoices have been late.					

### APPENDIX 3 – Grant Income Analysis

The tables below outline the allocation of the full Public Health grant.

#### Awarding Body : DofH

Grant	Business Plan £'000	Adjusted Amount £'000	Outturn Expenditure £'000	Expected / Actual Transfer to PH Reserves	Notes
Public Health Grant as per Business Plan	27,627				Ringfenced grant
Grant allocated as follows;					
Public Health Directorate	20,457		20,457	0	Including full year effect increase due to the Children 0-5 transfer into the LA, the 16/17 confirmed decrease and consolidation of the 15/16 in-year decrease.
CFA Directorate	6,422		6,422	0	
ETE Directorate	327		327	0	
CS&T Directorate	201		201	0	
LGSS Cambridge Office	220		220	0	
<b>Total</b>	<b>27,627</b>		<b>27,627</b>	<b>0</b>	

#### APPENDIX 4 – Virements and Budget Reconciliation

	£'000	Notes
<b>Budget as per Business Plan</b>	20,948	
<b>Virements</b>		
Non-material virements (+/- £160k)	0	
<b>Budget Reconciliation</b>		
<b>Current Budget 2015/16</b>	<b>20,948</b>	

## APPENDIX 5 – Reserve Schedule

Fund Description	Balance at 31 March 2016	2016/17		Forecast Balance at 31 March 2017	Notes
		Movements in 2016/17	Balance at 30 Sep 2016		
	£'000	£'000	£'000	£'000	
<b>General Reserve</b> Public Health carry-forward	1,138	155	983	638	Estimated use of reserves to fund part year 16-17 savings not made, redundancy costs and one off funding agreed for previously MOU funded activity. (Estimated £500k pending review of commitments)
<b>subtotal</b>	<b>1,138</b>	<b>0</b>	<b>983</b>	<b>638</b>	
<b>Equipment Reserves</b> Equipment Replacement Reserve	0	0	0	0	
<b>subtotal</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>Other Earmarked Funds</b> Healthy Fenland Fund	500	0	500	400	Anticipated spend £100k per year over 5 years.
Falls Prevention Fund	400	0	400	200	
NHS Healthchecks programme	270	0	270	170	Estimated spend, depending on timescale of developments.
Implementation of Cambridgeshire Public Health Integration Strategy	850	0	850	770	Anticipated spend on PH Reference Group projects during 2016-17.
Other Reserves (<£50k)	0	0	0	0	
<b>subtotal</b>	<b>2,020</b>	<b>0</b>	<b>2,020</b>	<b>1,445</b>	
<b>TOTAL</b>	<b>3,158</b>	<b>0</b>	<b>3,003</b>	<b>2,083</b>	

(+) positive figures should represent surplus funds.

(-) negative figures should represent deficit funds.

Fund Description	Balance at 31 March 2016	2016/17		Forecast Balance at 31 March 2017	Notes
		Movements in 2016/17	Balance at 30 Sep 2016		
	£'000	£'000	£'000	£'000	
<b>General Reserve</b> Joint Improvement Programme (JIP)	158	-47	111	111	
Improving Screening & Immunisation uptake	9	0	9	9	£9k from NHS ~England for expenditure in Cambridgeshire and Peterborough
<b>TOTAL</b>	<b>158</b>	<b>-24</b>	<b>144</b>	<b>144</b>	

## APPENDIX 6 PERFORMANCE

The Public Health Service Performance Management Framework (PMF) for September 2016 can be seen within the tables below:

