From: Martin Wade

Tel.: 01223 699733

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Public Health Directorate

Finance and Performance Report – May 2018

1 <u>SUMMARY</u>

1.1 Finance

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

1.2 Performance Indicators

Monthly Indicators	Red	Amber	Green	No Status	Total
Apr (No. of indicators)	7	5	16	2	30

2. INCOME AND EXPENDITURE

2.1 Overall Position

Forecast Outturn Variance (Apr)	Service	Budget for 2018/19	Actual to end of May 18	Forecast Outturn Variance	Forecast Outturn Variance
£000		£000	£000	£000	%
-	Children Health	9,266	-14	0	0%
-	Drug & Alcohol Misuse	5,625	155	0	0%
-	Sexual Health & Contraception	5,157	120	0	0%
-	Behaviour Change / Preventing				
	Long Term Conditions	3,812	-206	0	0%
-	Falls Prevention	80	0	0	0%
-	General Prevention Activities	56	19	0	0%
-	Adult Mental Health &				
	Community Safety	256	0	0	0%
-	Public Health Directorate	2,019	265	0	0%
-	Total Expenditure	26,271	339	0	0%
-	Public Health Grant	-25,419	-6,563	0	0%
-	s75 Agreement NHSE-HIV	-144	144	0	0%
-	Other Income	-40	-0	0	0%
-	Drawdown From Reserves	-39	0	0	0%
-	Total Income	-25,642	-6,419	0	0%
-	Net Total	629	-6,080	0	0%

The service level budgetary control report for 2018/19 can be found in appendix 1.

Further analysis can be found in appendix 2.

2.2 Significant Issues

A balanced budget has been set for the financial year 2018/19. Savings totalling £465k have been budgeted for and the achievement of savings will be monitored through the monthly savings tracker, with exceptions being reported to Heath Committee and any resulting overspends reported through this monthly Finance and Performance Report.

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

The total Public Health ring-fenced grant allocation for 2017/18 is £26.253m, of which £25.541m 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)

Details of virements made this year can be found in <u>appendix 4</u>.

3. BALANCE SHEET

3.1 Reserves

A schedule of the Directorate's reserves can be found in <u>appendix 5</u>.

4. **PERFORMANCE SUMMARY**

4.1 Performance overview (Appendix 6)

The performance data reported on relates to activity in April 2018.

Sexual Health (KP1 & 2)

Performance of sexual health and contraception services remains good with all indicators green and an upwards trajectory.

Smoking Cessation (KPI 5)

This service is being delivered by Everyone Health as part of the wider Lifestyle Service. Performance indicators for people setting and achieving a four week quit have moved to Amber which an upward trajectory. Appendix 6 commentary provides analysis of the year end target position and provides further explanations.

National Child Measurement Programme (KPI 14 & 15)

- Performance remains good with both indicators green with an upward trajectory.
- Measurements for the 2018/19 programme are taken during the academic year and the programme will re-commence in September 2018.

NHS Health Checks (KPI 3 & 4)

- The data presented for the NHS Health Checks is the end of year position for 2017/18. Both indicators for the number of health checks completed by GPs and the outreach health checks are red.
- The commentary in Appendix 6 provides a year end explanation.

Lifestyle Services (KPI 5,16-30)

- There are now 16 Lifestyle Service indicators reported on, the overall performance is very good and shows 11 green, 3 amber and 2 red indicators. Appendix 6 provides further explanation on the red indicators for the personal health trainer service and physical activity groups held.
- Direction of travel from the previous month is mixed with 8 indicators moving up.

Health Visitor and School Nursing Data (KPI 6-13)

The performance data provided is the same data presented in the April 2018 report. Health Visiting and School Nursing data is reported on quarterly and the data provided reflects the Quarter 4 period for 2017/18 (Jan-March).

- The new data for Quarter 4 shows 1 green, 3 amber and 2 red indicators (KPI data is not available at this time for indicators 12 & 13 school nursing but the commentary provides an update)
- Performance for Health Visiting mandated checks for 6-8 weeks is amber but Cambridgeshire does exceed the national average for this visit. The performance indicator for Health Visiting mandated check at 2- 2 ½ years is red but includes data from checks that are not wanted resulting in a high did not attend rate. The commentary provides further explanation to the analysis and plans to address this in the immediate future.
- Breastfeeding prevalence rates fluctuate but are higher than the national average. Details of localised actions to increase breastfeeding are provided in the commentary.

