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#### Public Health Directorate

#### Finance and Performance Report – September 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
Aug (No. of indicators)	6	5	17	3	31

#### 2. INCOME AND EXPENDITURE

#### 2.1 Overall Position

Forecast Outturn Variance (Aug)	Service	Budget for 2018/19	Actual to end of Sep 18	Forecast Outturn Variance	Forecast Outturn Variance
£000		£000	£000	£000	%
0	Children Health	9,266	3,959	0	0%
0	Drug & Alcohol Misuse	5,625	2,111	0	0%
-281	Sexual Health & Contraception	5,157	1,694	-331	6%
0	Behaviour Change / Preventing				
	Long Term Conditions	3,812	1,132	-50	-1%
0	Falls Prevention	80	8	0	0%
0	General Prevention Activities	56	32	-10	-18%
0	Adult Mental Health &				
	Community Safety	256	60	0	0%
0	Public Health Directorate	2,019	751	0	0%
-281	Total Expenditure	26,271	9,747	-391	-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%
-281	Net Total	629	-3,024	-391	-62%

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.

The total forecast underspend for the Public Health Directorate is £391k, an increase of £110k from last months reported position. An underspend of £50k has been identified against the stop smoking budget area; this is as a result of a reduction in prescribing costs. Additionally, a £50k underspend has been identified against the LARC (long acting reversible contraception) budget due to a reduction in the cost of injectable contraception. This is in addition to the previously identified underspend as a result of an over-accrual from a previous financial year, bringing the total expected underspend on sexual health budgets to £331k. A small underspend has also been identified against general prevention activities (£10k). Any underspend within the Public Health directorate up to the level of corporate funding allocated on top of the public health grant funding (£391k) will be attributed to corporate reserves at year end.

#### 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 <u>appendix 3</u>.

# 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 appendix 5.

#### 4. **PERFORMANCE SUMMARY**

#### 4.1 Performance overview (Appendix 6)

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

#### Sexual Health (KP1 & 2)

• Performance of sexual health and contraception services is good however the target for percentage seen within 48 hours has moved to amber reflecting the fall in performance earlier this year. This performance is being monitored carefully.

#### Smoking Cessation (KPI 5)

This service is being delivered by Everyone Health as part of the wider Lifestyle Service.

- There has been an improvement in this months performance but 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 November 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
- 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 the same as last month showing 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.

#### Health Visiting and School Nurse Services (KPI 6-13)

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.
- Quarter 2 (July-Sept) is planned to be reported on in Decembers finance and performance report.

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

Appendix 7 provides an update on Quarter 1 reports for the Public Health MOU services. Current spend is within an expected range

#### Previous Budget Actual to Outturn Outturn Service 2018/19 end of Sep Forecast (Aug) £'000 £'000 £'000 £'000 % **Children Health** 0 Children 0-5 PH Programme 7,253 0 1,586 0% Children 5-19 PH Programme -0 1,706 0 2,093 0% Non Prescribed 0 **Children Mental Health** 307 281 0 0% 0 0 **Children Health Total** 9,266 3,959 0% **Drugs & Alcohol** 0 **Drug & Alcohol Misuse** 5,625 2,111 0 0% 0 **Drugs & Alcohol Total** 0 5,625 2,111 0% **Sexual Health & Contraception** SH STI testing & treatment --281 3,829 1,525 -281 -7% Prescribed SH Contraception - Prescribed -50 0 1,176 169 -4% SH Services Advice Prevn Promtn 0 152 1 0 0% - Non-Presribed Sexual Health & -281 5,157 1,694 -331 -6% **Contraception Total Behaviour Change / Preventing** Long Term Conditions Integrated Lifestyle Services 0 1,980 1,141 -0 0% Other Health Improvement -59 0 413 0 0% Smoking Cessation GP & 0 703 -206 -50 -7% Pharmacy NHS Health Checks Prog -0 716 256 0 0% Prescribed **Behaviour Change / Preventing** 3,812 -50 0 1,132 -1% Long Term Conditions Total **Falls Prevention** 0 **Falls Prevention** 80 8 0 0% 0 **Falls Prevention Total** 80 8 0 0% **General Prevention Activities** General Prevention, Traveller 32 -10 0 56 -18% Health **General Prevention Activities** 0 Total 56 32 -10 -18% **Adult Mental Health & Community** Safety Adult Mental Health & Community 0 256 60 0 0% Safety Adult Mental Health & 0 256 60 0 0% **Community Safety Total**