	More than 10% away from YTD target
	Within 10% of YTD target
	YTD Target met

	Below previous month actual
	No movement
	Above previous month actual

Measures										
Measure	Y/E Target 2016/17	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous month actual	Current month target	Current month actual	Direction of travel (from previous month)	Comments
GUM Access - offered appointments within 2 working days	98%	98%	98%	98%	G	99%	98%	98%	↓	
GUM ACCESS - % seen within 48 hours ( % of those offered an appointment)	80%	80%	93%	93%	G	95%	80%	93%	↓	
Diverse : % of people newly diagnosed offered and accepted appointments	100%	100%	100%	100%	G	100%	100%	100%	↔	
Access to contraception and family planning (CCS)	7200	3600	5233	145%	G	149%	600	145%	↓	
Number of Health Checks completed	18,000	9,000	7783	87%	R	n/a	4500	87%	↔	<ul style="list-style-type: none"> <li>The comprehensive Improvement Programme is continuing this year. Intelligence from the commissioned social marketing work clearly indicates a lack of awareness in the population of Health Checks. Actual health check numbers compare reasonably well to other areas but the issue is the conversion rate which is attributed to the poor public understanding of the Programme.</li> <li>The introduction of new software into practices has been delayed due to the extensive work that needs to be undertaken to introduce it into the 77 practices. This involves close working with the Clinical Commissioning Group, Information Governance and LGSS. Its purpose is to support the invitation system and to ensure that the data collection system is comprehensive.</li> <li>Other activities include staff training from a commissioned Coronary Heart Disease specialist nurse. Currently working with the CCG to improve the NHS Health Checks performance which it has identified as a target area for improvement..</li> </ul>
Percentage of people who received a health check of those offered	45%	45%	33%	33%	A	n/a	45%	33%	↔	
Number of outreach health checks carried out	2,633	1336	573	43%	R	52%	223	44%	↓	The Lifestyle Service is commissioned to provide outreach Health Checks for hard to reach groups in the community and in workplaces. This commenced in February and started gaining momentum. However due to recruitment delays/changes the number completed has remained low Recruitment has now improved and improvements can be expected.
Smoking Cessation - four week quitters	2249	797	656	82%	R	70%	163	85%	↑	<ul style="list-style-type: none"> <li>The most recent Public Health Outcomes Framework figures (August 2016 data for 2015) suggest the prevalence of smoking in Cambridgeshire has increased slightly in the last few years, returning to a level statistically similar to the England average (16.4% v. 16.9%), although the trend is not statistically significant. Smoking rates in routine and manual workers are consistently higher than in the general population (27.2% in Cambridgeshire), and notably in Fenland where routine and manual smoking rates have returned to a level worse than the average for England (39.8%).</li> <li>There is an ongoing programme to improve performance that includes targeting routine and manual workers and the Fenland area. CamQuit the core Stop Smoking service is providing increasingly higher levels of support to the other providers along with promotional activities. Practices and community pharmacies are regularly visited with poor performers being targeted. Other activities introduced recently include a , a migrant worker Health Trainer who targets the communities where smoking rates are high .</li> <li>It should be noted that quitters are always reduced during the summer holidays. The smoking figures are for August as they are reported two months behind the reporting period.</li> </ul>

Measure	Y/E Target 2016/17	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous month actual	Current month target	Current month actual	Direction of travel (from previous month)	Comments
Percentage of infants being breastfed (fully or partially) at 6 - 8 weeks	58%	58%	56%	N/A	G	56%	58%	57%	↑	A stretch target for the percentage of infants being breastfed was set at 58%, - above the national average for England. The number of infants recorded as breastfed (fully or partially) at 6 weeks for Q2 has increased slightly to 57% in Q2, and the figure is one of the highest statistics in the Eastern region in published Public Health England data (2015/16).
Health visiting mandated check - Percentage of first face-to-face antenatal contact with a HV at >28 weeks	50%	/	47%	N/A	A	47%	50%	38%	↓	Of note, all of the health visiting data is reported quarterly. The data presented presented relates to the Q2 period (Jul - Sept) 2016-2017 and is compared to Q1 2016-2017 data for trend. Since Q1 there has been a fall in the antenatal contacts from 47% completed to 38%, and is due to staffing levels. Priority is being given to those parents who are assessed as being most vulnerable. This KPI will be monitored over the next quarterly period.
Health visiting mandated check - Percentage of births that receive a face to face New Birth Visit (NBV) within 14 days, by a health visitor	90%	90%	96%	N/A	G	96%	90%	96%	↔	
Health visiting mandated check - Percentage of children who received a 6 - 8 week review	90%	90%	94%	N/A	G	94%	90%	94%	↔	94% received a review at 6-8 weeks, well above the 90% targets.
Health visiting mandated check - Percentage of children who received a 12 month review by 15 months	100%	100%	92%	N/A	A	92%	100%	91%	↓	The target of 100% for percentage of children who received a 12 month review by age 15 months has not been met, however if 'not wanted and not attended' figures are included, the figure rises to 96%.
Health visiting mandated check - Percentage of children who received a 2 -2.5 year review	90%	90%	77%	N/A	A	77%	90%	80%	↑	The target of 90% for percentage of children who received a 2-2.5 year review has not been reported as met, although the proportion has increased since the last reporting period. However, if 'not wanted and not attended' figures are included, Q2 figure rises to 91% which falls within a range of 10% tolerance.
School nursing - Number of young people seen for behavioural interventions - smoking, sexual health advice, weight management or substance misuse	N/A	N/A	169	N/A	N/A	168	N/A	20	↓	Whilst this seems a significant drop in the number of young people seen, the Q2 period includes the summer holiday period, where the school nurses are not delivering services in the school settings. Therefore there is expectation that the Q2 data will be significantly lower than any other period
School nursing - number of young people seen for mental health & wellbeing concerns	N/A	N/A	513	N/A	N/A	513	N/A	123	↓	

