

# Public Health Quarterly Report – 2018/19 Q2

## Key departmental performance, outcomes and ongoing work

### Key Messages

- ◆ Two complaints and seven compliments were received in the most recent quarter
- ◆ The uptake of weight management services has decreased this quarter as expected from the seasonal high of quarter 4, The % of service users completing and achieving a 5% weight loss continues to be higher than KPIs.
- ◆ Whilst uptake for smoking cessation has generally declined, footfall in Q1 2018/19 has increased compared with Q1 2017/18.
- ◆ 17,776 Health Checks have been offered and 153958 delivered since Q2 2013/14 (5 years rolling programme)
- ◆ Performance remains above the target of 90% and is consistently higher than the England average.
- ◆ Successful completions for drug and alcohol treatment remain high with over 2,000 successes this year so far.
- ◆ Attendance at Sexual Health Hertfordshire services remains high, with increasing numbers using online services.
- ◆ The number of tests for STIs has increased overall with more diagnoses as a result
- ◆ HIV testing uptake remains high with 3631 completed by Sexual Health Hertfordshire in Q1. This figure above does not include online testing services.
- ◆ Although a slight decrease compared to Q4, Emergency Hormonal Contraception provided by pharmacies remains high with 751 given out in Q1 2018/19

### About this report

Service data is presented at the top of each page with, where available, relevant wider public health data below to support the interpretation of service data (see iconography guide below) showing comparisons with England and similar authorities (10 closest CIPFA statistical neighbours, ranked best/highest = 1) as well as district variation. Beneath this is a brief summary of the service covering any major changes, developments or work being undertaken.

#### Colours

 Statistically significant better

 Statistically significant worse

 Not statistically significantly different

 Statistically significant increase

 Statistically significant decrease

#### Icons

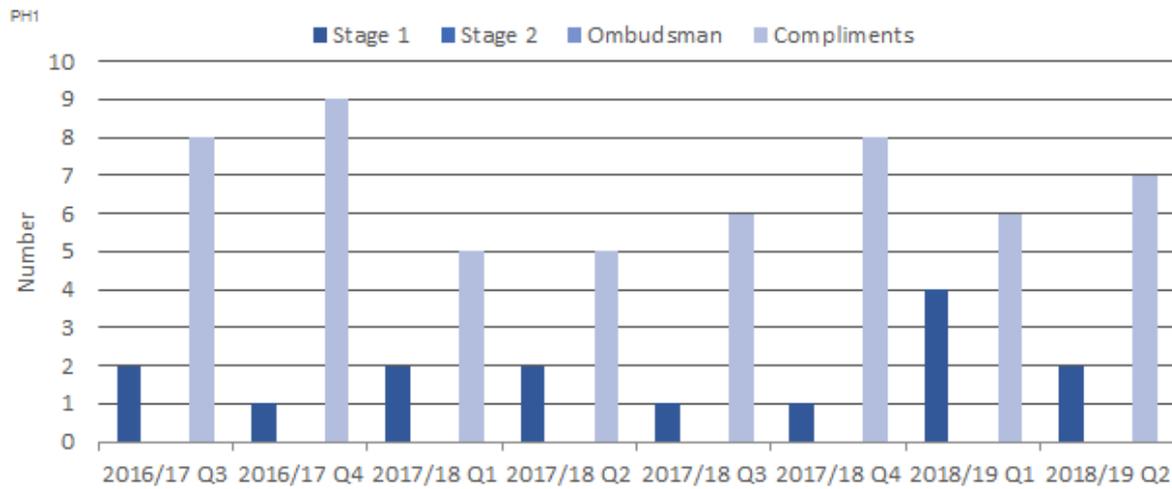
 Increase in value

 Decrease in value

 No change in value / no trend

 No data / no update

**PH1: Complaints and Compliments**



Two complaints and seven compliments were received in the most recent quarter

**Assessment**

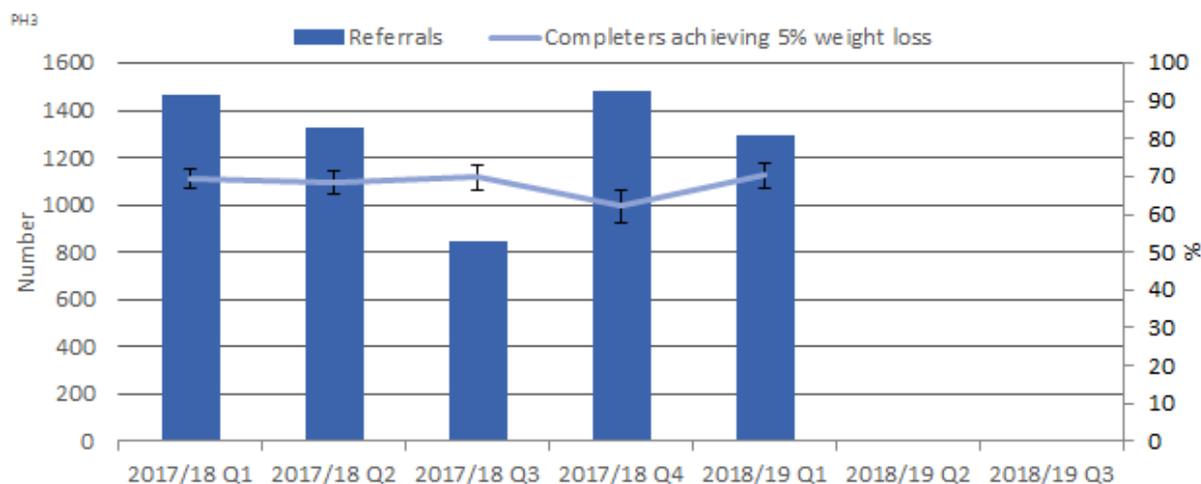
One complaint was in relation to the Health Improvement Service but was not upheld. The other complaint related to the content of the NCMP letter sent to parents. This was upheld.

Compliments - 3 related to support of and collaboration with other organisations, 2 were from clients of the Herts Health Improvement Service and the remaining 2 were for support on other issues.

**Actions**

The content of the NCMP letter was revised for future use.

