
Public Health Services Performance Summary 2017/18

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Leicester
City Council

Useful information

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1. Summary

This report updates Health and Well-being Scrutiny Commission on the performance of the city council's public health services (funded through the ring-fenced public health grant) in 2017/18.

2. Recommendations

2.1 Scrutiny members are asked to:

- Note current performance achievements and issues with public health services in 2017/18.

3. Report

3.1 Introduction

The aim of this performance report is to provide an update on the performance of the major public health services which are funded through the ring-fenced public health grant in 2017/18.

Under legislation, local councils have a duty to commission and provide certain services to prevent ill-health and improve health outcomes.

Some of these services are mandated (we are required by law to provide them). This includes the NHS Healthchecks programme, the 0-5 Healthy Together Programme (health visiting), the National Child Measurement Programme (provided by school nursing teams) and sexual health services. Others are at the discretion of the local authority. However, the local authority must take into consideration major health outcomes in the city (see appendix 1) in how it uses its resources, specifically the public health ring-fenced grant.

The Division of Public Health carries out a wider range of work than is captured in this report. This report focuses on the major services and programmes that the division either provides directly or are commissioned by the division and which are funded by the City Council through the public health ring-fenced grant.

The Division and wider council also meets its public health duties through joint working with the NHS as well as other organisations as well as the wider health impacts of work in the wider council such as investment in cycling infrastructure,

measures to tackle air pollution, licensing and planning responsibilities. These are not covered in this report but are an important part of how we improve health in the city in the long term.

Appendix 1 provides “at a glance” overview of a performance of Public Health contracts and services which are funded through the ring-fenced public health grant. This cover a small number of key indicators, selected from a larger performance dataset of over 100 indicators which are monitored quarterly by the division. It also outlines the key health outcomes for the city with benchmarking data from other comparable councils.

The main report provides context to these services and how they are performing in relation to the national picture and similar areas, using information from the national Public Health Outcomes Framework. This is available on-line at <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework>.

3.2 Public Health Services for children

There are a number of public health services and programmes aimed at supporting children’s health and well-being. Early intervention – getting the basics right- in the early years of life and at school is key to improving long-term health and also in making sure children are ready to school.

Healthy Together Programme

The Healthy Together Programme, provided locally by Leicestershire Partnership Trust, provides health visiting support to every child in the city antenatally and through early childhood. Parts of this service are nationally mandated and the performance data presented in appendix 1 is nationally reported by every council.

The programme is based on national and international research evidence that shows that antenatal support and early intervention such as early identification and support for post-natal depression, breastfeeding support, infant failure to thrive in the early weeks or, at a later stage, early identification and supporting children with speech and language delay or behavioural issues is associated with better development and health outcomes for children.

Health visiting teams must see every child in the city antenatally, within 14 days of birth, at 6-8 weeks and at 2 years. At each stage, they assess babies and children’s health and development. If children are identified as having specific developmental or behavioural issues, they will be provided additional clinical support and referral to specialist clinical services (for example audiology). The service also provides specialist support to parents having a baby after the death of a baby, as a result of a still-birth or Sudden Infant Death Syndrome, and also screens new mothers for post-natal depression, providing follow-up support where needed.

The programme also covers the city's school nursing service. This provides school nursing support to all schools in the city (nurses are shared across schools). The service provides some one-to-one health assessment for children and young people who have been referred by teachers, including children with emotional health issues who do not meet thresholds for CAMHS. The service also provides on-line advice and support through its ChatHealth website and chat facility and is piloting on-line health assessments which are being rolled out across secondary schools. It also provides sexual health assessments and advice where needed.

The performance report (appendix 1) summarises performance in 2017/18 across nationally reported indicators. This shows that in 2017/18, 95% of babies in the city were being seen and reviewed by a health visitor within the first two weeks of life, providing opportunities to review feeding or development issues and maternal issues such as post-natal depression. Similar numbers were seen at 6-8 weeks with 58% of babies still breastfeeding at this point, above the national average of 44%.

At two years, 81% of all children in the city had had a detailed assessment of their language skills and physical and emotional development (the ASQ-3 review) allowing for early identification and advice around language and early literacy development, behaviour and sleep management and diet and nutrition.

