Public Health (PH) – Q1 20115/16

1. SUMMARY

1.1 DELIVERY UNIT DASHBOARD

| Financial | | | | |
|--|-------------------------|--|--|--|
| Projected year-end revenue budget variance | Capital actual variance | | | |
| 0 | N/A | | | |

| | Performance | Commissioning Intentions |
|-------------------|-------------|-----------------------------|
| Green rated | 81% (13) | 79% (11) |
| Green Amber rated | 6% (1) | 14% (2) |
| Red Amber rated | - | |
| Red rated | 13% (2) | - |

1.2 TOP ACHIEVEMENTS AND ACTIONS

Top 3 Achievements

The Public Health Service has achieved the successful re procurement of School Nursing and Substance Misuse contracts for Barnet and Harrow Councils. The School Nursing Service and School Aged Immunisations which is being commissioned by NHSE will be delivered by a common provider in Barnet by October 2015.

A group of young people from Barnet were presented with the top prize at this year's Cut Film Awards on 1 July. Cut Films is a youth antismoking film and social media project organised by The Deborah Hutton Campaign which asks young people to research smoking, make a short film about what they find out and share their film with their friends. It is an anti-tobacco education campaign, created by young people for young people through the medium of filmmaking - a project which is funded by Public Health.

'Smoking Bullet' by Barnet Youth & Family Support Services won the prestigious Judges Choice award for its powerful anti-smoking message aimed at other young people across the country. The team from Barnet Council's Canada Villa Youth Centre also won the best film in the 12 to

15 year old category. Another group of Barnet residents from JCoSS (Jewish Community Secondary School) came joint third place in the national awards.

The post health check interventions project is about to commence offering GPs a route for referral for patients who have had a health check and would benefit from accessing physical activity interventions and/or healthy cooking and nutrition advice. Patients who are eligible can have six sessions of motivational interviewing to determine what is best for them to achieve their activity or weight management goals and then will follow a pathway into leisure services or nutrition sessions, delivered by London Met University Masters Students and Age UK for a longer period. The first meetings with GPs started mid-July, following a number of awareness raising meetings with primary care.

| Key Challenges | Actions required |
|---|---|
| Scoping of the local sexual health service as part of preparations for re procurement | Contraceptive and Sexual Health (CaSH) Service. We are currently undertaking a sexual health service review, which will have a particular focus on stakeholder engagement. This review will enable us to have a better understanding of the gaps in current service provision across all stages of the pathway, in relation to best practice. The outcome of this service review will be an options appraisal and a service specification setting out a new service pathway (resulting in improved access to services for local residents, particularly high risk group). We plan to procure a new service for April 2017. |
| Re procurement of the smoking cessation service | Barnet Stop Smoking Service which was de-commissioned from Central London Community Healthcare (CLCH), was due to expire at the end of July 2015. We will be relying on pharmacies and GPs to deliver the local stop smoking service and to support us in reaching our quit target. A number of briefing sessions with our primary care providers took place in early June. They were well received and a number of new providers have or are planning to sign up. Over the next few months we will be developing an options appraisal which will propose a number of service models based on best practice and value for money. This will inform our commissioning decision. The interim service will continue until March 2016. The collection of the smoking data will be considered in line with the health checks data collection. This is likely to identify additional quitters. |

| Recruitment to the recently agreed changes to the Public Health Service structure. | Interviews for the majority of posts have been completed. Offers have been made and the team are currently negotiating start dates and notice periods with successful applicants. The main challenge is in appointing to the Strategic posts, where we were unable to recruit to two out of three strategists in the Barnet team and one out of the two in Harrow. |
|--|--|
| 7.4% in-year budget cut | Central Government has announced a 7.4% in-year cut to the Public Health grant subject to consultation. We have developed plans for coping although the position is not yet confirmed. |

1.3 SUMMARY OF THE DELIVERY UNIT'S PERFORMANCE

Public Health is working on a commissioning and procurement strategy for GUM which is expected to be presented for approval to Barnet Council Procurement Board in September / October 2015. Re-commissioning and service redesign is due to complete in 2017.

CPI2003 - Increase the number of eligible people who receive an NHS Health Check. End of year results for NHS Health Checks for 2014/15.

The Health Check programme is monitored according to the number of 'invitations' sent out and the number of 'delivered' (completed) Health Checks. The annual target for both programmes is to achieve 15% invitations and 10% delivered Health Checks (of the eligible population). Every GP practice that delivers Health Checks has an individual target proportionate to the number of patients who meet the criteria for a Health Check. The round up of 2014/15 across Barnet shows the following data:

Barnet has achieved an 'invite' performance increase of 12.2% from 14,657 in 2013-14 to 16,447 in 2014-15, thus exceeding the annual invite target by 2.7%.

