



# Joint Public Health Board 3 February 2020 Health Improvement Services – Performance Update

Choose an item.

**Portfolio Holder:** Cllr L Miller, Adult Social Care and Health, Dorset Council

Cllr L Dedman, Adult Social Care and Health, Bournemouth,

Christchurch and Poole (BCP) Council

Local Councillor(s): All

**Executive Director:** Sam Crowe, Director of Public Health

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Report Status: Public

**Recommendation**: This paper provides a high-level summary of current performance for health improvement services commissioned and or provided by Public Health Dorset on behalf of both Councils. Appendices include supporting data and information, with more in-depth information available on request. The Joint Public Health Board is asked to consider the information in this report and to note the performance on health improvement services and children and young people's services.

**Reason for Recommendation**: To update the Joint Public Health Board and to note performance

# 1. Executive Summary

This report provides a high-level summary of performance for LiveWell Dorset, Smoking Cessation, weight management services, health checks and Children

and Young People's Public Health Service (CYPPHS) performance, with supporting data in appendices.

# 2. Financial Implications

Services considered within this paper are covered within the overall Public Health Dorset budget. Most of the Health Improvement Services are commissioned through either indicative figures or cost and volume type contractual arrangements.

None of these contracts currently includes any element of incentive or outcome related payment. The contract for the new CYPPHS has a performance-related element linked with outcomes (from October 2019 onwards). Monitoring of performance ensures that we achieve maximum value from these contracts.

## 3. Climate implications

N/A

# 4. Other Implications

N/A

#### 5. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: LOW Residual Risk: LOW

#### 6. Equalities Impact Assessment

EQIA Assessments form part of commissioning for all public health services and are published in accordance with Dorset Council guidance.

# 7. Appendices

Appendix 1: LiveWell Dorset, Weight Management and Smoking Cessation performance report

# 8. Background Papers

None

# 1 Background

- 1.1 This report provides an overview of health improvement services for adults, and children and young people's (0-19) services (health visiting and school nursing to be known as Children and Young People's Public Health Service under the new service which started in October 2019).
- 1.2 Alongside this the Board will also receive regular updates against the 2019/20 Business Plan to monitor progress against agreed deliverables.
- 1.3 This report to the Board provides data for the new unitary areas and sub unitary geographies.

#### **Health Improvement Services**

#### 2 LiveWell Dorset

- 2.1 LiveWell Dorset is a pan-Dorset integrated health improvement service, delivering consistent, high quality behaviour change support for people wanting to quit smoking, lose weight, be more active and drink less alcohol. It has supported almost 30,000 people since April 2015. LiveWell Dorset was initially a commissioned service but from April 2018 the service was successfully transferred in-house and has since been directly delivered as part of the Public Health Dorset offer.
- 2.2 Activity has increased by 43 per cent in 2019/20 compared with the previous year, and is on track to meet the ambitious target of 10,000 people supported in the year, compared with 6,600 in 2018/19. The increase in scale continues to be driven by more digital users and by supporting organisations to embed prevention offers in their core business. Most individuals reporting outcomes at 3 months are demonstrating positive change ranging from 45 per cent sustaining weight loss to 70 per cent increasing their activity levels. See appendix 1 for further details.
- 2.3 The next scheduled review of LiveWell will report back on the delivery against the 2019/20 service plan, <u>available here</u>. Work is underway to develop the next LiveWell Dorset service plan for 2020/21.
- 2.4 Development priorities agreed so far include enhanced smoking cessation offers for hard-to-reach groups, including vaping, and further development of the digital LiveWell Dorset offer to increase the scale and reach of support.

