

From: Martin Wade

Tel.: 01223 699733

Date: 10 October 2018

Public Health Directorate

Finance and Performance Report – October 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
Sept (No. of indicators)	6	2	20	3	31

2. INCOME AND EXPENDITURE

2.1 Overall Position

Forecast Outturn Variance (Sep) £000	Service	Budget for 2018/19 £000	Actual to end of Oct 18 £000	Forecast Outturn Variance £000	Forecast Outturn Variance %
0	Children Health	9,266	4,409	0	0%
0	Drug & Alcohol Misuse	5,625	3,991	0	0%
-331	Sexual Health & Contraception	5,157	1,963	-331	6%
-50	Behaviour Change / Preventing Long Term Conditions	3,812	1,338	-50	-1%
0	Falls Prevention	80	53	0	0%
-10	General Prevention Activities	56	35	-8	-14%
0	Adult Mental Health & Community Safety	256	60	0	0%
0	Public Health Directorate	2,019	926	-70	-3%
-391	Total Expenditure	26,271	12,774	-459	-2%
0	Public Health Grant	-25,419	-19,271	0	0%
0	s75 Agreement NHSE-HIV	-144	144	0	0%
0	Other Income	-40	-12	0	0%
0	Drawdown From Reserves	-39	0	0	0%
0	Total Income	-25,642	-19,139	0	0%
0	Contribution to/(Drawdown from) Public Health Reserve	0	0	68	
-391	Net Total	629	-6,365	-391	-73%

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 £459k, an increase of £68k from last months reported position. An underspend of £50k has been identified against the Public Health Directorate staffing budgets following a review of commitments against budget, with a further £20k underspend expected against Emergency Planning. A previously reported underspend on general preventions activities has reduced by £2k to £8k. 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 [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 September 2018.

Sexual Health (KPI 1 & 2)

- Performance of sexual health and contraception services is good.

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 month's performance with the trajectory moving up but indicators for people setting and achieving a four week quit remain still 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. Q2 is presented whilst this indicator is reporting as red it is an improvement on performance from this time last year.
- Indicator 4 for the number of outreach health checks remains red but the trajectory is moving upward. Further details of the refocus for the service are available in the commentary in Appendix 6.

Lifestyle Services (KPI 5,16-30)

- There are 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 indicators for the personal health trainer service, proportion of Tier 2 clients completing weight loss interventions (which is seeing an improvement in the trajectory) and smoking cessation.

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

The performance data provided reports on the Q2 (July –Sept 2018) for the Health Visiting and School Nurse service.

Health Visiting (KPI 6-11)

- The breastfeeding target for 2018/19 will remain at 56%- this is recognised across the county as a challenging target however performance for Q2 has seen a 3% increase and is now reaching this target. The performance indicator for the second quarter is at green.
- Breastfeeding rates are very varied across Cambridgeshire and Appendix 6 provides more detail on this.
- Improved performance against Health Visitor mandated checks for the percentage of births that receive a New Birth Visit (NBV) and children who receive a 6-8 week review is noted and the indicators are green.

- Whilst the percentage of first face to face antenatal contacts with a health visitor from 28 weeks is red the direction of travel from the previous quarter is up.
- Appendix 6 commentary provides further detailed explanation on the current performance.
- Performance against the 12 month Health Visitor check by 15th months has reduced in Q2. The service has focused on completing reviews by the 12th month hence we expect to see an improvement in this KPI during Q3. Including exception reporting takes performance to 94%.
- The indicator for performance against the children who receive a 2 – 2 1/2 year check is red. Performance has improved from Q1 to Q2. Appendix 6 provides detailed commentary.

School Nursing (KPI 12,13a and 13b)

- Quarter 2 reports 108 young people received brief interventions face-to-face. The commentary in Appendix 6 provides a further analysis of the types of interventions.
- Performance indicator 13 has been further broken down into number of calls made to the duty desk (13a) and number of young people who access advice and support through Chat Health (13b).
- Numbers are lower in Q2 due the summer school holidays the commentary reports emotional health is the most frequent reason to access the service.

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

- Quarter 2 report to be provided in a future report.