**PH3: Adult Weight Management: uptake and % achieving 5% weight loss**



The uptake of weight management services has decreased this quarter as expected from the seasonal high of quarter 4, The % of service users completing and achieving a 5% weight loss continues to be higher than KPIs.

Assessment	Actions
The uptake of weight management services has varied due to seasonal trends and there is always an expectation of lower numbers particularly during Q3. This has decreased again in Q1 in line with the previous quarters. There has been a slight increase in the numbers achieving 5% weight loss, which is very positive.	Both Weight Watchers and Slimming World continue to provide a high quality service. Work is ongoing to improve data quality through the contract monitoring and this will be reviewed regularly.

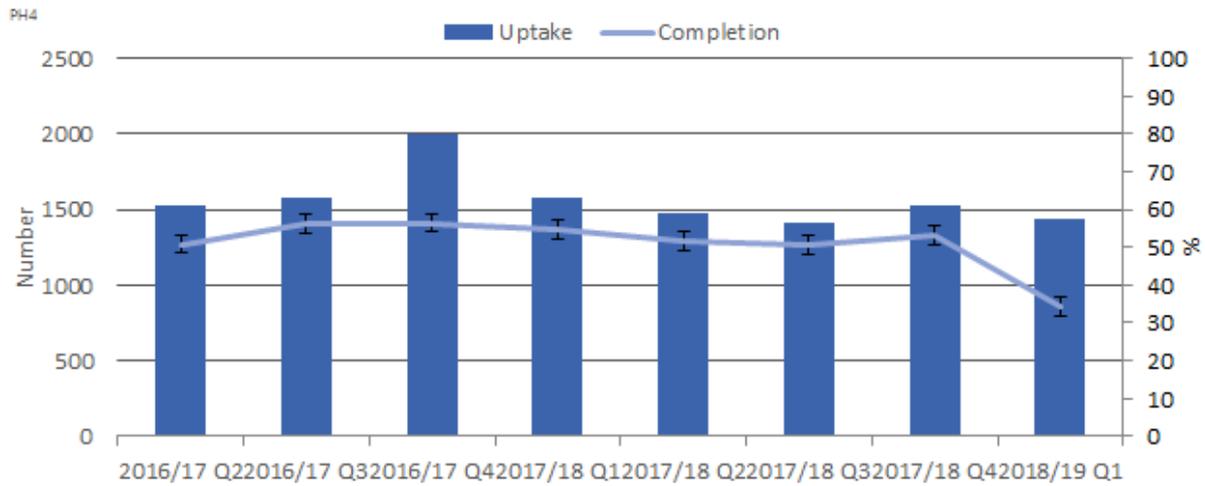
PH3 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to England	Similar LAs	Districts
Excess weight in adults (%)	60.15 2015/16	59.74 2016/17	↓	61.29	5 /11	0 9 1
Adults getting enough physical activity (%)	68.42 2015/16	68.46 2016/17	↑	66.01	6 /11	0 10 0
Diabetes recorded prevalence (%)	5.46 2015/16	5.66 2016/17	↑	6.67	4 /11	0 0 1

**Service Summary: adult health improvement (excl. tobacco control)**

Hertfordshire Health Improvement Service (HHIS) was involved with the following during Q2:

- Leading on the CQUINs and Quality Schedule metrics with CCGs and NHS Trusts as well as providing training and support to front line staff to deliver the requirements.
- Review of commissioning of Public Health Services with GP, community pharmacy and other providers and providing training and support to providers to maintain and improve quality
- Work with the STP on a systems approach to cardiovascular disease prevention (CVD), including the successful bid for funding from the British Heart Foundation to detect undiagnosed hypertension and prevent strokes
- Building HHIS capacity, policies, procedures and resources and ensuring staff competent to deliver Health Checks in 2018/19. Phased roll out from October 2018.
- Promoting and delivering a specialist weight management pilot in Watford & Three Rivers and Stevenage, with evaluation due in Q3, ensuring the intervention and outcomes of the pilot are cost-effective.
- Developing workplace initiatives to improve health, including Health Checks and delivering Making Every Contact Count (MECC) including alcohol identification and advice and support pathways.
- Delivering training for health champions in the workplace (HCC) including mental health awareness

PH4: Smoking Cessation: uptake and successful quits



Whilst uptake for smoking cessation has generally declined, footfall in Q1 2018/19 has increased compared with Q1 2017/18.

Assessment	Actions
<p>Routine and manual workers suffer a disproportionate amount of ill health and disability caused by unhealthy lifestyles including smoking and this is a significant cause of health inequalities. Reducing smoking in this population is a key public health priority to reduce health inequalities. A disproportionate number of smokers quit smoking from our more deprived communities. Although the number of smokers who want help to quit smoking has decreased over the last few years, the quality of stop smoking services remains high with a greater success rate than England as a whole. The number of quits appears to be lower than expected in Q1, but this is a provider recording anomaly due to a new database. Improvements will show in Q2.</p>	<p>A communications and marketing plan is in place to promote quitting and engage a range of employers through a range of media channels with campaigns (e.g. Stoptober, and Health Harms campaigns). Services provide a range of treatment options, including support for e-cigarette users as well as prescribed medicines and nicotine replacement therapy. As well as our specialist services, services are available through commissioned pharmacies and GP practices, with training and support provided by HCC's Health Improvement Service.</p>

PH4 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to England	Similar LAs	Districts
Smoking prevalence in adults (%)	13.46 2016	12.67 2017	↓	14.87	5 /11	0 10 0
Smoking prevalence in adults in routine and manual occupations (%)	28.89 2016	24.60 2017	↓	25.72	7 /11	0 10 0
Mothers who smoke at time of delivery (%)	7.15 2015/16	6.84 2016/17	↓	10.71	2 /11	0 10 0

## Service Summary: tobacco control

We are working to deliver Hertfordshire's Tobacco Control Strategic Plan 2016-2018 and are on trajectory to achieve the ambitions for adult smoking, routine and manual smoking and reducing smoking in young people. Smoking in pregnancy remains a challenge and there are plans in place with CCGs and maternity services to make continuous improvements.

