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Public Health Directorate

Finance and Performance Report – August 2018

1 SUMMARY

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
Jul (No. of indicators)	6	4	18	3	31

2. INCOME AND EXPENDITURE

2.1 Overall Position

Forecast Outturn Variance (Jul) £000	Service	Budget for 2018/19 £000	Actual to end of Aug 18 £000	Forecast Outturn Variance £000	Forecast Outturn Variance %
0	Children Health	9,266	3,049	0	0%
0	Drug & Alcohol Misuse	5,625	1,183	0	0%
0	Sexual Health & Contraception	5,157	1,338	-281	7%
0	Behaviour Change / Preventing Long Term Conditions	3,812	437	0	0%
0	Falls Prevention	80	8	0	0%
0	General Prevention Activities	56	32	0	0%
0	Adult Mental Health & Community Safety	256	32	0	0%
0	Public Health Directorate	2,019	619	0	0%
0	Total Expenditure	26,271	6,698	-281	-1%
0	Public Health Grant	-25,419	-12,915	0	0%
0	s75 Agreement NHSE-HIV	-144	144	0	0%
0	Other Income	-40	-0	0	0%
0	Drawdown From Reserves	-39	0	0	0%
0	Total Income	-25,642	-12,771	0	0%
0	Net Total	629	-6,073	-281	-45%

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.

An underspend of £281k has been identified against the Sexual Health budget. This is as a result of an over-accrual which had been carried forward from a previous financial year in error. The over-accrual will be moved into Public Health ring-fenced grant reserve and will be used to fund £281k of Public Health eligible funding during 2018/19 in place of £281k of general CCC funding, producing an underspend against the CCC corporate funding.

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

The total Public Health ring-fenced grant allocation for 2018/19 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 [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)

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

Sexual Health (KPI 1 & 2)

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

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 remain at red.
- Appendix 6 provides further commentary on the ongoing programme to improve performance.

National Child Measurement Programme (KPI 14 & 15)

- The coverage target for the programme was met. Year end data for the 2017/18 programme will be available at the end of 2018.
- 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)

- Indicator 3 for the number of health checks completed by GPs is reported on quarterly. For Q1 this indicator is reporting as red.
- Indicator 4 for the number of outreach health checks remains red although there is an upward trajectory.
- Further details of the refocus for the service are available in the commentary in Appendix 6.

Lifestyle Services (KPI 5,16-30)

- There are now 16 Lifestyle Service indicators reported on, the overall performance is good and shows 13 green, 1 amber and 2 red indicators.
- Appendix 6 provides further explanation on the red indicator for the personal health trainer service, proportion of Tier 2 clients completing weight loss interventions and smoking cessation.

The performance data provided reports on the Q1 (April –June 2018) for the Health Visiting and School Nurse service.

Summary of this quarter has been reported on in the previous finance and performance report for July 2018.

APPENDIX 1 – Public Health Directorate Budgetary Control Report

Previous Outturn (Jul) £'000	Service	Budget 2018/19	Actual to end of Aug	Outturn Forecast	
		£'000	£'000	£'000	%
Children Health					
0	Children 0-5 PH Programme	7,253	981	0	0%
0	Children 5-19 PH Programme - Non Prescribed	1,706	1,788	0	0%
0	Children Mental Health	307	281	0	0%
0	Children Health Total	9,266	3,049	0	0%
Drugs & Alcohol					
0	Drug & Alcohol Misuse	5,625	1,183	0	0%
0	Drugs & Alcohol Total	5,625	1,183	0	0%
Sexual Health & Contraception					
0	SH STI testing & treatment – Prescribed	3,829	1,225	-281	-7%
0	SH Contraception - Prescribed	1,176	112	0	0%
0	SH Services Advice Prevn Promtn - Non-Presribed	152	1	0	0%
0	Sexual Health & Contraception Total	5,157	1,338	-281	-5%
Behaviour Change / Preventing Long Term Conditions					
0	Integrated Lifestyle Services	1,980	485	0	0%
0	Other Health Improvement	413	-71	0	0%
0	Smoking Cessation GP & Pharmacy	703	-208	0	0%
0	NHS Health Checks Prog – Prescribed	716	230	0	0%
0	Behaviour Change / Preventing Long Term Conditions Total	3,812	437	0	0%
Falls Prevention					
0	Falls Prevention	80	8	0	0%
0	Falls Prevention Total	80	8	0	0%
General Prevention Activities					
0	General Prevention, Traveller Health	56	32	0	0%
0	General Prevention Activities Total	56	32	0	0%
Adult Mental Health & Community Safety					
0	Adult Mental Health & Community Safety	256	32	0	0%
0	Adult Mental Health & Community Safety Total	256	32	0	0%