APPENDIX 1 – Public Health Directorate Budgetary Control Report

<i>Previous Outturn (Sep) £'000</i>	Service	Budget 2018/19 £'000	Actual to end of Oct £'000	Outturn Forecast	
				£'000	%
	Children Health				
0	Children 0-5 PH Programme	7,253	1,837	0	0%
0	Children 5-19 PH Programme - Non Prescribed	1,706	2,246	0	0%
0	Children Mental Health	307	327	0	0%
0	Children Health Total	9,266	4,409	0	0%
	Drugs & Alcohol				
0	Drug & Alcohol Misuse	5,625	3,991	0	0%
0	Drugs & Alcohol Total	5,625	3,991	0	0%
	Sexual Health & Contraception				
-281	SH STI testing & treatment – Prescribed	3,829	1,641	-281	-7%
-50	SH Contraception - Prescribed	1,176	289	-50	-4%
0	SH Services Advice Prevn Promtn - Non-Presribed	152	34	0	0%
-331	Sexual Health & Contraception Total	5,157	1,963	-331	-6%
	Behaviour Change / Preventing Long Term Conditions				
0	Integrated Lifestyle Services	1,980	1,140	-0	0%
0	Other Health Improvement	413	43	0	0%
-50	Smoking Cessation GP & Pharmacy	703	-175	-50	-7%
0	NHS Health Checks Prog – Prescribed	716	330	0	0%
-50	Behaviour Change / Preventing Long Term Conditions Total	3,812	1,338	-50	-1%
	Falls Prevention				
0	Falls Prevention	80	53	0	0%
0	Falls Prevention Total	80	53	0	0%
	General Prevention Activities				
-10	General Prevention, Traveller Health	56	35	-8	-14%
-10	General Prevention Activities Total	56	35	-8	-14%
	Adult Mental Health & Community Safety				
0	Adult Mental Health & Community Safety	256	60	0	0%
0	Adult Mental Health & Community Safety Total	256	60	0	0%

<i>Previous s Outturn (Sep) £'000</i>	Service	Budget 2018/19 £'000	Actual to end of Oct £'000	Outturn Forecast £'000 %	
Public Health Directorate					
0	Children Health	189	98	0	0%
0	Drugs & Alcohol	287	120	0	0%
0	Sexual Health & Contraception	164	75	0	0%
0	Behaviour Change	753	348	-50	-7%
0	General Prevention	199	109	0	0%
0	Adult Mental Health	36	13	0	0%
0	Health Protection	53	29	-20	-38%
0	Analysts	338	134	0	0%
0		2,019	926	-70	-3%
-391	Total Expenditure before Carry forward	26,271	12,774	-459	-2%
0	Anticipated contribution to Public Health grant reserve	0	0	68	0.00%
Funded By					
0	Public Health Grant	-25,419	-19,271	0	0%
0	S75 Agreement NHSE HIV	-144	144	0	0%
0	Other Income	-40	-12	0	0%
	Drawdown From Reserves	-39	0	0	0%
0	Income Total	-25,642	-19,139	0	0%
-391	Net Total	629	-6,365	-391	-73%

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 Testing and Treatment	3,829	-281	-7%
<p>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.</p>			

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 Oct 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 Oct 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

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

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

	Below previous month actual
	No movement
	Above previous month actual

Measures												
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	Sep-18	98%	98%	100%	102%	G	98%	98%	100%	↔	
2	GUM ACCESS - % seen within 48 hours (% of those offered an appointment)	Sep-18	80%	80%	91%	113%	G	91%	80%	91%	↔	
3	Number of Health Checks completed (GPs)	Q2 (Jul-Sept 18)	18,000	9000	7251	81%	R	77%	4500	3447	↔	This is an improvement on performance at this time last year.
4	Number of outreach health checks carried out	Sep-18	1,800	900	610	68%	R	63%	108	102%	↑	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	Aug-18	2154	960	617	64%	R	76%	170	78%	↑	<ul style="list-style-type: none"> There has been an ongoing improvement in performance in the past two months. 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. 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%