The annual 'delivered' outturn of 8.8% represents a 1.2% shortfall against an annual target of 10%. However, in actual numbers Barnet Health Checks 'delivered' have increased by 50.2%, from 5,469 in 2013-14 to 8,218 in 2014-15.

Health Checks training sessions took place in June 2015, and were well attended. More sessions are planned for November 2015. Training sessions are often a good opportunity to ensure the programme remains as a priority for practices. An exam that is accredited by the Royal Society of Public Health has been introduced and this will help quality assure the Health Check process for those in General Practice.

The current data system is fragmented and dependant on manual input of data, with too much room for error and dependency on human resources. A new IT system, which provides live information based on GP data systems, was procured in April 2015 and is in the process of

implementation. Roll out is due to commence in July 2015, and a project plan including a risk register is in place to ensure progress towards full implementation. The new system will enable the GP practices to:

- see how many health checks they have completed
- see how much is due in terms of payments
- identify their eligible cohort
- access a whole range of information about patient's health status
- identify what they need to do for those health checks that come up as being 'incomplete'

The new system will allow Public Health to:

- See how practices are performing
- Identify payments due to practices
- Compare performance across the whole borough
- Provide evidence of the value of the programme in terms of patient health outcomes.

A distribution plan is underway for the ten Point of Care (POC) testing units purchased in Barnet. Access to this piece of equipment will make the delivery of Health Checks much more streamlined.

CPI 2001 Reduction in numbers of mothers that smoke at time of delivery: In 2014-15 the annual outturn was 3.7% against a target of no more than 5%. This positions Barnet as the 16th lowest in England Clinical Commissioning Groups.

PH012 - Number of healthy eating workshops provided in children centres. The year-end target of 78 was exceeded, with a total of 184 healthy eating / cooking workshops delivered by the end of 2014/15. 102 workshops were carried out in quarter 4.

PH001 - Number of people setting a quit date with Smoking Cessation services who successfully quit at 4 weeks – following the adjustment to the target in Q2, the 2014-15 target of 611 was exceeded by the GP and pharmacy services (2014-15 outturn 676). The target for 2015-16 has been set to reflect the change in the service being commissioned.

PH002-PH003 - the Public Health England NDTMS (National Drug and Alcohol Treatment Database) is currently being updated to implement security enhancements and upgrades and therefore data has not been available since October 2014. This is a national problem. PHE data reports are scheduled to be repeated up until the final year end submission for 2014-15 in July. It is expected that in a lot of areas there will be ongoing work to return the full year's data up until that point.

PH004 – % of eligible new SMS service users (year to date) who accepted HBV vaccinations. The service has achieved an outturn of 82.8% against a target of 40%. The SMS providers have a priority performance action plan in place across the partnership to increase the uptake of blood borne virus testing and immunisations. In addition to significantly increasing the uptake in new service users, the providers have also retrospectively reviewed current service users to ensure they have been vaccinated too.

2. Performance

2.1 How the Delivery Unit is performing against its performance indicators

| | | RAG | ratings | | | | No. of indicators expected to report this quarter | |
|-----------|----------|----------------|--------------|---------|-----------------------|-----------|---|--|
| | Green | Green Amber | Red Amber | Red | Improving or the same | Worsening | | |
| Strategic | 1 | | | 1 | 1 | 1 | 2 | |
| Critical | 12 | 1 | | 1 | 12 | 1 | 14 | |
| Overall | 81% (13) | 6% (1) | 0% (0) | 13% (2) | 81% (13) | 13% (2) | 16 | |

2.2a Performance Indicators that did not meet their target

Appendix A outlines the indicators which have met their target.

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of indicator | Period Covered Timeframe data has been measured | Previous Result Previous result from the most relevant period | Target Achievemen t level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculatio n of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|-------------|--|-------------------|--|--|--|--|--|--|--|---|
| CPI 2003 | Increase the number of eligible people who receive an NHS Health Check | Strategic | Jan-Mar 2015 | 2,243 | 3,500 | N/A | 1,402 | 59.9% | Worsening | No benchmarking data available for this quarter |

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of indicator | Period Covered Timeframe data has been measured | Previous Result Previous result from the most relevant period | Target Achievemen t level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculatio n of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|--------------|--|----------------------|--|--|--|--|--|--|--|---|
| KPI PH003 | Increased number of drug users successfully completing drug treatment and not returning within 6 months - non- opiate users | Critical | Jan – Mar 2015 | 27.8% ¹ | 40.2% | 90/333 | 27% | 32.8% | Improving | N/A |
| KPI PH007 | Number of large employers signing up to the healthy workplace charter | Critical | Jan – Mar 2015 | 0 | 2 | n/a | 1 | 50% | Same | Local programme only |

| Ref and title | | | Commen | ts and Pro _l | oosed Inter | vention |
|---|-------------------------|------------------|-------------------------|------------------------------|------------------------------|---|
| CPI2003 Increase the number of eligible people who receive an NHS Health Check | an action plan to impre | ove performation | ormance, who based on (| hich is detai GP data sys | led in sectio tems, has b | er of checks delivered did not. We have n 1.3. A new data recording system, een procured and will be in place for tuarter |

