

Public Health Performance Report: Quarter 1 2024/25

To: Adults and Health Committee

Meeting Date: 10 October 2024

From: Executive Director of Adults, Health, and Commissioning

Electoral division(s): All

Key decision: No

Forward Plan ref: Not Applicable

Executive Summary: The Report describes the performance of the main Public Health commissioned services for quarter 1 2024/25.

Recommendation: The Committee is asked to:

- a) acknowledge the performance and achievements.
- b) support the actions undertaken where improvements are necessary.

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1. Creating a greener, fairer and more caring Cambridgeshire

1.1 Public Health commissioned services reflect the seven strategic ambitions to varying degrees. There is strong alignment with ambitions addressing health inequalities, supporting people to have healthy, safe, and independent lives, and supporting children to thrive.

1.2 This Report reflects the Council's seven ambitions.

Net zero carbon emissions for Cambridgeshire by 2045, and our communities and natural environment are supported to adapt and thrive as the climate changes.

- There are implications with the introduction of virtual and digital services into commissioned services, but these are not covered in this performance report.

Travel across the county is safer and more environmentally sustainable.

- There are implications with the introduction of virtual and digital services, but these are not covered in this performance report.

Health inequalities are reduced.

- The Service does address health inequalities and included interventions to address groups that experience poorer sexual and reproductive health outcomes.

People enjoy healthy, safe, and independent lives through timely support that is most suited to their needs.

- The services do support people to enjoy healthy, safe, and independent lives through timely support most suited to their needs, but this is not detailed in the report.

Helping people out of poverty and income inequality.

- The services do impact upon poverty and income inequality, but this is not detailed in the report.

Places and communities prosper because they have a resilient and inclusive economy, access to good quality public services and social justice is prioritised.

- There are implications for places and communities, but these are not covered in this performance report.

Children and Young People have opportunities to thrive.

- The services do support children to thrive, but this not detailed in this report.

2. Background

2.1 The Performance Management Framework sets out that Policy and Service Committees should:

- Set outcomes and strategy in the areas they oversee
- Select and approve addition and removal of Key Performance Indicators (KPIs) for the committee performance report
- Track progress quarterly
- Consider whether performance is at an acceptable level
- Seek to understand the reasons behind the level of performance
- Identify remedial action

2.2 This report presents performance against the selected KPIs for Public Health commissioned services at the end of Quarter 1, 30th June 2024.

Indicators are 'RAG' rated where targets have been set.

- **Red** – current performance is off target by more than 10%.
- **Amber** – current performance is off target by 10% or less.
- **Green** – current performance is on target by up to 5% over target.
- **Blue** – current performance exceeds target by more than 5%.
- **Baseline** – indicates performance is currently being tracked against the target.

2.3 These performance indicators are for the Public Health high value contracts that are preventative or provide treatment e.g., Drugs and Alcohol Treatment Service. They include both locally set targets and national where applicable. There are key performance indicators for the Healthy Child Programme that is funded from the Public Health Grant. As these are not currently monitored by the Children and Young People's (CYP) Committee they are included here as priority indicators. There are nine indicators described in this report.

3. Main Issues

3.1 In summary the distribution of rag ratings for the performance of services described in the Report were as follows.

- Blue: 1
- Green: 2
- Amber: 3
- Red: 3

3.2 The key areas which have seen substantial improvement are NHS Health Checks and the Healthy Child Programme, with NHS Health Checks exceeding its target for the first time. Tier 2 Weight Management Services continue to achieve above target, driven by a very high demand for services. Currently measures are being taken to manage this high level of demand which exceeds current resources.

- 3.3 The main area of concern is Stop Smoking Services. Smoking rates have fallen considerably in recent years. In Cambridgeshire currently 11.1% of the population are estimated to smoke. The model for stop smoking services has traditionally been driven by referrals from health services primarily GP practices. However, there are population groups with much higher rates who do not always present in GP practices. For example, the homeless rate is 75%, manual and routine 27%.
- 3.4 New national additional funding has been allocated to local authorities for expanding and developing stop smoking and the wider tobacco control services. These are currently being developed and there will be a focus on population groups that have high rates of smoking and regulatory services to address illegal tobacco sales and vaping.

Drug and Alcohol Services

Indicator	FY 2021/22	National average (latest Q)	Quarter 1 22/23	Quarter 2 22/23	Quarter 3 22/23	Quarter 4 22/23	Status
201: % Achievement against target for drug and alcohol service users -Treatment Progress Measure (benchmarked against national average)	48.3%	47.1%	48.7%	48.2%	49.1%	48.6%	Green

Please note that performance data is extracted from the National Drug Treatment Monitoring System (NDTMS). The 2023/24 & 2024/25 drug/alcohol treatment data are restricted statistics and as such must not be released into the public domain until an agreed published date. Recent performance data is available to commissioners and is used for local performance monitoring and service planning. This indicator has changed from 'Successful completions' to 'Treatment progress measure' which is the new national outcome measure and is more reflective of progress over the treatment journey. This measure includes both successful completions (excluding those that have acute housing problems), those that are drug free in treatment or have a sustained reduction in drug/alcohol use.