We are:

- Coordinating a multi-agency Tobacco Control Alliance with strategic and operational partners to reduce smoking prevalence. Delivering training and supporting partners to develop the skills to address smoking and other risky behaviours and embedding prevention into NHS/STP service delivery
- Supporting the NHS to deliver the ambitions in the Public Health CQUINs for 2017-2019 (smoking and alcohol).
- Leading communication and marketing to promote quitting across all organisations and workplaces (e.g. Stoptober and Health Harms and the award-winning 'Love Your Bump' campaign)
- Promoting a toolkit for schools to become Smokefree and providing support for young smokers
- Delivering specialist stop smoking services in high prevalence groups and in pregnancy
- Developing a Smokefree toolkit focusing on routine and manual workplaces
- Ensuring high risk groups, (e.g. those with long-term /mental health conditions, prisoners, the unemployed) are encouraged and supported to quit using effective evidence-based methods.
- Promoting tobacco harm reduction for smokers unable to quit, including swapping to e-cigarettes
- Promote Hertfordshire's E-cig policy with all organisations

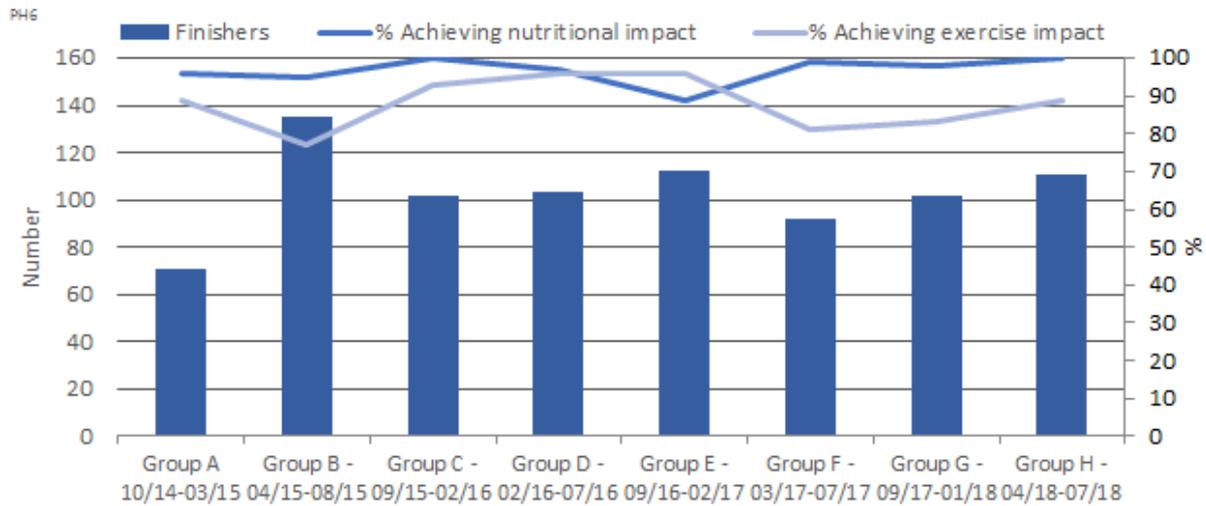
PH5: NHS Health Checks: invited and delivered



297,776 Health Checks have been offered and 153958 delivered since Q2 2013/14 (5 years rolling programme)

Assessment	Actions
<p>Up to and including Q1 2018/19, 87.0% of the eligible population has been offered a Health Check in the last 5 years, compared to an England average of 90.7% and a Public Health England target of 100%. The eligible population has increased from 336,528 in 2017/18 to 342,243 in 2018/19. In Q1, 11,467 individuals were invited for a Health Check which is only slightly fewer than Q1 2017/18. In Q1, 63.7% of those offered a Health Check went on to receive one. This compares to an England average of 42.6 % for Q1. There are practice differences in how GP practices offer NHS Health Checks, and not all of offers have been recorded.</p>	<p>Maintain relationships with the LMC and GP practices who are currently the sole provider of NHS Health Checks. A new 5-year rolling programme began in Q1, 18/19 and practices are required to prioritise their invitations based on a patient's risk of heart attack, stroke, or other measures of need. In order to offer an NHS Health Check to individuals who would otherwise not receive one, HCC's Health Improvement Service is developing the capacity, policies, procedures and resources to deliver Health Checks in workplaces and community venues during 2018/19. This is being done in a phased approach, beginning with Council employees from October 2018.</p>

**PH6: Children's Healthy Weight: uptake and outcomes**



The Beezee Families programmes are running well. Retention rates since the service started have exceeded expectations. For the Group G the retention rate was 85% (the contract requires 75%).

Assessment	Actions
89% of participants showed a reduction in BMI Z Score from the start to the end of the programme. This indicates that their BMI is now closer to their normal growth pattern than it was when they started the programme. As shown on the graph over 80% of families feel that the programme will help them to eating healthier and to do more exercise. There is a high level of satisfaction from the families on the programme; 100% of parents rate the service as good or excellent and 100% of children rate the service as good or excellent.	The next programme for Beezee Families, Programme I, will run from Sept 24 <sup>th</sup> 2018- 21st Jan 2019. The report for this programme will be available from March 2019. Therefore, the next update on the service will be available in two reports time. The Beezee Families programmes will continue to run until March 2020.

