

**25 April 2022**

**Agenda Item: 7**

## **REPORT OF THE DIRECTOR OF PUBLIC HEALTH**

### **PUBLIC HEALTH PERFORMANCE 30 SEPTEMBER TO 31 DECEMBER 2021**

#### **Purpose of the Report**

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

#### **Information**

2. This report provides the Committee with an overview of performance for Public Health commissioned services funded either in whole or in part by PH grant, in September to December 2021 against key performance indicators related to Public Health priorities, outcomes and actions within:
  - a). the Public Health Service Plan 2020-2021;
  - b). the Health and Wellbeing Strategy for Nottinghamshire 2017-21; and
  - c). the Authority's 12 Commitments as set out in the Council Plan 2017-21.
3. A summary of the key performance measures is set out on the first page of **Appendix A**.
4. Appendix A also provides a description of each of the services and it provides a breakdown of some commissioned services at District level.
5. During this quarter 'Plan B' measures were put in place following the spread of the new Omicron variant in England.
6. The Public Health team continued to monitor performance and where any issues were identified, officers worked in partnership with providers and wider stakeholders to find solutions to mitigate against the issues. Public health continued to review the challenges on a regular basis across the County, identifying the pressure points and working collaboratively to support provision of the commissioned services to our residents.
7. Public health officers maintained a close dialogue with providers to ensure that the Authority continued to be assured of the best performance in the circumstances and safe practices and

that services were being provided in line with emerging and changing guidance. Discussions also began on how providers were going to plan their full recovery out of lockdown.

### **NHS Health Checks (GPs)**

8. The aim of this programme is to help prevent heart disease, diabetes, stroke, kidney disease and certain types of preventable dementia by offering a check once every five years to everyone between the ages of 40 and 74 who has not already been diagnosed with one of these conditions.
9. In response to the emergence of the Omicron variant, NHS England advised GPs that they could de-prioritise NHS Health Checks. It continued to be an extremely pressured time for GP practices and therefore activity on this preventative programme remained at a very reduced level. The programme is not anticipated to re-start in earnest until Covid-related backlog pressures on primary care ease, hopefully in the spring or summer of 2022.
10. Whilst the service is still only operating at less than 50% of pre-pandemic activity, it is anticipated that the number both of those offered and those receiving health checks will increase gradually as the year progresses.
11. Payment continued on actual activity delivered in these quarters.

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

12. The ISHS is provided by the three NHS Trusts in Nottinghamshire.
13. Emergency and essential sexual health and contraception services including sexually transmitted infection responses (genital warts/molluscum contagiosum) and insertion and removal of long acting reversible contraception (IUD/S and Implants) continued. Clinics began re-opening in the community spokes as well as the hospital hubs albeit appointment bookings are still low.
14. PrEP medication taken by HIV-negative people to prevent infection continued to be supplied to clients (predominantly men who have sex with men) having previously only been available to those on the PrEP trial, however this is now routinely available to residents via all three NHS Trusts.
15. The County sexual health services have active social media profiles on Facebook and Instagram. A wide range of sexual health promotion and education messages as well as information on sexual health, self-help and other health education are regularly posted.
16. Sexual health services across the county will be back to pre-pandemic activity by the end of the year.

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

17. The C-card scheme is a free and confidential advice and condom service for young people living in Nottinghamshire.

18. The service is popular with young people and the officer was able to resume more provision. The numbers of individuals registered onto the scheme is anticipated to be back to pre-pandemic levels by the end of the year and the numbers who return are rising.
19. The Authority officer continues to work with pharmacies in Nottinghamshire, providing advice about managing possible increases in demand, possible delays in receiving supplies and minimising contact by preparing bags of condoms in advance. The officer produces weekly on-line guidance and resources for youth workers to enable them to distribute condoms safely in their areas.
20. The officer is working closely with our sexual health providers to streamline the provision of condoms by post.

### **All Age Alcohol and Drug Misuse Services (Change Grow Live) (Jointly funded with the PCC)**

21. The service has continued to see more clients than had originally been anticipated when the Council went out to tender and this figure is above pre-pandemic levels. Pressures on the provider continue to be monitored closely.
22. Successful completions continue to rise. A resident in rehabilitation stated *'It's been one hell of an emotional roller coaster, but I really am beginning to understand that I was in the grips of addiction, and this was the only place to save me... My life is changing for the better so much, I love it, I'm so glad I'm doing 6 months I wouldn't be ready yet, but I know I'll be ready for sure to spend the rest of my life in recovery... I'm forever in your debt for getting me into here'*.
23. Alcohol continues to be the highest drug type (63%) of all children and young people affected by substance misuse, with 29% of family members currently known to be in treatment with our service. Children's Social Care continue to be the highest referral source at 43%, followed by schools at 31%. A new social care lead has been appointed by the provider which has helped referrals into the service with social workers approaching CGL staff directly to arrange joint visits. The provider has further ambitions to take co-production with the Council's adult social care forward.
24. CGL are working with East Midlands Ambulance Service (EMAS) for the first time. EMAS will refer into the service if they pick up a member of the public who has taken an overdose.
25. CGL sub-contracts Hetty's to provide a range of services to families and carers affected by a relative's substance misuse. Hetty's have been an integral part in 19 CGL families' ongoing safeguarding concerns from across the seven districts. On behalf of these CGL families, Hetty's support has given rise to two Multi Agency Safeguarding Hub (MASH) enquiries and three new MASH referrals. Hetty's have advocated on behalf of families and children at various case conferences, core groups, child in need meetings and had 83 correspondences with social workers and lead professionals on behalf of these vulnerable families.

