

Joint Public Health Board

5 November 2020 Clinical Services Performance Monitoring For Recommendation to Council

Portfolio Holder: Cllr L Miller, Adult Social Care and Health, Dorset Council
Cllr N Greene, Covid Resilience, Schools and Skills,
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

Recommendations:

The Joint Board is asked to consider the information in this report and to note the performance in relation to drugs and alcohol, and sexual health.

Reason for Recommendation:

Close monitoring of performance will ensure that clinical treatment services deliver what is expected of them and that our budget is used to best effect.

1. Executive Summary

This report provides a high-level summary of performance for drugs and alcohol and sexual health services, with supporting data in appendices.

A report on clinical treatment services performance is considered every other meeting.

2. Financial Implications

None

3. Climate implications

No direct implications.

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

An Equalities Impact Assessment is not considered necessary for this agreement.

7. Appendices

None

8. Background Papers

Previous reports to the JPHB.

1. Background

1.1 The Joint Public Health Board reviews performance of commissioned services on a six-monthly basis. This report focuses on our core treatment services for drugs and alcohol and for sexual health and associated services commissioned from pharmacies through.

1.2 Alongside this the Board also receives regular updates against the Public Health Dorset Business Plan to monitor progress against agreed deliverables.

2. Drugs and Alcohol

2.1 Detail on latest performance is available in the appendix. This has identified some key issues:

- The number of opiate users engaged in treatment in the BCP Council area has increased, in line with priorities set by commissioners. Engagement

rates are now approaching the national average, and several people who have previously struggled to engage with treatment are now making progress as part of the Everyone In response to COVID-19.

- These increased numbers have put services under pressure, prompting a review of the design and delivery of the specialist prescribing service in BCP Council. These challenges will be addressed through the recommissioning of the treatment system in 2021.
- In Dorset and Poole, recommissioning in 2017 led to a disruption in performance for opiate clients with gradual improvements after the first year. Completion rates in BCP Council continue to fall as the overall number of people in treatment increases, though the number of individuals completing remains consistent.
- For alcohol, we would expect performance around the national average. With the emergence of COVID-19 completion rates have fallen as access to some interventions (e.g. detoxification services) has been limited.
- Performance related to non-opiates is around national averages as would be expected. Variation is largely due to small numbers. Completion rates for alcohol and non-opiate clients in Dorset require further investigation.
- Alcohol related hospital admissions are higher than the national average and rising in both Bournemouth and Poole while the figure for Dorset is relatively stable. This may have implications for how the acute trusts and other partners address alcohol related issues.
- Bournemouth shows good and improving performance in relation to delivering blood borne virus interventions, particularly in relation to Hepatitis C tests. This is likely to be due to specific targeted work to engage more people in new treatments. Dorset and Poole rates have also slightly improved, potentially as a result of the expansion of the Hep C programme across the county. There is still, however, work to do to further improve performance.
- Drug-related deaths continue to be a priority locally and are being closely monitored to assess the impact of changes resulting from COVID-19. Early indications are that 2020 figures will be in line with 2019.
- There is still work to do to improve Naloxone distribution, particularly in relation to people not currently in treatment. We are exploring delivering this through other partners but are limited by the current regulations which mean that housing support providers for example, cannot generally distribute this medicine.

3. Sexual Health

- 3.1 Detail on performance is available in the appendix and the data shows that all new STIs (excluding Chlamydia in the under 25s) per 100,000 aged 15 to 64 years in 2019 infection diagnoses are lower than England average in Bournemouth, Christchurch and Poole combined and lower in Dorset. A longer-term trend shows a rise for 2014/5 in Bournemouth, Christchurch

and Poole and a fall in 2016 but relatively static overall between the period 2012 to 2019, compared with a rise nationally

- 3.2 For chlamydia screening Sexual Health Services in Dorset have adopted a more targeted focus in directing screening to areas of greater need to increase positivity rates and subsequent treatment. So, the proportion of those 15-25 years olds screened in higher prevalence areas are higher. The numbers screened aged between 15-25 in Bournemouth, Christchurch and Poole combined are shown as higher than England average and Dorset are much lower. The diagnoses for those over 25 are lower than England average across both council areas.
- 3.3 The rate of gonorrhoea has increased since 2016 in Bournemouth, Christchurch and Poole and Dorset but remains lower than the England average with figures of 82.4 and 36.5 per 100,000 population respectively compared to 123.5 in England.
- 3.4 Nationally rates of syphilis diagnoses have been steadily rising, rates in Bournemouth, Christchurch and Poole have risen from 2017 onwards, and are now above England average (14.42 and 13.85 respectively). Updated more recent data shows that rates have started to fall again in Bournemouth, Christchurch and Poole.
- 3.5 Nationally, under-18 conception rates have fallen over time from 22.8 to 16.72 per 1,000 females aged 15-17. Bournemouth, Christchurch and Poole were slightly above the England rate in 2017 and are now below England (13.10 from 19.09) and Dorset remain below the England rate (12.11).

Sam Crowe
Director of Public Health