4.2 Health Committee Priorities

Priorities identified on 7 September 2017 are as follows:

- Behaviour Change
- Mental Health for children and young people
- Health Inequalities
- Air pollution
- School readiness
- Review of effective public health interventions
- Access to services.

4.3 Health Scrutiny Indicators

Priorities identified on 7 September 2017 are as follows

- Delayed Transfer of Care (DTOCs)
- Sustainable Transformation Plans
 - > Work programme, risk register and project list
 - Workforce planning
 - Communications and engagement
 - Primary Care developments

The Health Committee has requested routine monthly data reports on the "Fit for the Future" programme circulated prior to meetings, these are being received sporadically. The remaining scrutiny priorities around communications and engagement and Primary Care Developments requires further consideration from the committee on reporting requirements.

4.4 Public Health Services provided through a Memorandum of Understanding with other Directorates (Appendix 7)

All Quarter 4 reports for the Public Health MOU services are now complete and included in Appendix 7. Spend is in line with expectations and no year end variances are reported. The MOU 2017-18 documentation has been approved and signed off via internal audit. Appendix 7 provides further details of MOU spend.

Previous Actual to Budget Outturn Outturn end of Service 2018/19 Forecast (Apr) May £'000 £'000 £'000 £'000 % **Children Health** 0 Children 0-5 PH Programme 7,253 0 0 0% Children 5-19 PH Programme -0 1,706 0 -14 0% Non Prescribed 0 **Children Mental Health** 307 0 0 0% 0 -14 0 **Children Health Total** 9,266 0% **Drugs & Alcohol** 0 **Drug & Alcohol Misuse** 5,625 155 0 0% 0 **Drugs & Alcohol Total** 155 0 5,625 0% **Sexual Health & Contraception** SH STI testing & treatment -0 3,829 101 0 0% Prescribed SH Contraception - Prescribed 0 1,176 -20 0 0% SH Services Advice Prevn Promtn 152 0 39 0 0% - Non-Presribed Sexual Health & 0 0 5,157 120 0% **Contraception Total Behaviour Change / Preventing** Long Term Conditions Integrated Lifestyle Services 0 2,062 -23 0 0% Other Health Improvement 77 0 0 299 0% Smoking Cessation GP & 0 735 -166 0 0% Pharmacy NHS Health Checks Prog -0 716 -95 0 0% Prescribed **Behaviour Change / Preventing** 3,812 -206 0 0 0% Long Term Conditions Total **Falls Prevention** 0 **Falls Prevention** 80 0 0 0% 0 **Falls Prevention Total** 56 19 0 0% **General Prevention Activities** General Prevention, Traveller 19 0 0 56 0% Health **General Prevention Activities** 0 Total 56 19 0 0% **Adult Mental Health & Community** Safety Adult Mental Health & Community 0 256 0 0 0% Safety Adult Mental Health & 0 256 0 0 0% **Community Safety Total**

APPENDIX 1 – Public Health Directorate Budgetary Control Report

Previou s Outturn (Apr)	Service	Budget 2018/19	Actual to end of May	Outt Foree	
£'000		£'000	£'000	£'000	%
	Public Health Directorate	1			
0	Children Health	189	28	0	0%
0	Drugs & Alcohol	287	34	0	0%
0	Sexual Health & Contraception	163	21	0	0%
0	Behaviour Change	753	99	0	0%
0	General Prevention	199	30	0	0%
0	Adult Mental Health	36	5	0	0%
0	Health Protection	53	9	0	0%
0	Analysts	339	39	0	0%
0	-	2,019	265	0	0%
0	Total Expenditure before Carry forward	26,271	339	0	0%
0	Anticipated contribution to Public Health grant reserve	0	0	0	0.00%
	Funded By				
0	Public Health Grant	-25,419	-6,563		0%
0	S75 Agreement NHSE HIV	-144	144		0%
0	Other Income	-40	0		0%
	Drawdown From Reserves	-39	0		0%
0	Income Total	-25,642	-6,419	0	0%
0	Net Total	629	-6,080	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	Budget 2018/19	Forecast Outturn Variance					
	£'000	£'000	%				

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	Notes
Public Health Grant as per Business Plan	26,253	26,253	Ring-fenced grant
Grant allocated as follows;			
Public Health Directorate	25,419	25,419	
P&C Directorate	283	283	
P&E Directorate	130	130	
CS&T Directorate	201	201	
LGSS Cambridge Office	220	220	
Total	26,253	26,253	

