

**Outline model of Performance and Quality Reports for health contracts including
sample data for the Public Health Priority Functions
Quarter 3 2012/13**

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Introduction & Guide to Using this Report

Introduction

This report details performance of the Public Health (PH) commissioned activity for Nottinghamshire County. It is separated in to the different functions as outlined in the table below. The function is linked to the PH Local Outcomes Framework (LOF) and priorities within the Health and Wellbeing Strategy.

Public Health Priorities:	11. Immunisation Screening & Support
1.NHS Health Check	12. Infection Control
2.National Child Measurement Programme	13. Mental Health
3.Comprehensive Sexual Health Services	14. Nutrition
4.Local Authority (LA) role in dealing with health protection incidents, outbreaks and emergencies	15. Physical Activity
5.Public Health Advice to the Clinical Commissioning Groups (CCGs) (via a MoU)	16. Prevention of cancer & long term conditions
Other Public Health Functions:	17. Reduce & prevent birth defects
6. Accidental Injury Prevention	18. Seasonal mortality
7. Alcohol & Drug Misuse	19. Social exclusion
8. Children & Young People	20. Tobacco control
9. Community Safety	21. Weight management
10. Dental Public Health	22. Workplace Health

Each Public Health function/priority is reported on, where there is current commissioned activity. Where there is no commissioned activity, this is stated.

The table below provides a key to the performance trends shown within the tables

Key to Performance Trends	
▲	Better
►	Not significantly different
▼	Worse
—	Comparison not possible

Public Health Priority: NHS Health Checks

Public Health Local Outcomes Framework		Health and Wellbeing Strategy Priorities
Outcome	Reference PHLOF	- Physical Disability, Long term Conditions and Sensory Impairment - To reduce early mortality and improve quality of life for individuals with Long Term Conditions (LTC)
Recorded diabetes	PH 2.17	

Name of Providers	Number of Contracts
GPs – County-wide	96

Target and Measure	Status		Q3 – 2012/13 Plan	Q3 – 2012/13 Actual
	YTD	F/O		
% of eligible patients who have been offered health checks	R	A	19.0%	14.6%
% of eligible patients who have received health checks	R	A	13.1%	6.6%
% of patients offered who have received health checks	R	A	69.1%	45.3%

Details and Remedial Actions

Key Issues affecting delivery:

- The underperformance has been attributed to the change from the targeted approach from Year 2, whereby Programme activity was slowed down causing a number of practices to disengage.

Actions to address issues:

- Public Health and the CCGs having been working together, through the Local NHS Health Check Implementation Groups, to deliver the key message that the programme is mandatory, for a targeted population.
- All Nottinghamshire County CCG Practices have received annual targets for 2012/13, to catch up with the full national rollout of the programme.
- CCG Action Plans have been devised to improve the uptake rate and activity which, once completed, will be incorporated into CCG Communication Plans to raise awareness of the NHS Health Check Programme by:
 - Utilising CCG Patient Engagement Teams with CCG PPI Leads to assist in raising awareness.
 - Exploring opportunities to raise awareness in CCG events, for example Practice Learning or Promotional Events
 - Sourcing NHS Health Check Promotional Information leaflets/package of material for local use

Public Health Priority: National Child Measurement Programme (NCMP)

Public Health Outcomes Framework		Health and Wellbeing Strategy Priorities
Outcome	Reference PHLOF	To achieve a sustained downward trend in the level of excess weight in children by 2020
Excess weight ages 4-5	PH 2.6i	
Excess weight ages 10-11	PH 2.6ii	

Name of Providers	Number of Contracts
County Health Partnership	One
Bassetlaw Health Partnership	One

Target and Measure	Status		2011/12 Plan	2011/12 Actual
	YTD	F/O		
Participation rates (NHS Bassetlaw) – Reception (%)	G	G	89.05%	91.0%
Participation rates (NHS Bassetlaw) – Year 6 (%)	G	G	88.22%	89.3%
Participation rates (NHS Nottinghamshire County) – Reception (%)	A	A	91.0%	90.5%
Participation rates (NHS Nottinghamshire County) – Year 6 (%)	A	A	91.0%	89.6%
Excess Weight – overweight & obesity combined (NHS Bassetlaw) – Reception (%)			No target	24.5%
Excess Weight – overweight & obesity combined (NHS Bassetlaw) – Year 6 (%)			No target	33.2%
Excess Weight – overweight & obesity combined (NHS Nottinghamshire County)–Reception (%)			No target	20.7%
Excess Weight – overweight & obesity combined (NHS Nottinghamshire County) – Year 6 (%)			No target	31.5%
Details and Remedial Actions				