¹ Q3 outturn is provisional, based on currently available data from Public Health NDTMS (National Drug and Alcohol Treatment Database). Timeline for submitting previous years' data closes end of July 2015.

| Ref and title | | | Comme | ents and Pro | oposed Inter | vention |
|--|---|---|-------|--------------|--------------|---------|
| | Cumulative target | 1150 | 2500 | 5800 | 9300 | |
| | Actual Outturn | 2647 | 1926 | 2243 | 1402 | |
| | Cumulative actual | 2647 | 4573 | 6816 | 8218 | |
| PH003 Increased number of drug users successfully completing drug treatment and not returning within 6 months - non-opiate users | year ago and which is has the highest improvement and Recover | Improvement made on this indicator has reflected the Performance Action plan which commenced over a year ago and which is now showing a positive effect. PHE Programme Manager has reported that Barnet has the highest improvement rate within the boroughs whose performance is under review. A new Single Treatment and Recovery pathway has been commissioned and will commence in October 2015. Services will be reporting in more detail in 2015-6. | | | | |
| PH007 Number of large employers signing up to the healthy workplace charter | One business signed up in Q4 against a quarterly target of two. The final position for the year was three businesses against a target of five. However, since the end of March 2015, we have engaged another business to bring the total to four. The plans for the Council's own commitment to sign up to the charter, crucial to the success of this work stream, is now back on track and expected to deliver late 2015. | | | | | |

3. Commissioning Intentions

Theme committees have agreed the commissioning intentions for the council up to 2020, the tables below provide an update on the progress.

3.1 Overview of progress against Commissioning Intentions

| | RAG | Ratings | No of broadland doe | |
|---------------------------|--|---|---|------------------------------------|
| Green – Intentions Met | Green Amber – Intentions delayed, Low Impact | Red Amber - Intentions delayed, Medium Impact | Red - Risk of Not Delivering Or High Impact | No. of intentions due this quarter |
| 79% (11) | 14% (2) | 0% (0) | 0% (0) | 14 |

3.2 Commissioning Intentions

| Commissioning Intention | RAG | Commentary | | | | | | |
|---|---|---|--|--|--|--|--|--|
| Give every child the best start in life | Give every child the best start in life | | | | | | | |
| School nursing commissioning arrangements | Green | Through West London Alliance Public Health has lead the procurement of the school nursing service. The procurement of school aged immunisation formed part of the timetable and provided the opportunity to work in partnership with NHSE to ensure a common provider is chosen to deliver both services. The award is being finalised and achieves the quality and pricing requirements to deliver 5-19 Healthy Child Programme. The transition of moving to the new service specification is a major undertaking and a plan including addressing risks and mitigations is in place. | | | | | | |
| Family nurse partnership | Green | Family Nursing Partnership is in place and operating well | | | | | | |
| | | The update from January to July 2015 showed: 75 schools registered on Healthy Schools London website out of a total of 93 primary schools in Barnet (77.4%) 33 schools achieved Healthy Schools London Bronze Award 12 schools have achieved the Healthy Schools London Silver Award School staff were provided training around the themes of Healthy Eating, Physical Activity and Emotional Wellbeing. HEP organised a conference for secondary school staff on 'Promoting Pupil Wellbeing and Mental Health' which was attended by 9 secondary schools in Barnet. | | | | | | |
| Barnet Schools Wellbeing Programme | Green | The primary contract has been extended to end on 31 st July 2015. The Secondary contract will end 31 st December 2015. Sexual health support to Primary schools is on track. 21 schools have engaged and 50 members of staff attended centre based Sex and Relationship Education training to-date, which has exceeded the target. Contract has been extended until 31 st July 2015. Secondary contract started in December 2014 – 12 schools engaged exceeded target and six schools have sent staff on centre based SRE training. Tavistock and Portman NHS Foundation Trust (our provider of the alcohol and substance misuse component of the schools wellbeing programme) | | | | | | |