Previous Outturn (Jul) £'000	Service	Budget 2018/19 £'000	Actual to end of Aug £'000	Outturn Forecast £'000 %	
Public Health Directorate					
0	Children Health	189	65		0%
0	Drugs & Alcohol	287	79		0%
0	Sexual Health & Contraception	164	50		0%
0	Behaviour Change	753	230		0%
0	General Prevention	199	72		0%
0	Adult Mental Health	36	10		0%
0	Health Protection	53	20		0%
0	Analysts	338	93		0%
0		2,019	619	0	0%
Total Expenditure before Carry forward					
0		26,271	6,698	-281	-1%
Anticipated contribution to Public Health grant reserve					
0		0	0	0	0.00%
Funded By					
0	Public Health Grant	-25,419	-12,915		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	-12,771	0	0%
Net Total					
0		629	-6,073	-281	-45%

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 £'000	Forecast Outturn Variance	
		£'000	%
Sexual Health	3,829	-281	-7
An underspend of £281k has been identified against the Sexual Health budget. This is as a result of an over-accrual which had been carried forward from a previous financial year in error. The over-accrual will be moved into Public Health ring-fenced grant reserve and will be used to fund £281k of Public Health eligible funding during 2018/19 in place of £281k of general CCC funding, producing an underspend against the CCC corporate funding.			

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	293	£10k movement of Strengthening Communities Funding moved from P&E to P&C
P&E Directorate	130	120	£10k movement of Strengthening Communities Funding moved from P&E to P&C
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

Fund Description	Balance at 31 March 2018	2018/19		Forecast Closing Balance	Notes
		Movements in 2018/19	Balance at end Aug 2018		
	£'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.

Fund Description	Balance at 31 March 2018	2018/19		Forecast Closing Balance	Notes
		Movements in 2018/19	Balance at end Aug 2018		
	£'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

	Below previous month actual
	No movement
	Above previous month actual

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

Measures												
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	Jun-18	98%	98%	100%	100%	G	98%	98%	98%	↔	
2	GUM ACCESS - % seen within 48 hours (% of those offered an appointment)	Jun-18	80%	80%	93%	93%	G	93%	80%	92%	↓	
3	Number of Health Checks completed (GPs)	Q1 (Apr - Jun18)	18,000	4500	3747	83%	R	N/A	4500	3489	↔	This is an improvement on performance at this time last year.
4	Number of outreach health checks carried out	Jul-18	1,800	660	490	74%	R	93%	122	125%	↑	The Lifestyle Service is commissioned to provide outreach Health Checks for hard to reach groups in the community and in workplaces. The key challenge is securing access to workplaces in Fenland where there are high risk workforces. Wisbech Job Centre Plus is receiving sessions for staff and those claiming benefits. In addition sessions in community centres in areas that have high risk populations are ongoing. A mobile service is also being piloted. Performance in Fenland continues to be good with the Service there currently hitting its monthly target. However although performance in the rest of county has improved the target has not been achieved. The service is now asked to focus upon areas where there is a higher risk of cardiovascular disease and where GP Health Checks are low.
5	Smoking Cessation - four week quitters	Jun-18	2154	452	313	69%	R	69%	157	62%	↓	<p>* There is an ongoing programme to improve performance that includes targeting routine and manual workers (rates are known to be higher in these groups) and the Fenland area. A new promotional campaign is planned and other new approaches are being developed.</p> <p>*The most recent Public Health Outcomes Framework figures released in July 2018 with data for 2017) suggest the prevalence of smoking in Cambridgeshire is statistically similar to the England figure, 14.5% v 14.9%. All districts are now statistically similar to the England figure. Most notable has been the improvement in Fenland where it has dropped from 21.6% to 16.3%, making it lower than the Cambridge City rate of 17.0%</p>
6	Percentage of infants being breastfed (fully or partially) at 6 - 8 weeks	Q1 April - June 2018	56%	56%	53%	53%	A	50%	56%	53%	↑	The breastfeeding prevalence target will remain at 56% in 2018/19, although it is recognised that across the county this is a challenging target. Breastfeeding statistics have seen a 3% increase since the last reporting period. Analysis does show very different breastfeeding rates across the county. Breast feeding rates in South Cambridgeshire is 67% over this period, whilst the rates for East Cambs and Fenland are currently 33%. An action plan is in place and the Health Visitor Infant Feeding lead is working with acute midwifery units to attempt to improve the breastfeeding rates collaboratively. A pilot is to begin whereby mothers are contacted via telephone on discharge from hospital to offer an early follow up appointment to support breast feeding. In order to measure the impact and outcome of this pilot a change in process needs to take place within System One - this is being addressed. Overall however, the breastfeeding rates in Cambridgeshire remains higher than the national average of 44%. Breastfeeding prevalence rates will continue to be monitored closely, particularly in East Cambs and Fenland, with the aim of achieving the 56% target.
7	Health visiting mandated check - Percentage of first face-to-face antenatal contact with a HV from 28 weeks	Q1 April - June 2018	50%	50%	20%	20%	R	21%	50%	20%	↓	In Cambridgeshire a local target has been set for 50%, with the longer term goal of achieving a target of 90% by 2020. The overall performance this quarter has decreased by 1%. However, this does not reflect the month on month improvements in working towards this target. There was, in April an initial fall in performance to 14%, but then has been followed by significant improvement in June reaching 27% of face to face contacts completed. Looking at each individual areas, all have seen improvements with Huntingdon achieving 38%, East Cambs and Fenland reaching 37% and Cambs City and South reaching 13%. Whilst all areas need to continue to improve, a particular focus is required to improve the position in Cambs City and South. These improvements are in part due to the improvements in the notification process with midwifery, but also as a result of the health visiting team now beginning to recognise the importance of this assessment and are therefore beginning to embed this contact into their day to day working practice. An electronic process has been established with the Queen Elizabeth Hospital EH and went live two weeks ago. The clinical lead has had successful discussions with Hinchinbrook and Peterborough midwifery units and we are awaiting a 'go live' date. Once these hospital are established negotiations will then commence with Addenbrookes.