APPENDIX 4 – Virements and Budget Reconciliation

	£'000	Notes
Budget as per Business Plan		
Virements		
Non-material virements (+/- £160k)		
Budget Reconciliation		
Current Budget 2018/19		

APPENDIX 5 – Reserve Schedule

	Balance	2018	/19	Forecast	
Fund Description	at 31 March 2018	Movements in 2018/19	Balance at end May 2018	Closing Balance	Notes
	£'000	£'000	£'000	£'000	
General Reserve Public Health carry-forward	1,040	0	1,040	1,040	
subtotal	1,040	0	1,040	1,040	
Other Earmarked Funds					
Healthy Fenland Fund	300	0	300	200	Anticipated spend £100k per year over 5 years.
Falls Prevention Fund	378	0	378	259	Planned for use on joint work with the NHS in 2017/18 and 2018/19.
NHS Healthchecks programme	270	0	270	270	This funding will be used to install new software into GP practices which will identify patients for inclusion in Health Checks. The installation work will commence in June 2017. Funding will also be used for a comprehensive campaign to boost participation in NHS Health Checks.
Implementation of Cambridgeshire Public Health Integration Strategy	579	0	579	300	£517k Committed to the countywide 'Let's Get Moving' physical activity programme which runs for two years from July 2017-June 2019.
subtotal	1,527	0	1,527	1,029	
TOTAL	2,567	0	2,567	2,069	

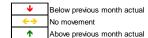
(+) positive figures should represent surplus funds.(-) negative figures should represent deficit funds.

	Balance	2018/ [,]	19	Forecast			
Fund Description	at 31 March 2018	Movements in 2018/19	Balance at end May 2018	Closing Balance	Notes		
	£'000	£'000	£'000	£'000			
General Reserve Joint Improvement Programme (JIP)	136	0	136	136			
Improving Screening & Immunisation uptake	9	0	9	9	£9k from NHS ~England for expenditure in Cambridgeshire and Peterborough		
TOTAL	145		145	145			

APPENDIX 6 PERFORMANCE



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



The Public Health Service Performance Management Framework (PMF) for Apr 2018 can be seen within the tables below:

									_	Measur	es	
KPI no.	Measure	Period data relates to	Y/E Target 2018/19	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous period actual	Current period target	Current period actual	Direction of travel (from previous period)	Comments
1	GUM Access - offered appointments within 2 working days	Apr-18	98%	98%	100%	102%	G	99%	98%	100%	←→	
2	GUM ACCESS - % seen within 48 hours (% of those offered an appointment)	Apr-18	80%	80%	93%	116%	G	89%	80%	93%	1	
3	Number of Health Checks completed (GPs)	Mar-18	18,000	18,000	15962	89%	R	74%	4500	106%	1	This is the end of year data for 2017 18. Data is captured quarterly, Q1 for 2018 19 will be available in July 2018. The conversion rate for those who are invited and go on to have a completed health Check has increased to 53% from 38% in the previous year. These changes reflect much improved data processes. Data in previous years was not always robust and but this year improved data capture methods have ensured the final figures better reflect the actual activity
4	Number of outreach health checks carried out	Apr-18	2,200	198	81	41%	R	N/A	198	41%	←→	Outreach Health Checks are provided by the Lifestyle Service. Data reporting is for Fenland and the rest of the county. The main need is in Fenland which also has presented a challenge in engaging the target high risk groups. However there has been a steady improvement and the Fenland target has been achieved this month. The poor performance reflects the rest of the county. Efforts have been focused upon Fenland and consequently capacity across the rest of the county has been compromised.
5	Smoking Cessation - four week quitters	Mar-18	2278	2278	2090	92%	A	76%	190	94%		Although there was some recovery from a dip in performance the end of year target was not achieved. There has been a fall in GP and Community Pharmacy activity. Some of this activity has been picked up by the Core Service. However long-term sickness and staff turnover has compromised its capacity. The Core Service did achieve its target. The most recent Public Health Outcomes Framework figures (June 2017 data for 2016) suggest the prevalence of smoking in Cambridgeshire remains at a level statistically similar to the England average (15.2% v. 15.5%). Rates remain higher in Fenland (21.6%) than the Cambridgeshire and England figure.