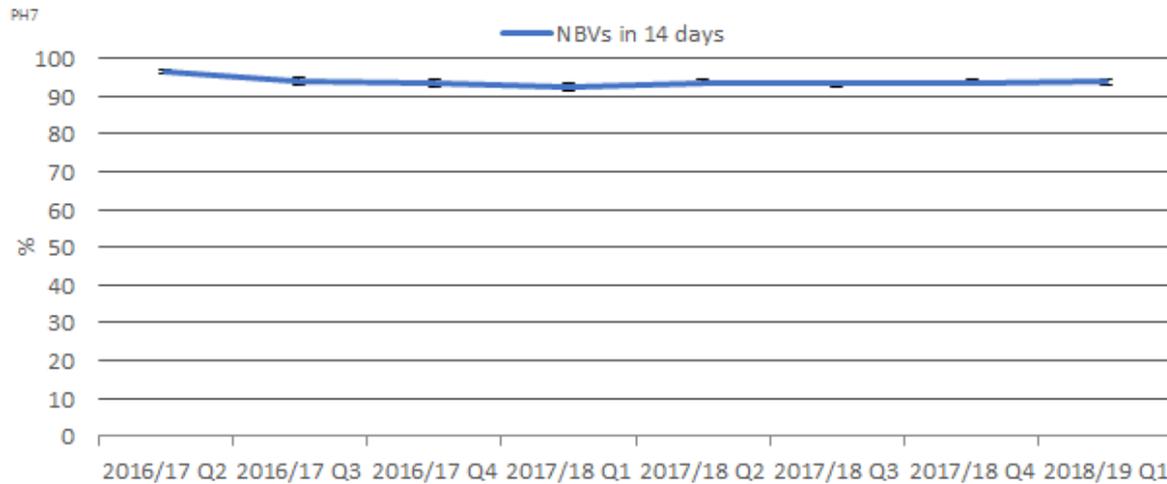
PH6 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to		
				England	Similar LAs	Districts
NCMP participation rate (reception & year 6) (%)	91.11 2015/16	95.13 2016/17	↑	95.04	6 /11	- - -
Excess weight in children 4-5 (Reception) (%)	19.11 2015/16	20.01 2016/17	↑	22.63	5 /11	0 9 1
Excess weight in children 10-11 (Year 6) (%)	29.38 2015/16	28.88 2016/17	↓	34.25	5 /11	3 6 1

**Service Summary: children and young people**

The Children and Young People's team has delivered the following:

- Successful mobilisation of the Family Centre Service contract. Several workstreams continue to be in place to ensure that the new service can deliver the new vision and oversee any changes required over the coming months.
- Pilot phase of a new e-learning module on mental health for school governors working in partnership with Herts for Learning.
- Working with School Nursing, a new online health needs assessment (The Lancaster Model) for reception year, year 6 and year 9 has been piloted and well received. This will be rolled out across the county in the current academic year.
- Continued implementation of the Just Talk campaign (boys' mental health) for later this year.
- Work continues to include the colleges and university in being part of a new Pastoral Leads network. The first meeting has taken place this quarter.
- Ongoing monitoring of current contracts such as Beezee Bodies, health visiting and school nursing.

**PH7: Health Visitors: new birth visits (NBV) within 14 days of birth**

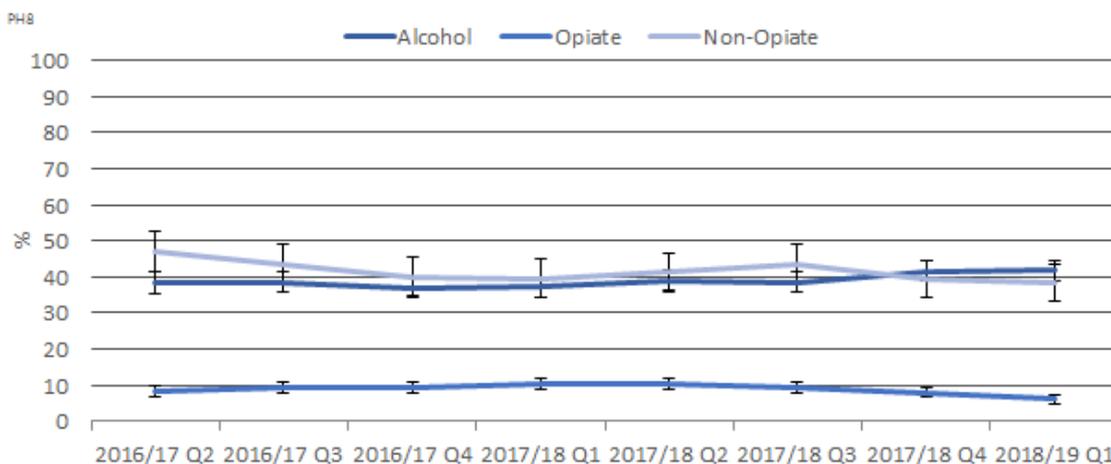


Performance remains above the target of 90% and is consistently higher than the England average.

Assessment	Actions
<p>All families are offered a NBV. The % seen in Hertfordshire within 14 days is above the national average and we compare well in comparison to our statistical neighbours. Some do not receive a NBV within 14 days due to their baby remaining in hospital at this time or due to personal choice/circumstances. Those families who are not seen at this time are offered a further appointment and 99%+ of all families in Hertfordshire receive a NBV.</p>	<ul style="list-style-type: none"> <li>The new contract for the new Family Centre Service contract started from October 1st 2018. Public Health continues to work closely with Children’s Services and all providers to ensure a seamless transition and manage the changes to minimise disruption to families.</li> <li>This indicator is a KPI for the Public Health Nursing Service.</li> <li>Continue with contract monitoring to maintain performance and identify issues early.</li> </ul>

PH7 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to		
				England	Similar LAs	District
Health Visitor new birth visits <14 days (%)	-	94.95 2015/16	○	87.02	●	1 /11
Health Visitor review by 8 weeks (%)	-	69.94 2015/16	○	80.36	●	10 /11
Health visitor 12 month review (%)	-	85.66 2015/16	○	72.6	●	7 /11

PH8: Successful completion of drugs & alcohol treatment - alcohol, opiate, non-opiate



Successful completions for drug and alcohol treatment remain high with over 2,000 successes this year so far.

