

REPORT OF THE DIRECTOR OF PUBLIC HEALTH**PUBLIC HEALTH PERFORMANCE AND QUALITY REPORT FOR CONTRACTS FUNDED
WITH RING-FENCED PUBLIC HEALTH GRANT APRIL TO JULY 2018****Purpose of the Report**

1. To enable Members to scrutinise the performance and quality of services commissioned by Public Health (PH).

Information

2. The Health and Social Care Act 2012 confers general duties on local authorities to improve and to protect the health of their local populations, including specific statutory duties to commission certain mandatory services for residents¹, the provision of specialist advice to the local NHS, and health protection advice to organisations across the local system.
3. In discharging these duties, the Council is currently supported by a ring-fenced grant which must be deployed to secure significant improvements in health, giving regard to the need to reduce health inequalities and to improving uptake and outcomes from drug and alcohol treatment services.
4. Services commissioned by public health contribute to a number of Council commitments (in particular, Commitment 6 – People are Healthier) and are critical for securing improved healthy life expectancy for our residents.
5. Working with colleagues, the Public Health Contract and Performance Team manages the performance of providers to ensure the Authority and the residents of Nottinghamshire are receiving good outcomes, quality services and value for money.
6. Contract management is undertaken in a variety of ways including regular contract review meetings, quality assurance visits to the service and ongoing communication.
7. This report provides the Committee with an overview of performance for Public Health directly commissioned services and services funded either in whole or in part by PH grant, in January

¹ These mandatory services include: local implementation of the National Child Measurement Programme, assessment and conduct of health checks, open access sexual health and contraception services

to March 2018 against key performance indicators related to Public Health priorities, outcomes and actions within:

- i) the Public Health Service Plan 2017-2018;
 - ii) the Health and Wellbeing Strategy for Nottinghamshire 2017-21; and
 - iii) the Authority's Commitments 2017-21.
8. A summary of the key performance measures is set out on the first page of **Appendix A**. Where performance is at 80% or greater of the target or meets the standard, it is rated green.
9. Appendix A also provides a description of each of the services and examples of the return on investment achievable from commissioning public health services.
10. This report further provides a summary of the work of the Public Health Contract and Performance Team, including efficiencies and value for money achieved in the financial year 2017/18 through effective contract management.

NHS Health Checks (GPs)

11. In quarter one of 2018/19, 5,941 people were invited to attend a health check, which is below target. However, during the same period 5,049 health checks were undertaken, showing that people do attend for the health check when offered, resulting in a high level of uptake across the county.
12. In Nottinghamshire, practices are financially incentivised to target patients at high risk of cardiovascular disease (CVD), who are often harder to reach. This can impact adversely upon performance against regional and national averages, but evidence² indicates that this approach is the most cost effective in the long term.
13. During the last quarter a series of practice liaison visits have been undertaken to support surgeries to undertake fully compliant health checks, to use the associated information technology (IT) correctly and to improve overall performance. There has also been a drive to ensure that every practice in the county is using the dedicated Local Authority-developed template, rather than an individually customised version which may generate incorrect CVD risk scores and lead to patient safety issues.
14. A new IT system to identify the eligible population, record health checks, manage performance and enable payment (e-Healthscope) has been in use over the last year in all districts except Bassetlaw. It is currently in the process of being rolled out in Bassetlaw (where the clinical commissioning group uses a different IT provider) and a new, improved template has now also been installed in the majority of practices across Nottinghamshire. These IT changes will ensure more efficient service delivery, higher rates of clinical compliance and more effective performance management.

² Emerging evidence on the NHS Health Check: findings and recommendations - A report from the Expert Scientific and Clinical Advisory Panel (February 2017)

Integrated Sexual Health Services (Nottingham University Hospitals (NUH), Sherwood Forest Hospital Foundation Trust (SFHFT) and Doncaster and Bassetlaw Hospitals (DBH)

15. All three sexual health providers continue to perform well in quarter one with a slight change in the number of filled appointments compared with quarter one last year from 12,027 to 11,783.