#### **APPENDIX 1 – Public Health Directorate Budgetary Control Report**

Previou s Outturn (Jul)	Service	Budget 2018/19	Actual to end of Aug	Outi Fore	
£'000		£'000	£'000	£'000	%
0 0 0	Public Health Directorate Children Health Drugs & Alcohol Sexual Health & Contraception	189 287 164	80 97 61		0% 0% 0%
0 0 0 0 0	Behaviour Change General Prevention Adult Mental Health Health Protection Analysts	753 199 36 53 338	282 87 10 24 110		0% 0% 0% 0%
0		2,019	751	0	0%
-281	Total Expenditure before Carry forward	26,271	9,747	-391	-1%
0	Anticipated contribution to Public Health grant reserve	0	0	0	0.00%
	Funded By				
0 0 0	Public Health Grant S75 Agreement NHSE HIV Other Income Drawdown From Reserves	-25,419 -144 -40 -39	-12,915 144 0 0		0% 0% 0%
0	Income Total	-25,642	-12,771	0	0%
-281	Net Total	629	-3,024	-391	-62%

#### **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	%			
Sexual Health Testing and Treatment	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**

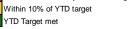
	Balance	2018	/19	Forecast	
Fund Description	at 31 March 2018	Movements in 2018/19	Balance at end Sep 2018	Closing Balance	Notes
	£'000	£'000	£'000	£'000	
General Reserve Public Health carry-forward	1,040	0	1,040	1,040	
	.,		1,010	1,010	
subtotal	1,040	0	1,040	1,040	
Other Fermerked Funde					
Other Earmarked 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 Sep 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



¢ Below previous month actual No movement ←→ 1 Above previous month actual

The Public Health Service Performance Management Framework (PMF) for August 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	Aug-18	98%	98%	100%	100%	G	98%	98%	98%	<b>←→</b>	
2	GUM ACCESS - % seen within 48 hours ( % of those offered an appointment)	Aug-18	80%	80%	93%	92%	А	92%	80%	91%	¥	This reflects the fall in performance earlier in the year. The performance is being monitored carefully in view of past increases in activity.
3	Number of Health Checks completed (GPs)	Q1 (Apr - Jun18)	18,000	4500	3747	83%	R	N/A	4500	3489	<del>&lt;                                    </del>	This is an improvement on performance at this time last year.
4	Number of outreach health checks carried out	Aug-18	1,800	770	567	74%	R	125%	110	63%	J	The Lifestyle Service is commissioned to provide outreach Health Checks for hard to reach groups in the community and in workplaces. This includes 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 has been piloted and will be introduced. Performance in Fenland continues to overachieve. However although performance in the rest of county has improved it remains below target and consequently this KPI remains on red.
5	Smoking Cessation - four week quitters	Jul-18	2154	640	437	68%	R	62%	160	76%	↑	<ul> <li>There has been an improvement this month in performance. 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.</li> <li>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%</li> </ul>

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	Q1 April - June 2018	56%	56%	53%	53%	A	50%	56%	53%	↑	The breastleeding prevalence target will remain at 56% in 2018/19, although it is recognised that across the county this is a challenging target. Breastleeding statistics have seen a 3% increase since the last reporting period. Analysis does show very different breastleeding rates across the county. Breast leeding rates in South Cambridgeshire is 67% over this period, whilst the rates for East Cambs and Fenland are currently 33%. An action plain is in place and the Health Wisitor Intan Feeding lead is working with acute midwlfery units to attempt to improve the breastleeding 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 breastleeding rates in Cambridgeshire remains higher than the national average of 44%. Breastleeding 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 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 midwlfery, 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.
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%	<b>~</b> >	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%	1	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 date 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 Cambs and Fenland enam, 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-wisiting until July. This has now been addressed and performance is expected to improve next quarter. There has also been recruitment to 2.61te 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
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	has changed and therefore the measure provided in this report has been changed to reflect the services being accessed via the 5 - 19 services. 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 hittubes 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)	Aug-18	>90%	>90%	>90%	91%	G	91.3%	91.3%	90.0%	N/A	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)	Aug-18	>90%	>90%	>90%	95%	G	95.1%	95.1%	90.0%	N/A	The 2018/19 measurement programme commences in November
16	Overall referrals to the service	Aug-18	5610	1964	2743	140%	G	139%	281	148%	♠	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)	Aug-18	1670	585	578	99%	G	80%	84	92%	↑	
18	Personal Health Trainer Service - Personal Health Plans completed (Pre-existing GP based service)	Aug-18	1252	438	516	118%	G	149%	63	222%	↑	
19	Number of physical activity groups held (Pre-existing GP based service)	Aug-18	730	256	409	160%	G	208%	37	262%	↑	
20	Number of healthy eating groups held (Pre-existing GP based service)	Aug-18	495	173	220	127%	G	131%	25	50%	¥	The fall reflects seasonal variation and the overachievement in the previous month.
21	Personal Health Trainer Service - number of PHPs produced (Extended Service)	Aug-18	795	278	394	142%	G	164%	40	190%	♠	
22	Personal Health Trainer Service - Personal Health Plans completed (Extended Service)	Aug-18	596	209	234	112%	G	147%	30	113%	¥	The fall reflects seasonal variation and the overachievement in the previous month.
23	Number of physical activity groups held (Extended Service)	Aug-18	913	320	297	93%	A	164%	37	102%	¥	There has been a considerable improvement in performance overall, this month is above target and although there is fall this reflects the very high overachievement last month.
24	Number of healthy eating groups held (Extended Service)	Aug-18	627	219	249	114%	G	102%	25	39%	¥	The fall reflects seasonal variation and the overachievement in the previous month.