Measure	Y/E Target 2016/17	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous month actual	Current month target	Current month actual	Direction of travel (from previous month)	Comments
Childhood Obesity (School year) - 90% coverage of children in year 6 by final submission (EOY)	90%	0%	0%	0%	N/A	0%	0%	0%	↔	The National Child Measurement Programme is undertaken during school term times. It is not possible to formulate a trajectory as this is dependent on school timetabling.
Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	90%	0%	0%	0%	N/A	0%	0%	0%	↔	
Personal Health Trainer Service - number of referrals received ( <b>Pre-existing GP based service</b> )	1983	1013	914	90%	A	116%	175	84%	↓	The Countywide Integrated Lifestyle Service provided by Everyone Health has now successfully recruited to all areas The South of the county had been problematic and there was limited Health Trainer service in this area. However staff recruitment was not completed until the end of August. The KPIs that are not on target generally have an upward trend.
Personal Health Trainer Service - number of initial assessments completed ( <b>Pre-existing GP based service</b> )	1686	861	849	99%	A	125%	149	80%	↓	
Personal Health Trainer Service - Personal Health Plans completed ( <b>Pre-existing GP based service</b> )	1075	550	370	67%	R	71%	95	83%	↑	Quarterly reporting. This intervention can take up to one year. Therefore there are cyclical changes and reporting quarterly.
Number of referrals from Vulnerable Groups ( <b>Pre-existing GP based service</b> )	992	508	705	139%	G	151%	88	131%	↓	
Number of physical activity groups held ( <b>Pre-existing GP based service</b> )	581	288	309	107%	G	88%	86	88%	↓	
Number of healthy eating groups held ( <b>Pre-existing GP based service</b> )	290	144	136	94%	A	60%	24	88%	↑	

Measure	Y/E Target 2016/17	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous month actual	Current month target	Current month actual	Direction of travel (from previous month)	Comments
Personal Health Trainer Service - number of referrals received (Extended Service)	739	353	302	86%	R	81%	66	94%	↑	
Personal Health Trainer Service - number of initial assessments completed (Extended Service)	628	298	258	87%	R	106%	56	66%	↓	This reflects the recruitment issue which should shortly be resolved.
Personal Health Trainer Service - Personal Health Plans completed (Extended Service)	400	185	35	19%	R	17%	36	39%	↑	This intervention can take up to one year. Consequently the target KPI s are being reviewed. This is reported quarterly.
Number of physical activity groups held (Extended Service)	578	276	372	135%	G	127%	52	104%	↓	
Number of healthy eating groups held (Extended Service)	726	356	301	85%	R	33%	65	69%	↑	
Number of behaviour change courses held	34	16	5	31%	R	0%	3	33%	↑	Courses not delivered in June, July and August. Five courses set up to be delivered in September and October 2016. 11 courses currently booked over next 3 months.
Proportion of of Tier 2 clients completing the intervention who have achieved 5% weight loss.	30%	30%	34%	113%	G	71%	30%	200%	↑	This is reported quarterly as the intervention takes 3 - 6 months
Proportion of Tier 3 clients completing the course who have achieved 10% weight loss	60%	60%	n/a	n/a	N/A	n/a	n/a	n/a	↑	No data is currently available for 16/17. Each course is a minimum of 6 months