The Q1 24/25 data available to commissioners for this indicator remains strong and the Cambridgeshire service, provided by Change Grow Live (CGL), is performing in line with national average.

Health Behaviour Change Services

Indicator	Full Year 2023/24	Quarter 1 24/25	Quarter 2 24/25	Quarter 3 24/25	Quarter 4 24/25	Status
82: Tier 2 Weight Management Services: % achievement of the target for users who complete the course and achieve a 5% weight loss. Target: 30% of those in the service. Consistently well above target.	48%	50%				Blue
237: Health Trainer: (Structured support for health behaviour change): % achievement against target referrals to the service received from deprived areas. Target: 30% Below target for Q1.	34%	28%				Amber

Indicator	Full Year 2023/24	Quarter 1 24/25	Quarter 2 24/25	Quarter 3 24/25	Quarter 4 24/25	Status
56: Stop Smoking Services: % achievement against target for smoking quitters who have been supported through a 4-week structured course. Annual Target: 1906 quitters. Below target	796 quits. (42% of annual target)	252 quits. (53% of quarterly target)				Red
53: NHS Health Checks (cardiovascular disease risk assessment) Achievement against local target set for completed health checks. The ambition is to work over the next three years to meet the national target of 37,000 p.a. Target: 23,500 Above target	20,216 (101% of annual target)	5,633 (96% of quarterly target)				Amber
Commentary on performance:						
<p>Indicator 82: Tier 2 Adult Weight Management. As seen throughout 23/24, referral numbers into the tier 2 services continue to be very high with 1,234 referrals received in Quarter 1 against a target of 586 (211% of target). This continued higher than expected referral rate is due to the NHS enhanced specification whereby GP practices receive a financial incentive for a referral to weight management services. In addition to this, introduction of weight loss medications (Semaglutide/Wegovy) has increased demand for both tier 2 and tier 3 services.</p> <p>The percentage of completers achieving 5% weight loss continues to far exceed the target of 30%, with 50% achieving a 5% weight loss in Quarter 1.</p> <p>Indicator 237: Health Trainer. The number of referrals into the Health Trainer service for people from deprived areas was just below target for Quarter 1 (92% of target). To improve this, practitioners have attended events in Fenland to raise awareness of the service and the support it can provide.</p> <p>Indicator 56: Stop Smoking Services The Stop Smoking service intervention takes two months in total for a service user to complete from initiation date. As a result, the complete data return for all starters in quarter 4 of the 23/24 fiscal year was not available in the previous report.</p>						

During Quarter 4 23/24 the Behaviour Change Service/Stop Smoking Service achieved 54% of its quarterly 4-week quitter target, showing some improvement over the year. During Quarter 1 24/25 this decreased to 53%.

GP practices continue to face demand pressures and find it challenging to provide stop smoking services. Additionally, the withdrawal of two main smoking cessation pharmacotherapies (Champix and Zyban) due to safety concerns has impacted overall 4-week quit numbers.

During Q1 24/25 the Allen Carr Easyway to Stop Smoking method has been introduced offering NICE approved smoking cessation seminars in person and online to smokers in Cambridgeshire, which has been promoted through GP's, Integrated Neighbours and partner organisations in addition to paid social media marketing undertaken by Allen Carr Easyway. There is a high demand for this method of support.

The pilot Fenland Stop Smoking Service specifically targeting the local homeless population which has high smoking rates. This initiative, delivered within the Closer to Communities programme, involves NHS Neighbourhood Managers promoting and developing new face-to-face clinics in collaboration with GP practices to send bulk text messages to smokers.

Locally, several national campaigns are to be actively promoted:

- Stoptober in October
- New Year Quit in January
- National No Smoking Day in March

The "Swap to Stop" initiative provides quitters with a free starter vape kit under the national programme and is popular with smokers making a quit attempt. New funding associated with the Smokefree Generation legislation will be at targeted smokers who are homeless, have poor mental health and those misusing drugs and alcohol, groups that have rates of smoking and poor health outcomes.

Indicator 53: NHS Health Checks

NHS Health Checks are mainly delivered in GP practices, alongside a supplementary, targeted provision provided through our behaviour change service - Healthy You. In 2023/24, 101% of the target was met. In 2024/25, the target has been increased from 20,000 NHS Health Check completed to 23,500, an increase of 17.5%.