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
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	Q1 April - June 2018	90%	90%	95%	95%	G	95%	90%	95%	↔	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	Q1 April - June 2018	90%	90%	85%	85%	A	84%	90%	85%	↑	The performance for the 6 - 8 week review has increased one percentile this quarter, from 84% in Q4 2017/18, to 85%. Cambridgeshire continues to exceed the national average for this visit, which in 2016/17 was 82.5%. Analysis of the data shows that the 90% target was achieved in both Cambs City and South (91%) and Hunts (95%), but East Cambs and Fenland only achieved 66%. This was a local capacity issue in East Cambs and Fenland. Consequently it was locally agreed not to prioritise the review, meaning completion levels in this area fell, impacting the county figure as a whole. The Area Manager is working with staff to ensure this is re-prioritised moving forward.
10	Health visiting mandated check - Percentage of children who received a 12 month review by 15 months	Q1 April - June 2018	95%	95%	85%	85%	A	85%	95%	85%	↔	Performance against the 12 month visit by 15 months target has remained at 85% this quarter. However if exception reporting is accounted for, this increases to a quarterly average of 95%, thus meeting the target. This quarter 72 visits were not wanted by the family and a further 90 were not attended. Staff working in the East Cambs and Fenland locality have now returned to offering this review as a home visit rather than in a clinic setting as data demonstrated that clinic appointments increased the number of people not attending. By returning to home visits there has been an increase in success of completing this assessment in this area.
11	Health visiting mandated check - Percentage of children who received a 2 - 2.5 year review	Q1 April - June 2018	90%	90%	67%	67%	R	77%	90%	67%	↓	The number of two year old checks completed this quarter has declined, from 77% in Q4 2017/18 to 67%. 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 82%. During this quarter, 137 appointments were not wanted and 118 were not attended. Both Cambs City and South and Huntingdon Districts have performed at 72% and 75% respectively, but East Cambs and Fenland only achieved 56% during this quarter. A decrease in performance is attributed to a change in delivery model for the East Cambridgeshire and Fenland team, who introduced development clinics to account for staffing and capacity issues. This is led to an increase in DNA's, however due to pre-booked appointments, the team are unable to return to home-visiting until July. This has now been addressed and performance is expected to improve next quarter. There has also been recruitment to 2.6fte Nursery Nurse posts. These are currently progressing through the recruitment process. One post will be placed in East Cambs and Fenland and the remaining will work in Cambs City. These posts will increase the teams capacity and ability to meet this target.
12	School nursing - Number of young people seen for behavioural interventions - smoking, sexual health advice, weight management, emotional health and well being, substance misuse or domestic violence	Q1 April - June 2018	N/A	N/A	100	N/A	N/A	N/A	N/A	100	N/A	Whilst the school nursing services has seen changes to the way it is delivered the service continues to offer face to face interventions to children and young people in settings relating to a range of subjects. There has been a fall in the number of interventions around emotional health and well being, although this may be attributed to the introduction of CHUMS Counselling and Talking Therapies service and Emotional Wellbeing Practitioners, who are offering services to children and young people and supporting existing services including schools and the School Nursing service.
13a	School nursing - number of calls made to the duty desk	Q1 April - June 2018	N/A	N/A	801	N/A	N/A	Not applicable	N/A	801	N/A	The school nursing service has developed over the last 12 months, which includes the introduction of a duty desk, which operates as a single point of access and CHAT Health, a text based support service for children and young people. As a result the information collected and reported has changed and therefore the measure provided in this report has been changed to reflect the services being accessed via the 5 - 19 services.
13b	School nursing - Number of children and young people who access health advices and support through Chat Health	Q1 April - June 2018	N/A	N/A	742	N/A	N/A	Not applicable	N/A	742	N/A	The duty desk has received 801 calls during the quarter 1 period offering immediate access to staff for support, referral and advice. Chat Health has been accessed by 742 children and young people over the quarter. Analysis of the Chat Health attributes indicate that the service has been used to support an additional 11 CYP regarding sexual health, 27 for emotional health and well being concerns and 2 for substance misuse.

