

Public Health Quarterly Report – 2018/19 Q3

Key departmental performance, outcomes and ongoing work

Key Messages

- ◆ No complaints and 34 compliments were received in the most recent quarter
- ◆ 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 KPIs.
- ◆ Whilst uptake for smoking cessation has generally declined, footfall in Q2 2018/19 was similar to Q2 2017/18.
- ◆ 297,776 Health Checks have been offered and 15,3958 delivered since Q2 2013/14 (5 years rolling programme)
- ◆ 3,295 new birth visits within the national required timescale were carried out in in Q2 (latest data). Performance remains above the target of 90% and is consistently higher than England as a whole.
- ◆ Successful completions for drug and alcohol treatment remains high, with 1,404 successes in the first half of 2018/19 (alcohol: 980, opiate: 173, non-opiate: 251).
- ◆ Physical attendance at sexual health clinics remains stable; however, there has been an increase in people accessing STI testing on-line.
- ◆ Q2 has seen an increase in STI testing, resulting in an increase in STI diagnosis compared to the previous quarter.
- ◆ HIV testing and uptake remains stable in clinical-based services.

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

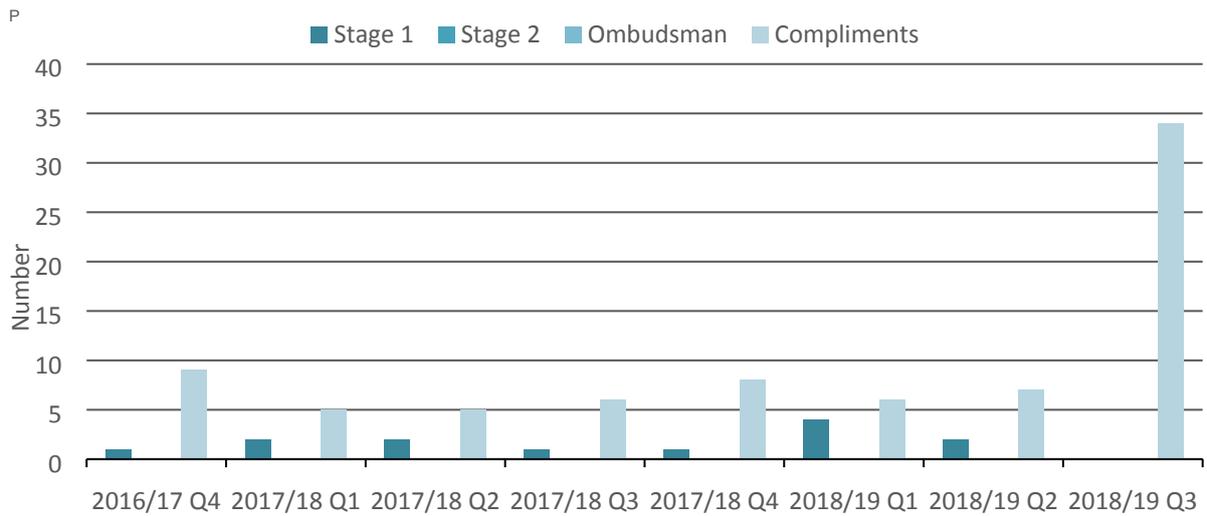
 Increase in value

 Decrease in value

 No change in value / no trend

 No data / no update

PH1: Complaints and Compliments



No complaints and 34 compliments were received in the most recent quarter

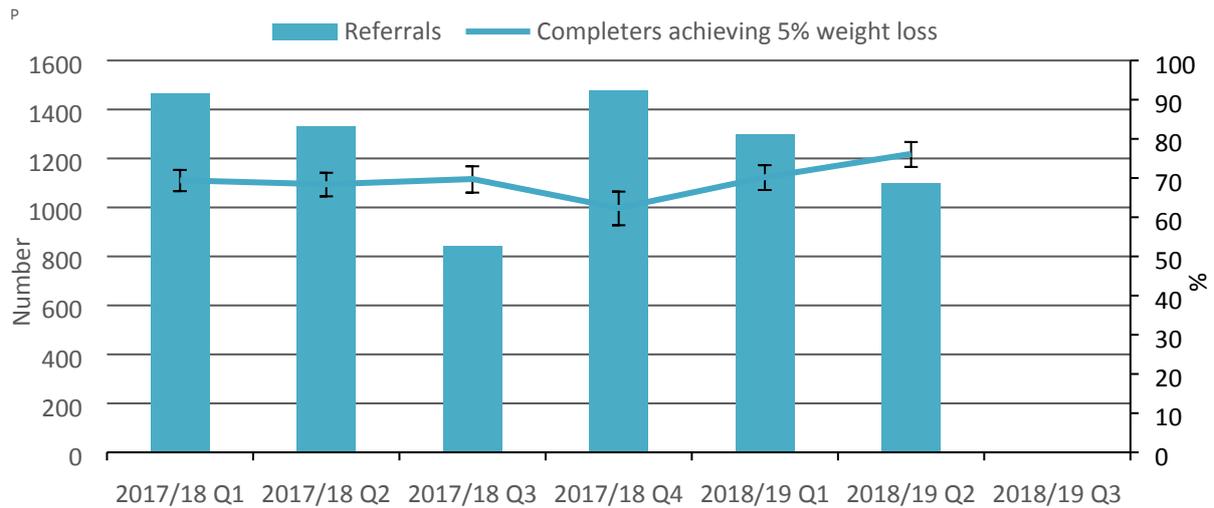
Assessment

There were no complaints in Q3.
 Compliments – 23 were from clients of the Herts Health Improvement Service. 6 related to presentations or support at events, 3 were for support of and collaboration with other organisations, and the remaining 2 were for support on other issues.

