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Date: 10<sup>th</sup> June 2019

## **Public Health Directorate**

### **Finance and Performance Report – May 2019**

#### **1 SUMMARY**

##### **1.1 Finance**

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

##### **1.2 Performance Indicators**

<b>Monthly Indicators</b>	<b>Red</b>	<b>Amber</b>	<b>Green</b>	<b>No Status</b>	<b>Total</b>
Apr (No. of indicators)	6	1	24	0	31

#### **2. INCOME AND EXPENDITURE**

##### **2.1 Overall Position**

<b>Forecast Outturn Variance (Apr) £000</b>	<b>Service</b>	<b>Budget for 2019/20 £000</b>	<b>Actual to end of May 19 £000</b>	<b>Forecast Outturn Variance £000</b>	<b>Forecast Outturn Variance %</b>
-	Children Health	8,832	-14	0	0%
-	Drug & Alcohol Misuse	5,463	64	0	0%
-	Sexual Health & Contraception	5,097	-162	0	0%
-	Behaviour Change / Preventing Long Term Conditions	3,720	-489	0	0%
-	Falls Prevention	80	-10	0	0%
-	General Prevention Activities	13	-1	0	0%
-	Adult Mental Health & Community Safety	256	-1	0	0%
-	Public Health Directorate	1,894	231	0	0%
-	<b>Total Expenditure</b>	<b>25,355</b>	<b>-381</b>	<b>0</b>	<b>0%</b>
-	Public Health Grant	-24,726	-6,390	0	0%
-	s75 Agreement NHSE-HIV	-144	-144	0	0%
-	Other Income	-38	-10	0	0%
-	Drawdown From Reserves	-57	0	0	0%
-	<b>Total Income</b>	<b>-24,965</b>	<b>-6,544</b>	<b>0</b>	<b>0%</b>
-	<b>Contribution to/(Drawdown from) Public Health Reserve</b>				
-	<b>Net Total</b>	<b>390</b>	<b>-6,925</b>	<b>0</b>	<b>0%</b>

The service level budgetary control report for 2019/20 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 2019/20. Savings totalling £949k 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 2019/20 is £25.560m, of which £24.726m 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 of April 2019(Appendix 6)**

#### Sexual Health (KP1 & 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.

- The indicators for people setting and achieving a four week quit still remain red. Everyone Health is exceeding its targets for quits for routine and manual workers but activity in primary care has been decreasing (See Appendix 6)
- Appendix 6 provides further commentary on the Public Health Outcomes Framework (released July 2018) suggesting prevalence of smoking in Cambridgeshire is statistically similar to the England figure.
- End of year date will be available at the end of June 2019.

#### National Child Measurement Programme (KPI 14 & 15)

- The coverage target for the programme was met in 2017/18 and data has been submitted to PHE. Updates on performance in last year's programme were provided in February 2019 performance report.
- Measurements for the 2018/19 programme are taken during the academic year and the programme commenced in November 2018.

#### NHS Health Checks (KPI 3 & 4)

- Indicator 3 for the number of health checks completed by GPs is reported on quarterly. Q1 is presented and reporting as green.
- The commentary provides more details on the outreach health checks provision measured in Indicator 4 which remains at red.

#### Lifestyles Services (KPI 5, 16-30)

- There are 16 Lifestyle Service indicators reported on, the overall performance is good with 10 green 1 amber and 5 red indicators.
- Appendix 6 provides further explanation of the red indicators for smoking cessation and the personal health trainer service. The commentary further explains performance against the proportion of Tier 3 clients completing weight loss interventions and the complexity of the client group.
- The number of clients completing their PHP for the falls prevention service has fallen and KPI 30 is at red. The drop represents increased referrals and service capacity to respond (See appendix 6)

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

The performance data for Q1 (April – June 2019) for the Health Visiting and School Nurse services is still pending and should be available to report on in next month's finance and performance report.