Measure	Y/E Target 2016/17	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous month actual	Current month target	Current month actual	Direction of travel (from previous month)	Comments
% of children recruited who complete the weight management programme and maintain or reduce their BMI Z score by agreed amounts	80%	80%	N/A	N/A	N/A	100%	80%	n/a	↔	No programmes completing in September hence no completers
Falls prevention - number of referrals	386	149	179	120%	G	209%	39	85%	↓	
Falls prevention - number of personal health plans written	279	108	118	109%	G	181%	28	96%	↓	

\* All figures received in October 2016 relate to September 2016 actuals with exception of Smoking Services, which are a month behind and Health Checks, some elements of the Lifestyle Service, School Nursing and Health Visitors which are reported quarterly.

\*\* Direction of travel against previous month actuals

\*\*\* The assessment of RAG status for services where targets and activity are based on small numbers may be prone to month on month variation. Therefore RAG status should be interpreted with caution.

## **APPENDIX 7 – HEALTH COMMITTEE PRIORITIES**

These are presented to Health Committee bi-monthly, with the next set to be presented as part of November F&PR to the January Committee.

## **APPENDIX 8 – HEALTH SCRUTINY INDICATORS**

These are presented to Health Committee bi-monthly, with the next set to be presented as part of November F&PR to the January Committee.

**APPENDIX 9 - PUBLIC HEALTH MOU 2016-17 UPDATE FOR Q2**  
**PUBLIC HEALTH MOU 2016-17 UPDATE FOR Q2**

Directorate	Service	Allocated	Contact	Cost Centre Finance Contact	Q2 Update	YTD expected spend	YTD actual spend	Variance
CFA	Chronically Excluded Adults (MEAM)	£68k	Tom Tallon	MN92145  Stephen Howarth	<p>During quarter two we have started work with four new complex needs clients. Five clients have been closed. Of those three were living more positively and safely and were accommodated, one had left the area and one where CEA could not provide any further assistance. One closed client was now doing some voluntary work.</p> <p>CEA have had information sharing sessions where our approach was discussed with Oxford. We have also had a practice session with Bristol on the theme of engaging with the most marginalised clients.</p> <p>We have recruited and appointed, Heather Yeadon, formerly senior project worker at Wintercomfort to the new post working with the street based community. Heather is due to start at the end of October.</p> <p>A review of our referral process has led to a change in practice with one person, Ben Harwin, now triaging all referrals and allocating after acceptance by the Case Group.</p> <p>Preliminary results from the Peterborough project indicate that savings have been made to the criminal justice system as mirrored with the Cambridgeshire work.</p> <p>CEA have assembled a small working group to look at expansion of the training flat model. We have been asked to present at a Homelesslink event on this work.</p> <p>The first social work student that was placed with the CEA team finished his placement and successfully passed.</p> <p>Following discussions between Making Every Adult Matter (MEAM)</p>	£34,000	£34,000	0

					and CEA, MEAM have asked FTI consultancy to produce a 5 year evaluation of the CEA work. We are currently pulling together the data for this.			
CFA	PSHE KickAsh	£15k	Diane Fenner	CB40101 Jenny Simmons	<ul style="list-style-type: none"> <li>Ten secondary schools in the programme</li> <li>Kick Ash training for secondary school has commenced</li> <li>Primary visits planned for spring term 2-017</li> </ul>	£7,500	£7,500	0
CFA	Children's Centres	£170k	Jo Sollars/ Sarah Ferguson	CE10001 Rob Stephens	<p>The overall aim of Cambridgeshire Children's Centres remains ensuring a healthy start to life for children aged 0-4 and ensuring readiness for school, whilst maintaining a focus on inequalities in the early years, and targeting support which will minimise the need to access specialist services where possible.</p> <p>The Public Health funding is utilised as part of the total Children's Centre budget to improve health of children aged 0-5.</p> <p>Close alignment and joint working with community health colleagues in Health Visiting, Family Nurse Partnership and Maternity Services is established for all Children's Centres. Work continues to ensure arrangements with Health partners are consistent and functionally effective at a community level for families as structural service change is introduced across the system.</p>	£85,000	£85,000	0
CFA	Mental Health Youth Counselling	£111k	Holly Hodge/ Emma De Zoete	CD20901 Clare Andrews	<p>Cambridgeshire Youth Counselling Services:</p> <p>Youth counselling services are provided by Centre 33 and YMCA covering the whole of Cambridgeshire for 12-25 year olds. This quarter's contract monitoring meeting is upcoming.</p> <p>There continues to be a high number of young people accessing these counselling services and responding positively to the interventions offered.</p> <p>As part of a wider re-design of child and adolescent mental health services this service is likely to be re-tendered in 2017. The existing contracts are currently going through the exemption process to be extended for an additional 6-9months. The service will be re-commissioned across Cambridgeshire and Peterborough with additional funding from Peterborough City Council and Cambridgeshire and Peterborough Clinical Commissioning Group.</p>	£55,500	£55,500	0