Actions

THE National Child Measurement Programme (NCMP) letter has been revised in response to public feedback.

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



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 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 Q2. There has been a slight increase in the proportion achieving 5% weight loss (524), 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.

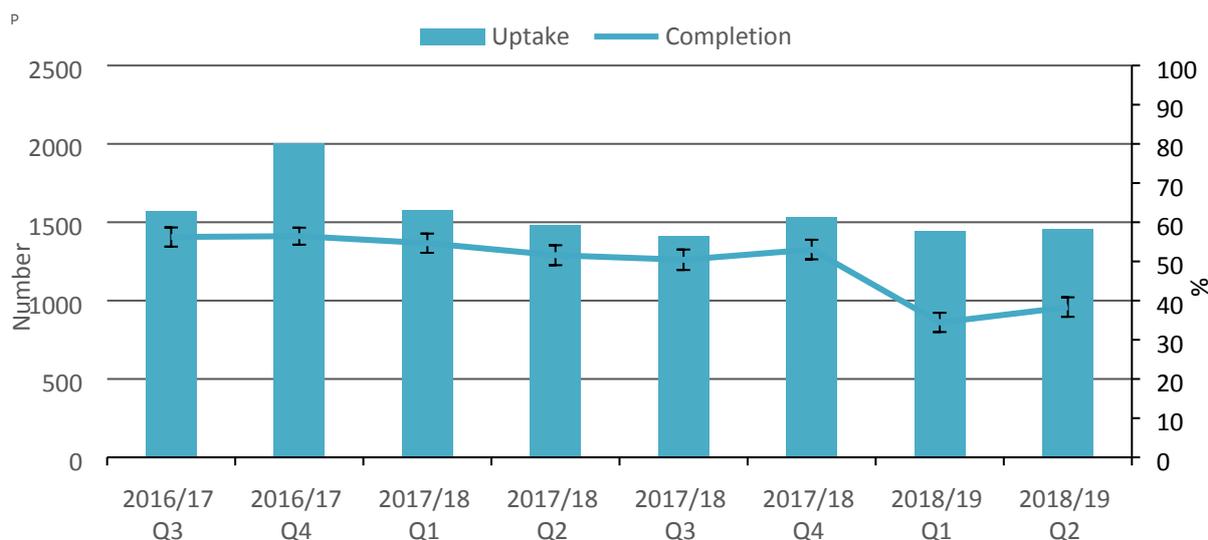
PH3 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to		
				England	Similar LAs	Districts
Excess weight in adults (%)	60.15 2015/16	59.74 2016/17	↓	61.29	5 /11	0 9 1
Adults getting enough physical activity (%)	68.42 2015/16	68.46 2016/17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

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

Hertfordshire Health Improvement Service (HHIS) is involved with the following during Q3:

- Leading on the Commissioning for Quality and Innovation (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 (CVD) prevention, including developing the services to detect undiagnosed hypertension following the successful bid to British Heart Foundation.
- Continuing to build Hertfordshire Health Improvement Service (HHIS) capacity and ensuring staff are competent to deliver Health Checks in 2018/19. The phased roll out began with public sector employees in Q3.
- Promoting and delivering a weight management pilot in Watford & Three Rivers and Stevenage, with the evaluation due to be published shortly.
- 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 Q2 2018/19 was similar to Q2 2017/18.

Assessment	Actions
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Routine and manual workers suffer a disproportionate amount of ill health and disability caused by unhealthy lifestyles, including smoking. 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 (558) appears to be lower than expected in Q1 and Q2, but this is a provider recording anomaly due to a new database. Improvements have begun to show in Q2.

A comms 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). Work with our NHS partners ensures that quality improvements are in place with inpatient wards to identify, support and refer smokers. 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.

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 (%)	6.84 2016/17	7.13 2017/18	↑	10.8	2 /11	1 9 0

Service Summary: tobacco control

We are working to deliver Hertfordshire's Tobacco Control Strategic Plan 2016-18 and have achieved the ambitions for smoking in adults, routine and manual workers and young people (smoking in pregnancy remains a challenge and plans are in place with CCGs and maternity services to make improvements):

- 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 2017-19 (smoking & alcohol).
- Leading communication and marketing to promote quitting across all organisations and workplaces
- 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
- Promoting Hertfordshire's E-cig policy with all organisations.
- We are now working with strategic partners to refresh our strategic plan for 2019-2022.