60% of new users accepting HIV test

16. SFHT and DBH are now working to the new definition for this quality standard which is in line with the Public Health Outcomes Framework (PHOF) definition. This means both are now accurately reporting a significantly improved performance. NUH has seen a fall in the number of new service users accepting an HIV test and the reason for this is being investigated with NUH.

75% of 15-24 year olds accepting a chlamydia test.

17. SFHT have exceeded the quality standard of 75% of 15-24 year olds in contact with the service accepting a chlamydia test in quarter one. DBH and NUH remain below target and commissioners will continue to work with the providers to improve uptake of testing by service users, including on line testing.
18. The most recent PHOF data for Quarter one 2018 shows a continuing upward trend for Nottinghamshire with the detection rate at 1,789 up from a low of 1,456 in 2016 and in contrast to the downward national trend.

Young People's Sexual Health Service- C Card (In-house)

19. The C-card scheme is a free and confidential advice and condom service for young people living in Nottinghamshire. The service is performing well overall, but has found it more difficult to recruit new service users to the scheme. An action plan has been developed for 2018/19 which aims to increase new registrations and number of active sites across the scheme. Seven C Card training sessions have been delivered by the team this quarter, and 100% of attendees who returned an evaluation form reported an increase in knowledge and skills.

Alcohol and Drug Misuse Services (Change Grow Live)

20. This service provides a treatment and recovery service to people with substance misuse issues. The service continues to perform well against its contract, with number of successful completions from the whole service exceeding the target in Quarter one. There is also an improvement in successful completion for opiates with Nottinghamshire now above the Public Health England National average and the Change, Grow, Live (CGL) national average. PH and the provider work closely together to ensure a safe and equitable service is provided across Nottinghamshire. There continues to be very positive feedback from service users both whilst in the service and once they are substance free. The provider encourages a peer

mentor approach and many service users who complete their journey stay on to help others. Within this quarter 8 peer mentors have been recruited and have commenced training.

21. However, the national published statistics known as the PH Outcomes Framework only measures successful completions from a clinical treatment aspect. Therefore, if members were to check the PH outcomes framework, Nottinghamshire would be shown as red and therefore below the national average. This is due in part to the fact that the figures are based on 2016 data but mainly due to the fact that the Nottinghamshire contract measures a different indicator to the framework.
22. The Nottinghamshire measurements are harder to achieve than the national framework as the aim is to ensure all service users with any substance misuse issues are helped to recovery and not just those who require a clinical intervention (generally opiate users)

Smoking Cessation (Solutions 4 Health)

23. Following a restructure of the service in order to deliver the new model for smoking cessation Service Level agreements have been set up with a number of local Pharmacists who are sub contracted to deliver smoking cessation support for people who wish to quit smoking in an accessible way, whilst maintaining quality standards.
24. A Service Level Agreement has also been signed with Sherwood Forest Hospitals Foundation Trust (SFHFT) to enable Solutions For Health staff to work on the wards at the hospital, offering support at the bedside to patients who smoke, either with quitting or temporary abstinence during their hospital stay. "Stop Before the Op" support is also offered to outpatients waiting for elective surgery.
25. This will complement the ongoing work with pregnant women at SFHFT, where the Trust was the first in Nottinghamshire to deliver the innovative Risk Perception Model supported by the Provider, which has seen a reduction in the numbers of women Smoking At The Time Of Delivery across Mansfield, Ashfield and Newark.
26. Honorary contracts have also been granted to SmokefreeLifeNotts staff by Nottingham University Hospitals (NUH) to enable them to adopt the same, ward based approach to support County patients who attend the hospital as inpatients and outpatients.
27. Due to the cyclical nature of smoking cessation (more people quit at New Year, following Stoptober and Stop Smoking Day in March), the increase in referrals and therefore quitters has been slow over the summer, but is expected to pick up in line with these key campaign times.

Illicit Tobacco Services (In-house)

28. The Council's officers continue to take effective enforcement action against individuals and businesses that sell and distribute illicit tobacco. During Quarter 1 of 2018 officers conducted a total of 41 inspections at premises in the county, resulting in 9 seizures of illicit tobacco. The work is intelligence led and targeted in order to work in the most efficient and effective way. The employment of a Police Officer as part of the team is integral to its success in achieving prosecutions. A number of investigations are ongoing.