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	Q2 Jul-Sept	56%	56%	55%	98%	G	53%	56%	56%	↑	Despite being a challenging target, county breastfeeding statistics have seen a further 3% increase in Q2 on top of the 3% improvement in Q1. Cambs is now reaching target of 56% based on quarterly averages. Overall, breastfeeding rates in Cambridgeshire remains higher than the national average of 44%. Breastfeeding rates vary across the county however there has been a notable improvement in East Cambs & Fenland in Q2, raising from 33% to 43%, coming close to national average.
7	Health visiting mandated check - Percentage of first face-to-face antenatal contact with a HV from 28 weeks	Q2 Jul-Sept	50%	50%	23%	46%	R	20%	50%	23%	↑	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 improved by 3%. Locally, Huntingdon has increased it's antenatal visits from 38% in Q1 to 47% in Q2. However East Cambs & Fenland has dropped from 37% in Q1 to 24% in Q2 and South Cambs from 13% in Q1 to 5% in Q2. Steps to improve this include introduction of mobile working which is being rolled out across the patch and will be completed by the end of the calendar year. Incentives are also being offered to encourage staff to work across a wider geographic area. Progress has been made in securing agreement from all 4 hospitals to provide antenatal notifications.
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	Q2 Jul-Sept	90%	90%	92%	102%	G	90%	90%	92%	↑	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	Q2 Jul-Sept	90%	90%	92%	102%	G	85%	90%	92%	↑	Performance for the 6 - 8 week review has continued to improve since Q4 17/18 and is now above target threshold of 90%. This has been achieved in each of the 3 local areas and notably with Huntingdon reaching 94%.
10	Health visiting mandated check - Percentage of children who received a 12 month review by 15 months	Q2 Jul-Sept	95%	95%	81%	85%	A	85%	95%	77%	↓	Performance has reduced in Q2 from 85% to 77%, however there has been an improvement in the number of children receiving their 1 year check by their 1st birthday. Due to this we anticipate that there will be an improvement in this KPI for Q3. Including exception reporting takes performance to 94%. Exception reporting includes those that 'did not want' or 'did not attend' their appointment. However it also includes those who were not recorded (n=213 children in Q2). Work is being undertaken to clarify the definition of 'not recorded' and to improve data completeness in this regard. An additional challenge has been the delayed transfers in notifications from the Child Health Information System (CHIS) presenting a capacity issue to the service. This has now been resolved.
11	Health visiting mandated check - Percentage of children who received a 2 - 2.5 year review	Q2 Jul-Sept	90%	90%	69%	76%	R	67%	90%	72%	↑	Performance has improved from Q1 to Q2. Performance ranges from 67% in South Cambs, 73% in Huntingdon to 79% in East Cambs and Fenland. East Cambs & Fenland improved from 45% to 79%. Initiatives to continue to improve uptake of this mandated visit include 1) Home visiting offer reinstated in deprived areas 2.) Additional Saturday morning clinics put on in Cambs City which have proven popular 3.) reviewed processes for sending out appointments to ensure they are sent out earlier to be able to offer second appointment within timeframe if needed.
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	Q2 Jul-Sept	N/A	N/A	208	N/A	N/A	100	N/A	108	N/A	The School Nursing service is actively delivering brief interventions for Healthy Weight, Mental Health, Sexual Health and Domestic Violence. The numbers of brief interventions for domestic violence are particularly high and are to be applauded. There have been no brief interventions for substance misuse or smoking cessation. This is worrying given the number of onwards referrals to substance misuse and smoking cessation services is very low too. Urgent review of school nursing service offer and pathways with young people's substance misuse and smoking cessation services being undertaken during November.
13a	School nursing - number of calls made to the duty desk	Q2 Jul-Sept	N/A	N/A	1490	N/A	N/A	Not applicable	N/A	689	N/A	Numbers overall are lower in Q2 due to the summer school holidays. Emotional health is by far the most popular topic. Events promoting Chat Health have been well received across the area.
13b	School nursing - Number of children and young people who access health advice and support through Chat Health	Q2 Jul-Sept	N/A	N/A	1123	N/A	N/A	Not applicable	N/A	381	N/A	

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)	Sep-18	>90%	>90%	>90%	91%	G	91.3%	91.0%	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 2018/19 measurement programme commences in November
15	Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	Sep-18	>90%	>90%	>90%	95%	G	95.1%	95.0%	90.0%	N/A	
16	Overall referrals to the service	Sep-18	5300	2173	2650	122%	G	148%	318	108%	↓	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)	Sep-18	1670	685	694	101%	G	92%	100	116%	↑	
18	Personal Health Trainer Service - Personal Health Plans completed (Pre-existing GP based service)	Sep-18	1252	513	612	119%	G	222%	75	128%	↓	
19	Number of physical activity groups held (Pre-existing GP based service)	Sep-18	730	299	507	169%	G	262%	44	223%	↓	
20	Number of healthy eating groups held (Pre-existing GP based service)	Sep-18	495	203	236	116%	G	50%	30	53%	↑	
21	Personal Health Trainer Service - number of PHPs produced (Extended Service)	Sep-18	800	328	452	138%	G	190%	48	121%	↓	
22	Personal Health Trainer Service - Personal Health Plans completed (Extended Service)	Sep-18	650	267	276	104%	G	113%	39	105%	↓	
23	Number of physical activity groups held (Extended Service)	Sep-18	830	340	354	104%	G	102%	50	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
24	Number of healthy eating groups held (Extended Service)	Sep-18	570	234	265	113%	G	39%	34	47%	↑	
25	Proportion of Tier 2 clients completing the intervention who have achieved 5% weight loss.	Sep-18	30%	30%	24.0%	80%	R	22%	30%	30%	↑	There is an improvement this month but there has been an ongoing issue with staff changes. To address this Everyone Health has contracted with Weight Watchers (WV reimagined) and Slimming World to provide the services. The services that these organisations provide have been very well evaluated and they have robust evidence for the effectiveness of their services. These will commence in October.
26	Proportion of Tier 3 clients completing the course who have achieved 10% weight loss	Sep-18	60%	60%	58.0%	96%	A	67.0%	60%	56.0%	↓	Generally this service performs well but it does have some very challenging complex patients that find meeting the 10% weight loss target difficult.
27	% of children recruited who complete the weight management programme and maintain or reduce their BMI Z score by agreed amounts	Sep-18	80%	80%	80%	100.0%	G	0%	80%	0%	↔	A new programme has commenced.
28	Number of referrals received for multi factorial risk assessment for Falls Prevention	Sep-18	520	213	341	100.0%	G	295%	31	309%	↑	
29	Number of Multi Factorial Risk Assessments Completed - Falls Prevention	Sep-18	442	181	367	100.0%	G	511%	27	244%	↓	
30	Number clients completing their PHP - Falls Prevention	Sep-18	331	136	212	100.0%	G	158%	20	385%	↑	

* All figures received in October 2018 relate to September 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 months 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 Q2

To be provided in a future report.