CFA	CAMH Trainer	£71k	Holly Hodge/ Emma De Zoete	CD20901  Clare Andrews	<p>The CAMH trainer is employed by CPFT and delivers specialist mental health training for a range of roles working with children and young people. Training specifically tailored to the needs of schools is also provided with a new 1 day mental health course for the 2016/17 academic year.</p> <p>Most recent data (July 1016) shows 63 schools and colleges have been engaged in the training programme as shown below:</p> <p><b>2012-16</b></p> <table><tr><th>District</th><th>No. Schools</th><th>%</th></tr><tr><td>Cambridge City</td><td>8</td><td>22</td></tr><tr><td>East Cambridgeshire</td><td>14</td><td>39</td></tr><tr><td>Fenland</td><td>9</td><td>23</td></tr><tr><td>Huntingdonshire</td><td>18</td><td>26</td></tr><tr><td>South Cambridgeshire</td><td>14</td><td>19</td></tr><tr><td>Grand Total</td><td>63</td><td>25</td></tr></table> <p>A range of other courses are run for professionals working with children and young people and attendees have included school nurses, family workers, social workers, young people's workers and health visitors among other roles. A broad range of topics are included within this training for example, understanding and responding to self-harm.</p>	District	No. Schools	%	Cambridge City	8	22	East Cambridgeshire	14	39	Fenland	9	23	Huntingdonshire	18	26	South Cambridgeshire	14	19	Grand Total	63	25	£35,500	£35,500	0
District	No. Schools	%																											
Cambridge City	8	22																											
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Grand Total	63	25																											
CFA	DAAT	£5,980k	Susie Talbot	NB31001- NB31010  Jo D'Arcy	<p>At the end of Qtr 2 there had not been any current spend for the allocated budget for GP Shared Care &amp; Nalmefene, this information is passed through for recharge by PH and to date no information has been received. The inpatient detox beds contract is paid up to end August, Septembers invoice has also now been paid but does not show on the grid, all payments are up to date to the end of Qtr 2. The Service User Contract is also paid to end Qtr 2. Qtr 1 &amp; Qtr 2 80% invoices from Inclusion for the Drug &amp; Alcohol Contracts have been received and paid. We are currently awaiting invoices for the Qtr 1 20% performance element of the contract.</p> <p>Qtr 2 of the young people's contract has now been paid and this will show in Qtr 3's report.</p>	£2,990,000	2,564,890	£425,110																					

					<p>The predicted Q2 spend is based solely on half of the overall allocated budget so the predicted and actual spend will vary during the year depending on when invoices are received however we anticipate the budget will be fully spent by year end.</p> <p>The only exception to this being the Inclusion Contract where the contract is based on 80% in advance quarterly and the remainder 20% performance related which is normally paid during the next quarter following the performance meeting. This is to ensure that Inclusion have met their targets in line with the contract agreement, the 20% performance related invoices are then agreed for payment.</p>			
CFA	Contribution to Anti-Bullying	£7k	Sarah Ferguson		This is a nominal amount and is part of a large budget, it is therefore difficult to pull out exactly what the £7k covers, and difficult to apportion amounts. This will be spend in total.	£3,500	£3,500	0
					<b>SUB TOTAL : CFA Q2</b>	<b>£3,211,000</b>	<b>£2,785,890</b>	<b>£425,110</b>
ETE	Active Travel (overcoming safety barriers)	£55k	Matt Staton	HG03560 Jonathan Trayer	<p>Currently 66 schools are actively engaged in the school travel planning process through STARS. 32 accredited to Bronze level and 2 Gold.</p> <p>Since the beginning of April:</p> <p>Walk Smart has been delivered to 132 pupils            Scoot Smart has been delivered to 1018 pupils            Pedal Smart has been delivered to 120 pupils</p>	£27,500	£27,500	0
ETE	Explore additional interventions for cyclist/ pedestrian safety	£30k	Matt Staton	HG03560 Jonathan Trayer	<p>Partnership campaign 'Let's look out for each other' ran in July</p> <p>Planning is underway for a 'Be Bright Be Seen' promotion after the clocks change in October and into November.</p> <p>Data and intelligence continues to be interrogated to produce a profile for collisions involving cyclists.</p> <p>Discussions have been held with Anglia Ruskin University to see whether any of their research projects looking at eye-tracking and road user behaviour are relevant to cycle safety or if they could be extended to include potential cycle safety elements, particularly in relation to driver search patterns and eye-contact between road users.</p>	£15,000	£15,000	0