The school nursing service went through significant change in 2017/18 with a new programme for schools put in place, including improved coverage across city schools, a new health and well-being screening tool put in place and the roll out of the ChatHealth service. New performance measures for the service took effect this financial year and are being reported from this financial year.

NCMP & childhood obesity

The National Child Measurement Programme is a nationally mandated programme that weighs and measures all children at the start and end of primary school. This information is then sent to parents/ carers with advice about how they can support their children to be a healthy weight and information about services that are available locally.

The programme is carried out as part of the Healthy Together Programme. Participation rates in the programme are good at both the start and end of primary school, although there has been a slight fall in 2016/17 – the most recent year that we have verified national data for.

Childhood obesity levels in the city are showing signs of stabilising (appendix 1), with 10% of children obese in reception, similar to the national position. Rates in older children at the end of reception are higher, rising to 23% and this has been increasing since 2013/14. This continues to be a priority area of work for the division, including working with the city's sports clubs to expand primary school outreach programmes, working with primary schools to roll out the 'Daily Mile' programme

which supports pupils to run a mile a day at school and which is now operational in 36 schools and the recent 1,000 tweaks campaign which is encouraging children, families and parents to make small changes to improve their health and well-being. Through our investment in healthy eating initiatives in schools (see appendix 1) 72 schools are now enrolled in the 'Food for Life' programme which skills up pupils to grow and cook food as well as helping schools to promote healthy eating across the curriculum and in the wider school environment.

Oral Health

Detailed updates on the city's oral health programme have been provided to recent Scrutiny meetings but 25% of primary schools are signed up to the programme with 75% of nurseries and pre-school playgroups also involved. Since the start of the programme the percentage of children without tooth decay has improved from 53% in 2014 to 61%.

3.3 Public Health Services for adults

The council is responsible for a number of public health services for adults:

Sexual health services

Provided by the NHS, the council is responsible for open access sexual health services and some contraception services. The city's main sexual health service – currently provided at St Peter's Health Centre but shortly to move to the Haymarket centre – provides testing, treatment and advice for sexually transmitted infections, chlamydia screening, HIV testing and contraception. It also runs outreach clinics in parts of the city. We also pay for specialist contraception in some general practices in the city and emergency hormonal contraception in community pharmacies. We do not pay for cervical screening but have worked with NHS England who are responsible for this service to include cervical screening as a service that is offered by our sexual health services.

The main service at St Peter's has over 36,600 attendances each year (appendix 1), below the forecast figure of 40,300. This figure has been increasing over the last 3 years as the service has been more widely promoted. This includes 'primary attendances' (these are appointments where people are assessed and given screening for STIs or a routine contraception appointment) and 'secondary attendances' (these are appointments where people may need follow up treatment which cannot be done at a single appointment). Waiting times for appointments are monitored and patients have a choice of booked appointments and walk-in sessions are also available. When a patient cannot be seen at a walk-in session, they will be offered an appointment within 48 hours (appendix 1).

A new contract was awarded to provide this service from January 2019 when the service will also move into the Haymarket. As part of this, the service will be offering more on-line testing and testing from self-service kiosks. We will therefore be

monitoring the volume of people who chose to use this option as well as continuing to monitor waiting times and the number of people using face-to-face and on-line or self-service options.

We commission local general practices to provide Long-Acting Reversible Contraception (forms of contraception such as coils or implants which are very effective at reducing unwanted pregnancies). Wider capacity issues in general practice, a reduction in the number of GPs who are trained to provide this type of contraception and low numbers of women requesting LARC forms of contraception means that LARC rates are below the national average and falling (appendix 1). We are working with the Clinical Commissioning Group and local GPs to increase the number of GPs who are accessing training and to review options to offer this service to women through a model where a GP could offer this service to patients who are registered in a different practice.

We also commission sexual health & HIV prevention services which are the subject of a separate Scrutiny paper.

Sexual health outcomes are monitored nationally (appendix 1) and within the division. The rate of new STIs has been falling since 2013 but has shown a slight increase in the last year, although at a slower rate than is the case nationally. Overall rates are similar to the national level.