PH5: NHS Health Checks: invited and delivered

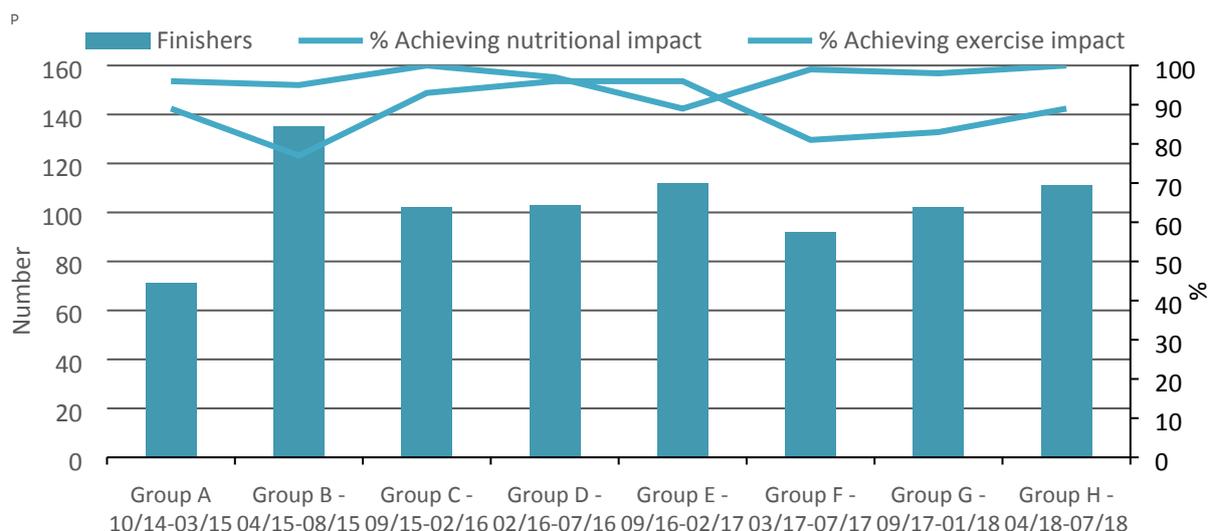


297,776 Health Checks have been offered and 15,3958 delivered since Q2 2013/14 (5 years rolling programme)

Assessment	Actions
<p>Up to and including Q2 2018/19, 91% of the eligible population has been offered a Health Check in the last 5 years, compared to 87% at the end of Q4, 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 Q2, 12,751 individuals were invited for a Health Check which compares with 15,898 in Q1 2017/18. In Q2, 51.5% of those offered a Health Check went on to receive one. This compares to an England average of 43.6 % for Q2. There are practice differences in how GP practices offer NHS Health Checks, and not all of offers have been recorded. Q2 data will be refreshed in Q3.</p>	<p>Maintain relationships with the Local Medical Committee (LMC) and GP practices who are currently the main 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 started delivery of Health Checks in Q3 2018/19. This is being done in a phased approach, beginning with Council employees from October 2018 and rolling out with other public sector employees during Q4.</p>

PH5 Further detail and associated outcomes	Hertfordshire	Hertfordshire	Change	Hertfordshire compared to		
	previous	latest		England	Similar LAs	Districts
Eligible population offered an NHS Health Check (%)	77.36 2014/15 Q1 - 2018/19 Q1	81.09 2014/15 Q1 - 2018/19 Q2	↑	81.05	●	8 /11
Eligible population taking up offer an NHS Health Check (%)	50.48 2014/15 Q1 - 2018/19 Q1	50.39 2014/15 Q1 - 2018/19 Q2	↓	48.05	●	3 /11
Eligible population receiving an NHS Health Check (%)	39.05 2014/15 Q1 - 2018/19 Q1	40.86 2014/15 Q1 - 2018/19 Q2	↑	38.94	●	4 /11

PH6: Children's Healthy Weight: uptake and outcomes



The Beezee Families programmes are running well. Retention rates since the service started have exceeded expectations.

Assessment	Actions
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89% (n=99) 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.

The next update on the service will be available in two reports time.

As shown on the graph over 80% of families feel that the programme will help them to eat 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 Beezee Families programmes will continue to run until March 2020.