KPI no.	Measure	Period data relates to	Y/E Target 2018/19	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous period actual	Current period target	Current period actual	Direction of travel (from previous period)	Comments
6	Percentage of infants being breastfed (fully or partially) at 6 - 8 weeks	Q4 Jan-Mar 2018	56%	56%	53%	53%	A	49%	56%	50%	↑	The breastfeeding prevalence target has been set locally 56%, although performance against this fluctuates. The target has been missed over the last three quarters, including this quarter but remains within the 10% tolerance limit. Over the 2017/18 period the breastfeeding prevalence is an average of 53.25%. The Health Visitor Infant Feeding Lead is developing an action plan to address localised issues where breastfeeding rates are below target. The breastfeeding rates in Cambridgeshire are higher than the national breastfeeding rates (national average 44%), however prevalence will continue to be monitored closely, with the aim of achieving the 56% target.
7	Health visiting mandated check - Percentage of first face-to-face antenatal contact with a HV at >28 weeks	Q4 Jan-Mar 2018	50%	50%	25%	25%	R	22%	50%	20%	¥	In Cambridgeshire a local target has been set for 50%, with the longer term goal of achieving a target of 90% in 2 years. The contact is currently low as it is currently targeted at first time mothers and those who are vulnerable, rather than universally offered. Additionally, the notification process between Midwifery and the Healthy child programme (HCP) has not been robust and poses a challenge in achieving the target. Since the last quarter, a locality workshop has been held to engage with the staff on how to work differently in order to build capacity to meet this mandated target. The provider clinical lead and service lead are working with the acute midwifery units to establish an electronic notification system so that there is assurance that health visitors are notified of every expectant woman to enable the ante natal contact to take place. Furthermore Health Visitors are being asked to complete incident forms when a new birth visit is carried out but they weren't notified of the pregnancy to understand the extent of the problem.
8	Health visiting mandated check - Percentage of births that receive a face to face New Birth Visit (NBV) within 14 days, by a health visitor	Q4 Jan-Mar 2018	90%	90%	95%	95%	G	94%	90%	96%	↑	The 10 - 14 new birth visit remains consistent each month and numbers are well within the 90% target.
9	Health visiting mandated check - Percentage of children who received a 6 - 8 week review	Q4 Jan-Mar 2018	90%	90%	88%	88%	A	88%	90%	84%	¥	The performance for the 6 - 8 week reviewhas fallen to 84%. A staffing deficit in East Cambs & Fenland and Cambridge City has affected the overall performance this quarter. Engagement workshops undertaken in April was undertaken to support staff to work consistently across caseloads, including the implementation of a review tool which will support staff to focus work where there are identified health needs, thus increasing capacity to support mandated contacts. The provider achieved an average of 88% over 2017/18, and Cambridgeshire continues to exceed the national average for this visit, which in 2016/17 was 82.5%.
10	Health visiting mandated check - Percentage of children who received a 12 month review by 15 months	Q4 Jan-Mar 2018	100%	95%	85%	85%	A	81%	95%	85%	↑	The 12 month visit by 15 months has increased this quarter from 81% to 85%. Service Leads will review this assessment with the staff to ensure that the planning of this development assessment is completed within a 12 month timeframe, to ensure that this target is achieved.
11	Health visiting mandated check - Percentage of children who received a 2 -2.5 year review	Q4 Jan-Mar 2018	90%	90%	79%	79%	R	80%	90%	77%	¥	The number of two year old checks completed this quarter is 77%. If data is looked at in terms exception reporting, which includes parents who did not want/attend the 2 year check then the average percentage achieved for this quarter increases to 90%. During quarter 4,144 appointments were not wanted and 116 were not attended. Performance in March has reduced the overall figures for this quarter as only 67% checks were completed. Three Nursery Nurses were supported during this period to undertake their nurse training, resulting in reduced staffing capacity in March. Moving forward, to ensure that the 2 year old checks are completed, additional staff hours are being offered and positions are being advertised for bank staff to fill this shortfall in the interim.
12	School nursing - Number of young people seen for behavioural interventions - smoking, sexual health advice, weight management or substance misuse	Q4 Jan-Mar 2018	N/A	N/A	249	N/A	N/A	81	N/A	29	N/A	The School Nursing service has introduced a duty desk to offer a more efficient and accessible service, which does mean that there is an expected reduction in children and young people attending clinic based appointments in school. This figure is only representative for those seen in clinics. The duty desk has received 1082 calls during the quarter 4 period and feedback from school regarding the introduction of the duty desk has been positive, identifying the value of immediate access to staff for support, referral and advise. Chat Health has also been introduced, a text based support for children and young people. This service is now starting to establish itself, in increasing access to health support and advise for young people. Following the promotion of the service, there has been an increase in usage.
13	School nursing - number of young people seen for mental health & wellbeing concerns	Q4 Jan-Mar 2018	N/A	N/A	2381	N/A	N/A	666	N/A	385	N/A	By far the largest number of referrals is for mental health and wellbeing, which is mirroring a national trend. To address staffing and capacity issues, an action plan has been implemented, including the county wide duty desk and the Chat Health service, which offers text based support to young people and launched in March. This quarter has witnessed the introduction of CHUMS Counselling and Talking Therapies service and Emotional Wellbeing Practitioners. It is anticipated that these organisations will work with the School Nursing team to reduce pressures. The reduction in the volume of pupils seen this quarter for emotional health concerns may be attributed to this.