ETE	Road Safety	£20k	Matt Staton	HG03560 Jonathan Trayer	<p>17 schools are now signed up to the Junior Travel Ambassador Scheme, including 9 schools who were engaged last academic year.</p> <p>The 8 new schools are appointing JTAs during September/October with the total number expected to reach 80-85 JTAs.</p>	£10,000	£10,000	0
ETE	Trading Standards KickAsh and Alcohol Advice	£23k	Elaine Matthews/ Jill Terrell	LC44590 John Steel	<p><i>A dedicated post has been created to fulfil this funded KickAsh role within Community Protection Team in Community and Cultural Services. This post holder (employed term time only) fulfils the specified activities on behalf of Trading Standards and supports the wider KickAsh team to deliver improved outcomes.</i></p> <p><b>July:</b> Certificates for the 2015/16 mentors. Collating feedback and gathering information for evaluation. Administrative work completing year end reports and setting up systems for school year 2016/17 ahead. Preparation for recruitment of new Year 10 mentors for September.</p> <p>Attended the Safety Zone in Parkside, Cambridge – delivery messages about underage sales and shop policies and sharing information with approximately 450 9-10 year olds about E-cigarettes, the effects of those and tobacco with their health.</p> <p><b>August:</b> School holidays, no work carried out during this month</p> <p><b>September:</b> Launched straight in to the delivery of training to the first pupils recruited to be mentors and take part in the delivery of KickAsh for 2016/17.</p> <p><b>Swavesey Village College:</b></p> <ul style="list-style-type: none"> <li>Met 44 very keen year 10's to deliver the messages of being proud to be smoke free.</li> <li>Enhanced the delivery to include more information on Nicotine Inhaling Products that are becoming more popular with young people and those who are nicotine dependent.</li> </ul> <p><b>Bottisham Village College:</b></p> <ul style="list-style-type: none"> <li>A group of very able and enthusiastic year 10'2 gathered to receive the training. Bottisham VC is one of the link schools that will receive 5 half termly visits to support them to stay on track to deliver messages and events throughout the year.</li> </ul>	£11,500	£10,752	-748

					<p><b>St Peter's College, Huntindon:</b></p> <ul style="list-style-type: none"> <li>Facilitated a group of 14/15 year olds gathered to discuss the issues affecting them and their peers, and to increase their awareness of the effects of smoking in young people.</li> <li>They took part in visits to local shops selling tobacco and nicotine inhaling products, advising shopkeepers of the dangers smoking has on their peers, checking Challenge 25 ID and completing the mentor's questionnaire devised for this purpose.</li> <li>Three members visited three shops to complete the questionnaire and to take part in the Trading Standards Illicit tobacco Awareness roadshow, helping to deliver the messages about plain packaging, illicit tobacco etc.</li> </ul> <p><b>Sir Harry Smith, Whittlesey:</b></p> <ul style="list-style-type: none"> <li>Met with 45+ Year 10's to talk about the KickAsh programme and to deliver the messages about plain packaging, illicit tobacco etc.</li> </ul> <p><b>Other work:</b></p> <ul style="list-style-type: none"> <li>Continued work to support and improve the communication between the school leads and mentors. Developing an individual programme of KickAsh events and expectations for three schools (Cottenham Village College, Longsands Academy, Bottisham Village College), which fall within wider responsibilities for the duration of the year.</li> </ul>			
ETE	Illicit Tobacco	£15k	Aileen Andrews	JM12800 John Steel	<ul style="list-style-type: none"> <li>Following the 6 Magistrates warrants executed late March and all 6 premises yielding illicit tobacco, investigation work was concluded and cases prepared for court with cases in court.</li> <li>Financial Investigations ongoing.</li> <li>The one week illicit tobacco roadshow was during September (not calculated in to the actual spend as part of a regional project).</li> <li>Intelligence work on going and intelligence received about sellers within county during roadshow week. 12,974</li> <li>One premises raided in Wisbech. Hand rolling tobacco seized which was concealed in roof behind a light fitting.</li> <li>The simple caution was signed by takeaway owner</li> </ul>	£7,500	£12,974	£5474