# 3 Weight management

- 3.1 Having a high body mass index (BMI) is a leading cause of morbidity in England. The proportion of adults in the population that are overweight and or obese has risen to over 60 per cent in recent years and is projected to continue to grow in line with national trends.
- 3.2 Local weight loss services are delivered by two national providers, Slimming World and Weight Watchers, with access managed by LiveWell Dorset to ensure individuals are in receipt of behaviour change support before taking up the service. Provision was recommissioned in April 2019.
- 3.3 Access to services is good. There has been a 75 per cent increase in people accessing weight loss support in 2019, compared with the previous year. Services remain effective at reaching people living in deprived communities, where the prevalence of obesity is greater. This is particularly true for BCP Council where there are more people living in deprived communities.
- 3.4 The impact of services has increased in 2019 following the introduction of a new payment by results contract. There has been an increase in the percentage of people achieving and sustaining 5 per cent weight loss at 3 months.

## 4 Smoking cessation

- 4.1 The prevalence of smoking continues to decline locally in line with national trends. This is driven by more people successfully quitting, fewer young people taking up smoking and increasing popularity of vaping products. Despite the gains being made, smoking remains the biggest single cause of mortality and a key driver of health inequalities, because smoking prevalence is higher among communities living in areas of higher deprivation.
- 4.2 In April 2019 Public Health Dorset commissioned new community smoking cessation services to support people with psychosocial, behavioural interventions alongside Nicotine Replacement Therapy (NRT) or pharmacotherapy (Champix). This provision is supported by NICE as the most effective and efficient treatment available and is delivered by GPs, pharmacies and LiveWell Dorset.
- 4.3 There has been a fall in the number of people accessing smoking cessation services in 2019/20. This is in line with the declining prevalence of smoking and mirrors the national trends. Services continue to be effective at engaging a higher than average number of people from deprived communities, however.

- 4.4 The number of smokers quitting at 4 weeks across Dorset has fallen, reflecting the falling prevalence of smoking generally. However, local quit rates are below the national level and remain a performance priority for 2020.
- 4.5 Public Health England has a strategic commitment of achieving a smoke-free society by 2030. We have maintained our local commitment and are investing in smoking cessation services while also developing enhanced smoking cessation offers in 2020 which will target individuals who are least likely to engage with existing services.

#### 5 Health Checks

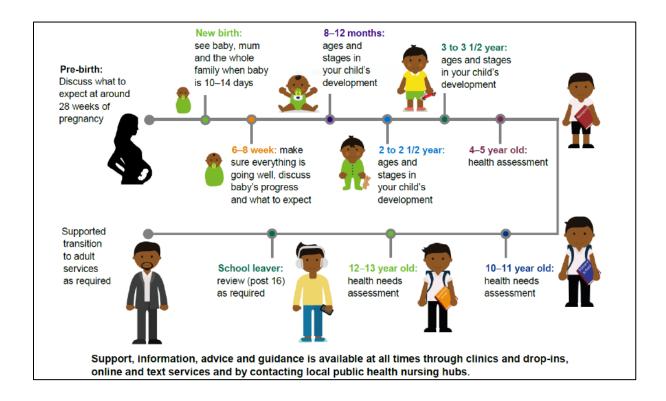
- 5.1 Local Authorities are mandated to provide the NHS Health Check programme under the 2012 Health and Social Care Act.
- 5.2 As reported to the last board in November 2019, current performance for delivery of NHS Health Checks is improving but remains variable across Dorset.
- 5.3 From April 2019 the new programme of provision was put in place following a successful procurement. GP and pharmacy providers are delivering under the new contract where there are some encouraging early indications of increased activity to the previous year. The impact of the new contract will be better understood through reviewing activity over the next few quarters and the next set of data is due at the end of January 2020. Therefore, there are no new reports at the time of writing this paper, however a verbal update on any new activity could be made during the board meeting.

# 6 Children and Young People's Public Health Nursing Services (0 – 19 years)

6.1 Getting a good start in life and throughout childhood, building resilience and getting maximum benefit from education are important markers for good health and wellbeing throughout life. Health visitors and school nurses have a crucial leadership, co-ordination and delivery role within the Healthy Child Programme. They work with key partners to deliver comprehensive services for children, young people and families.

