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Public Health Directorate

Finance and Performance Report – July 2014

1. SUMMARY

1.1 Finance

Previous Status	Category	Target	Current Status	Section Ref.
-	Income and Expenditure	Balanced year end position	Green	2.1

1.2 Performance Indicators

Monthly Indicators	Red	Amber	Green	No Status	Total
June (No. of indicators)	6	1	10	0	17

2. INCOME AND EXPENDITURE

2.1 Overall Position

Forecast Variance - Outturn (June) £000	Directorate	Current Budget for 2014/15 £000	Current Variance £000	Current Variance %	Forecast Variance - Outturn (July) £000	Forecast Variance - Outturn (July) %
0	Health Improvement	8,962	-310	-13.23%	0	0.0%
0	Children Health	1,730	-59	-10.62%	0	0.0%
0	Adult Health & Well Being	895	-106	-37.89%	0	0.0%
0	Intelligence Team	37	-26	-207.43%	0	0.0%
0	Health Protection	20	-7	-100.0%	0	0.0%
0	Programme Team	189	-30	-58.87%	0	0.0%
0	Public Health Directorate	2,650	-123	-13.9%	0	0.0%
0	Total Expenditure	14,482	-662	-16.0%	0	0.0%
0	Anticipated carry-forward of Public Health grant	0	0	0.0%	0	0.0%
0	Total Income	-14,482	-9	0.1%	0	0.0%
0	Net Total	0	-671	0.0%	0	0.0%

The service level budgetary control report for July 14 can be found in [appendix 1](#).

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

2.2 Significant Issues

There are no significant issues to note at this time. Details of variances from budget at this point in the year are explained at appendix 2.

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

Public Health is funded by a ring-fenced grant in the sum of £22.3m. Of this, £14.5m 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

4.1 The Public Health Service Performance Management Framework (PMF) for June 2014 can be found in Appendix 6.

The following commentary should be read in conjunction with the PMF.

Chlamydia :

- Performance across all services that provide screening remains low or there is no change.
Outreach activity fell temporarily due to concerns about challenges to staff in some outreach environments, and the need to put further procedures in place to ensure staff welfare. More outreach activity is planned that will take advantage of the summer music festivals.
- The Chlamydia Screening Programme targets young people between the age of 15 and 24 years of age. The programme was established in 2005 in response to an increase in the numbers of young people with the sexually transmitted infection chlamydia. Initially the focus was on screening a percentage of the target population each year. This has now changed to identifying and screening young people who are most at risk of being positive for chlamydia to enable them to be treated to decrease the spread of infection in the population. The recommended annual positive diagnosis rate is at least 2,400 per 100,000 15 – 24 year olds per year. Local areas are encouraged to identify their own diagnosis rates based on historical trends.

- The number of young people screened in Cambridgeshire is the highest in the East of England but the County has historically had a low positivity rate which is reflected in the local positivity trajectory for 14/15
- Chlamydia Screening Programme includes screening sites in GP practices, community pharmacies and contraceptive and sexual health services, currently all these services especially GP practices are reporting high positivity rates relative to the outreach part of the Programme. The Programme's strategic approach is to target those most at risk through outreach programmes to capture as many positive screens as possible.

Long Acting Reversible Contraception (LARC):

The Long Acting Reversible Contraception (LARC) targets are based on actual figures achieved in 2013/14. Performance has improved over the past three years and has been consistently exceeding the trajectory. This reflects the improved training programme that has been accessed by primary care staff providing the service. There are two types of LARCs provided. This month the numbers of both LARCs have improved considerably against target. However it is expected that there will be variation in numbers achieved each month. Two LARC training days were provided for primary care staff responsible for providing or referring during June.

Health Checks:

- Health Checks is cardio vascular risk assessment offered to people between the ages of 40 to 74. There is a 5 year rolling programme and each year up to 20% of the eligible population should be invited to a health check. The important indicators are the number of health checks completed and the number of those invited who actually complete a health checks. The Health Checks Programme is provided by GP practices that are responsible for sending out invitations to the eligible population. The main concern has been the low take up of the invitations to a health check.

The final end of year Health Checks data indicated that in Q4 there was an increase in the conversion rate from 39% in Q3 to 45.8%. However the figure for the whole of 13/14 was 40.6%. Nationally it was 49%. In Cambridgeshire 24.7% of the eligible population was offered a health check and 10% of the eligible population had a health check. Nationally the figures were 18.5% and 9%. In terms of overall numbers of health checks the target was 26,959 and 18,256 was achieved

Reporting of Health Checks is quarterly. In 14/15 Q1 76% of the target number of health checks was achieved. Importantly there was a continued improvement in the number of health checks that were converted from offered to complete i.e. 43% from an annual figure of 41%. This represents efforts to encourage practices to improve their style of invitations and to promote the programme generally

This year there is a comprehensive Improvement Programme which involves staff training, new data collection software for practices, awareness campaigns for the public and additional staff support for practices.