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

TO FOLLOW

## APPENDIX 1 – Public Health Directorate Budgetary Control Report

Previous Outturn (Apr) £'000	Service	Budget 2019/20 £'000	Actual to end of May £'000	Outturn Forecast	
				£'000	%
	Children Health				
0	Children 0-5 PH Programme	6,907	0	0	0%
0	Children 5-19 PH Programme - Non Prescribed	1,655	-14	0	0%
0	Children Mental Health	271	0	0	0%
0	Children Health Total	8,832	-14	0	0%
	Drugs & Alcohol				
0	Drug & Alcohol Misuse	5,463	64	0	0%
0	Drugs & Alcohol Total	5,463	64	0	0%
	Sexual Health & Contraception				
0	SH STI testing & treatment – Prescribed	3,829	9	0	0%
0	SH Contraception - Prescribed	1,116	-203	0	0%
0	SH Services Advice Prevn Promtn - Non-Presribed	152	33	0	0%
0	Sexual Health & Contraception Total	5,097	-162	0	0%
	Behaviour Change / Preventing Long Term Conditions				
0	Integrated Lifestyle Services	1,979	-150	0	0%
0	Other Health Improvement	413	-143	0	0%
0	Smoking Cessation GP & Pharmacy	703	-206	0	0%
0	NHS Health Checks Prog – Prescribed	625	9	0	0%
0	Behaviour Change / Preventing Long Term Conditions Total	1,979	-150	0	0%
	Falls Prevention				
0	Falls Prevention	80	-10	0	0%
0	Falls Prevention Total	80	-10	0	0%
	General Prevention Activities				
0	General Prevention, Traveller Health	13	-1	0	0%
0	General Prevention Activities Total	13	-1	0	0%
	Adult Mental Health & Community Safety				
0	Adult Mental Health & Community Safety	256	-1	0	0%
0	Adult Mental Health & Community Safety Total	256	-1	0	0%

Previous Outturn (Apr) £'000	Service	Budget 2019/20 £'000	Actual to end of May £'000	Outturn Forecast	
				£'000	%
	Public Health Directorate				
0	Children Health	285	26	0	0%
0	Drugs & Alcohol	216	34	0	0%
0	Sexual Health & Contraception	155	13	0	0%
0	Prevention Long Term Conditions (Behaviour Change )	559	61	0	0%
0	General Prevention (Travellers)	206	32	0	0%
0	Adult Mental Health	21	4	0	0%
0	Health Protection	134	23	0	0%
0	Analysts	318	38	0	0%
0		1,894	231	0	0%
0	Total Expenditure before Carry forward	25,355	-381	0	0%
0	Anticipated contribution to Public Health grant reserve	0	0	0	0%
	Funded By				
0	Public Health Grant	-24,726	-6,390	0	0%
0	S75 Agreement NHSE HIV	-144	-144	0	0%
0	Other Income	-38	-10	0	0%
	Drawdown From Reserves	-57	0	0	0%
0	Income Total	-24,965	-6,544	0	0%
-0	Net Total	390	-6,925	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 2019/20 £'000	Forecast Outturn Variance	
		£'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	25,560	25,560	Ring-fenced grant
Grant allocated as follows;			
Public Health Directorate	24,726	24,726	
P&C Directorate	293	293	
P&E Directorate	120	120	
CS&T Directorate	201	201	
LGSS Cambridge Office	220	220	
<b>Total</b>	<b>25,560</b>	<b>25,560</b>	



## APPENDIX 4 – Virements and Budget Reconciliation

	£'000	Notes
<b>Gross Budget as per Business Plan</b>		
<b>Virements</b>		
Non-material virements (+/- £160k)		
<b>Budget Reconciliation</b>		
<b>Current Budget 2019/20</b>		

## APPENDIX 5 – Reserve Schedule

Fund Description	Balance at 31 March 2019	2018/19		Forecast Closing Balance	Notes
		Movements in 2019/10	Balance at end May 2019		
	£'000	£'000	£'000	£'000	
<b><u>General Reserve</u></b>					
Public Health carry-forward	1,683	0	1,683	1,683	Usage of un-earmarked reserve to be considered by Member working group
<b>subtotal</b>	<b>1,683</b>	<b>0</b>	<b>1,683</b>	<b>1,683</b>	
<b><u>Other Earmarked Funds</u></b>					
Healthy Fenland Fund	199	0	199	99	Anticipated spend £100k per year over 5 years.
Falls Prevention Fund	271	0	271	171	Joint project with the NHS
NHS Healthchecks programme	270	0	270	270	Usage to be considered by Member working group
Implementation of Cambridgeshire Public Health Integration Strategy	463	0	463	363	'Let's Get Moving' physical activity programme has been extended.
<b>subtotal</b>	<b>1,203</b>	<b>0</b>	<b>1,203</b>	<b>903</b>	
<b>TOTAL</b>	<b>2,886</b>	<b>0</b>	<b>2,886</b>	<b>2,586</b>	

(+) positive figures should represent surplus funds.

(-) negative figures should represent deficit funds.