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.	Aug-18	30%	30%	21.0%	70.0%	R	25%	30%	22%	<b>V</b>	There has been an ongoing issue with staff changes, to ensure that there is consistent services To address this 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 well evaluated and they have robust evidence for the effectiveness of their services.
26	Proportion of Tier 3 clients completing the course who have achieved 10% weight loss	Aug-18	60%	60%	61.0%	101.0%	G	50.0%	60%	67.0%	↑	
27	% of children recruited who complete the weight management programme and maintain or reduce their BMI Z score by agreed amounts	Aug-18	80%	80%	80%	100.0%	G	0%	80%	0%	<del>&lt;                                    </del>	A new programme has commenced.
28	Number of referrals received for multi factorial risk assessment for Falls Prevention	Aug-18	425	149	245	164%	G	208%	21	295%	♠	
29	Number of Multi Factorial Risk Assessments Completed - Falls Prevention	Aug-18	180	63	301	478%	G	609%	9	511%	↑	
30	Number clients completing their PHP - Falls Prevention	Aug-18	230	81	135	167%	G	414%	12	158%	¥	The fall reflects seasonal variation and the overachievement in the previous month.

\* All figures received in September 2018 relate to August 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

Directorate	YTD (Q1)	YTD (Q1)	Variance
	expected spend	actual spend	
P&C	£73,250	£72,811	£439
ETE	£30,000	£28,005	£1,995
CS&T	£50,250	£50,250	0
LGSS	£55,000	£55,000	0
TOTAL Q1	£208,500	£206,066	£2,434

Directorate	Service	Q4 Update	YTD expected spend	YTD actual spend	Variance
P&C	Counting every Adult (MEAM)	CEA caseload update: Referrals: 16 Accepted: 6 Closed: 3 Active: 31 (at end of quarter) 21 positively engaged in treatment and support including drug and alcohol treatment, mental health support, probation, physical health issues.	£17,000	£17,000	0
P&C	Education Wellbeing/PSHE KickAsh	Primary programme visits c/ompleted (Education Wellbeing Team, planned, coordinated, managed and delivered the programme with Kick Ash mentors from participating secondary schools).	£3,750	£3,750	0

P&C	Children's Centres	<ul> <li>We have now launched the new Child and Family Centre offer across Cambridgeshire which 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 including the same commitment to delivering integrated health provision as a key part of this offer.</li> <li>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.</li> <li>The Public Health funding is utilised as part of the total budget to improve health of children, with particular focus on the youngest children.</li> <li>We are continuing our work to transform services to create a more integrated offer for families with community health colleagues in Health Visiting, Family Nurse Partnership and Maternity Services.</li> </ul>	£42,500	£42,400	0
P&C	Strengthening Communities Service - KickAsh	<ul> <li>Work has continued to be carried out under the instruction of PHSE Services who led on Kick Ash programme in this reporting period.</li> <li>Update from Sarah Freeman on Strengthening Communities work in Q1 as part of the Kick Ash team.</li> <li>This Q1 leads us towards the end of the school year. Nine of the ten schools have received training, encouragement and support for their mentors from Strengthening Communities in order to deliver a number of different activities over the year including:</li> <li>Raising awareness with their peers on and around National No Smoking Day in March and Stoptober (October stop smoking campaign).</li> <li>Participating in Year 8 career or personal development days in school – showing the interactive computer session Operation Smokestorm.</li> <li>Holding lunch time peer support sessions.</li> </ul>	£5,750	£5,223	£527