Stop Smoking Programme:

- 76% of the stop smoking target for 2013/14 was achieved, a drop from 92% in 12/13. This is reflected in the national trend that is attributed to the use of e cigarettes. The lower level of performance is continuing in 14/15 in Cambridgeshire.

- Performance in GP practices was especially poor and there is an ongoing problem with recruiting smokers to make quit attempts. There is an ongoing programme to improve performance with Camquit the core service providing increasingly higher levels of support to the other providers along with promotional activities. Practices are regularly visited with poor performers being targeted.
- There is considerable concern with the level of smoking in Fenland, with the latest prevalence figure being 29.5% compared to a county figure of 17.9% and a national figure of 19.5%. A wide ranging intervention plan has been developed that will focus upon Fenland. This includes a mobile workplace service, a migrant worker Health Trainer post that will target these communities where smoking rates are high, a wide ranging promotional campaign and recruitment of an additional Stop Smoking Advisor to focus upon Fenland

School Nursing:

- The School Nursing Service is a workforce of specialist public health nurses who provide child-centred expert advice, support and interventions to school age children and their families (the service currently covers 5-16 in Cambridgeshire). School nurses are clinically skilled in providing holistic, individualised and population health needs assessment, with, as a team, a broad range of skills to assess, deliver and refer for a broad range of health interventions,
- Year to date figures for school nursing show a performance on “group attendances” which is within 10% of target and an over-performance on “contacts”. Some variation in school nursing performance may be attributable to school holidays as the service is term-time only.
- The activity monitoring refers to a historical (set before the commissioning of school nursing transferred to the local authority) high-level overall activity indicators.
- Work is currently in progress to develop a set of measures which more accurately reflect school nursing activity as part of the service specification for school nursing. In 2014/15 these data will be used to establish a baseline for future target setting.

Childhood obesity:

- The National Childhood Measurement Programme is undertaken annually over the course of the school year when all children in maintained schools in years 6 and reception are measured. The coverage levels and obesity rates are monitored. Appointments are made with schools but change over the year and the obesity rates are released after the end of the school year when the data has been cleaned. Therefore annual measurements will be reported. The results for the 12/13 year are now available and have the following headlines
 - Participation rates were 95.0% in Reception and 93.1% in Year 6 (England was 94.0% and 92.7% respectively)
 - Reception obesity = 7.5% (9.3% England) - a decrease from 8.0% in 2011/12
 - Year 6 obesity = 15.8% (19.2% England) - a decrease from 16.3% in 2011/12. Both have also decreased nationally.
 - Fenland remains the highest for obesity prevalence - but saw a noticeable decrease between 2011/12 and 2012/13 in Reception prevalence (12.2% to 9.4%) and Year 6 prevalence (22.3% to 18.9%). Hunts experienced an increase in Year 6 prevalence between the two years from 15.8% to 17.1%.
- The 2013/14 Measurement Programme is nearing completion and the 90% coverage target has already been met

Health Trainer Service

- The Health Trainer Service is a lifestyle service focusing on supporting people to make healthy lifestyle changes. Based in GP practices found in the 20% most deprived areas, the last Health Trainer contractual year ran from November 2012 to October 2013. Performance data from November – April 2014 indicates this over performed, which has been generally maintained. The area where the performance is lower is the number of personal health plans completed. This could reflect the high number of clients from high risk/deprived populations who often require support for longer periods. as a client may see a health trainer for up to year.

Although there has been some fall in performance it is generally good which reflects the on-going new types of initiatives that the service provides which includes new ways of working with GP practices and the use of social media and the wider community activities.