| Commissioning Intention | RAG | Commentary |
|---|-----------------|---|
| | | have engaged with 72 schools, which resulted in exceeding their target. 37 schools have sent two or more staff on training courses regarding alcohol & substance misuse. 100% of staff have reported they have the skills and knowledge to apply the programme of work after attending training. The contract has been extended to end 31 st July 2015. |
| Enabling all children, young people and adults to m | aximise their d | capabilities and have control over their lives |
| Children and adults who are overweight and obese are encouraged and supported to lose weight. | Green | The Child Weight Management Programme, run by the Weight Management Centre, went live in May 2015. The programme is a 12-week family intervention run in community setting, with the first 12-week course running in Colindale. The course has been well received with all 10 families completing the programme. Over the Summer and into Autumn there will be roll-out to other areas, which have been selected based on obesity prevalence in schools. We have also developed clear thresholds for referral to the Weight Management Centre and also to the Healthy Weight Nurses, who are trained school nurses and will be supporting children >99.6 th centile (considered very obese). The Public Health Children's Team is chairing monthly meetings between the Weight Management Centre and the Healthy Weight Nurses to ensure the pathway works as it should and that there is a strong working |
| People are encouraged and supported to quit smoking | Green | relationship between these two providers. Barnet Stop Smoking Service which was de-commissioned from Central London Community Healthcare (CLCH) was due to expire at the end of July 2015. We will be relying on pharmacies and GPs to deliver the local stop smoking service and to support us in reaching our quit target. A number of briefing sessions with our primary care providers took place in early June. They were well received and a number of new providers have or are planning to sign up. Over the next few months we will be developing an options appraisal which will propose a number of service models based on best practice and value for money. This will inform our commissioning decision. The interim service will continue until March 2016. The collection of the smoking data will be considered in line with the health checks data collection. This is likely to identify additional quitters. |

| Commissioning Intention | RAG | Commentary |
|---|----------------|---|
| | | The 2014-15 target of 611 (for the number of people setting a quit date with Smoking Cessation services who successfully quit at 4 weeks) was met by the GP and pharmacy services. The target for 2015-16 has been set to reflect the change in the service being commissioned. |
| Community emotional wellbeing | Green | Options review has been undertaken and a preferred option (health champions) identified aiming for tendering process in Autumn for Spring launch. |
| Making every contact count | Green Amber | Options for development currently under review following withdrawal of funding (as a result of 7.4% in-year budget cut) |
| Alcohol brief intervention | Green | Has been included in the new D&A service specification and will be handed over to the new provider in October |
| Create fair employment and good work for all, which | h helps ensure | e a healthy standard of living for all |
| Residents are supported to retain/return to employment | Green | Services underway and performance is being monitored. |
| Create and develop healthy and sustainable places | and communi | <u>ities</u> |
| Ensuring robust Sexual Health services | Green | Service review to be completed in September |
| Adult Drug and Alcohol Treatment and Recovery pathway focusing on providing early treatment, harm minimisation and full recovery. | Green | New service procured, launching in October |
| Young People's Drug and Alcohol Service focusing on prevention of substance misuse and escalation of misuse and associated harm | Green | New service Specification currently being written and new service to be procured to commence April 2016 |
| Strengthen the role and impact of ill health prevention | <u>on</u> | |
| People with a long term condition are encouraged and supported to self-manage their condition | Green Amber | Healthy Living Pharmacy training has been conducted and structured education delivered. Further options for development are currently responding to a reduced funding envelope (as a result of 7.4% in-year budget cut) |
| Health and lifestyle checks are offered and taken up | Green | Health checks training sessions took place in June 2015, and were well attended. More sessions are planned for November 2015. Training sessions are often a good opportunity to ensure the programme remains a priority for |

| Commissioning Intention | RAG | Commentary |
|-------------------------|-----|--|
| | | practices. An exam that is accredited by the Royal Society of Public Health has been introduced and this will help quality assure the Health Check process for those in General Practice. |
| | | Barnet health checks 'delivered' has increased by 50.2% from 5,469 in 2013-14 to 8,218 in 2014-15. A new data recording system, which provides live information based on GP data systems, has been procured and will be in place for reporting in the new financial year (Q1). |
| | | A distribution plan is underway for the 10 Point of Care (POC) testing units purchased in Barnet. Access to this piece of equipment will make the delivery of Health Checks much more streamlined. |

3.3 How is the Delivery Unit achieving against Commissioning Priorities

| Commissioning Priority | Subjective RAG | Commentary |
|---|-------------------|---|
| Complete the School nursing and health visiting review and ensure appropriate development of the early years and schools well-being programmes ahead of assuming commissioning responsibilities for Health Visiting services in 2015. | GREEN | Through West London Alliance Public Health has lead the procurement of the school nursing service. The procurement of school aged immunisation formed part of the timetable and provided the opportunity to work in partnership with NHSE to ensure a common provider is chosen to deliver both services. The award is being finalised and achieves the quality and pricing requirements to deliver 5-19 Healthy Child Programme. The transition of moving to the new service specification is a major undertaking and a plan including addressing risks and mitigations is in place. Funding allocations for Health Visiting services for 2015/16 have been announced and Barnet is 1 of 12 of all the 152 LAs that will receive a growth in the allocation. The growth will enable Barnet to have more frontline health visiting staff on the ground to meet the developmental milestones and giving every child and best and an early start. Contract negotiations with NHSE with |
| | | every child and best and an early start. Contract negotiations with NHSE with each provider commenced in January 2015 and Public Health is working with NHSE to ensure the transition is smooth. Contract novation was secured and to allow stability of the service and meeting the performance requirements it |