Fund Description	Balance at 31 March 2019	2018/19		Forecast Closing Balance	Notes
		Movements in 2019/20	Balance at end May 2019		
	£'000	£'000	£'000	£'000	
<b><u>General Reserve</u></b>					
Joint Improvement Programme (JIP)	128	0	128	128	
Improving Screening & Immunisation uptake	9	0	9	9	£9k from NHS ~England for expenditure in Cambridgeshire and Peterborough
<b>TOTAL</b>	<b>137</b>		<b>137</b>	<b>137</b>	

## 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 April 2019 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+D&O2	Apr-19	98%	98%	100%	102%	G	100%	98%	100%	↔	
2	GUM ACCESS - % seen within 48 hours ( % of those offered an appointment)	Apr-19	80%	80%	87%	109%	G	90%	87%	90%	↓	
3	Number of Health Checks completed (GPs)	Q1 (Apr-Jun)	18,000	n/a	n/a	n/a	G	n/a	n/a	n/a	↔	Reporting for Health Checks is quarterly, therefore data for 19-20 will be available in the July report
4	Number of outreach health checks carried out	Apr-19	1,600	162	67	41%	R	81%	162	41%	↓	The Lifestyle Service is commissioned to provide outreach Health Checks for hard to reach groups in the community and in workplaces. The provider uses a range of innovative approaches which includes sessions in workplaces in Fenland where there are high risk workforces. Wisbech Job Centre Plus, community centres in areas that have high risk populations are ongoing, a mobile service and "pop up" shops opening. New events are planned for this financial year. Most of the key workplaces in Fenland have received visits and the eligible workforce have received their health checks. Alternative approaches are being adopted.
5	Smoking Cessation - four week quitters	Mar-19	2154	2154	1631	76%	R	99%	156	91%	↓	<ul style="list-style-type: none"> <li>The main issue is the core Everyone Health service is exceeding its targets for number of quitters, from routine and manual groups, pregnant smokers and carbon monoxide verification rates.</li> <li>Activity and quit rates from primary care have been falling some of this is due to poor data returns but generally activity has decreased. The Provider is asked to increase its support to practices to increase their engagement in delivering stop smoking services.</li> <li>The ongoing improvement represents work undertaken with GP practices to improve their data returns by JCU staff. 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.</li> <li>The new promotional campaign "missing moments" has secured a lot of local coverage. Any impacts upon Services will be monitored.</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> The end of year data will not be available until the end of June and this will include data from February and March in addition to the data trawls that are undertaken in practices.