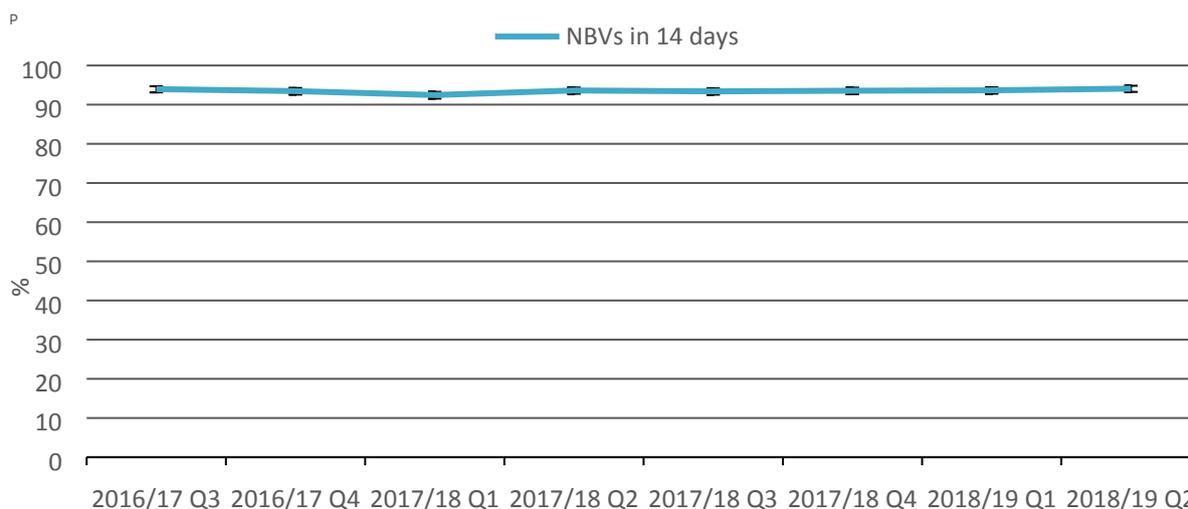
Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to		
				England	Similar LAs	Districts
NCMP participation rate (reception & year 6) (%)	91.11 2015/16	95.13 2016/17	↑	95.04	6 /11	- - -
Excess weight in children 4-5 (Reception) (%)	19.11 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:

- A successful start to the new Family Centre Service Contract (children centres, health visiting and school nursing) which went live on October 1st. Several work streams continue to be in place to ensure that the service can deliver the new vision and oversee any changes required over the coming months.
- Results of the Hertfordshire Health Related behaviour Questionnaire were analysed and shared with schools and other professionals. This is the only health related questionnaire for children and young people in Hertfordshire.
- Working with School Nursing, a new online health needs assessment (The Lancaster Model) for reception year, year 6 and year 9 has been piloted. This is now being rolled out quadrant by quadrant. Children and young people have given positive feedback on the tool and previously unknown health/safeguarding needs identified and followed up.
- A well-attended Primary Pastoral leads conference took place.
- Continued implementation of the Just Talk campaign (boys' mental health). Just Talk has won two awards during Q3.

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

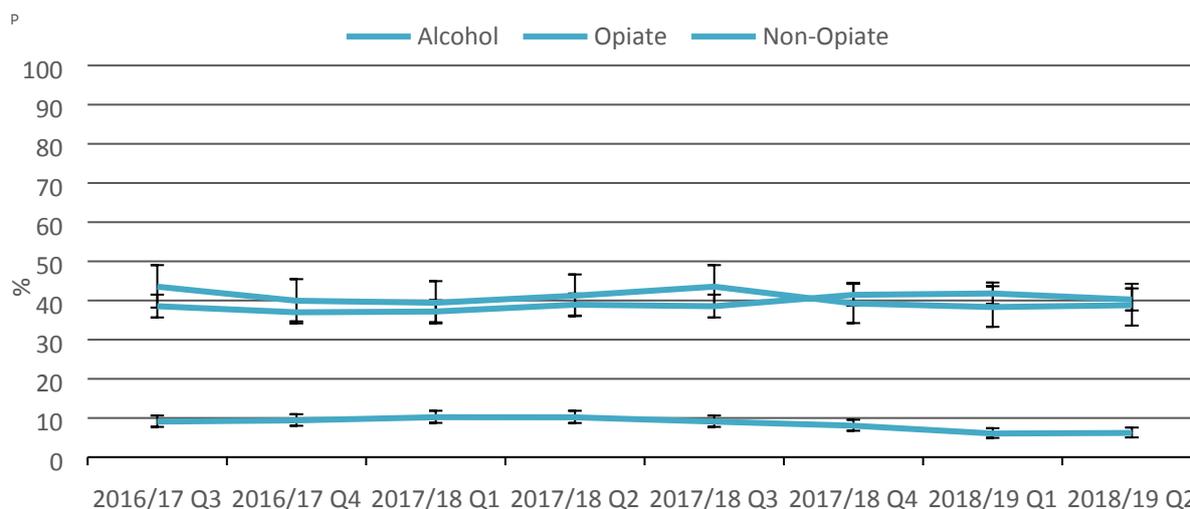


3,295 new birth visits within the national required timescale were carried out in in Q2 (latest data). Performance remains above the target of 90% and is consistently higher than England as a whole.

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 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"> • The contract for the new Family Centre Service 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. • This indicator is a KPI for the Public Health Nursing Service. • Continue with contract monitoring to maintain performance and identify issues early.

PH7 Further detail and associated outcomes	Hertfordshire previous	Hertfordshire latest	Change	Hertfordshire compared to		
				England	Similar LAs	Districts
Health Visitor new birth visits <14 days (%)	-	94.95 2015/16	○	87.02	● 11 /11	- - -
Health Visitor review by 8 weeks (%)	-	69.94 2015/16	○	80.36	● 2 /11	- - -
Health visitor 12 month review (%)	-	85.66 2015/16	○	72.6	● 5 /11	- - -

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



Successful completions for drug and alcohol treatment remains high, with 1,404 successes in the first half of 2018/19 (alcohol: 980, opiate: 173, non-opiate: 251).