4.2 The detailed Service performance data can be found in [appendix 6](#).

APPENDIX 1 – Public Health Directorate Budgetary Control Report

Forecast Variance Outturn (June) £'000		Service	Current Budget for 2014/15 £'000	Expected to end of July £'000	Actual to end of July £'000	Current Variance		Forecast Variance Outturn (July)	
						£'000	%	£'000	%
Health Improvement Directorate									
0	2	Sexual Health STI testing & treatment	4,632	1,278	1,256	-21	-1.7%	0	0.0%
0		Sexual Health and Contraception	1,147	288	267	-20	-7.0%	0	0.0%
0		National Child Measurement Programme	86	30	28	-2	-5.5%	0	0.0%
0		Sexual Health Services Prevention and Promotion	256	97	32	-65	-66.9%	0	0.0%
0		Obesity Adults	312	108	97	-10	-9.7%	0	0.0%
0		Obesity Children	182	44	38	-6	-12.9%	0	0.0%
0		Physical Activity Adults	97	46	46	0	0.0%	0	0.0%
0		Physical Activity Children	0	0	0	0	0.0%	0	0.0%
0	1	Stop Smoking Service & Intervention	1,260	270	122	-148	-54.7%	0	0.0%
0		Wider Tobacco Control	31	0	0	0	0.0%	0	0.0%
0		General Prevention Activities	909	185	147	-38	-20.5%	0	0.0%
0		Dental Health	51	0	0	0	0.0%	0	0.0%
0		Health Improvement Total	8,962	2,345	2,035	-310	-13.2%	0	0.0%
Children Health Directorate									
0		Children 5-19 PH Programme	1,730	557	498	-59	-10.6%	0	0.0%
0		Children Health Total	1,730	557	498	-59	-10.6%	0	0.0%
Adult Health & Wellbeing Directorate									
0		NHS Health Checks Programme	757	189	83	-106	-56.1%	0	0.0%
0		Public Mental Health	102	55	55	0	0.0%	0	0.0%
0		Community Safety, Violence Prevention	36	36	36	0	0.0%	0	0.0%
0		Adult Health & Wellbeing Total	895	280	174	-106	-37.9%	0	0.0%
Intelligence Team Directorate									
0		Public Health Advice	15	5	1	-4	-76.0%	0	0.0%
0		Info & Intelligence Misc	21	7	-15	-22	-301.9%	0	0.0%
0		Intelligence Team Total	37	13	-14	-26	-207.4%	0	0.0%
Health Protection									
0		LA Role in Health Protection	15	5	0	-5	-100.0%	0	0.0%
0		Health Protection Emergency Planning	5	2	0	-2	-100.0%	0	0.0%
0		Health Protection Total	20	7	0	-7	-100.0%	0	0.0%
Programme Team Directorate									
0		Obesity Adults	36	9	11	3	29.5%	0	0.0%
0		Stop Smoking no pay staff costs	31	11	5	-6	-55.7%	0	0.0%
0		General Prevention, Traveller, Lifestyle	122	32	5	-27	-84.3%	0	0.0%
0		Programme Team Total	189	51	21	-30	-58.9%	0	0.0%

Forecast Variance Outturn (June) £'000	Service	Current Budget for 2014/15 £'000	Expected to end of July £'000	Actual to end of July £'000	Current Variance		Forecast Variance Outturn (July)	
					£'000	%	£'000	%
Public Health Directorate								
0	Health Improvement	443	147	141	-6	-4.1%	0	0.0%
0	Public Health Advice	855	285	218	-67	-23.5%	0	0.0%
0	Health Protection	145	48	29	-19	-39.6%	0	0.0%
0	Programme Team	1,019	340	324	-16	-4.7%	0	0.0%
0	Childrens Health	62	21	19	-2	-9.5%	0	0.0%
0	Comm Safety, Violence Protection	31	10	10	0	0.0%	0	0.0%
0	Public Mental Health	95	32	19	-13	-40.6%	0	0.0%
0	Public Health Total	2,650	883	760	-123	-13.9%	0	0.0%
0	Total Expenditure before Carry forward	14,482	4,136	3,474	-662	-16.0%	0	0.0%
0	Carry forward of Public Health grant	0	0	0	0	0.0%	0	0.0%
Funded By								
0	Public Health Grant	-14,443	-7,222	-7,231	-9	0.1%	0	0.0%
0	Other Income	-39	0	0	0	0.0%	0	0.0%
0	Income Total	-14,482	-7,222	-7,231	-9	0.1%	0	0.0%
0	Net Total	0	-3,086	-3,757	-671	-	0	0.0%

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 2014/15 £'000	Current Variance		Forecast Variance - Outturn	
		£'000	%	£'000	%
1) Stop Smoking Service & Intervention	1,260	-148	-54.7%	0	0.0%
The variance on Stop Smoking Service & Intervention has arisen from underperformance which has meant an over accrual in 2013/14 for end of year payments. There are some payments outstanding (midwife) which will reduce this variance.					
2) NHS Health Checks Programme	757	-106	-56.1%	0	0.0%
Invoices are expected which will reduce the variance, including payment for near patient testing.					

APPENDIX 3 – Grant Income Analysis

The table below outlines the allocation of the full Public Health grant.