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 2019	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	Despite being a challenging target and experiencing a 1 percentile decrease this quarter, county breastfeeding statistics remain just above the 56% target and significantly exceeding the national average of 45%. Across the year performance has fluctuated but has shown improvement over the last two quarters. Breastfeeding prevalence rates, which comprise of both exclusive breastfeeding and mixed feeding vary across the county. In February however, due to service redesign changes, the data for Huntingdonshire and Fenland have been amalgamated to form the North Locality area, whereas East Cambs has been included in the South Cambs and City data, therefore the disaggregated data cannot be comparable to previous quarters. Prevalence stands at 66% in the South Locality and 50% in the newly formed North Locality. It is expected that district level data will be available from Q1 2019/20. The Health Visiting service remains Stage 3 UNICEF Baby Friendly accredited, which demonstrates quality of care in terms of support, advice and guidance offered to parents/careers and the excellent knowledge that staff have in respect of responsive feeding.
7	Health visiting mandated check - Percentage of first face-to-face antenatal contact with a HV from 28 weeks	Q1 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	In Cambridgeshire a local target has been set for 50%, with the longer term goal of achieving a target of 90% by 2020. Service transformation, which has included use of the Benson Modelling tool to determine workforce required to deliver the service, has accounted for Health Visitors to be completing all antenatal contacts and will start to be worked against from April 2019. Quarter 4 shows an increase of 4% of antenatal contacts achieved across the service in comparison to quarter 3 and is comparable to Q2 performance. Despite these improvements, overall performance still remains significantly below target. Disaggregated into the two new Locality areas, the North team completed 38% of contacts, however the South Locality continues to face challenges, only achieving 5%. The provider reports that the South Cambs locality remains under pressure with its current staffing capacity and the staffing capacity tool has identified that for Q4 staffing reduced from 87% availability to 77%, which impacted on the mandated reviews. Staff engagement identified that the workforce do value the importance of this contact however feel processes challenges are an issue. These are being addressed and work is underway to streamline the waiting list to aid assessment and contact planning as well as improving communication with Maternity services. Monthly face to face HV/Midwifery meetings are being established to discuss identified vulnerable pregnant women and there is ongoing development to embed an electronic notification process. To mitigate the situation in the immediacy, a Business Continuity Plan has been implemented and a meeting has been scheduled to discuss next steps. Options include reviewing the frequency and delivery style of some clinics in the South Locality to include a greater skill mix, freeing up Health Visitors to complete more antenatal contacts and temporarily halting face to face contacts for universal families for the 12 month and 2-2.5 year reviews, instead offering them a letter containing an ASQ self-assessment, advising parents to get in contact if there are any concerns. It is anticipated performance will increase significantly from September, when 4 newly qualified Health Visitors come into post in the locality.
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 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	The 10 - 14 day new birth visit remains consistent each month and numbers are exceeding the 90% target, despite a 2 percentile decrease this quarter. If those completed after 14 days are accounted for, the quarterly average increase to 97%.
9	Health visiting mandated check - Percentage of children who received a 6 - 8 week review	Q1 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	Performance for the 6 - 8 week review has remained steady throughout the year and comparable to the previous quarter. The continuation of good performance has meant that the YTD performance has also improved, increasing from 89% to 92%, which is positive. During quarter 4, in some areas, as a temporary measure, universal pathway families have been invited to a clinic based appointment to build capacity elsewhere within the system. For universal plus/partnership plus families a home visit contact has been maintained.
10	Health visiting mandated check - Percentage of children who received a 12 month review by 15 months	Q1 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	Performance has remained stable this quarter, standing at 84%; by comparison 78% of families received this visit by the time the child turned 12 months old. The inclusion of exception reporting would increase the quarterly performance to 97% of families having this review by the time the child turns 15 months, which would exceed the 95% target. Of all appointments offered this quarter, 156 were not wanted by the family and 86 were not attended. Assurances are in place to ensure vulnerable families (those on Universal Plus or Universal Partnership Plus pathways) are receiving this contact and an escalation plan is in place if these mandated visits are missed. A further 58 of contacts were 'not recorded'. The provider again cites pressures attributed to ongoing challenges in the South Locality and increased levels of short term sickness during the period.
11	Health visiting mandated check - Percentage of children who received a 2 -2.5 year review	Q1 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	Despite demonstrating an upward trajectory over the course of the year, performance has declined from 76% to 73% over the duration of the quarter and continues to fall below the target threshold of 90%. The main cause of performance issues against this target was staffing and capacity challenges in the South Locality being exacerbated by short term sickness, resulting in performance reducing to 54% by this team in March, significantly impacting on overall figures. If exception reporting is accounted for, overall performance increases to 88%, a decrease of 7% from Q3. This quarter it was reported that 152 reviews were not wanted and 127 were not attended. 225 contacts were listed as 'not recorded', which has shown slippage compared to only 87 in Q3. The data indicates that non recorded contacts are predominantly an issue within the South Locality team and is being addressed with the provider through the Business Continuity Plan and options being considered in the Antenatal narrative.
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 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	The School Nursing service is actively delivering brief interventions for Health Weight, Mental Health, Sexual Health and Domestic Violence. There have also been 4 interventions in relation to immunisations undertaken this quarter. The numbers of brief interventions for Domestic Violence continues to be the highest recorded intervention young people are seeking support with (n=32), followed by Sexual Health (n=21) and Mental Health (n=19); there continues to be no young people seeking support for issues related to smoking or substance misuse. The provider reports that in the duration of the quarter, 573 CYP received a face-to-face intervention by the School Nursing team, however only 83 themed interventions were recorded. Work is to be conducted with the provider and their data analytics team to obtain a more rounded picture of what issues School Nurses are supporting young people with, including conducting an audit to check whether this is a recording issue.
13a	School nursing - number of calls made to the duty desk	Q1 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	The number of contacts to the Duty Desk made by telephone call, has dropped significantly this quarter, although it still higher than reported in Q2. In addition to phone contacts, this quarter there have been 2174 email contacts and 138 letter. This indicates that overwhelmingly email is the preferred method of communication into the duty desk, however further analysis is required to determine the proportion of professional contacts and those coming from young people or families. Furthermore, the provider has reported that there has been a 4.4% increase in the amount of young people requiring a 1:1 intervention this quarter.
13b	School nursing - Number of children and young people who access health advice and support through Chat Health	Q1 (Apr-Jun)	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	↔	Chat Health continues to be well embedded as the universal offer for the School Nursing service and figures are showing continual improvement. Over the duration of the quarter there have been a total of 1548 text messages received from young people, resulting in 71 conversations. Analysis of contact attributes indicates that the majority of contacts relate to seeking emotional health and health wellbeing support (54%) and signposting to other services (30%); however further development is required to increase the number of attributes allocated to conversations - this will be picked up with the provider. Additionally, it is reported that the significant difference in figures are likely due to issues/queries being resolved by a singular message rather than requiring numerous message exchanges. ChatHealth is now available nationally to 2 million young people and CCS is the health provider nationally with the most usage of licences across the 4 Healthy Child Programme services the trust delivers, evidencing that it is the right service for this cohort of people and that you can deliver this service in non traditional ways.