KPI no.	Measure	Period data relates to	Y/E Target 2018/19	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous period actual	Current period target	Current period actual	Direction of travel (from previous period)	Comments
14	Childhood Obesity (School year) - 90% coverage of children in year 6 by final submission (EOY)	Apr-18	90%	90.0%	72.0%	80%	G	68.0%	90.0%	72.0%	1	
15	Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	Apr-18	90%	90.0%	70.0%	78%	G	58.0%	90.0%	70.0%	←	
15	Overall referrals to the service	Apr-18	5610	505	980	194%	G	106%	425	194%	♠	
17	Personal Health Trainer Service - number of Personal Health Plans produced (PHPs) (Pre-existing GP based service)	Apr-18	1670	150	282	188%	G	91%	150	188%	♠	
18	Personal Health Trainer Service - Personal Health Plans completed (Pre-existing GP based service)	Apr-18	1252	113	109	96%	A	158%	113	96%	♦	It is not always possible to predict monthly completion numbers as it reflects client preference for the period of support. Last month saw a very high percentage of completions and this is reflected in slightly lower number this month.
19	Number of physical activity groups held (Pre-existing GP based service)	Apr-18	730	66	85	129%	G	170%	66	129%	→	
20	Number of healthy eating groups held (Pre-existing GP based service)	Apr-18	495	45	59	131%	G	228%	45	131%	→	
21	Personal Health Trainer Service - number of PHPs produced (Extended Service)	Apr-18	795	72	120	167%	G	375%	72	167%	¥	
22	Personal Health Trainer Service - Personal Health Plans completed (Extended Service)	Apr-18	596	54	47	87%	R	85%	54	87%	↑	This primarily is a capacity issue with staff turnover creating three vacancies. Interviews are planned.
23	Number of physical activity groups held (Extended Service)	Apr-18	913	82	53	65%	R	90%	82	65%	→	This primarily is a capacity issue with staff turnover creating three vacancies. Interviews are planned.
24	Number of healthy eating groups held (Extended Service)	Apr-18	627	56	64	114%	G	102%	56	114%	♠	

KPI no.	Measure	Period data relates to	Y/E Target 2018/19	YTD Target	YTD Actual	YTD %	YTD Actual RAG Status	Previous period actual	Current period target	Current period actual	Direction of travel (from previous period)	Comments
25	Proportion of Tier 2 clients completing the intervention who have achieved 5% weight loss.	Apr-18	30%	30%	21.0%	70.0%	R	17%	30%	21%	•	This reflects a high drop rate at 5/6 weeks into the programme. Currently the provider is conducting focus groups to try and understand why dients drop out at this stage The results from these will shape the development of the course to increase the retention rate.
26	Proportion of Tier 3 clients completing the course who have achieved 10% weight loss	Apr-18	60%	60%	70.0%	117.0%	G	67.0%	60%	117.0%	♠	
27	% of children recruited who complete the weight management programme and maintain or reduce their BMI Z score by agreed amounts	Apr-18	80%	80%	N/A	N/A	G	N/A	80%	N/A	↔	There is a longstanding challenge of recruiting children and families to weight management courses . This summer different approaches are being taken forward. The Service is working with Fenland District Council on it "Fit and Fed" programme to ensure that it has physical activity element. In Cambridge City and Huntingdonshire over the summer holiday periods it will run a six week course with sessions being held twice a week. They will have strong focus upon physical activity.
28	Number of referrals received for multi factorial risk assessment for Falls Prevention	Apr-18	425	38	46	121%	G	174%	38	121%	¥	The high percentage achievement last month is reflected in the lower percentage this month.
29	Number of Multi Factorial Risk Assessments Completed - Falls Prevention	Apr-18	180	16	65	406%	G	295%	16	406%	↑	
30	Number clients completing their PHP - Falls Prevention	Apr-18	230	21	21	100%	G	139%	21	100%	↓	The high percentage achievement last month is reflected in the lower percentage this month.