# 7 Main changes to commissioning/service

- 7.1 The contract was awarded to Dorset HealthCare and the service began on the 1<sup>st</sup> October 2019.
- 7.2 The CYP PHS remains key to the local delivery of the Healthy Child Programme delivering the **Universal** Whole Family pathway.



7.3 The Universal offer for all under 5s will be delivered flexibly based on what each family most needs, taking a whole family approach to health and wellbeing and utilising the unique skills of each practitioner in the teams.

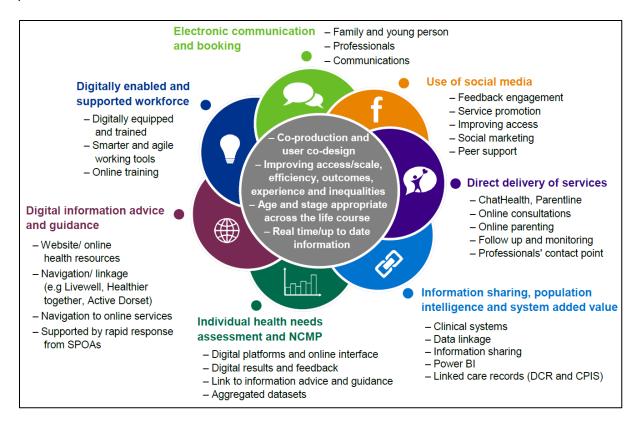
	Te	am mem	ber*	5	Setting**		Comments	
	HV	PHSN	CNN			Online tool***		
Antenatal	<b>√</b>			<b>√</b>			Relationship, first assessment, safe sleeping environment	
New birth	<b>✓</b>			<b>√</b>			Relationship, critical time point, safe sleeping environment	
6-8 week	<b>√</b>	<b>√</b>		<b>√</b>	<b>✓</b>	✓	Based on family need (high vulnerability seen at home by HV)	
1 year	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>~</b>	✓	Based on family need (high vulnerability seen at home by HV)	
2-21/2 year	<b>✓</b>	<b>√</b>	✓	✓	<b>~</b>	<b>√</b>	Based on family need (high vulnerability seen at home by HV)	
New 3-3 ½ year	✓	<b>√</b>	✓	✓	<b>✓</b>	<b>√</b>	Based on family need (high vulnerability seen at home by HV)	
Transition	<b>✓</b>	<b>√</b>	✓	✓	<b>√</b>	✓	Based on family needs at school entry, timing based on stage not age	

<sup>\*</sup> HV (health visitor); PHSN (public health staff nurse); CNN (community nursery nurse)

<sup>\*\*</sup> Home or community

<sup>\*\*\*</sup> To support assessment (including online consultation or platform)

7.4 Recognising that families want to be able to find the information and support they need quickly and easily, the new CYPPHS service will extend the digital offer by offering advice by text message, digital consultations and more proactive health promotion online.



- 7.5 The service will deliver additionally on four key local health and wellbeing priorities:
  - · reducing smoking, particularly in pregnancy and postnatally
  - increasing family physical activity
  - improving family wellbeing and mental health
  - ensuring children arrive at school ready to learn and achieve.
- 7.6 Public Health Dorset and Dorset HealthCare senior leaders are working with our partners on a number of phased implementation plans to enable changes to key elements of the described service model and operational delivery including: workforce, intelligence, communications and digital.
- 8 Summary of performance for 2019/20
- 8.1 The Health Visiting service pan-Dorset is high performing when compared with other services in England. Overall, parents and carers express high levels of satisfaction with the service.

#### 8.2 Service User Satisfaction

91 per cent of parents who completed the friends and family survey (April – Sept 2019) said they would be extremely likely to recommend the service to friends and family if they needed similar care or treatment and 90 per cent rated the service they received as 'Excellent'.