Assessment	Actions
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Individuals achieving a successful completion outcome demonstrate significant improvements in health and general wellbeing. Revised Local Outcome Comparator (LOC) measures were recently introduced which impact from quarter 4 data. The LOCs 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.

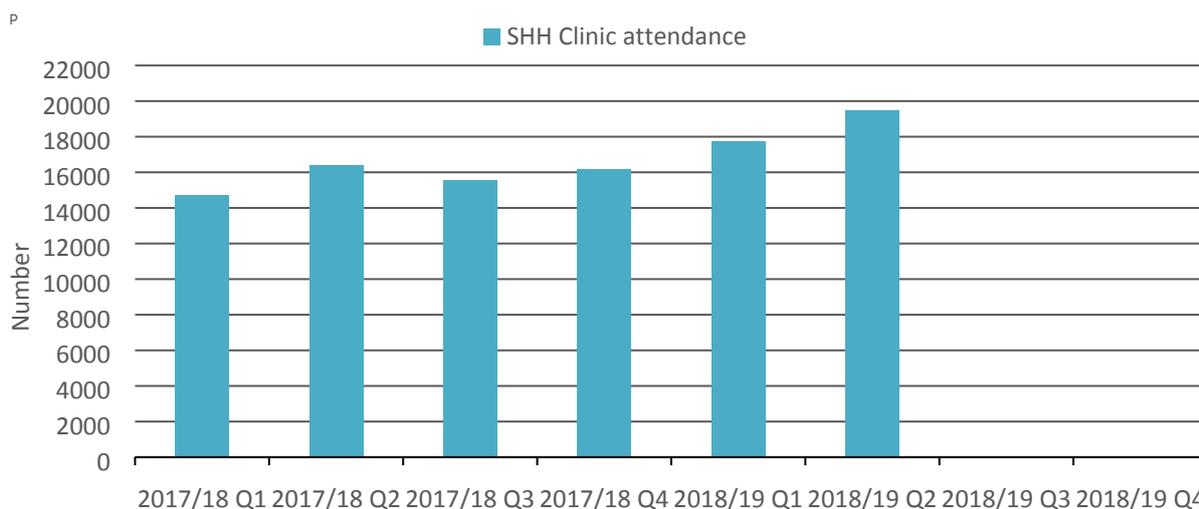
Due to the changes to the LOC areas, Hertfordshire’s position within the top quartile ranges for successful completions from Quarter 4 has now changed. Hertfordshire remains outside the range for Opiates and non-Opiates, but remains above the top quartile range for Alcohol.
Action- To develop and implement 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 previous	Hertfordshire latest	Change	Hertfordshire compared to		
	2016	2017		England	Similar LAs	Districts
Successful completion of drug treatment - alcohol users (%)	37.79	39.64	↑	38.92	●	3 / 11
Successful completion of drug treatment - opiate users (%)	9.02	9.30	↑	6.5	●	2 / 11
Successful completion of drug treatment - non-opiate users (%)	40.28	37.53	↓	36.9	●	6 / 11

Service Summary: health protection and resilience

- The Health Protection annual report was presented to Herts Local Health Resilience Partnership in December, noting priority topics for the coming year: Late diagnosis of HIV (see sexual health section), incorporating care home infection control standards into ACS/CCG quality visits, promotion of antimicrobial resistance guardianship, 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 obtain health protection assurance through email updates and face-to-face meetings with local providers and an annual health protection workshop.
- Our proposal for HCC teams to offer their front-line staff reimbursement for flu vaccination was adopted. We continue work with NHSE and PHE to promote residents’ uptake of NHS flu vaccination by eligible groups and to increase uptake of shingles vaccination.
- We have participated in multi-disciplinary Incident Management Teams to manage environmental hazards and poor healthcare practice.
- Work has begun on TB care pathways with our Drugs & Alcohol Service provider, to include diagnosis, housing support and compliance with treatment.

PH9: Sexual Health Hertfordshire: Attendance at sexual health services (including online)



Physical attendance at sexual health clinics remains stable; however, there has been an increase in people accessing STI testing on-line.