* All figures received in May 2018 relate to April 2018 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

PUBLIC HEALTH MOU 2017-18 UPDATE FOR Q4/EOY

Directorate	Service	Allocated	Q4 Update		YTD actual spend	Variance
P&C	Chronically Excluded Adults (MEAM)	£68k	CEA caseload update: Referrals: 9 Accepted: 6 Closed: 5 Active: 29 (at end of quarter) 13 in independent accommodation 6 in supported accommodation 9 in other circumstances e.g. sofa surfing, rough sleeping, HMP 21 positively engaged in treatment and support including drug and alcohol treatment, mental health support, probation, physical health issues. 	£68,000	£68,000	0
P&C	Education Wellbeing/PSHE KickAsh	£15k	 10 Secondary schools recruited and participating in KickAsh Programme for 2017-2018. Training programme for mentors completed. Primary programme is progressing. Whole School collaborative event planned for all KickAsh mentors for 28 April 2018. Secondary school event held in March at around the time of what would have been National 	£15,000	£15,000	0

			No Smoking Day.			
P&C	Children's Centres	£170k	Over the last 12 months, a review of Children's Centres in Cambridgeshire has been completed resulting in the implementation of the new Child and Family Centre offer that operates across a wider age range, offering more responsive and flexible services on a district based structure. The level of frontline delivery has remained the same in the new offer and the consultation response renewed the commitment to delivering integrated health provision as a key part of this offer. The overall aim of the offer remains ensuring a healthy start to life for all children 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. The Public Health funding is utilised as part of the total budget to improve health of children, with particular focus on the youngest children. Close alignment and joint working with community health colleagues in Health Visiting, Family Nurse Partnership and Maternity Services is established and work is ongoing with CCG partners to develop a network of Community Hubs (part of the Better Births programme) from our centres.	£170,000	£170,000	0
P&C	CAMH Trainer	£66k	 The CAMH trainers are employed by CPFT and deliver specialist mental health training for a range of roles working with children and young people. £20,000 is being removed from this contract annually to go into a broader children's mental health service contract. It will fund mental health literacy work/training in schools. This contract came into effect on 1st January 2018 and has been awarded to CHUMS. As a result the schools briefings and e-learning offered by the CAMH trainer are being reduced. In addition a £5k saving is being made in 2018/19 for this contract. The service is adapting to these changes, and this has been a key focus of this quarter. The CAMH Trainer is continuing to deliver the CAMH Foundation Module, which is popular with schools and the wider children and young people's workforce. This course supports individuals to build knowledge and confidence in identifying and responding to mental health issues in young people. Awaiting latest data, however, between 1/4/17-17/10/17 there was delivery of: Whole School Briefing (1 hour sessions) – delivered to 3 schools 	£66,000	£66,000	0

			 Schools Workshops (follow-up to Whole School Briefing) – 2 schools 'Be Confident' Seminar delivered Youth Mental Health Awareness – 4 courses Continued delivery of the Foundation Course for cohorts 14 and 15 (11 days across the 2 courses) CPD day delivered Resilience training – 3 courses Youth Mental Health First Aid – 1 course. 			
P&C	Strengthening Communities Service - KickAsh	£23k	 January Training was delivered to a small group of mentors at St Ivo school. This involved educating the young mentors on legislation relating to the sale, display and packaging of tobacco products and Nicotine Inhaling Products (NIPs) as well as providing information about counterfeit products and the harm they cause and the Challenge 25 scheme to help retailers keep to the law. Six mentors from Sawtry Village Academy carried out positive business visits with appropriate officers to five tobacco/NIP retail premises. Each shop received information from the students about the Kick Ash project, checks were made for compliance with all relevant legislation and a Challenge 25 training pack was provided to help the business comply with the age restriction applicable to tobacco products and NIPs. Meetings with the mentors took place at Cottenham, Sawtry and Bottisham colleges to discuss plans for No Smoking Day in March and possible additional work based on the vaping statistics obtained from the latest Health Related Behaviour Survey (HRBS). At the same time plans were discussed for the big Kick Ash event in April for all mentors from all participating schools to attend. Suggestions received from mentors at Cottenham that mentors could participate in the Race For Life 5km run in aid of Cancer Research in July. Planning continued this month for the big event in April 2018 for all 10 schools to attend including finding and booking the venue. February A brainstorming session took place with mentors from Longsands Academy to discuss the opportunities to positively promote the low statistics for vaping amongst the school's students as identified by the HRBS. Additional meetings with schools took place to confirm plans for Primary School visits. March No Smoking Day 2018 took place on 14th of this month and support was given to a number of the colleges with their efforts for the occasion. 	£23,000	£23,000	