Key Findings:

- NHS Nottinghamshire County did not meet its target for numbers of reception or Year 6 children that are weighed and measured (participation rate) as part of the NCMP.
- The obesity and excess weight prevalence rate in both reception and Year 6 in Nottinghamshire County were significantly lower than the England rate.
- The percentage of obese children in Year 6 is approximately double that of Reception year children, both locally and nationally.
- Locally, there has been no significant change or difference in reception and Year 6 obesity or overweight prevalence rates between 2006/07 and 2011/12.
- There has been a significant decrease in excess weight in reception year for Nottinghamshire County but no significant change or difference in excess weight for Year 6 between 2006/07 and 2011/12.

Actions for 2013/14:

The indicators in the Public Health Outcomes Framework are based around excess weight (overweight plus obesity) in 4-5 (reception year) and 10-11(year 6) year olds. Futures targets will therefore be based around excess weight and will be countywide as opposed to being based around the two PCT areas. Targets for NCMP from 2013/14 will be developed in the near future.

Notes:

This report is based on results from the 2011/12 school year. The NCMP takes place once in a school year; therefore it will be reported on annually. The results for the 2012/13 school year will be published in December 2013.

A more detailed report has been presented to the Children's Trust.

Public Health Priority: Comprehensive Sexual Health

Public Health Outcomes Framework		Health and Wellbeing Strategy Priorities
Outcome	Reference PHLOF	None
None		

Name of Providers	Service	Number of Contracts
Nottingham University Hospitals	Genitourinary Medicine (GUM)	One
	GUM - community	
	Contraceptive and Sexual Health service (CaSH)	
Sherwood Forest Hospital Foundation Trust	Genitourinary Medicine (GUM)	One
	CaSH	
	Sexions	
Doncaster & Bassetlaw Hospital	Genitourinary Medicine (GUM)	One
	CaSH	
Chandos Clinic	Psycho-sexual	One
Terrence Higgins Trust	HIV Advice/support	One
Bassetlaw Health Partnership	Teenage Pregnancy Service	One
Community Pharmacists	Emergency Hormonal Contraceptive (EHC)	
GPs	Long-Acting Reversible Contraceptive (LARC, IUDs & Implants)	

Performance data is not available for all the above contracts. Work is on-going to identify what data is available that is meaningful and that gives a picture of providers performance.

Public Health Priority: Steps Local Authorities must perform to protect the health of their local populations

There is a Health Protection Strategy Group (HPSG) which feeds in to the Health and Well Being Implementation Group. It also links in with Public Health England and the NHS Commissioning Board Area Team.

The purpose of the HPSG is to provide proper assurance regarding outcomes and arrangements for the protection of the health of the population to Nottinghamshire County Health and Wellbeing Board and Implementation Group. The Terms of Reference outline the approach and governance arrangements of the HPSG.

Public Health Priority: Public Health Advice to Clinical Commissioning Groups

A Memorandum of Understanding (MoU) for Public Health (PH) advice to the Nottinghamshire County Clinical Commissioning Groups (CCG) for the period 2013 – 2016 has been developed. Each CCG has received their MoU which has been adapted to reflect local need.

This report will outline progress against the outcomes, as identified in the MoU, on a quarterly basis.

Summary Report of High Impact (Red Risks) from Public Health Register, Serious Incidents, Complaints and Freedom of Information requests relating to Health contracts for a given quarter

[The detail below is provided as an example only]

	Summary of High Impact Risks (Red Risks)		Complaints relating to Health Contracts			Summary of Serious Incidents (SI)			Freedom of Information Requests relating to Public health Functions and Health Contracts
	Relating to Public Health Functions	Relating to Health Contracts	Number of new complaints in period	Number of complaints under investigation in period	Number of complaints concluded in period	Number of new SIs in period	Number of Sis under investigation in period	Number of SIs concluded in period	
Public Health Area									
Example NHS Health Check Assessments	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	2 (Two)
Example Alcohol and Drug Misuse services	0 (Zero)	1 (One)	0 (Zero)	1 (One)	1 (One)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)
Example Infection, Prevention and Control	0 (Zero)	1 (One)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)	0 (Zero)