<ul> <li>Kick Ash Mentors carrying out business visits on behalf of Trading Standards.</li> <li>Delivering training to year 6 pupils in their partner primary schools.</li> <li>Interviewing some players from Cambridge United Football Club about their ideas about smoking and to gain the club support.</li> </ul>		
St Peters school chose to not take part in Kick Ash in this academic year despite best efforts from officers to encourage them to do so. Their decision was made too late in the annual programme to invite another school as a replacement.		
Some Business Visits by Kick Ash mentors took place, but the main focus this year shifted away from conducting business visits to working with the young people to understand and share positives of not vaping, supported by the findings of the 2016 Health Related Behaviour Survey (which suggested low levels of vaping in the schools). Students disputed the findings of the Survey (their understanding is that vaping levels are much higher) and it led to some interesting discussions between the pupils.		
As well as the usual administration and contact with schools, specific activity during Quarter 1 of 2018-19 includes:-		
• <u>April</u> (which included a two week Easter break): Kick Ash "big event", designed to bring mentors together from all Kick Ash participating schools to network, share experiences, celebrate achievements and team build. Our Kick Ash officer spent time resourcing and booking venues and activities (Krashball / Zorbing football) but insufficient take-up resulted in cancellation of the event. A full refund from the activity company and a partial refund for the venue was negotiated.		
Met the mentor group at <b>Cottenham VC</b> to continue the support and to encourage ideas for the remainder of the term.		
Organised a KA resource team meeting to discuss various items for the future and to begin planning ideas for September.		

	Many (included a holf torma break):		
	• <u>May</u> (included a half term break):		
	Visited Bottisham VC to offer continued support and     Souther Academy to finalize the note for the wisite to ture		
	Sawtry Academy to finalise the rota for the visits to two		
	primary school visits in May and early June.		
	<ul> <li>In preparation for the planned "big event" and Krashball</li> </ul>		
	activity we had invited Cambridge United Football Club		
	to attend and show support and encouragement for the		
	Kick Ash project and the young mentors. Despite the event		
	being cancelled, new arrangements were negotiated with		
	CUFC and two students from Swavesey VC were given		
	the opportunity to meet and interview some of the players		
	at their training ground. This gave the young mentors the		
	chance to ask players to share their thoughts about being		
	healthy and smoke-free. Our officer chaperoned the		
	students and made all the necessary arrangements with		
	CUFC and with our corporate Communications Team (for		
	the occasion to be captured on film and still images to be		
	shared on social media and web pages). This proved a		
	very positive experience for both the mentors and the		
	players who have now pledged, as part of Cambridge		
	United Football Club, to support Kick Ash, sharing short		
	videos and photos on their social media and web pages.		
	General Data Protection Regulations came into force on		
	25 <sup>th</sup> May and the consent forms used for newly recruited		
	mentors were updated.		
	• Safety Zone took place in St Neots over 41/2 days. Officers		
	from the Community Protection Team helped to deliver		
	safety messages about the effects of tobacco and e-		
	cigarettes on health as well as information about age		
	restrictions and shop policies to some 450 aged 9/10 year		
	olds from 16 different schools.		
	• June:		
	Organised and chaired resource team meeting to discuss the		
	marketing strategy, social media and communications support		
	and fulfilment.		
	Evaluation meetings took place with Cottenham and Sawtry		
	school leads for the end of year with recruitment options		
	discussed and new contacts established.		
	All meetings to support the schools were fulfilled.		