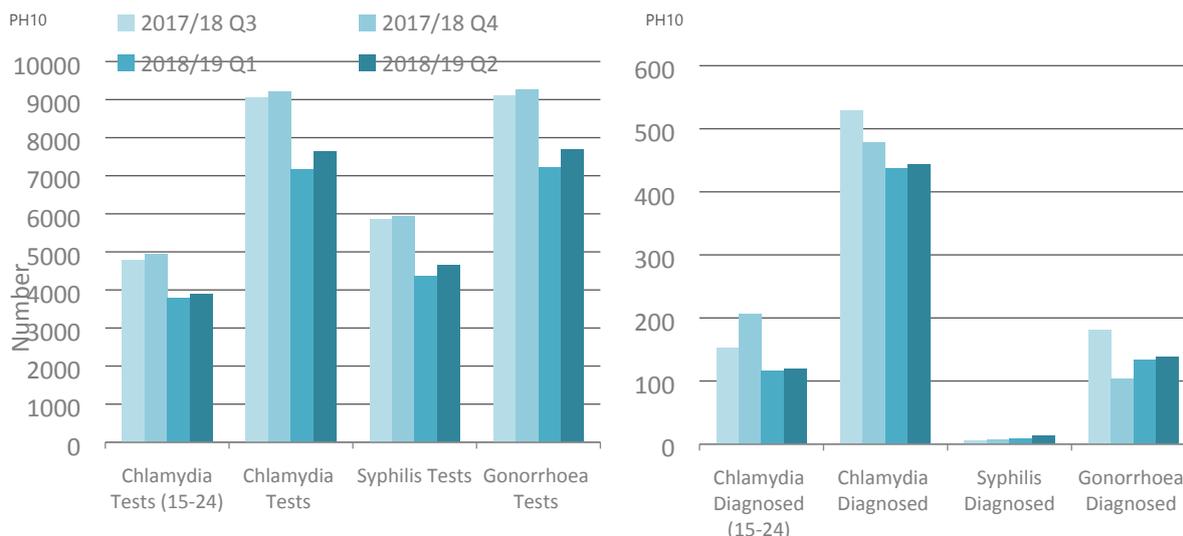
Assessment	Actions
<p>Physical attendance at sexual health clinics remains stable; however, there has been an increase in people accessing STI testing on-line.</p> <p>On-line testing has seen a 50% reduction of service users with no symptoms for STI's attending clinics allowing more appointments for service users with an infection to be treated.</p> <p>99% of patients seen within 2 hours of arrival at walk in clinics.</p> <p>30% of patients requesting an on-line test have visited a sexual health clinic within the past 12 months.</p>	<p>Clinical practice for contraceptive pill checks has changed from 6 months to annually to free clinic spaces.</p> <p>Watford & Stevenage clinics redesigned to better triage & treat patients, increasing capacity and therefore attendance.</p> <p>Specific clinic for LGBTQ patients in Watford/ Stevenage.</p> <p>Introduce measures to ensure appropriate requests for online testing e.g. no repeat testing within 3 months.</p>

Service Summary: sexual health

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

- Launched on-line STI testing in February 2018.
- 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.
- Access to Long Acting Reversible Contraception (LARC) available through commissioned GP practices.
- Promotion of LARC is being prioritised especially via Pharmacies providing Emergency Hormonal Contraception (EHC). A needs assessment of those women accessing EHC has been undertaken with a report out in January 2019.
- Self-sampling HIV kits available on-line
- Public Health and Sexual Health Hertfordshire have completed an 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. Over 5,000 clicks for further information generated in first two months of the campaign.

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



Q2 has seen an increase in STI testing, resulting in an increase in STI diagnosis compared to the previous quarter.

Assessment

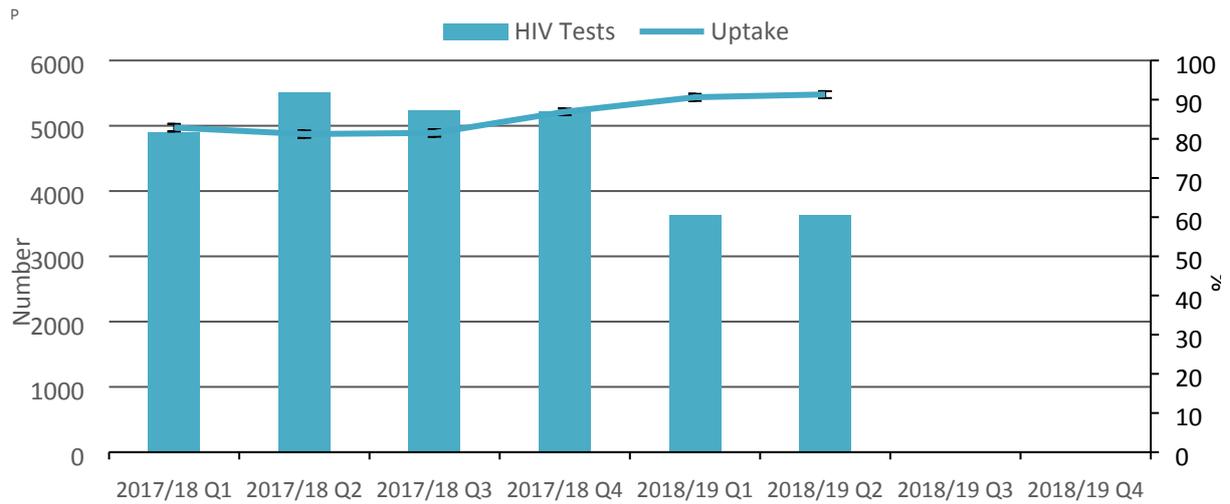
Q2 has seen an increase in STI testing, resulting in an increase in STI diagnosis compared to the previous quarter. Testing for chlamydia (all age), syphilis and gonorrhoea has increased, resulting in an increase in STI diagnosis. 14 reactive tests for syphilis were identified via on-line testing. Chlamydia testing for 15-24 years, remains stable, with fewer services within Primary Care offering a test.