			Further engagement to organise future engagement with Cottenham, St Ivo and Witchford schools is ongoing.			
P&C	Strengthening Communities Service	£10k	 In addition to the day to day 'business as usual' engagement with communities in Fenland activities include: Providing regular support to the Area Champion for Fenland, an elected member from within the Communities and Partnership Committee with responsibility for championing community action. Engagement a local level includes attendance at every Fenland parish councils sharing information on HFF and health initiatives. Wisbech 2020: SCS Manager co-lead on the priority to 'secure resource to work within the community to develop new capacity', developing action plan and delivering to that. Officers actively engaged on the CLG supported 'Participation at Scale' project in Wisbech, aimed at increasing community development. Facilitating discussions between Support Cambridgeshire and the training provider for the CLG fully funded accredited training for public sector officers interested in community organising, democratic engagement, community empowerment and social action. One day introductory course held in March. Managing the Support Cambridgeshire contract and including training events in Fenland for community groups and volunteers, plus access to the Funding Portal (part funded by Strengthening Communities). Time Credit networks in Chatteris, March and Wisbech continue with support from officers in SCS. A total of 50,000 hours have been worked by volunteers across Cambridgeshire throughout the life of Time Credits, expectation is that a third of those will be in Fenland. The communication campaign publicising the programme and the 50k milestone featured Glenda from Wisbech who was previously homeless and gained confidence, support, experience and employment through Time Credits. Community Protection officers have been giving advice and support to four Fenland residents who were referred to the team as a result of investigations by the National Scams Team. Those affected by loneliness and social isolation are encouraged to take part in local communi	£10,000	£10,000	0

			 Rings End Nature Intervention, with Friends of Rings end working with volunteers and developing their own nature intervention for health and wellbeing. Wisbech Footpaths Volunteer Group, improved right of way network to encourage more people being physically active. Table Tennis and sports sessions for young people and families with additional needs being provided in Wisbech. Support for young people and families continues through Weekly youth club run by volunteers in Gorefield and supported by Youth and Community coordinators. Paws for Wellbeing: supporting animal assisted therapies for young people from a wellbeing centre in a primary school. Library activities and Arts Alive/Library Presents performances in Fenland Libraries. Community resilience development Rima Ladies and Families: Group of local Eastern European ladies who now meet weekly and deliver information and family activities. Signposted to Wisbech CLLD for funding opportunities. Strengthening workforce in museums: encouraging and recruiting volunteers and trustees in museums in Fenland, including Wisbech, March, Chatteris and Whittlesey. Developing skill sets of those involved and encouraging volunteers from all ages and backgrounds. Viva Communities and Families, play sessions for families being held in Wisbech (including in the library). 			
P&C	Contribution to Anti-Bullying	£7k	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 spent in total.	£7,000	£7,000	£0
			SUB TOTAL : P&C Q4	£344,000	£344,000	
ETE	Active Travel (overcoming safety barriers)	£55k	 A total of 96 schools are now using Modeshift STARS for school travel planning 48 schools achieved bronze accreditation for their Modeshift STARS travel plans, 1 school has achieved silver and 2 Gold. Walk to School Month activity was delivered in October. Barnabas Oley school won the School of the East of England and also the School of the Nation Modeshift STARS Awards. This is a significant achievement for the school, reflecting a huge amount of effort on their part and also a recognition of the quality of service offered to Cambridgeshire schools through this scheme. This is also the second year in a row that a 	£55,000	£55,000	0