Grant	Awarding Body	Expected Amount £'000
Public Health Grant as per Business Plan	DofH	22,299
Grant allocated as follows;		
Public Health Directorate		14,443
Children, Families & Adults Services		
Making Every Adult Matter		93
Community Navigators		119
Age UK Contract		51
Older People Day Services		51
Housing Related Support		51
Public Health Researcher		20
Personal, Social & Health Education		56
Children Centres		170
Mental Health Youth Counselling		111
Child & Adolescent Mental Health Trainer		71
Teenage Pregnancy		58
Drug & Alcohol Action Team		6,010
Changing Behaviours of Staff in CCC		92
Economy, Transport & Environment Services		
Road Safety – Campaigns for Children		230
Road Safety – Accident awareness signs		20
Trading Standards – Kick Ash		31
Trading Standards – Alcohol underage sales		15
Trading Standards – Grants to encourage sporting activities		25
Trading Standards – Arts/Museums, to support wellbeing, social inclusion etc		20
Other Trading Standards initiatives		36
Registration & Library Service promotions		10
Changing Behaviours of Staff in CCC		31

Grant	Awarding Body	Expected Amount £'000
Corporate Services		
Research		51
Health & Wellbeing Board Support		26
Contact Centre		20
Overhead functions on behalf of Public Health		102
Changing Behaviours of Staff in CCC		31
Overheads associated with Public Health function (LGSS Managed)		100
LGSS Cambridge Office		
Overheads associated with Public Health function		155
Total Public Health Grant		22,299

APPENDIX 4 – Virements and Budget Reconciliation

	£'000	Notes
Budget as per Business Plan	14,482	
Non-material virements (+/- £160k)	0	
Current Budget 2014/15	14,482	

APPENDIX 5 – Reserve Schedule

Fund Description	Balance at 31 March 2014	2014/15		Forecast Balance at 31 March 2015	Notes
		Movements in 2014/15	Balance at 31 July 14		
	£'000	£'000	£'000	£'000	
General Reserve					
Public Health carry-forward	749	0	749	749	
subtotal	749	0	749	749	
Equipment Reserves					
Equipment Replacement Reserve	0	0	0	0	
subtotal	0	0	0	0	
Other Earmarked Funds					
Other Reserves (<£50k)	0	0	0	0	
subtotal	0	0	0	0	
SUB TOTAL	749	0	749	749	

(+) positive figures should represent surplus funds.

(-) negative figures should represent deficit funds.

It should be noted that £237k of the ring-fenced Public Health grant was carried forward by other service areas into 2014/15.

Appendix 6 – Performance – See chart on following page

The Public Health Service Performance Management Framework (PMF) for June 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

HEALTH IMPROVEMENT												
Service		Measures										
	Overall RAG status	Measure	Y/E Target 2014/15	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
Sexual Health & Family Planning : Treating and caring for people in a safe environment and protecting them from avoidable harm	R	Prevalence of Chlamydia. Number of positive screens.	631	152	102	67%	R	67%	57	68%	↑	10% tolerance
		Chlamydia Screening - includes GP, CASH, Pharmacy and Outreach	14427	3509	2576	73%	R	81%	1312	69%	↓	Information based on attendances. Outreach team activity was temporarily reduced following changes to procedures.
		GUM Access - Clinic 6 Oaktree Centre - 90% within 2 working days	90%	90%	98%	98%	G	99%	90%	97%	↔	Information based on attendances. Currently achieving 100% of target set.
		LARC - access to long acting reversible contraception - Implanon Insertion	3098	806	663	82%	R	69%	232	125%	↑	2013/14 targets were exceeded
		LARC - access to long acting reversible contraception - IUCD Insertion	3204	804	746	93%	G	92%	298	93%	↑	
		Access to contraception and family planning	7088	3404	3385	99%	G	111%	1060	108%	↓	
Health Improvement: Caring for people and assisting in improving all aspects of their general wellbeing	A	Number of Health Checks completed	20000	5000	3790	76%	R	n/a	5000	76%	↑	Information reported quarterly
		Percentage of people who received a health check of those offered	50%	42%	43%	43%	G	n/a	42%	43%	↑	This provides information about the promotion of the Programme and patient engagement
		Smoking Cessation - four week quitters	3600	631	344	55%	R	54%	631	55%	↑	Figures shown are for May 2014. A quit attempt and data follow up means a two month delay in reporting
		School Nursing : Contacts made	8125	2083	2528	121%	G	143%	833	121%	↓	Reduction in activity expected around the school holiday periods
		School Nursing : Group activities	4784	1227	1117	91%	G	179%	491	78%	↓	
		Childhood Obesity (School year) - 90% coverage of children in year 6 by final submission (EOY)	90%	90%	94%	104%	G	92%	90%	104%	↔	This is reported on Annually. This data is the final for the 2012/13 academic year
		Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	90%	90%	95%	105%	G	92%	90%	105%	↔	
		Personal Health Trainer Service - number of referrals received	2205	1470	1325	90%	A	99%	184	86%	↓	
		Personal Health Trainer Service - number of initial assessments completed	1874	1249	1268	102%	G	89%	156	103%	↑	1-12 months intervention period. Figures are based on a rolling performance.
		Personal Health Trainer Service - Personal Health Plans completed	1115	743	611	82%	R	82%	93	84%	↑	Figures are based on a rolling performance.
		Number of referrals from Vulnerable Groups	661	441	702	159%	G	201%	56	189%	↓	

* All figures received in July, relate to June actuals.

** 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.