| Commissioning Priority | Subjective RAG | Commentary |
|--|-------------------|--|
| | | will be essential to continue the service with these contractors up to 2018/19. |
| Provide strategic leadership of the Fit and Active Barnet (FAB) Campaign and delivering environmental and behavioural interventions to promote physical activity | GREEN | FAB campaign continues to promote the brand and encourage residents to be active. An 'inclusive' section added to the website to encourage people with disability to participate in sports and physical activity. The FAB Partnership Board was established and has met. The Board has adopted the SPA Strategy Statement and developed a delivery plan. The Board has agreed to prioritise target groups for participation of people with disabilities, older people and children. FAB Reference Group will ensure that the new leisure contract is public health outcomes focused. |
| As part of the integrated care agenda, introduce a new self care programme in partnership with the CCG | AMBER | Health and social care integration tier 1 and 2 plans are currently under review. The available funds for this work have been reduced as a result of the in year cuts to the public health budget. The Healthy Living Pharmacy Initiative is underway and its potential contribution to H&SCI is being clarified alongside additional investment priorities. |
| Re-procure sexual health services, and drug and alcohol services (following a service review); in collaboration with the West London Alliance where appropriate | GREEN | Public Health continue to lead on the re procurement of GUM services across 22 boroughs. The potential for the Harrow and Barnet public health team to lead a sexual health commissioning support function is currently under development. A business case has been prepared and circulated to all Councils in London. Responses are awaited. |

| Commissioning Priority | Subjective RAG | Commentary |
|---|-------------------|--|
| | | The Drug & Alcohol service procurement has been successful, a new contract has been awarded, and mobilisation of the new service to start on 1 st October 2015 is in progress. |
| Provide strategic leadership and, where appropriate, investment support to other areas of the council that influence the wider determinants of health. In particular via improvements in the built environment and supporting people with health problems back to work. | GREEN | Supporting people with health problems back to work: The West London Alliance (WLA) bid for funds to develop an integrated mental health and employment pilot was successful. We plan going to market in late summer. |

4. RESOURCES AND VALUE FOR MONEY

4.1 Revenue

| | | Variations | | | | |
|---------------|--------------------|------------|-------------|-----------|--|----------------|
| Description | Original Budget | Budget V1 | Q1 Forecast | Variation | Comments | % Variation of |
| | £000 | £000 | £000 | £000 | | revised budget |
| Public Health | 14,334 | 14,334 | 14,334 | | The Government announced on 4th June 2015 a reduction in the Department of Health non-NHS funding of £200m. This is expected to result in an in year reduction of £1,026k on the previously notified grant allocation of £14.334m. The 2015-16 budget process created capacity of £1,078k in the grant against which wider public health outcomes could be charged, however this capacity will simply mitigate the grant reduction now expected. | 0.0% |
| Total | 14,334 | 14,334 | 14,334 | | | 0.0% |

5. OVERVIEW OF DELIVERY UNIT5.2 Change projects

| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|---|-------|------------------------|---|
| Children's health pathway development through school nursing and health visiting services review/ preparation for receipt of Health Visiting responsibilities in 2015 (This is a continuation of the project commenced in 2013-14) | GREEN | SAME | Through West London Alliance Public Health has lead the procurement of the school nursing service. The procurement of school aged immunisation formed part of the timetable and provided the opportunity to work in partnership with NHSE to ensure a common provider is chosen to deliver both services. The award is being finalised and achieves the quality and pricing requirements to deliver 5-19 Healthy Child Programme. The transition of moving to the new service specification is a major undertaking and a plan including addressing risks and mitigations is in place. Funding allocations for Health Visiting services for 2015/16 have been announced and Barnet is 1 of 12 of all the 152 LAs that will receive a growth in the allocation. The growth will enable Barnet to have more frontline health visiting staff on the ground to meet the developmental milestones and giving every child and best and an early start. Contract negotiations with NHSE with each provider commenced in January 2015 and Public Health is working with NHSE to ensure the transition in October 2015 is smooth. Contract novation was secured and to allow stability of the service and meeting the performance requirements it will be essential to continue the service up to 2018/19. |
| Barnet Schools Wellbeing Programme The Programme provides resources, training and consultancy support for physical activity, healthy eating, emotional wellbeing (EWB) and Tobacco Control, Sex and Relationships Education (SRE) and Drugs & Alcohol | GREEN | SAME | The update from January to July 2015 showed: 75 schools registered on Healthy Schools London website out of a total of 93 primary schools in Barnet (77.4%) 33 schools achieved Healthy Schools London Bronze Award |

| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|--|-------|------------------------|---|
| | | | 12 schools have achieved the Healthy Schools London Silver Award Provided training to members of school staff around the themes of Healthy Eating, Physical Activity and Emotional Wellbeing. HEP organised a conference for secondary school staff on 'Promoting Pupil Wellbeing and Mental Health' attended by 9 secondary schools in Barnet. The primary contract has been extended to end on 31st July 2015. The Secondary contract will end 31st December 2015. Sexual health support to Primary schools is on track. 21 schools have engaged and 50 members of staff have attended centre based Sex and Relationship Education training to-date, this has exceeded the target. Contract has been extended until 31st July 2015. Secondary contract started in December 2014 – 12 schools engaged exceeded target and six schools have sent staff on centre based SRE training. Tavistock and Portman NHS Foundation Trust (our provider of the alcohol and substance misuse component of the schools wellbeing programme) have engaged with 72 schools, which resulted in exceeding their target. 37 schools have sent two or more staff on training courses regarding alcohol & substance misuse. 100% of staff have reported they have the skills and knowledge to apply the programme of work after attending training. The contract has been extended to end 31st July 2015. |
| Children's Centre wellbeing initiative. This contains the following elements: Focus on improving mother and baby's health and wellbeing before, during pregnancy and beyond including: | GREEN | SAME | The Breast feeding service is on track and an application for Level 1 UNICEF accreditation has been submitted. Breast Feeding Coordinator recruited. Eight peer support groups are up and running across the borough. Four paid peer supporters have been recruited and four volunteers have been recruited, |

| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|---|-----|------------------------|--|
| Childhood Obesity Parenting support Support for First Time Mothers/Breastfeeding Oral Health of Children Smoking cessation and smoke free homes | | | this number is likely to increase in the second year of the programme.100% of all mothers offered the service would recommend to family and friends. Two part time Health and Wellbeing Coordinator commenced taking forward the Healthy Children's Centre Standards. 184 Cooking and healthy eating workshops have taken place across centres. This includes healthy eating and cooking advice, practical sessions for parents and training for staff (exceeded target). 11 out of 13 centres have received the 'eat better, start better' training. 19 children centre staff have been nominated as Health & Wellbeing champions. An Oral Health Programme has commenced, delivered by an Oral Health Coordinator. Q4 included the following: Supervised tooth brushing programme for Reception and Nursery classes rolled out in nine schools Oral health workshops for parents in children's centres (also helping them to achieve their oral health standards) all 13 children's centres have had workshops delivered which is eight more than the five planned. Brushing for Life programme (B4L) coordinates a scheme and trains Children's Centre staff to give brief oral health messages and distribute B4L packs to parents at a child's developmental progress check (24 members of staff were trained) Engagement with vulnerable groups within two special schools and work is underway with young parents from the Family Nurse Partnership and at a Refuge Centre. |

| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|--|-------|------------------------|---|
| Targeted weight management programme for overweight and obese children | GREEN | SAME | The Child Weight Management Programme, run by the Weight Management Centre, went live in May 2015. The programme is a 12-week family intervention run in community setting, with the first 12-week course running in Colindale. The course has been well received with all 10 families completing the programme. Over the Summer and into Autumn there will be roll-out to other areas, which have been selected based on obesity prevalence in schools. We have also developed clear thresholds for referral to the Weight Management Centre and also to the Healthy Weight Nurses, who are trained school nurses and will be supporting children >99.6 th centile (considered very obese). The Public Health Children's Team is chairing monthly meetings between the Weight Management Centre and the Healthy Weight Nurses to ensure the pathway works as it should and that there is a strong working relationship between these two providers. |
| Development of Sport & Physical Activity (SPA) | GREEN | SAME | The FAB Partnership Board is due to meet and explore how the group fits into the Healthy Weight Strategy Group and how the Board can offer support to the SPA Board on public health outcomes. |
| FAB Campaign | GREEN | SAME | FAB campaign continues to promote the brand and encourage residents to be active. An 'inclusive' section was added to the website to encourage people with disabilities to participate in sports and physical activity, see: https://www.barnet.gov.uk/citizen-home/public-health/fit-and-active-barnet/physical-activity/inclusive-opportunities.html |
| FAB partnership Board | GREEN | SAME | FAB Reference Group – supporting the officers who have a role in physical activity. The development of this group will be done in partnership with the new Head of Sport and Physical |

| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|---|-------|------------------------|---|
| | | | Activity (to be appointed). |
| Public Health promotion and campaigns | GREEN | SAME | Two cancer prevention community events took place in June 2015 in Broadwalk Shopping Centre in Edgware and in East Finchley Summer Festival. About 100 people visited the cancer nurse in Broadwalk. Further five events will take place until end of November 2015. |
| Supporting people with long term health conditions – self management- (supporting the personalisation agenda) | AMBER | SAME | Health and Social Care Integration tier 1 plans were finalised and submitted as part of the Barnet Better Care Fund (BCF) application. The steering group is established and has membership from Local Pharmaceuticals Committee and Clinical Commissioning Group (CCG). The Healthy Living Pharmacy Project has been designed and agreed by the steering group and the Health & Social Care Information Steering Group. Training has been delivered to pharmacists to be Health Champions and has had positive feedback. 17 pharmacists have completed training and a further dozen are underway. The whole of tier 1 and 2 plans are currently under review. The available funds for this work have been reduced as a result of the in-year cuts to the public health budget. The contribution of the Health Living Pharmacy Model to H&SCI is being clarified alongside additional investment priorities. |
| Ageing Well | GREEN | SAME | The involvement of Ageing Well in the Winter Well programme is still to be decided. The opportunities for Ageing Well to be part of health and social care integration tier 1 is also still under discussion, due to the impact of funding changes for Public Health. |