					<p>(mentioned as being offered in quarter one document.)</p> <ul style="list-style-type: none"> <li>5 cases have been through the courts, results – <ol style="list-style-type: none"> <li>Defendant fine reduced to £1500 and victim surcharge £120 after sentencing appeal hearing.</li> <li>Defendant fined £250 and victim surcharge £25.</li> <li>Defendant fined £465</li> <li>Two defendants (directors of one shop) sentenced to 120 hours unpaid work each.</li> <li>One defendant still going through court (hearings in this qtr.) as proceeds of crime hearings taking place.</li> </ol> </li> </ul> <p>Regional Project - Costs not within this allocation. Most of the work going forward will be against the regional tobacco project funding.</p>			
ETE	Business and Communities Team	£10k	Elaine Matthews		<p><b>ETE Shared Priority: Engaging with communities in Fenland</b>  <b>Prioritised work completed by Community Resilience Development Team (CRD) focusing on improving lives in Fenland.</b></p> <p><u>Libraries and Older People project – March town</u>  Bringing together a range of internal and external partners and volunteers who work on front line with older people in March to maximise use of resources, resulting in improved knowledge and intelligence of the service users, increasing knowledge and information for sharing by front line workers for residents on available services and social/local support groups.  Development of a shared 'Older peoples promise', using evaluation of Fenland projects to roll out in 2 new areas.</p> <p><u>Community Green Spaces: Rings End Nature Reserve.</u>  CRD engagement with a large national locally based employer resulted in 120 hours of volunteer time by their employees at Rings End Nature reserve in September. These capable volunteers were joined by learning disability service users and people from the local community and led by our Green Spaces Manager, working together to create new pathways, cleared a large pond, removed overgrown shrubs and trees and built new deadwood fencing which has opened up the nature reserve to far more visitors from the community and schools, learning disability groups and Forest Schools. The company has donated or pledged useful equipment and supplies for the nature reserves, further man power and loan of heavy duty equipment.</p>	£7,300	£7,372	£72

					<p><u>Winter Warmth Packs</u>, inputting to the development of the packs, the distribution and promotion.</p> <p><u>Mental Health support for young people in Fenland</u>  'Shelf Help' Part of the Reading Well Books on Prescription scheme, which provides 13-18 year-olds with high-quality information, support and advice on a wide-range of mental health issues such as anxiety, depression, eating disorders and self-harm, and difficult life pressures, like bullying and exams.</p> <p><u>Dementia Awareness and local support</u>: delivery of sessions and support to Dementia Friends and Dementia Alliance. Increased available information and book collections in all Fenland libraries, running dementia friends sessions across Fenland as part of health &amp; wellbeing training for front line workers and several DF sessions across the district with more planned up to Christmas</p> <p><i>Note: Costs in Q3 and Q4 anticipated to be lower due to planning carried out in Q1 and Q2. Annual spend on target in line with allocation</i></p>			
ETE	Fenland Learning Centres	£90k			Contract awarded and all funds allocated.	£45,000	£45,000	0
					<b>SUB TOTAL : ETE Q2</b>	<b>£123,800</b>	<b>£128,598</b>	<b>£4798</b>
CS&T	Research	£22k	Dan Thorpe	KH50000 Maureen Wright	<p>The funding is used in two parts: To maintain Cambridgeshire Insight Website, which continues the host enhanced content for the JSNA and other PH material.</p> <p>The funding also contributes to the development of our population estimates/forecasts. We are in the process of developing a new set of these and I hope to be able to report in Q3 that this work has been completed.</p>	£11,000	£11,000	0
CS&T	H&WB Support	£27k	Dan Thorpe	KA20000 Maureen Wright	With supervision from the Director of Public Health, approximately 2.5 days per week of the Policy and Projects Officer's time, who site within Policy and Business Support Team of Customer Services and Transformation.	£13,500	£13,500	0