Actions

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. New 2-minute film produced on role of sexual health services in Hertfordshire. Aim to dispel myths and encourage more people to get tested. Promoting new national STI campaign targeting people aged 16-24 and STI clinic at Herts Uni. (1 day every 2 weeks). Chlamydia testing information provided in CCG bulletin.

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

PH11: HIV Testing Uptake

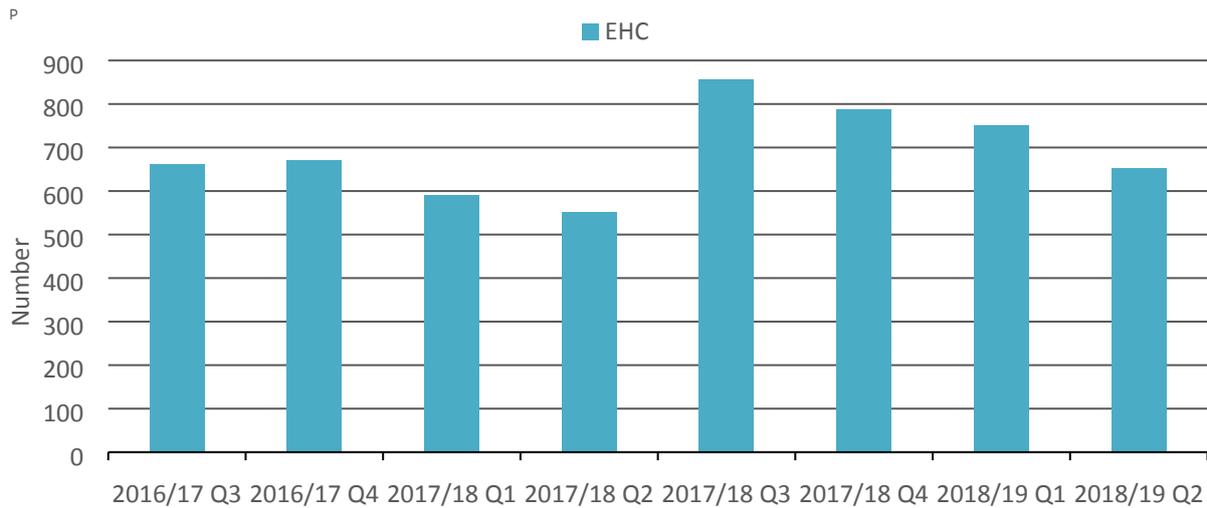


HIV testing and uptake remains stable in clinical-based services.

Assessment	Actions
<p>100% of new/rebook patients (of clinical based services) were documented as being offered an HIV test. Of those 91% accepted a test. This resulted in 4 HIV diagnoses. In addition to HIV testing within clinical based services : 3,530 HIV kits were ordered via the online testing service, resulting in 18 reactive test results that require further confirmation testing. 151 HIV kits were ordered via the national HIV Home Sampling Service with 81 patients being tested.</p>	<p>Increase uptake of HIV testing amongst individuals diagnosed with TB disease as part of their routine care. Review case notes of all those diagnosed late in 2016/17 to identify opportunities missed and highlight risks amongst Primary Care, LMC and CCG. Increase on-line provision by commissioning the national Provide HIV home sampling service and STI testing service (including HIV) via Sexual Health Hertfordshire. Increase awareness of STI/HIV testing by supporting national HIV Testing Week (11/18) and Herts Pride (09/18).</p>

PH11 Further detail and associated outcomes	Previous Herts. figure	Hertfordshire latest	Change	England	Hertfordshire compared to Similar LAs	Districts
HIV late diagnosis (%)	42.86 2014 - 16	43.90 2015 - 17	↑	41.12	● 5 /11	0 10 0
HIV diagnosed prevalence (per 1000)	1.62 2016	1.64 2017	↑	2.32	● 9 /11	3 6 1
New HIV diagnosis rate (per 100,000)	8.52 2016	7.03 2017	↓	8.66	● 10 /11	1 9 0