Assist (In-house)

29. The ASSIST peer led smoking prevention intervention is in its third year of running in schools across Nottinghamshire and the impact on young people across the county has been very positive. ASSIST is improving young people's health whilst providing valuable life skills. ASSIST's activity based training improves leadership, communication skills, resilience, self-esteem, confidence, highlights empathy and shows the value of taking a non-judgemental approach to peer-led conversations. The whole school benefits from increased conversations around smoking and health.
30. Two new schools have been recruited to the programme this quarter; Newark Academy and Selston High School. Following the training delivered by the ASSIST team, Newark Academy is adding Health Mentors to its student leadership structure.

Obesity Prevention and Weight Management (Everyone Health)

31. The Obesity Prevention and Weight Management service provided by Everyone Health supports children and adults through targeted healthy eating and physical activity initiatives and weight management support.
32. The service is performing above target for adults supported in weight management and as planned for children. Performance for the number of pregnant women supported is below target.
33. Review with the Provider has identified that low uptake of children and maternity weight management services is due to a combination of low demand from eligible groups, low referrals from NHS services, and the need for a service offer more tailored to service user preferences. Commissioners have worked with the Provider and NHS leads to develop service improvement plans for child and maternal weight management. These service and system changes are resulting in improvements in the uptake of both service areas in comparison to the same period a year ago and will continue to be closely performance managed by the commissioners until targets are achieved for two consecutive quarters.
34. Relaunch of the children's weight management service and closer working with PH nurses working in school settings should see increased number of service users being referred to the service. Problems with midwifery referrals to the service are being addressed. This is challenging with three different midwifery services in the county and competing priorities. However, engagement with senior managers, asking for changes to referral systems and offering training to midwives, together with new one to one weight management support for women are expected to result in continued improvement.
35. The service is now able to refer individuals to other weight management services through sub-contracting arrangements, where appropriate to the service user's need. This has increased the number of adults accessing weight management via the service. It also offers service users more choice of weight management support.

36. The service is on track with its tier one prevention sessions and projects in schools, with vulnerable adults, and with support to the Healthy Options Takeaway scheme. The work in Children's Centres is being reviewed to improve performance from Q2.
37. As a result of a re-negotiation of the contract at the beginning of 2018/19, the Service is establishing additional new prevention projects covering both physical activity and nutrition based support at district and borough level in community, workplace and schools settings (detail provided in a separate committee report). The majority of these projects are proceeding as scheduled. However additional work is required to establish the new place based project in Ashfield.

Domestic Abuse Services (Notts Women's Aid and Women's Aid Integrated Services)

38. These services are providing support to increasingly complex and difficult cases. The number of adult service users continues to be high whilst the number of unique children each quarter has slightly fallen.
39. Providers are working longer with children and young people since they require support for longer due to the levels of trauma, complex needs and time taken to build trust.

Seasonal Mortality (Nottingham Energy Partnership)

40. This service protects and improves the health of residents in Nottinghamshire County, by facilitating insulation and heating improvements and preventative adaptations in private sector homes, providing energy efficiency advice and reducing fuel poverty. The service targets the most deprived private sector households, with a specific emphasis on support to residents over 60 and a smaller provision for families with children under 5 and pregnant women. The service is on track to achieve 2018/19 targets.
41. The service has seen 160 people who received comprehensive energy efficiency advice and/or were given help and advice to switch energy supplier or get on the cheapest tariff. The service also trained 51 individuals to deliver Energy Efficiency Brief Interventions to improve awareness of the links between cold-homes, fuel poverty and ill health and to generate appropriate referrals to the service.

Social Exclusion (The Friary)

42. The Friary provides a "one-stop" approach on three mornings a week from a single location in West Bridgford to individuals in crisis situations, including homeless people. It delivers one to one assessment of need, specialist advice and practical support regarding housing, benefits, debts and health needs (including signposting to other services that operate within the Friary e.g. GP clinic, substance misuse services) The service offered support to 358 individuals in Quarter 1 with the service giving specialist advice to 2,227 people and providing 1,996 health care support and interventions.