					<p>Support during Q2 has included:</p> <ul style="list-style-type: none"> <li>Supporting the effective functioning of the Health and Wellbeing Board</li> <li>Supporting the effective functioning of the Health and Wellbeing Board Support Group</li> <li>Researching and preparing reports for the Health and Wellbeing Board, including key policy/strategy changes</li> <li>Presenting relevant reports at the Health &amp; Wellbeing Board Support Group meetings, such as on the HWB Working Group</li> <li>Agenda planning for the HWB support group and (working with democratic services) the HWB meetings.</li> </ul> <p>This is in addition to ongoing, reactive support as required.</p>			
CS&T	Communi- cations	£25k	Dan Thorpe	KH60000  Maureen Wright	<p>Q2 Update:</p> <ul style="list-style-type: none"> <li>Supporting a range of campaign developmental work around Stoptober and the Stay Well campaign</li> <li>Supported consultations, such as the Healthy Weight strategy</li> <li>Helped with the development of web resources for the Heads Up website and the PH web presence</li> <li>Provided advice and support in PH steering groups and meetings</li> </ul>	£12,500	£12,500	0
CS&T	Strategic Advice	£22k	Dan Thorpe	KA20000  Maureen Wright	<p>Strategic advice over the second quarter has involved:</p> <ul style="list-style-type: none"> <li>Inputting strategically into the business planning process, e.g. Member workshops, Committee meetings, SMT meetings and CLT meetings – which have all progressed the business planning process</li> <li>Inputting into the ongoing devolution negotiations with Government – and in particular ensuring that the diverse range of needs of this Council (including Public Health) are reflected within those</li> </ul>	£11,000	£11,000	0
CS&T	Emergency Planning Support	£5k	Dan Thorpe	KA40000  Maureen Wright	<p>Ongoing close working with the Health Emergency Planning and Resilience Officer (HEPRO) on a number of Emergency Planning tasks:</p> <ul style="list-style-type: none"> <li>Provision of emergency planning support when the HEPRO is not available</li> <li>Provision of out of hours support for the Director of Public Health (DPH) ensuring that the DPH is kept up to date on any incidents of relevance that occur, or are responded to outside 'normal working hours'</li> </ul>	£2,500	£2,500	0

					<ul style="list-style-type: none"> <li>Review of the Excess Deaths Planning in support of the Pandemic Flu arrangements</li> <li>Collaboration on the Business Continuity arrangements developed for Public Health</li> </ul>			
CS&T	LGSS Managed Overheads	£100k	Dan Thorpe	UQ10000 Maureen Wright	This continues to be supported on an ongoing basis, including: <ul style="list-style-type: none"> <li>Provision of IT equipment</li> <li>Office Accommodation</li> <li>Telephony</li> <li>Members Allowances</li> </ul>	£50,000	£50,000	0
					<b>SUB TOTAL : CS&amp;T Q2</b>	<b>£100,500</b>	<b>£100,500</b>	<b>0</b>
LGSS	Overheads associated with PH function	£220k	Dan Thorpe	QL30000 RL65200 TA76000 Maureen Wright	This covers Public Health contribution towards all of the fixed overhead costs.  The total amount of £220k contains £65k of specific allocations as follows:  Finance £20k HR £25k IT £20k  The remaining £155k is a general contribution to LGSS overhead costs	£110,000	£110,000	0
					<b>SUB TOTAL : LGSS Q2</b>	<b>£110,000</b>	<b>£110,000</b>	<b>0</b>

## SUMMARY

Directorate	YTD (Q2) expected spend	YTD (Q2) actual spend	Variance
CFA	£3,211,000	£2,785,890	£425,110
ETE	£123,800	£128,598	-£4,798
CS&T	£100,500	£100,500	0
LGSS	£110,000	£110,000	0
<b>TOTAL Q2</b>	<b>£3,545,300</b>	<b>£3,124,988</b>	<b>£420,312</b>