PH12: Emergency Hormonal Contraception (EHC) provided by pharmacies

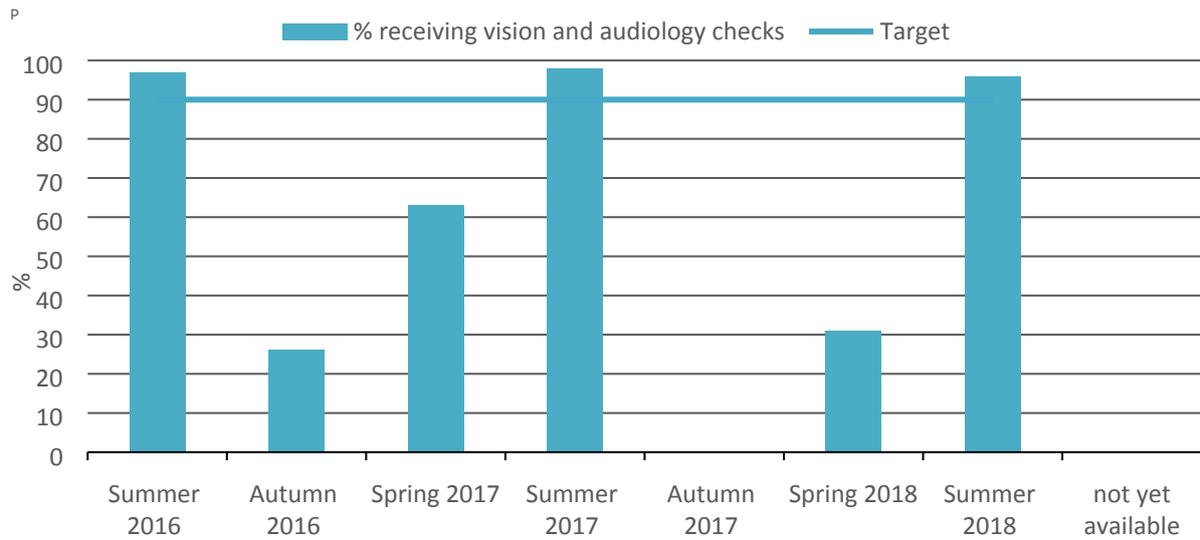


Q2 has seen a decline in number of EHC provided by Pharmacies (653 in Q2 vs 751 in Q1).

Assessment	Actions
<p>Q2 has seen a slight decline in EHC provided by Pharmacies. This could be due to the summer holidays and fewer students attending the University during the summer holiday.</p> <p>Just over half of all women accessing EHC had not used any form of contraception.</p> <p>Further knowledge of needs of women accessing service is required to ensure appropriate services and information is available.</p> <p>Free condom wallets now available at all EHC services.</p>	<p>Continue with quality visits to participating EHC pharmacies.</p> <p>Share quarterly update and information with Pharmacists to encourage effective practice.</p> <p>Promote and support continuation of Sexual Health Clinic at University of Herts to encourage long term contraception use and STI testing.</p> <p>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.</p> <p>Promote Long Acting Reversible Contraception (LARC).</p>

PH12 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) (%)	16.96 2016	20.11 2017	↑	21.57	● 5 /11	2 6 2
Under 25s having repeat abortions (%)	26.65 2016	26.63 2017	↓	26.67	● 8 /11	- - -

PH13: Reception year children receiving vision and audiology screening



Public Health Nursing has met the target for delivering 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 awarding 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.
- Public Health is 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 Local Medical Committee (LMC) and Local Pharmaceutical Committee (LPC), which act as umbrella representative organisations for, respectively, GPs and Pharmacies. Public Health will then send contracts to individual practices and community pharmacies for completion.
- 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:

Finance

- Integrated Planning budget updates

HCC integrated working – building health considerations into the work of other departments

- Young People Health Mapping – work continues to identify where Public Health and Children's Services provisions cross-over and what health related services are operating across the county including the voluntary sector. Public Health has also supported Children Services in a successful bid to the Police and Crime Commissioner for funding for training professionals on Adverse Child Experiences (ACEs)
- Staywise – Public Health input into a scheme run by Fire and Rescue
- Princes Trust - Public Health input into a scheme run by Fire and Rescue including health 'MOT's' information about healthy eating, smoking, drugs and alcohol, sexual health
- ACS/PH Collaboration – work to identify shared priorities and joint working opportunities
- Input into ACS Learning Disabilities Partnership Board
- Libraries health events
- HAFLS Joint Working – learning opportunities for vulnerable people such as 'how to cook a healthy meal'
- Make Every Contact Count (MECC) for Older Peoples Service/Social Workers – improving social workers knowledge of basic good health measures and signposting to health resources

Partnership Working (external partners)

- District Partnership. Completion of Phase 3 projects and roll out of 'Healthy Hubs' over next 2 years
- Facilitation of the University of Hertfordshire masterclasses, liaison group and website
- Development of 'Eat out Eat Well' scheme in Welwyn/Hatfield and Stevenage

Management of Prevention related projects:

- Dog Therapy Projects - Hertfordshire Leading The Way
- Employment – a review of how Hertfordshire County Council supports people to be employment ready
- Social Prescribing Social Marketing – a campaign to encourage health professionals to signpost people to community activities as an alternative to medication
- Behavioural Science web pages & toolkit – development of a psychological tool kit to help staff at HCC produce effective and impactful communications
- SMART Staff Volunteering – a programme to encourage staff to do voluntary work which supports staff well-being

Project Management of the following:

- Housing related support tender
- Child weight management trailblazer
- NHS Health Checks
- 0-19 Service
- Child Weight Management
- Just Talk Campaign
- Suicide prevention
- Adult Weight Management Service
- Emergency Hormonal Contraception questionnaire
- LARC prescription savings
- Sexual Health project plan (to underpin the new strategy)
- Re modelling the sexual health service
- Workplace health

Service Summary: evidence and intelligence

- A new Autism Spectrum Disorder JSNA report was published in December 2018.
- 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.
- A fixed-term Evaluation Officer post, funded by the STP, was appointed to in December to assist with the evaluation of the social prescribing initiative.
- An evaluation of the Hertfordshire Tier 2.5 weight management service pilot has been completed.
- Work is underway on a number of Joint Strategic Needs Assessment (JSNA) reports, including: Looked after Children, Learning Disabilities, Cancer, 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.