			Cambridgeshire school has won School of the Region – Godmanchester Primary went on to be runners-up in the School of the Nation award in 2016/2017.			
ETE	Explore additional interventions for cyclist/ pedestrian safety	£30k	Adverts for students in Student Pocket Guide to promote safe cycling. A profile of cycling collisions in Cambridgeshire has been undertaken including both the cyclists involved and any other parties. This has shown that the demographic profile of cyclists and drivers involved in collisions where at least one bicycle is involved is almost identical (male commuters age 25-45), the only real difference being the mode of travel. This was used to support development of a Police operation using plain clothes officers on bikes (Op Velo) which began in February 2018 and will run throughout the year to provide advice to drivers and cyclists who drive/cycle carelessly as well as tickets for other offences detected. Resources for cycle promotion have been refreshed. Be bright be seen campaign was delivered in October/November for school pupils and in wider media.	£30,000	£30,000	0
ETE	Road Safety	£20k	 This year has seen an increase to 26 schools on the JTA scheme and a further 15 on the waiting list. There are now 144 JTAs across the 26 schools. Activities they have undertaken include: A competition to write 'be bright be seen' songs and poems for when the clocks changed Walk to school promotion, including Happy Shoes Day School assemblies A school play Designing their own banners for outside school Charity events to support the Road Victims Trust Moving forward there is an opportunity to grow the scheme and meet the additional demand through the Council's new road safety hub approach in partnership with Peterborough City Council. 	£20,000	£20,000	0
ETE	Illicit Tobacco	£15k	 Preparation and completion of cases, with 3 cases in Magistrates Court. Hearing dates confirmed in June. Intelligence work on going. Intelligence received that 13 shops selling in Wisbech, other intelligence received about sellers and gangs in Wisbech. Tobacco seized by Police and passed over to TS. 	£15,000	£15,000	

			SUB TOTAL : ETE Q4	£120,000	£120,000	0
C&CS	Research	£22k	 Development of Cambridgeshire Insight to ensure sound and future-proofed platform for publishing JSNAs and other PHI data aligned with other datasets about the county Production of population forecasts New development surveys to support robust population forecasting methodology 	£22,000	£22,000	0
C&CS	Transformation Team Support	£27k	 Business Planning The Transformation Team continues to lead the Council's Business Planning Process, ensuring that the Business Planning process (and the Business Plan agreed by the Council in Q4) sufficiently aligns with the work of the Public Health directorate, and supporting Public Health colleagues to engage with the Business Planning process. Business Transformation The Transformation Team remain available to provide project management support and advice to Public Health; as well as operating a range of projects that include public health representation The authority's new project management system continues to be rolled out and refined at present; this includes Public Health projects and wider projects that public health colleagues are engaged in. Links between Public Health, STP and Devolution The Transformation Team continue to engage and support the development of STP work led by Public Health, including the Ageing Well programme. The Transformation Team worked with colleagues in People and Communities Commissioning to support the implementation of the BCF Plan following sign off in Q3, and put in place arrangements for monitoring delivery of the plan via the Integrated Commissioning Board. Devolution work also continues, and the Transformation team will be involved in work on future devolution deals including the potential inclusion of public health activity. 	£27,000	£27,000	0
C&CS	Communications	£25k	Comms worked on the following campaigns in the final quarter: Stay Well Dry January No Smoking Day One You Health Checks Change4Life 	£25,000	£25,000	0

			We also supported reactive enquiries and the Health Committee			
C&CS	Strategic Advice	£22k	 Inputting strategically into the business planning process, e.g. Member workshops, Committee meetings, SMT meetings and CLT meetings Managing the corporate risk management and corporate performance management frameworks and ensuring that Public Health is fully accounted for in these Leading the corporate Health, Safety and Wellbeing Board to ensure that Public Health, & its role in supporting for staff wellbeing, is given greater focus Managing winter alerts to encourage people towards self-care or other appropriate options instead of A&E attendance Delivered a variety of communications campaigns Developing a campaign to highlight loneliness in the county 	£22,000	£22,000	0
C&CS	Emergency Planning Support	£5k	 Close co-operation with the Health Emergency Planning Officer (HEPRO) across a range of resilience tasks. Provision of emergency planning support when the HEPRO is not available Provision of out of hours support to ensure that the DPH is kept up to date with any incidents that may occur, and which may have impact upon Public Health. Ongoing support across all areas of resilience preparation 	£5,000	£5,000	0
C&CS	LGSS Managed Overheads	£100k	 This continues to be supported on an ongoing basis, including: Provision of IT equipment Office Accommodation Telephony Members allowances 	£100,000	£100,000	0
			SUB TOTAL : CCS Q4	£201,000	£201,000	0
LGSS	Overheads associated with PH function	£220k	This covers the 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	£220,000	£220,000	£0
			SUB TOTAL : LGSS Q4	£220,000	£220,000	£0

SUMMARY

Directorate	YTD (Q4) expected spend	YTD (Q4) actual spend	Variance
P&C	£344,000	£344,000	0
ETE	£120,000	£120,000	0
CS&T	£201,000	£201,000	0
LGSS	£220,000	£220,000	0
TOTAL Q4	£885,000	£885,000	0