"I've seen HVs during my son's life ......excellent - knowledgeable, listened and adapted their advice to our family situation and well informed about natural term breastfeeding."

"The Health Visitor was friendly, reassuring and great with both myself and my son. I have seen her several times since having my son and she has always been very friendly, helpful and approachable. I can say the same for all the HVs I've seen, they're all great."

"My health visitor is X and she's absolutely amazing she is so caring and always listens to what I have to say. She's always there if I need to talk to her about anything even the most embarrassing things. She's a credit to the health visiting team."

#### 8.3 Performance Data

	BCP		Dorset	
	Q1	Q2	Q1	Q2
Percentage of all births that receive a face to face NBV within 14 days by a Health Visitor	88	91	93	94
Percentage of children who received a 6-8 week review by the time they were 8 weeks.	64	68	95	97
Percentage of children who received a 12-month review	62	60	92	98
Percentage of children who received a 2-2½ year review	94	93	95	97

Table 1. Performance on mandated checks (2019/20 Contract - Quarters 1 & 2 Pan-Dorset).

The Bournemouth Health Visiting team operated an interim universal service model, reflected in the quarterly performance data above. Demand and capacity against performance was monitored weekly and teams were fully supported to utilise skill mix and settings/methods to deliver the universal mandated checks. There is confidence that Quarter 3 will show improvements.

8.4 The **School Nursing** service continues to provide a high-quality service for young people who express positive experiences of the service.

#### 8.5 Service User Satisfaction

100 per cent of respondents who completed the friends and family survey (April – Sept 2019) said they would be extremely likely to recommend the service to friends and family if they needed similar care or treatment and all rated the service they received as 'Excellent'.

"Helpful advice, especially as it is a hard thing to talk about not knowing what to do. Taken over 6 months to get to this stage where I feel we can progress now."

"Huge thank you for all of your help with X night time dryness. To have gone from not one dry night since birth, to no wet night at all, is amazing! We really appreciate all of your advice and support."

"Fantastic support, friendly approachable and extremely knowledgeable thank vou."

#### 8.6 Performance Data

	В	СР	Dorset	
	Qtr 1	Qtr 2	Qtr 1	Qtr 2
Number of children and young people supported by universal services by Bournemouth, Poole and Dorset	49219	50894	51986	51380

Number of children and young people supported at universal plus services by Bournemouth, Poole and Dorset	1690	1672	1341	1401
Number of children and young people supported at universal partnership plus services by Bournemouth, Poole and Dorset	295	288	507	506
Number of children and young people supported at universal partnership plus statutory services by Bournemouth, Poole and Dorset	1441	1383	1540	1528

Table 2. Number of contacts by identified level of need – Quarter 1 & 2 (2018/19)

8.7 The *CHAT Health text* service continues to provide young people with confidential digital information and advice.

#### 8.8 Service User Satisfaction

"You have been so helpful. I was so worried you were going to be really patronising or pushy with what I should do but you've been great. It's so nice to have my feelings actually validated rather than feeling like a wimp and I feel better knowing I have options to talk to people now rather than deal with it on my own. Thank you so much for making me feel like how I feel matters"

"Thank you for giving me someone to talk to and offering help, and I will be bringing it up with my mum."

"I have just wanted to tell you how much you have helped me and I have now moved house and am sleeping very well. I just want to say a big thank you."

"I'm no longer self-harming."

#### 8.9 Performance Data

Month	Number of Chat Health Text Messages Received			
April 2019	231			
May 2019	330			
June 2019	269			
July 2019	435			
August 2019	83 (school holidays)			
September 2019	232			

#### 9 Conclusion and recommendation

9.1 This paper provides a high-level summary in narrative form. Appendices include supporting data and information, with more in-depth information available on request. The Joint Board is asked to consider the information in this report and to note the performance on health improvement services and children and young people's services.

# Footnote:

Issues relating to financial, legal, environmental, economic and equalities implications have been considered and any information relevant to the decision is included within the report.