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-19	> 90%	70%	76%	110%	G	57.0%	90%	76%	↑	The National Child Measurement Programme (NCMP) has been completed for the 2017/18 academic year. The coverage target was met and the measurement data has been submitted to the PHE in line with the required timeline. The current programme is on track. It is difficult to develop a trajectory for this as it depends on school availability for the measuring team to visit.
15	Childhood Obesity (School year) - 90% coverage of children in reception by final submission (EOY)	Apr-19	> 90%	70%	71%	101%	G	50.0%	90%	71%	↑	
16	Overall referrals to the service	Apr-19	5300	477	676	142%	G	256%	477	142%	↓	
17	Personal Health Trainer Service - number of Personal Health Plans produced (PHPs) (Pre-existing GP based service)	Apr-19	1670	140	147	105%	G	182%	140	105%	↑	Although this indicator is still red overall there has been a general improvement in recent months. This reflects the appointment of two new Health Trainers to fill two empty posts. Lack of capacity had compromised the ability of the Service to develop PHPs. The increased performance has not been large enough to compensate for lack of capacity earlier in the year.
18	Personal Health Trainer Service - Personal Health Plans completed (Pre-existing GP based service)	Apr-19	1252	113	63	56%	R	93%	113	56%	↓	Referral have increased but the personal health plan completion rate remains below target. The manager is addressing with staff to identify any underlying issues.
19	Number of physical activity groups held (Pre-existing GP based service)	Apr-19	730	66	82	124%	G	118%	66	124%	↑	
20	Number of healthy eating groups held (Pre-existing GP based service)	Apr-19	495	45	43	96%	A	116%	45	96%	↓	This reflects variation between months.
21	Personal Health Trainer Service - number of PHPs produced (Extended Service)	Apr-19	800	72	81	113%	G	328%	72	113%	↓	
22	Personal Health Trainer Service - Personal Health Plans completed (Extended Service)	Apr-19	650	59	17	29%	R	85%	59	29%	↓	This continues to be challenging and the Service Manager is addressing this with staff to determine any underlying issues.
23	Number of physical activity groups held (Extended Service)	Apr-19	830	75	78	104%	G	300%	75	104%	↓	
24	Number of healthy eating groups held (Extended Service)	Apr-19	570	48	51	106%	G	218%	48	106%	↓	
25	Proportion of Tier 2 clients completing the intervention who have achieved 5% weight loss.	Apr-19	30%	30%	36%	120.0%	G	17%	30%	36%	↑	

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	Apr-19	60%	60%	45%	75%	R	75%	60%	45%	↓	There are dips in performance in this reflects the complexity of the patient seen by this service. This has been discussed with the provider and is being carefully monitored.
27	% of children recruited who complete the weight management programme and maintain or reduce their BMI Z score by agreed amounts	Apr-19	80%	80%	100%	125.00%	G	0%	80%	100%	↑	A new programme has commenced. A lot of work has been undertaken to increase engagement but it remains challenging. However there has been a recent improvement that reflects a more effective use of NCMP data to secure referrals.
28	Number of referrals received for multi factorial risk assessment for Falls Prevention	Apr-19	520	47	128	272%	G	67%	47	272%	↓	
29	Number of Multi Factorial Risk Assessments Completed - Falls Prevention	Apr-19	442	40	72	160%	G	16%	40	160%	↔	
30	Number clients completing their PHP - Falls Prevention	Apr-19	331	28	21	75%	R	160%	28	75%	↓	This dip represents service capacity. There has been in the last year a four-fold increase in referrals which put pressure on staffing resources

\* All figures received in May 2019 relate to April 2019 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 Q4**

TO FOLLOW