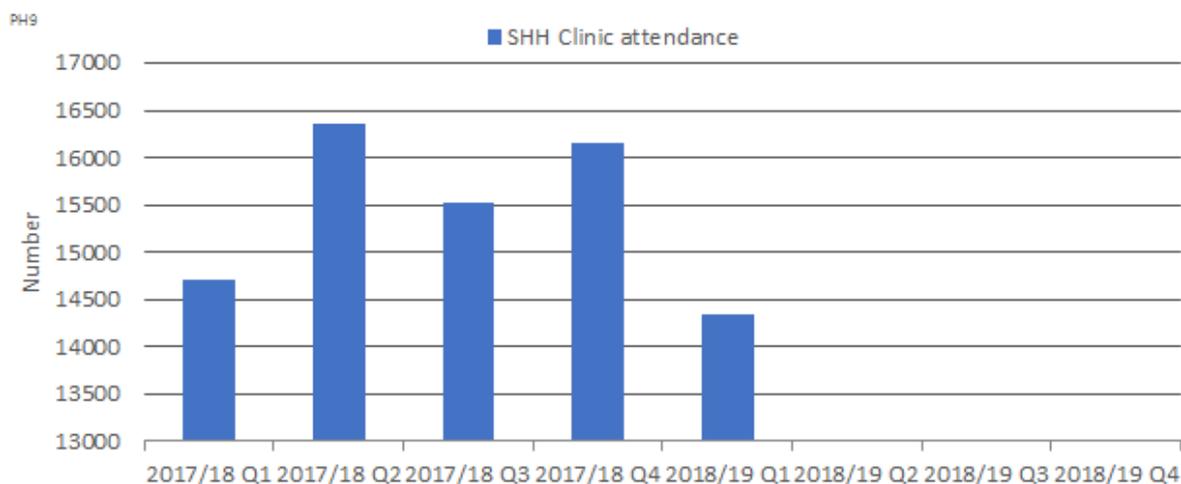
Assessment	Actions
Individuals achieving a successful completion outcome demonstrate significant improvements in health and general wellbeing. Revised Local Outcome Comparator (LOC) measures were recently introduced which impacts from quarter 4 data. The LOC's mean that each Local Authority has been assigned 32 revised and new comparator areas which are areas most similar to Hertfordshire in terms of complexity of those in drug and alcohol treatment. These changes are with immediate effect and will impact on Hertfordshire's position within the top quartile ranges for successful completions against local comparator areas.	Due to the changes to the LOC areas, Hertfordshire's position within the top quartile ranges for successful completions from Quarter 4 has now changed. Hertfordshire remains outside the range for Opiates and non-Opiates, but remains above the top quartile range for Alcohol. Action- To develop and implement any necessary actions to improve performance, to remain within top quartile ranges across opiates, non-opiates and alcohol.

PH8 Further detail and associated outcomes	Hertfordshire	Hertfordshire	Change	Hertfordshire compared to		
	previous	latest		England	Similar LAs	Districts
Successful completion of drug treatment - alcohol users (%)	42.71 2015	37.79 2016	⬇️	38.69	7 /11	- - -
Successful completion of drug treatment - opiate users (%)	9.57 2015	9.02 2016	⬇️	6.71	3 /11	- - -
Successful completion of drug treatment - non-opiate users (%)	39.72 2015	40.28 2016	⬆️	37.12	6 /11	- - -

**Service Summary: health protection and resilience**

- We have identified priority topics for the coming year: Late diagnosis of HIV (see sexual health section), incorporating the infection control in care homes standards into ACS/CCG quality visits, promotion of antimicrobial resistance guardianship and uptake of cervical screening, and development of a quarterly reporting dashboard.
- We continue to work with other HCC departments and external partners to ensure preparedness for major health protection events, such as pandemic flu and participate in exercises to test local plans.
- We will obtain health protection assurance through email updates and face-to-face meetings with local providers
- We will host an annual, Hertfordshire health protection workshop in collaboration with environmental health officers
- Work has already begun with PHE to promote uptake of NHS flu vaccination by social care staff (added to the eligible groups earlier this year) and to increase uptake of shingles vaccination.
- We have participated in multi-disciplinary Incident Management Teams to manage outbreaks of tuberculosis, seasonal influenza and rising incidence of syphilis and concerns about possible contamination of water supply and of localised particulate air pollution.
- We continue to work with Public Health England and local providers to develop care pathways for local people with TB who do not take their medication.

## PH9: Sexual Health Hertfordshire (SHH): Attendance at sexual health services (inc. online)



Attendance at Sexual Health Hertfordshire services remains high, with increasing numbers using online services.

Assessment	Actions
<ul style="list-style-type: none"> <li>Demand for online testing services has increased with 3,364 tests returned in Q1. Approximately 69 tests ordered a day. In order for CLCH to meet their budget requirements, tests will need to be capped at 13 per day (80% reduction). This is an interim measure, until there is a reduction in clinics attendances and an increase in more targeted testing.</li> <li>There has been a significant reduction in the number of patients not being able to be seen away (2016/17 = 1,861, 2017/18 = 555). 95 patients in Q1 18/19.</li> <li>There has been a drop of 50% in asymptomatic patients attending sexual health clinics since online services were introduced. This allows sexual health services to address the needs of more complex patients.</li> </ul>	<ul style="list-style-type: none"> <li>Clinical practice for contraceptive pill checks has changed from 6 months to annually to free clinic spaces</li> <li>Watford &amp; Stevenage clinics redesigned to better triage &amp; treat patients, increasing capacity and therefore attendance.</li> <li>Specific clinic for LGBTQ patients in Watford/ Stevenage</li> <li>Reducing Hubs from 4 to 3, remaining Spoke clinics to be Level 2 (STI testing) with longer hours inc. Saturdays</li> <li>Notice to leave St Albans Hospital by 01/19. HCC capital funding for new service in Hatfield has been agreed. The Beaconsfield site remains the priority site for third hub.</li> <li>Introduce measures to increase on-line testing e.g. triage, no repeat testing within 9 months (3 months for high risk groups).</li> </ul>

### Service Summary: sexual health

We are continuing to deliver actions within the Sexual Health Improvement Plan:

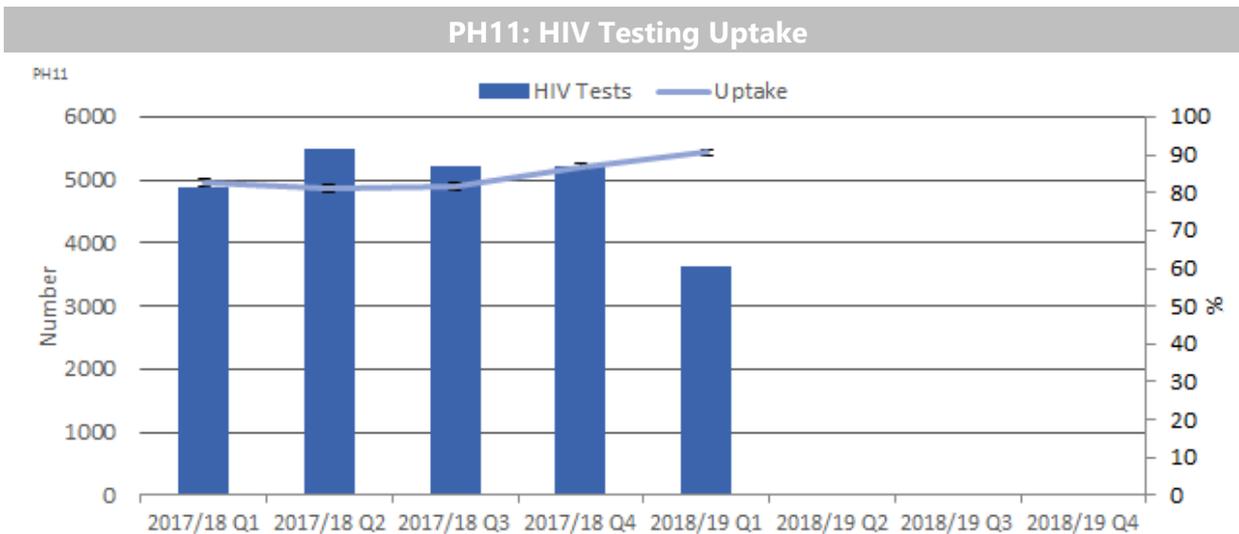
- Launched on-line STI testing (Feb 2018). During April and June 2018, 4362 kits were ordered, of those 194 (5.8%) were reactive for an STI.
- Increased capacity in Level 2 clinics on borders of Hertfordshire (e.g. Bishop Stortford, Waltham Cross) where migration to other services outside Hertfordshire is high.
- Clinic U – Specific clinic for LGBTQ patients in Watford and Stevenage. 82 patients seen in Q1.
- Access to Long Acting Reversible Contraception (LARC) through commissioned GP practices.
- Promotion of LARC is being prioritised especially via Pharmacies providing Emergency Hormonal Contraception (EHC), where 52% of women accessing EHC do not use any form of contraception. A needs assessment of those women accessing EHC will be undertaken in October 2019.
- Self-sampling HIV kits available on-line.
- In March 2018, a joint project between Public Health and Sexual Health Hertfordshire started to undertake audit of patients diagnosed late for HIV infection prior to attending the service.
- The Hertfordshire Grid for Learning updated to include more Sex and Relationship Education guidance and Sexual Health information.
- Syphilis Campaign targeting men who have sex with men launched in September. 413 clicks for further information generated in first week.

## PH10: Sexual Health Hertfordshire (SHH): STI testing and diagnosis

The number of tests for STIs has increased overall with more diagnoses as a result

Assessment	Actions
<ul style="list-style-type: none"> <li>Q1 has seen a decline in chlamydia testing amongst 15-24 year old. The drop was largely due less testing within Primary Care settings. Improvements in people accessing STI testing on-line, will hopefully show an increase in overall chlamydia testing rates in Q2.</li> <li>Testing for chlamydia (all age), syphilis and gonorrhoea remains stable with diagnosis rates significantly lower than the England average.</li> <li>Across England there has been increase in the number cases of infectious syphilis presenting to clinics. This rise is predominantly in young adults aged 23-45 but there have been cases in the older age groups, mainly in men who have sex with men. To prevent the spread of infections testing for syphilis is available from Sexual Health Hertfordshire with 4,349 tests undertaken in Q1 2018. The number of infections is expected to rise as a result of more testing on the back of public awareness campaigns.</li> </ul>	<ul style="list-style-type: none"> <li>Working with other local authorities across East of England to address a rise in number cases of infectious syphilis at clinics. Hertfordshire launched its own social marketing campaign to increase online testing amongst men who have sex with men.</li> <li>During April and June, SH:24 online testing has identified 14 reactive cases of Syphilis infection.</li> <li>New 2-minute film produced on role of sexual health services in Hertfordshire. Aim to dispel myths and encourage more people to get tested.</li> <li>Promoting new national STI campaign targeting people aged 16-24 and STI clinic at Herts Uni (1 day every 2 weeks).</li> </ul>

PH10 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to		
				England	Similar LAs	Districts
Chlamydia detection rate (15-24 year olds) (per 100,000)	1494.30 2016	1441.00 2017		1881.90	 8 /11	<b>2 6 2</b>
All new STI diagnosis rate (per 100,000)	566.40 2016	573.88 2017		743.11	 8 /11	<b>3 4 3</b>
Chlamydia diagnosis rate (per 100,000)	247.62 2016	246.43 2017		361.29	 7 /11	<b>2 6 2</b>

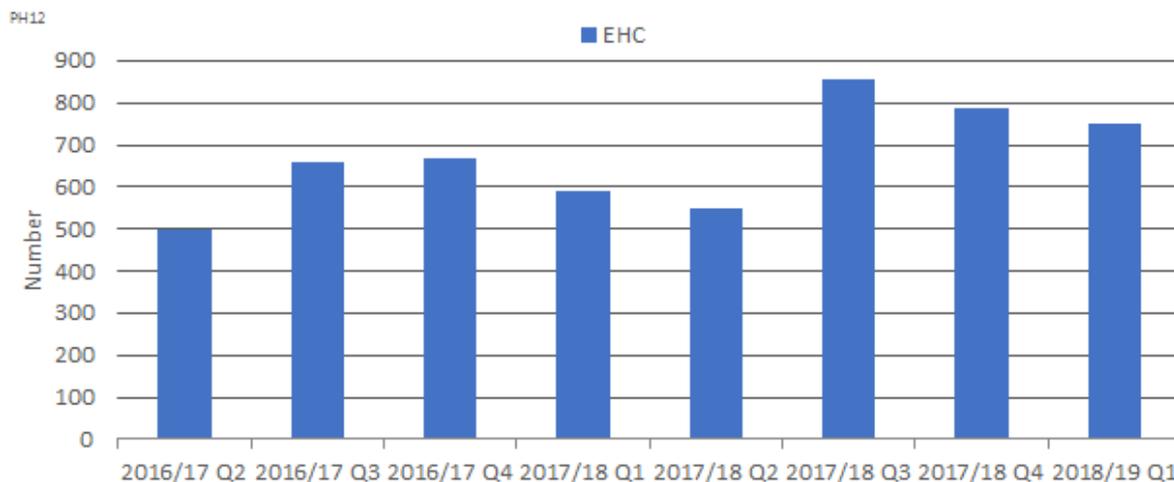


HIV testing uptake remains high with 3631 completed by Sexual Health Hertfordshire in Q1. This figure above does not include online testing services.

