

HERTFORDSHIRE COUNTY COUNCIL

**PUBLIC HEALTH AND PREVENTION
CABINET PANEL**

8 FEBRUARY 2019 AT 10.00 AM

Agenda Item No.

3

PUBLIC HEALTH QUARTERLY PERFORMANCE REPORT – Q3 2018/19

Report of the Director of Public Health

Author: - David Conrad, Consultant in Public Health (Evidence & Intelligence) (Tel: 01992 555391)
Will Yuill, Public Health Analyst (Tel: 01992 555127)

Executive Member: - Tim Hutchings, Public Health and Prevention

1. Purpose of report

1.1 The purpose of the Report is to provide Panel members with an overview of work being undertaken in Public Health, along with key statistics on local service performance and public health outcomes.

2. Summary

2.1 The report provides an overview of the work going on in the department and presents key statistics on service performance and public health outcomes for Hertfordshire, with contributions from a number of Public Health officers on their specialist areas.

2.2 On a rolling basis, each quarterly presentation of the report to Panel will be accompanied by a brief overview of data on one of the four life stages featured in Hertfordshire's current Health & Wellbeing Strategy (Starting Well, Developing Well, Living & Working Well, Ageing Well). This quarter, data on Living & Working Well will be presented.

3. Recommendation/s

3.1 Panel is asked to note and discuss the content of the Public Health Quarterly Performance Report for Q3 2018/19 (Appendix 1) and the accompanying presentation.

4. Background

- 4.1 The Public Health quarterly performance report has been developed by the Public Health Evidence & Intelligence Team to provide Panel members with an overview of work being undertaken in Public Health, along with key statistics on local service performance and public health outcomes. This is the first quarter in which the new report has been produced.
- 4.2 The report will be presented to Panel each quarter, accompanied by a brief overview of data on one of the four life stages featured in Hertfordshire's current [Health & Wellbeing Strategy](#) (Starting Well, Developing Well, Living & Working Well, Ageing Well)
- 4.3 Key messages from the Public Health Quarterly Performance Report for Q3 2018/19 are as follows (*please note that for operational reasons, finalised service performance data is typically one quarter behind*):
1. No complaints and 34 compliments were received in the most recent quarter
 2. The uptake of weight management services has decreased in Quarter 2, as expected from the seasonal high of Quarter 4. The % of service users completing and achieving 5% weight loss continues to be higher than Key Performance Indicators (KPIs).
 3. Whilst uptake for smoking cessation has generally declined, footfall in Q2 2018/19 was similar to Q2 2017/18.
 4. 297,776 Health Checks have been offered and 15,3958 delivered since Q2 2013/14 (5 years rolling programme)
 5. 3,295 new birth visits within the national required timescale were carried out in Q2 (latest data). Performance remains above the target of 90% and is consistently higher than England as a whole.
 6. Successful completions for drug and alcohol treatment remain high, with 1,404 successes in the first half of 2018/19 (alcohol: 980, opiate: 173, non-opiate: 251).
 7. Physical attendance at sexual health clinics remains stable; however, there has been an increase in people accessing STI testing on-line.
 8. Q2 has seen an increase in STI testing, resulting in an increase in STI diagnosis compared to the previous quarter.
 9. HIV testing and uptake remains stable in clinical-based services.
 10. Q2 has seen a decline in number of emergency hormonal contraception provided by pharmacies (653 in Q2 vs 751 in Q1).

5. Equality Impact Assessment

- 5.1 When considering proposals placed before Members it is important that they are fully aware of, and have themselves rigorously considered the equalities implications of the decision that they are taking.

- 5.2 Rigorous consideration will ensure that proper appreciation of any potential impact of that decision on the County Council's statutory obligations under the Public Sector Equality Duty. As a minimum this requires decision makers to read and carefully consider the content of any Equalities Impact Assessment (EqIA) produced by officers.
- 5.3 The Equality Act 2010 requires the Council when exercising its functions to have due regard to the need to (a) eliminate discrimination, harassment, victimisation and other conduct prohibited under the Act; (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The protected characteristics under the Equality Act 2010 are age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief, sex and sexual orientation.
- 5.4 No EqIA was undertaken in relation to this matter, as the report presents performance monitoring data and information on existing services only.