The service has responded well to this step-change increase in target during Q1 2024/25, with 96% of the quarterly target achieved, this represents a 42% increase of the performance from Q1 last year.

The award of additional funding from the Department of Health and Social Care for 500 workplace NHS Health Checks through the use of digital technology supported by the Behaviour Change Service, will further support the achievement of the increased annual target.

Healthy Child Programme

Indicator	Full Year 23/24	Quarter 1 24/25	Quarter 2 24/25	Quarter 3 24/25	Quarter 4 24/25	Status
<p>59: Health visiting mandated check - Percentage of births that receive a face-to-face New Birth Visit (NBV) within 14 days, by a health visitor.</p> <p>Local target: 95% (National Benchmark 79.9% in 22/23) Below target but improved and better than National</p>	84%	86% (96% including those completed after 14 days)				Amber
<p>60: Health visiting mandated check – percentage of children who received a 6–8-week review by 8 weeks.</p> <p>Local target: 95%. (National Benchmark 79.6% in 22/23) Below target but improving quickly and better than National</p>	69%	82% (95% including those completed after 8 weeks)				Red
<p>62: Health visiting mandated check - Percentage -of children who received a 2-2.5-year review.</p> <p>Local target: 90%. (National Benchmark 74% in 22/23) Below target similar to 23/24 and National 22/23</p>	73%	72% (80% including those after 2.5 years old)				Red
<p>57: % of infants breastfeeding at 6 weeks Local Target: 56% Need to achieve 95% coverage to pass validation</p> <p>Local target achieved</p>	60%	62%				Green

Commentary on performance:

Indicators 59 & 60: Health visiting mandated checks (New Birth Visit & 6-8 check).

Performance of the Health Visiting service in Cambridgeshire has improved over the last year, which is reflected in the percentage of mandated checks now being completed within timescale. In Q1, 86% of new birth assessments were completed in 14 days (1% increase in comparison to 23/24) as well as 82% of 6–8-week reviews. (7% increase in comparison to 23/24). When including checks completed outside of timeframes, performance data shows that 96% of families received a New Birth Visit and 95% a 6–8-week check. Recruitment to the revised skill mix model in the 0-5 pathway has continued to progress. There are no vacancies for Health visitors in the north or south localities and staff sickness rates have slightly decreased since last quarter which has contributed to the improvements.

Indicator 62: Health visiting mandated check (2.2.5-year review).

The improvements on the delivery of this contact that were seen throughout 23/24 have been maintained during Q1 of 24/25. The provider is trying to identify more efficient delivery methods, including the use digital methods.

Indicator 57: % of infants breastfeeding at 6-8 weeks.

The overall breastfeeding prevalence of 62% is higher than the national average of 49% and East of England Regional average (53.4%) and is meeting the locally agreed stretch target. Breastfeeding rates, which include both exclusive breastfeeding and mixed feeding, do however continue to vary greatly across the county. Broken down by districts, breastfeeding rates for 2024/25 Q1 stand at 80% in Cambridge City, 72% in South Cambridgeshire, 60% in East Cambridgeshire, 56% in Huntingdonshire, and 39% in Fenland.

We continue to move forward on the actions identified in the [Infant Feeding strategy](#) which we report on as part of the Family Hubs transformation programme.

4. Alternative Options Considered

Not applicable

5. Conclusion and reasons for recommendations

- 5.1 The performance of the Public Health commissioned services described in this paper is generally positive. The key areas of improvement are NHS Health Checks exceeding its target for the first time and the Healthy Child Programme. Tier 2 Weight Management Services continue to overachieve against their target driven by a very high demand. Currently measures are being taken to manage this high level of demand which exceeds current resources.

The main area of concern is Stop Smoking Services Recent national additional funding has been allocated for expanding and developing stop smoking and the wider tobacco control services. These are currently being developed and there will be focus on population groups

that have high rates of smoking and regulatory services to address illegal tobacco sales and vaping.

6. Significant Implications

6.1 Finance Implications

This performance report does not include a financial analysis of the services commissioned.

6.2 Legal Implications

There are no current legal implications in this report.

6.3 Risk Implications

The key risk is the poor performance of the Stop Smoking Services. The measures that are being taken to address these risks are indicated in the report.

6.4 Equality and Diversity Implications

Any equality and diversity implications will be identified before any service developments are implemented.

6.5 Climate Change and Environment Implications (Key decisions only)

All commissioned services are required to ensure that their services minimise any negative impacts and support positive climate and environmental improvements.

7. Source Documents

7.1 None

8. Accessibility

8.1 An accessible version of the information contained in this report is available on request from the report author.