Assessment	Actions
<p>Although, Q1 saw a decline in the number of HIV tests performed the number of patients accepting a test has improved from 87% in Q4 (2017/18) to 90% in Q1 (2018/19). 99% of men who have sex with men accept an HIV test when offered. The decline in tests could be due to the reduction of service in Hertford and move to online testing.</p> <p>91 HIV kits were ordered via the national HIV Home Sampling Service with 61 patients being tested. This resulted in 2 reactive tests for HIV.</p>	<ul style="list-style-type: none"> <li>• Increase uptake of HIV testing amongst individuals diagnosed with TB disease as part of their routine care.</li> <li>• Review case notes of all those diagnosed late in 2016/17 to identify opportunities missed and highlight risks amongst Primary Care, LMC and CCG.</li> <li>• Increase on-line provision by commissioning the national HIV home sampling service and STI testing service (including HIV) via Sexual Health Hertfordshire.</li> <li>• Increase awareness of STI/HIV testing by supporting national HIV Testing Week (11/18) and Herts Pride (09/18).</li> </ul>

Further detail and associated outcomes	Previous Herts. figure	Hertfordshire latest	Change	Hertfordshire compared to			
				England	Similar LAs	Districts	
HIV late diagnosis (%)	42.57 2014 - 16	42.38 2015 - 17	↓	40.19	●	5 /11	- - -
HIV diagnosed prevalence (per 1000)	1.62 2016	1.64 2017	↑	2.32	●	9 /11	<b>3 6 1</b>
New HIV diagnosis rate (per 100,000)	9.25 2016	6.93 2017	↓	8.66	●	10 /11	<b>1 9 0</b>

**PH12: Emergency Hormone Contraception (EHC) provided by pharmacies**

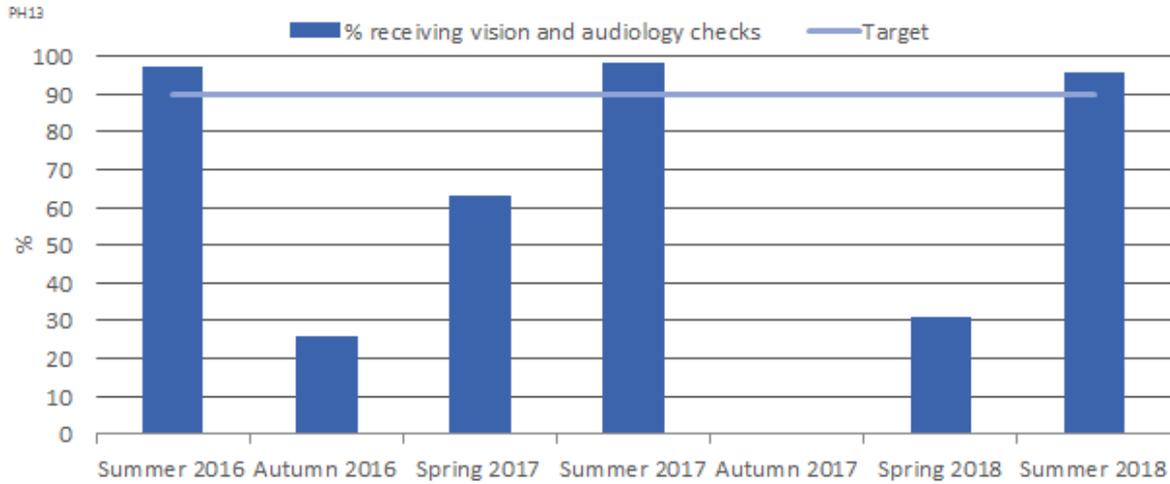


Although a slight decrease compared to Q4, Emergency Hormonal Contraception provided by pharmacies remains high with 751 given out in Q1 2018/19

Assessment	Actions
<ul style="list-style-type: none"> <li>• Good coverage of EHC services across Hertfordshire and good relationship with pharmacies offering services</li> <li>• Just over half of all women accessing EHC had not used any form of contraception.</li> <li>• 33% of women accessing EHC are from the AL10 postcode (where University is located)</li> <li>• Increase in costs due to introduction of more efficient drug 'EllaOne'. Expenditure will be closely monitored</li> <li>• Limited knowledge of needs of women accessing service.</li> <li>• Free condom wallets now available at all EHC services</li> </ul>	<ul style="list-style-type: none"> <li>• Continue with quality visits to participating EHC pharmacies</li> <li>• Share quarterly update and information with Pharmacists to encourage effective practice</li> <li>• Promote and support continuation of Sexual Health Clinic at University of Herts to encourage long term contraception use and STI testing.</li> <li>• Undertake needs assessment (November 2018) of those women accessing EHC services e.g. establish why contraception is not used, service quality, sexual health information offered.</li> <li>• Promote Long Acting Reversible Contraception (LARC)</li> </ul>

Further detail and associated outcomes	Previous Herts. figure	Hertfordshire latest	Change	Hertfordshire compared to England	Similar LAs	Districts
Under 16 conceptions (per 1000)	2.70 2015	2.20 2016	↓	3.00	6 /11	- - -
Under 25s choosing long acting contraception (exc. injections) (%)	16.03 2015	16.96 2016	↑	20.56	4 /11	0 10 0
Under 25s having repeat abortions (%)	26.65 2016	26.63 2017	↓	26.67	8 /11	- - -

**PH13: Reception year children receiving vision and audiology screening**



**Assessment**

All children are offered a vision and audiology screening during the reception year. Those children who are not seen during the autumn term are offered a further appointment later in the school year. Children that need further follow up are referred to specialist Ophthalmology and/or Audiology services.