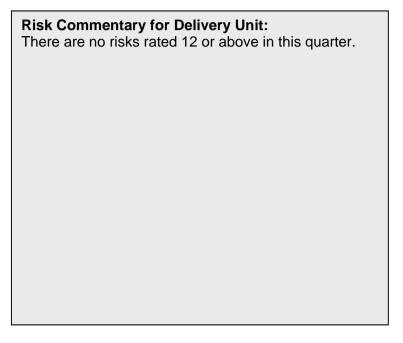
| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|---------------------------------------|-------|------------------------|--|
| Sexual Health Commissioning | GREEN | SAME | Public Health continue to lead on the re procurement of GUM services across 22 boroughs. The potential for the Harrow and Barnet Public Health team to lead a sexual health commissioning support function is currently under development. A business case has been prepared and circulated to all Councils in London. Responses are awaited. |
| Employment support | GREEN | SAME | This was the first quarter of operations for both services. Motivational and Psychological Support (MaPS) service received 258 referrals in this quarter. Of these, 124 were engaged on the programme, 20 of whom were successfully supported into a minimum of 16 hours employment. This service is co-located within the Job Centre Plus and support people with mild to moderate mental health problems. Individual Placement and Support (IPS) service to date engaged with 65 people in this quarter of whom one person was successfully supported into a minimum 16 hours employment. This service is co-located within the Community Mental Health Teams and supports people with severe and enduring mental health problems. |
| Re/ Public Health Projects | GREEN | SAME | Winter Well - the 2014/15 project was delivered with 21 eligible people having been given emergency equipment and/or grants, 86 members of the public and 19 front line staff received relevant training. Overall the mild weather reduced demand for emergency equipment though the energy efficiency component continued to grow. A review of 2014/15 was completed and took account of this and how agencies can enhance joint working, to achieve |

| Name of project and brief description | RAG | Direction of Travel | Include narrative to reflect current status of project |
|---------------------------------------|-----|------------------------|---|
| | | | the aims of the project. Planning for the next winter season is underway. |

5.3. Risk Overview

The following is the 5 X 5 matrix 'heat map' highlighting the number of risks at a Directorate Level and where they are currently rated:

| | | | | | IMPACT | | |
|-------------|-------|----------------|-------|----------|--------|--------------|---|
| | SCORE | | 1 | 2 | 3 | 4 | 5 |
| | | Negligible | Minor | Moderate | Major | Catastrophic | |
| PR | 5 | Almost Certain | 0 | 0 | 0 | 0 | 0 |
| PROBABILITY | 4 | Likely | 0 | 0 | 0 | 0 | 0 |
| 4 | 3 | Possible | 0 | 0 | 0 | 0 | 0 |
| | 2 | Unlikely | 0 | 0 | 3 | 0 | 0 |
| | 1 | Rare | 0 | 0 | 0 | 0 | 0 |



Appendix APerformance indicators which have met or exceeded their target.

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of Indicator | Period Covered Timeframe data has been measured | Previous result Previous result from the most relevant period | Target Achievement level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculation of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|--------------|--|----------------------|--|--|--|--|--|---|---|---|
| CPI 2001 | Reduction in numbers of mothers that smoke at time of delivery | Strategic | Jan-Mar 2015 | 4.2% ² | 5.00% | 44/1,197 | 3.7% | 26.5% | Worsening | 16th lowest in England CCGs |
| KPI PH005 | Number of people undertaking drinking level assessment (scratch card) | Critical | Jan - Mar 15 | 240 | 350 | N/A | 455 ³ | 30% | Improving | Local programme only |
| KPI PH006 | Numbers of people receiving brief advice or referred to alcohol services) | Critical | Jan - Mar 15 | 84 | 87 | N/A | 148 ⁴ | 70.1% | Improving | Local programme only |
| KPI PH012 | Number healthy eating workshops | Critical | Jan - Mar 15 | 39 | 24 | N/A | 102 ⁵ | 325% | Improving | Local programme only |

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² Due to a six month reporting delay of SSTOD data by Health and Social Care Information Centre, data for "current reporting quarter" was unavailable for previous performance reports. The reporting delay has now been reduced to 3 months so data is more timely and quarter 3 and 4 data is now available. This accounts for any discrepancy with previous figures.