P&C	Strengthening Communities Service	<ul> <li>For period 1 April to 30 June]. Business as usual continues in Fenland, below are a few of the highlights for this quarter.</li> <li><b>Prevention at Scale</b> Normally a Health based initiative, in the case of Wisbech Prevention at Scale is being used to achieve greater impacts in Community Development and Engagement, the rationale being that if there is greater engagement from communities overall, if they begin to own projects or services and exert a voice and influence then, impacts are likely to be greater, whether that be in heath, well-being, skills, employment or educational attainment (or indeed any other broad theme). This project is about the population and communities of Wisbech and dovetails neatly with the overarching vision and themes of Wisbech 2020.</li> <li><b>Wisbech Community Led Local Delivery (CLLD)</b> Using ESF and partnership funding (including CCC), Wisbech CLLD is a programme being delivered through a range of local projects which will help people facing multiple disadvantages to move closer to work, either into paid employment or into activities that may build their confidence and skills to help them find work.</li> <li>Project funding applications are considered by a Local Action Group which includes Strengthening Communities and as a result of our involvement, local community leaders who are representative of the town's demographics.</li> <li><b>Time Credit networks</b> 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. Officers are currently progressing the ambitious plans for sustainable Time Credits work post Jan 2019 when the current contract with Spice ends.</li> </ul>	£2,500	£2,588	-£88	
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	cyclist/ pedestrian safety	Work with Cambridge City Council, Police and Cambridge Cycling Campaign to explore some of the issues facing cyclists in Cambridge. Looking at some additional analysis of collisions where close pass recorded as a factor.			
ETE	Road Safety	<ul> <li>This academic year has seen an increase to 26 schools on the JTA scheme and a further 15 on the waiting list.</li> <li>There are now 144 JTAs across the 26 schools. Activities they have undertaken include: <ul> <li>A competition to write 'be bright be seen' songs and poems for when the clocks changed</li> <li>Walk to school promotion, including Happy Shoes Day</li> <li>School assemblies</li> <li>A school play</li> <li>Designing their own banners for outside school</li> <li>Charity events to support the Road Victims Trust</li> </ul> </li> <li>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.</li> <li>A separate funding bid to the Office of the Police and Crime Commissioner has been submitted to extend the programme to deliver Youth Travel Ambassador in 10 secondary schools across Cambridgeshire and Peterborough in the new academic year.</li> </ul>	£5,000	£5,000	0
ETE	Illicit Tobacco	<ul> <li>Preparation and cases in the Magistrates Court. Hearing dates in June resulted in arrest warrants being issued as defendants failed to appear and another case hearing will be in September.</li> <li>Intelligence work on going. Intelligence received on shops as other premises selling in various places across the county.</li> </ul>	£3,750	£1,755	£1,995
		SUB TOTAL : ETE Q1	£30,000	£28,005	£1,995
C&CS	Research	The main focus for quarter one has been the delivery of the New Communities survey work. This will provide insight into the demographics of new communities (in support of the	£5,500	£5,500	0

		planning of new facilities and services) and also include some questions on the perceived health of respondents. The team are currently surveying the Cambridge fringe developments. The consistent review and update to CambridgeshireInsight and CambridgeshireInsight OpenData continues. A recent finance paper to the CambridgeInsight steering group identified an annual cost for each partner £4,110 per anum for basic maintenance and upkeep for the site. It is assumed that the MOU covers this cost.			
C&CS	Transformation Team Support	<ul> <li>Business Planning The Transformation Team continues to lead the Council's Business Planning Process, ensuring that the 2018-19 Business Planning process sufficiently aligns with the work of the Public Health directorate, and supporting Public Health colleagues to engage with the Business Planning process. </li> <li>Business Transformation <ul> <li>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</li> <li>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.</li> </ul> </li> <li>Links between Public Health, STP and Devolution <ul> <li>The Transformation Team continue to engage and support the development of STP work led by Public Health.</li> <li>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.</li> </ul> </li> </ul>	£6,750	£6,750	0
C&CS	Communications	<ul> <li>Supporting the Change for Life campaign on physical activity</li> <li>Developing a PR communications strategy for the PH team</li> <li>Continuing to work on the falls prevention campaign</li> <li>Stay Well evaluation</li> </ul>	£6,250	£6,250	0

		- Heatwave communications			
C&CS	Strategic Advice	<ul> <li>Leading the corporate Health, Safety and Wellbeing Board to ensure that Public Health, &amp; its role in supporting for staff wellbeing, is given greater focus</li> <li>Support with specification and supply of analytical software</li> <li>Managing the corporate risk management and corporate performance management frameworks and ensuring that Public Health is fully accounted for in these</li> </ul>	£5,500	£5,500	0
C&CS	Emergency Planning Support	<ul> <li>Close co-operation with the Health Emergency Planning Officer (HEPRO) across a range of resilience tasks.</li> <li>Provision of emergency planning support when the HEPRO is not available</li> <li>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.</li> <li>Ongoing support across all areas of resilience preparation</li> </ul>	£1,250	£1,250	0
C&CS	LGSS Managed Overheads	<ul> <li>This continues to be supported on an ongoing basis, including:</li> <li>Provision of IT equipment</li> <li>Office Accommodation</li> <li>Telephony</li> <li>Members allowances</li> </ul>	£25,000	£25,000	0
		SUB TOTAL : CCS Q1	£50,250	£50,250	0
LGSS	Overheads associated with PH function	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	£55,000	£55,000	0
		SUB TOTAL : LGSS Q1	£55,000	£55,000	£0