**Actions**

- Delivery of Vision and hearing screening for reception year is a KPI for the Public Health Nursing Service.
- Continue with contract monitoring to maintain performance and identify issues early

**Service Summary: commissioning**

- Two contracts for the provision of drug and alcohol treatment services have been successfully awarded without formal challenge. The contracts for the provision of an All-Age treatment service has been awarded to Change, Grow, Live, and the contract for the provision of a Community Rehabilitation Service has been awarded to The Living Room Hertfordshire. Both are third sector organisations and are incumbent providers of broadly similar services. Mobilisation of the new services is about to commence, in order for the new services to go live in April 2019. Briefings and presentations are being established for the providers to engage with stakeholders and to communicate their service offer and referral pathways.
- Public Health is reviewing the range of interventions and services provided to enable drug and alcohol users to have accommodation and support so that they can maximise treatment outcomes. A new service specification is being drawn up for a procurement exercise to take place in February 2019 and a new service to commence in August 2019. A contract for continued provision of current services will be directly awarded to the incumbent whilst the procurement takes place and the new service is mobilised.
- The Partnership Agreement for the co-funding of the Adult Weight Management service has now been signed by the Council and the two CCGs. The opportunity to tender for the contract has been formally published, and tender submissions are due to be evaluated in October. Public Health will be issuing new contracts for the continuation of existing service provision, whilst the new contracts are procured, and the new services are mobilised.
- Public Health is currently engaging with the provider of Sexual Health Hertfordshire, Central London Community Healthcare NHS Trust. The provider has been asked to identify significant savings. Dependent on the proposals received, Public Health may take a decision not to extend the current contract beyond its natural expiry date of March 2020, and may instead go out to tender for a newly specified service.
- Following discussions with the provider of the Warmer Homes Project, Public Health is bringing in-house the co-ordination of the project. This will involve letting contracts for energy efficient interventions to be installed in the homes of vulnerable adults across the county. Supported by funding from major energy suppliers and supplemented by funds from district and borough councils, Public Health will be directly awarding a contract for this provision, whilst we undertake a competitive process to establish a framework of installers.
- We are developing new contracts for delivery of Public Health interventions by GPs and community pharmacies. Current contracts with GPs will expire in March 2019, and new contracts will be developed in collaboration with the LMC and LPC which act as umbrella organisations for these providers, before sending contracts to individual practices and pharmacies
- Public Health is currently drafting a document that will set out its commissioning intentions for 2019/20, and beyond where appropriate. This will provide a sense of direction for stakeholders including other commissioning bodies and will encourage further discussion on collaborative working and the development of more efficient service delivery arrangements.

**Service Summary: CCG support**

- Public Health input to the Beds, Herts, West Essex and Milton Keynes Priorities Forum – attending meetings and contributing to policy development
- Support to the CCG in regards to implementation of policies from the Priorities Forum
- Public Health support to CCGs in responding to Enquiries, Complaints and FOIs
- Attendance and participation in various committees (Commissioning Executive, Quality Committee)
- Involvement in CCG policy development where PH input required
- Work to support NHS service commissioning, decommissioning, redesign of pathways
- Conducting audits within Trusts/service providers on behalf of the CCG
- Evidence and intelligence support to Individual Funding Requests
- Ad hoc advice re various issues of a public health nature

**Service Summary: delivery and resources**

Priorities for this quarter have been:

- Recruiting to vacant posts
- Integrated Planning budget updates
- Integration with other HCC Depts e.g. community protection, trading standards and ACS
- Delivery PH initiatives e.g. District Offer, Social Prescribing
- Make Every Contact Count (MECC)
- Programme management of HCC SMART Prevention
- Review of dog therapy options with ACS
- Support of Weight Management commissioning process
- Development of behaviour change toolkit
- Early planning for District Partnership Health 'hubs'

**Service Summary: evidence and intelligence**

- Recently completed projects include:
  - Oral Health JSNA report
  - Investigation of cases of late diagnosis of HIV in the county
  - Letchworth Garden City & Baldock health needs assessment (HNA)
  - Hertfordshire Director of Public Health Report 2018/19
- Work is ongoing on a number of evaluations, including the Sport England-funded Active Ageing project; the Public Health Partnership Fund (District Offer), Hertfordshire's social prescribing initiative and an ACS assistive technology pilot.
- Work is underway on a number of Joint Strategic Needs Assessment (JSNA) reports, including: Looked after Children, Learning Disabilities, Cancer; Autism Spectrum Disorder; and Mental Health & Wellbeing.
- Operational planning is underway on an improved local model for collecting/analysing data on children's and young people's health needs to replace the Health Related Behaviour Survey.
- Work is ongoing to shape the role of PH intelligence in the forthcoming Integrated Care System.

**Service Summary: prevention, training & healthcare**

Input to the Sustainable Transformation Partnership (STP) in Q2 includes -

- Leadership of the STP Prevention Workstream. Jim McManus is the chair of this Workstream.
- Social prescribing continues to be rolled out in Hertfordshire with two subgroups to develop a social marketing approach and plan for the evaluation of the new social prescribing programme.
- The STP Prevention Workstream supported a successful STP wide bid for British Heart Foundation funding. The project group were awarded £100k over two years to help identify hypertension in locations outside usual health care settings.
- The STP Prevention Workstream were successful in their application to the East Anglia Health & Science network (EAHSN) for hand held ECG monitors to improve detection rates for atrial fibrillation. 70 monitors have been distributed in West Essex CCG and ENHCCG. The EAHSN will provide data for evaluation
- Public Health Training: Hertfordshire continues to be a recognised training location for the East of England Public Health Training Programme. There are currently five registrars based in the team, and a further two are currently undertaking full time study for a Master's in Public Health. The registrars support a range of projects within the department, for example contributing to JSNA development and producing clinical policies for CCGs.