### **Integrated Wellbeing Service (ABL - Your Health Your Way (YHYW))**

26. Your Health Your Way provides an integrated wellbeing service to support individuals to lose weight, increase physical activity, stop smoking, reduce alcohol consumption, all of which is underpinned by supporting mental wellbeing
27. The provider is moving towards a hybrid delivery model, including face to face services, delivering in local communities where take up is increasing. The service now operates six days per week including evenings.
28. The provider continued to engage with health and social care during quarter three to drive up referrals, however this was impacted by challenges felt across the system as a result of the emergence of the Omicron variant. Despite this, the provider continued to engage with Primary Care Networks, provided active case finding in eleven GP practices, and delivered 'Raising the Issue of Weight' training to 300 health and care staff. New pathways within secondary care were also established.
29. It is anticipated that by the end of the year the numbers of smoking cessation clients will meet pre-pandemic levels. The provider will have almost met all the outcomes required under the contract for the second half of the year which shows that services are getting back to some form of normality.
30. The provider has set out a detailed action plan outlining how all targets will be met in the next financial year. Public Health officers will be working with the provider and monitoring the progress of this plan.

#### **Illicit Tobacco Services (In-house)**

31. Officers resumed visits to make test purchases at premises about which intelligence had been received on the sale of illicit tobacco products.
32. A recent example of the benefits of the service includes three warrants being issued on people running shops selling illegal tobacco and benefiting financially from the sale of such products.

#### **Domestic Abuse Services (Notts Women's Aid, JUNO Women's Aid and Equation) (Jointly commissioned with the Police and Crime Commissioner)**

33. The Domestic Abuse service continues to be challenged by the complexity of cases.
34. Every case requires some form of multi-agency cooperation and liaison not only for the survivor but as necessary for their children too, with links needed to schools, social care, the police to highlight a few. The providers ensure that all areas are covered and their clients are advocated for and safeguarded so that ultimately they can feel safe.
35. The prevention, promotion and training service continued on-line to improve the domestic abuse information available for professionals and young people across the County.
36. The services have started to move back to some face to face meetings in community settings albeit home visits are only made in exceptional circumstances.

#### **Healthy Families (Nottinghamshire Healthcare NHS Foundation Trust)**

37. This service provides help and support to families with children from birth to 19 years of age to ensure the health and well-being of children and young people. The healthy child programme provides a framework to support collaborative work and a more integrated service delivery.
38. The Provider has continued to work innovatively to overcome challenges in the 'new normal' continuing to deliver all elements of the service using a blended approach of face-to-face contacts, telephone and digital platforms to support the most vulnerable children, young people and their families as well as deliver all the universal and targeted elements of the core offer.

### **Oral Health Promotion Services (Nottinghamshire Healthcare Trust)**

39. Nottinghamshire's specialist Oral Health Promotion Team works to improve oral health within local communities and among vulnerable groups by delivering training to the health, social care and education workforce, a supervised tooth-brushing programme in targeted primary schools (with linked nurseries) and health promotion activities such as the provision of tooth-brushing packs to one-year olds.
40. The number of frontline staff that have taken up the offer to be trained in child related oral health brief advice is positive and almost twice that of pre-pandemic levels and attendance at the adult related training is set to reach target by the end of the year.

### **Homelessness (Framework)**

41. The service provides intensive support in short term hostel accommodation (up to 18 weeks) and less intensive support in Move On accommodation (typically for six months, and up to a maximum of 12 months). The service aims to enable clients to achieve a range of outcomes including self-care, living skills, managing money, reducing offending, motivation and taking responsibility, improve social networks and relationships, managing tenancy and accommodation, and making meaningful use of time.
42. Officers have worked very closely with Framework to ensure reporting is robust and accurate so that there is a clearer understanding of the issues impacting clients. Every client who does not move on in a timely way or exits the service in an unplanned way is now documented with an explanatory narrative. The narrative shows that clients have more complex issues and pre-existing comorbidities which can impact their stay in the services or their chances of moving on.

### **Other Options Considered**

43. None

### **Reason/s for Recommendation/s**

44. To ensure performance of Public Health services is scrutinised by the Authority

### **Statutory and Policy Implications**

45. 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, clients, 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**

46. 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**

47. 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**

48. 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 Clients**

49. 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 clients.

## **RECOMMENDATION**

- 1) The Adult Social Care and Public Health Committee considers whether there are any further actions it requires arising from the information in this report.

**Jonathan Gribbin**  
**Director of Public Health**

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### **Constitutional Comments (KB 18.03.2022)**

52. The recommendations fall within the remit of the Adult Social Care and Public Health Committee by virtue of its terms of reference.

## **Finance Comments (DG 21.03.2022)**

53. There are no direct financial implications arising from this report.

## **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

## **Electoral Division(s) and Member(s) Affected**

- All