Services to improve physical and mental health & well-being

Integrated lifestyle services

The Executive have agreed proposals to develop a new integrated lifestyle service for adults which would bring together the existing lifestyle services we have in place to promote healthier lifestyles. This includes the healthy lifestyles hub, adult weight management, active lifestyle scheme and smoking cessation.

These services are therefore undergoing changes with a go-live date for the new service of April 2019. However, we continue to monitor performance across our current services and these measures will also be monitored when the new service goes live.

Health and Well-being Scrutiny received a detailed report on these services, including how these services are performing at its meeting on the 23rd August 2018 so this information is not reproduced in detail in this report. In summary, the performance report for 2017/18 (appendix 1) shows that:

- The healthy lifestyles hub saw 5268 people referred by their GPs in 2017/18. 3/4s of people came from the most deprived parts of the city where health needs are greatest.

-The Active Lifestyle scheme run out of leisure centres saw just under 5,000 people last year, including 208 patients for cardiac rehabilitation and just over 2,500 people with long-term conditions that could be improve through exercise

-The smoking service worked with 2753 smokers of whom half had successfully stopped smoking after 4 weeks and also with 175 pregnant smokers of whom 45% successfully quit. The number of smokers coming to the service has declined in recent years, partly as a result of increases in e-cigarette use.

City outcomes (appendix 1) that relate to these service show that smoking prevalence (18%) remains higher than the England position (15%). However, the rate of smoking in Leicester is falling faster than is the case nationally. The number of women smoking in pregnancy has been falling with 10% smoking at the point of delivery compared with 14% in 2012/13.

Obesity rates in adults are below England levels (56% compared with 61% nationally) but the rates of physical activity in adults is lower than the national average (60% compared to 66%). Lifestyle services are part of the picture in reversing this but wider changes to the built environment such as the expansion of walking and cycling routes as well as increasing footfall at outdoor gyms and leisure centres is also key.

The performance report also describes performance in food growing initiatives that are run as part of the City's Food Plan. This supports 2 food growing schemes to skill up local people and schools to grow fruit and vegetables including Saffron Acres community food growing programme and the Conservation volunteers.

The report also outlines performance in the probation health trainers service. This service, which is provided by Inclusion healthcare who also run No 5 and provide health services to asylum seekers and homeless people in the city, supports people on probation to develop health plans and access services such as substance misuse. This service saw 269 people on probation last year of whom 153 put in place a health plan with 87% of these achieving the goals on this plan.

NHS Healthchecks

NHS Health-checks is a nationally mandated programme offered at GPs across the city. Designed to screen otherwise healthy adults once every five years for early indicators of heart disease, kidney disease & diabetes which can be prevented, the programme has just reached the end of its first five year cycle. Since 2013/14, the programme has reached 75% of eligible adults in the city, or 61,447 adults (appendix 1).

The number (rate) of people in the city who die under the age of 75 from preventable heart disease is higher than in similar cities and above the England average (appendix 1) so early identification of risk factors for heart disease and tackling

factors such as high blood pressure, exercise and diet that contribute to these continue to be an important priority within the city.

Drug and alcohol services (substance misuse)

Health and well-being Scrutiny Commission have previously received reports on our substance misuse services, including Turning Point and No. 5 with further updates planned. Following the recommissioning of these services and a period of managing a dip in the number of people accessing some services, there has been an increase in people using these services in 2017/18 and all clients are seen within 3 weeks of making contact with the service. A more detailed update focusing on this service will be presented to Scrutiny early next year.

Mental health

The division runs a number of programmes to improve mental health. This has included the local Time to Change programme which has promoted conversations around mental health to reduce the stigma associated with mental health as well as a programme to train staff from across a range of agencies to spot risk factors for suicide and learn how to manage these. In 2017/18, this reached 300 staff and evaluation of staff skills, knowledge and confidence in working with people to manage suicidal behaviour showed significant improvements after completion of the training.

Appendices

Appendix 1 Division of Public Health Summary Dashboard 2017/18, trends in outcome data in Leicester and in similar authorities.