³ PH005 Number of people undertaking drinking level assessment (scratch card): In 2014-15 the final annual outturn was 1,972 against a target of 1,400

⁴ PH006 Numbers of people receiving brief advice or referred to alcohol services): in 2014-15 the final annual outturn was 680 against a target of 350

⁵ PH012 Number healthy eating workshops provided in children centres: in 2014-15 the final annual outturn was 184 against a target of 78

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of Indicator | Period Covered Timeframe data has been measured | Previous result Previous result from the most relevant period | Target Achievement level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculation of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|--------------|--|----------------------|--|--|--|--|--|---|---|---|
| | provided in children centres | | | | | | | | | |
| KPI PH011 | Number of newly registered schools for the Bronze Healthy Schools London Award | Critical | Jan - Mar 15 | 58 | 18 | N/A | 18 | 0% | Worsening | Local programme only |
| KPI PH001 | Number of people setting a quit date with SC services who successfully quit at 4 weeks | Critical | Jan - Mar 15 | 157 | 164 | N/A | 172 | 4.9% | Improving | annual data only available |
| KPI PH002 | Increased number of drug users successfully completing drug treatment and not returning | Critical | Jan - Mar 15 | 9.8% | 8.2% ⁶ | 60/598 | 10% | 22.36% | Improving | N/A |

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⁶ Q3 outturn is provisional, based on currently available data from Public Health NDTMS (National Drug and Alcohol Treatment Database). Timeline for submitting previous years' data closes end of July 2015.

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan within 6 months - opiate users | Type of Indicator | Period Covered Timeframe data has been measured | Previous result Previous result from the most relevant period | Target Achievement level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculation of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|--------------|---|----------------------|--|--|---|--|--|---|---|---|
| KPI PH004 | % of eligible new SMS service users (year to date) who accepted HBV vaccinations | Critical | Jan - Mar 15 | 58.2% | 40.0% | 240/290 | 82.8% | 106.90% | Improving | N/A |
| KPI PH008 | Number of people with mental health problems who have accessed employment support programme | Critical | Jan - Mar 15 | 115 | 65 | N/A | 262 ⁷ | 303.1% | Improving | Local programme only |

⁷ PH008 Number of people with mental health problems who have accessed employment support programme: in 2014-15 the final annual outturn was 472 against a target of 95

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of Indicator | Period Covered Timeframe data has been measured | Previous result Previous result from the most relevant period | Target Achievement level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculation of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|--------------|---|----------------------|--|--|---|--|--|---|--|---|
| KPI PH009 | % of people with needs relating to STIs contacting a service who are offered to be seen or assessed with an appointment or as a 'walkin' within two working days of first contacting the service. | Critical | Jan - Mar 15 | 100% | 98% | N/A | 100% | 2% | Same | Not available quarterly |
| KPI PH010 | % of people with needs relating to STIs who have a record of having an HIV test at first attendance (excluding those already diagnosed HIV positive). | Critical | Jan - Mar 15 | 79% | 80% | 2,733/3,298 | 82.9% | 3.6% | Improving | Not available quarterly |

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of Indicator | Period Covered Timeframe data has been measured | Previous result Previous result from the most relevant period | Target Achievement level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculation of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|---------------------|--|----------------------|--|--|---|--|--|---|---|---|
| KPI PH013 (a) | Number of children centres & schools taking part in Oral health initiative - Supervised tooth brushing programme-Children's Centres | Critical | Jan - Mar 15 | 3 | 3 | N/A | 5 ⁸ | 66.7% | Improving | Local programme only |
| KPI PH013 (b) | Number of children centres & schools taking part in Oral health initiative - Supervised tooth brushing programme Schools | Critical | Jan - Mar 15 | 3 | 3 | N/A | 9 | 200% | Improving | Local programme only |

⁸ PH013(a) Number of children centres & schools taking part in Oral health initiative - Supervised tooth brushing programme- Children's Centres: in 2014-15 the final annual outturn was 13 against a target of 9

| Ref | Indicator description Measure of how successful the Council is towards meeting the strategic objectives as set out in the Corporate Plan | Type of Indicator | Period Covered Timeframe data has been measured | Previous result Previous result from the most relevant period | Target Achievement level expected | Numerator and Denominator Relevant number that achieved the level required by the indicator out of total for indicator | Result Most recent result of the indicator measurement | Target Variance A calculation of how far the outturn is from the target | Direction of Travel An assessment of whether performance has improved since the previous results | Benchmarking How performance compared to other councils |
|----------|--|----------------------|--|--|---|--|--|---|---|---|
| 2002 (a) | Reduce the proportion of children aged 4 to 5 classified as overweight or obese | Strategic | | Annual CPI's, reported in Q2 of each year | | | | | | |
| 2002 (b) | Reduce the proportion of children aged 10 to 11 classified as overweight or obese | Strategic | | | | Annual CPI's, r | eported in Q2 c | of each year | | |