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)	Jul-18	90%	90.0%	90.0%	90%	G	90.0%	90.0%	90.0%	↔	The National Child Measurement Programme (NCMP) has been completed for the 2016/17 academic year. The coverage target was met and the measurement data has been submitted to the PHE in line with the required timeline. The cleaned measurement data will be available at the end of the year.
15	Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	Jul-18	90%	90.0%	90.0%	90%	G	90.0%	90.0%	90.0%	↔	
16	Overall referrals to the service	Jul-18	5300	1683	2327	138%	G	185%	337	139%	↓	Although downwards the number of referrals is still above target.
17	Personal Health Trainer Service - number of Personal Health Plans produced (PHPs) (Pre-existing GP based service)	Jul-18	1670	501	501	100%	G	55%	100	80%	↑	
18	Personal Health Trainer Service - Personal Health Plans completed (Pre-existing GP based service)	Jul-18	1252	376	376	100%	G	82%	75	149%	↑	
19	Number of physical activity groups held (Pre-existing GP based service)	Jul-18	730	219	312	142%	G	116%	44	208%	↑	
20	Number of healthy eating groups held (Pre-existing GP based service)	Jul-18	495	149	207	139%	G	186%	30	131%	↓	
21	Personal Health Trainer Service - number of PHPs produced (Extended Service)	Jul-18	800	238	318	134%	G	84%	48	164%	↑	The trend is downwards but the year to date target is exceeded.
22	Personal Health Trainer Service - Personal Health Plans completed (Extended Service)	Jul-18	650	179	201	112%	G	126%	36	147%	↑	
23	Number of physical activity groups held (Extended Service)	Jul-18	830	274	250	91%	A	91%	55	164%	↑	There has been considerable improvement this month.
24	Number of healthy eating groups held (Extended Service)	Jul-18	570	188	237	126%	G	181%	38	102%	↓	
25	Proportion of Tier 2 clients completing the intervention who have achieved 5% weight loss.	Jul-18	30%	30%	20.0%	66.7%	R	31%	30%	25%	↓	There has been an ongoing issue with staff changes, to ensure that there is consistent services Everyone Health is contracting with Slimming World and Weight Watchers to deliver the Tier 2 weight management services. The Programmes of both these organisations have been very evaluated and they have robust evidence for the effectiveness of their services. Recognised nationally as

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
26	Proportion of Tier 3 clients completing the course who have achieved 10% weight loss	Jul-18	60%	60%	60.0%	100.0%	G	54.0%	60%	50.0%	↓	Although a slight dip this month the over performance in earlier months means that the YTD is being met.
27	% of children recruited who complete the weight management programme and maintain or reduce their BMI Z score by agreed amounts	Jul-18	80%	80%	80%	100.0%	G	80%	80%	0%	↓	A new programme has commenced.
28	Number of referrals received for multi factorial risk assessment for Falls Prevention	Jul-18	520	128	183	143%	G	197%	26	208%	↑	
29	Number of Multi Factorial Risk Assessments Completed - Falls Prevention	Jul-18	442	54	255	472%	G	338%	11	609%	↑	
30	Number clients completing their PHP - Falls Prevention	Jul-18	331	69	116	168%	G	163%	14	414%	↑	

* All figures received in August 2018 relate to July 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 2018-19 UPDATE FOR Q1

This will be provided in the next F&PR report.