43. A recent review conducted with service users showed the service makes a difference by contributing towards improved health and wellbeing, self-confidence and reductions in loneliness.

Public Health Services for Children and Young People aged 0-19 (Nottinghamshire Healthcare Trust)

44. The service has entered its second year of delivery and the Healthy Families Programme is now embedding across the County as a fully integrated universal service for children, young people and their families. The Authority has set ambitious targets for the provider and whilst some of these targets have yet to be met, the service overall is performing well with Nottinghamshire data for mandated reviews comparable with, or better than the England average.
45. Staffing and recruitment challenges experienced by the service due to retirement, maternity leave, and sick leave are resolving. The Trust is working pro-actively to recruit and retain the workforce and a rolling programme of recruitment for permanent staff has been launched. This increase in workforce capacity is being reflected in improved performance against the key performance indicators.
46. A recent Quality Assurance visit to the service assured commissioners that Healthy Family Teams (HFTs) had good relationships with early years settings and that communication with schools and GPs had improved significantly since the model was first implemented, and that schools in particular valued the role of HFTs.

Oral Health Promotion Services (Nottinghamshire Healthcare Trust)

47. Performance in the last quarter has been positive - 2,462 children received oral health advice and resources at their one year health review and the well-received supervised tooth-brushing programme has achieved its target, and is being delivered successfully in 20 schools.
48. Oral health promotion training amongst frontline staff was delivered to 51 staff working in child-related services and 60 in adult-related services (Quarter one target of 50 each), and a quality assurance visit by Public Health in July 2018 of a session for dental health nurses confirmed that the training observed was of high quality, with a range of methodologies employed to ensure maximum engagement and learning. In addition, 14 targeted local oral health awareness-raising activities were undertaken by the service during the quarter.
49. Following feedback from service users, oral health resource kits were created for quarter one. Topics include early years, primary school age, young people, special care, smoking and alcohol. Each kit contains selected resources to aid the promotion of the key messages for use by stakeholders such as health visiting teams, schools and care homes, and the initial feedback has been encouraging. The new kits enable more people to access resources than before - 21 kits were loaned out in quarter one, the most popular being the primary school age resource.

Single Person Supported Accommodation (Framework)

50. The service provides intensive support in short term hostel accommodation (up to 18 weeks) and less intensive support in Move On and Housing First Accommodation (typically for six months, and up to a maximum of 12 months) aimed at enabling the service user to achieve a range of outcomes including self-care, living skills, managing money, motivation and taking responsibility, social networks and relationships, managing tenancy and accommodation, reducing offending and meaningful use of time.
51. The service provides the opportunity for the assessment of support needs, followed by intensive and targeted housing related support to enable an individual to move towards independent living. The key outcome for this service is that the service user is able to move on, either to longer term supported accommodation (Move On) or to independent living, in a planned way. In Quarter 1, 70% (against a target of 80%) of service users moved on in a planned way from hostel accommodation and 100% (against a target of 80%) from the Move On accommodation.

Community Infection Prevention and Control (CCGs)

52. This service provides advice and assistance to prevent the spread of infectious and avoidable diseases. The team has led initiatives in care homes, GP practices and the acute hospital trusts including hand hygiene training, viral swabbing, advice and assistance. The service continues to meet all key performance indicators and has been very effective in preventing healthcare associated infections amongst people receiving care in community settings.

Academic Resilience - Each Amazing Breath (EAB) and Young Minds (YM)

53. Developed by Each Amazing Breath, 'Take Five' is a Whole School Resilience Building Programme based on breathing, grounding, and awareness that helps children to develop their capacity to handle life's challenges with awareness and confidence, building skills of self-regulation, and managing anger.
54. EAB is currently commissioned by the Authority to deliver the programme in 15 schools across Bassetlaw, Newark and Sherwood, Mansfield and Ashfield. To date over 8000 children have taken part in resilience building activities in the school setting.
55. On July 13th, as part of a Youth Social Action Project, NCC hosted a visit to County Hall to enable children who have taken part in the programme to showcase their work to elected members represented on the Adult Social Care and Public Health Committee. This event was well received by all.
56. In Broxtowe, Gedling and Rushcliffe, the Authority has commissioned Young Minds to deliver a school based academic resilience programme which uses evidence based approaches to help schools close the attainment gap. Schools are supported to develop their own practical, integrated whole-school approach to identifying and supporting vulnerable pupils to enable them to achieve their emotional and academic potential.
57. Young Minds supports 15 schools in the three boroughs, including one school for children with special educational needs and disability, Derrymount. To date, 100% of school staff who have taken part in academic resilience training (391 in total) report that they now have an increased understanding of mental health and resilience.

58. The providers develop and deliver an evidence-based resilience programme that improves emotional health, wellbeing and resilience of children and young people in 30 Nottinghamshire schools. It is a whole school approach, meaning that school leaders, staff, children and young people are all involved. It includes approaches such as training the trainer and pupils and students as coaches, mentors or teachers. The programmes are sustainable and will enable schools to have the understanding, knowledge, skills and resources to continue independent delivery of the programme thus building resilience for new cohorts of children and young people after the direct contract activity ends.

Public Health Contract and Performance Team

59. In 2017/18, the Public Health Contract and Performance Team (PHCPT) directly contract managed 21 key providers as well as 95 GP practices and 156 community pharmacies. The overall budget for these directly managed services amounts to £30,949,253.

60. The PHCPT has recorded the financial value achieved through contract management and contract negotiation within contracts over the preceding two financial years. Unnecessary costs to the Authority have been avoided through close financial management (invoice checking and validation of performance data), effective contract management and contract negotiation. This is summarised in the table below, with further detail provided in **Appendix B**.

	Financial value achieved 2017/18	Financial value as % of Overall Budget
Overall Budget, directly managed services	£30,949,253	-
Efficiencies through financial management	£99,547.47	0.32%
Efficiencies through contract management and negotiation	£819,083.52	2.65%
TOTAL	£918,630.99	2.97%

61. Overall, efficiencies achieved through the contract management function resulted in a financial value of £918,630.99, or nearly 3% of the total budget for directly managed services. This should be considered against a total annual staff budget of approximately £200,000 for the PHCPT.

62. The PHCPT results compare favourably to the Local Government Association's (LGA) research which found that local authorities obtained savings of between 3 and 15 % on the value of contracts over their duration (approximately four years)³ through effective contract management.

³ Making savings from Contract Management LGA November 2013

63. The PHCPT further contributes to the quality and value for money of contracted services through developing and maintaining effective relationships with a large range of Nottinghamshire providers, including GP practices and pharmacies. For example, consultations for emergency hormonal contraception in 2017/18 increased by 32% from the previous year (from 2,602 to 3,445), partially due to effective engagement with contracted pharmacies. The PHCPT has also been successful in securing delivery of public health services in Boots pharmacies, with other local authorities seeking to replicate this approach.

Statutory and Policy Implications

64. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

65. Robust performance and quality reporting ensures that financial implications are monitored and reviewed effectively to minimise financial risk to the council.

Public Sector Equality Duty implications

66. Monitoring of the contracts ensures providers of services comply with their equality duty. Equality performance is a standing agenda item of review meetings and providers are asked to provide case studies celebrating success and showing how complaints, if applicable, are resolved.

Safeguarding of Children and Adults at Risk Implications

67. Safeguarding is a standing item on contract review meeting agendas and providers are expected to report any areas of concern allowing the Authority to ensure children and adults at risk are safe.

Implications for Service Users

68. The management and quality monitoring of contracts are mechanisms by which commissioners secure assurance about the safety and quality of services using the public health grant for service users.

RECOMMENDATION

- 1) For Committee to scrutinise the performance of services commissioned using the public health grant.

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Constitutional Comments [EP 04.09.2018]

69. The recommendation falls within the remit of Adult Social Care and Public Health Committee by virtue of its terms of reference.

Financial Comments [DG 04.09.2018]

70. The financial implications are contained within paragraph 65 of this report.

Background Papers and Published Documents

- 'None'

Electoral Division(s) and Member(s) Affected

- 'All'