

From: Andrew Scott-Clark, Interim Director of Public Health

To: Thanet Health and Wellbeing Board

Date: 8th May 2014

Subject: Public Health Performance – Children and Young People

Classification: Unrestricted

Summary: This report provides an overview of the performance indicators monitored by the Public Health division which directly relate to services delivered to children, or services which could be accessed by under 18 year olds.

Collection of data for infant feeding rates has, until February, been suspended while national agencies decide on the best approach, however it is clear from 2012/13 data that Kent underperforms in this area. This service will be put out to tender shortly.

Participation rates for the National Child Measurement Programme (NCMP) are exceeding the set targets and continue to perform well.

Future reports to Thanet Health and Wellbeing Board will be more specific on local Thanet performance of Public Health programmes.

Recommendation(s): Thanet Health and Wellbeing Board is asked to note the report

1. Introduction

- 1.1. This report provides an overview of the key performance indicators for Kent Public Health which directly relate to services delivered to children and young people, or services which could be accessed by under 18 year olds.
- 1.2. There are a wide range of indicators for Public Health, including the indicators contained in the Public Health Outcomes Framework (PHOF). This report will focus on the indicators which are presented to KCC Cabinet, and which are relevant to this committee.
- 1.3. Following the transition of Public Health services into KCC in April 2013, a public health performance framework has been developed and implemented. This systematic focus on performance has identified concerns about the performance of a number of key programmes.
- 1.4. Previously, a national system was in place from which to compare performance, but regular updating of data is currently varied. For example, national data collection for infant feeding initiation and prevalence, and smoking at time of delivery, have been temporarily suspended while NHS England, Public Health England, the Department of Health and the Health and Social Care Information Centre assess their options of continued collation following the health system changes; collation re-commenced in

February 2014, and publication of up to date figures is expected in three months' time.

- 1.5. A Public Health Commissioning Framework has been developed to review every model of service inherited since the transfer. This framework identifies public health services, reviews specifications, and implements formal contract monitoring processes to allow commissioners to take action through contractual processes to remedy any areas of under-performance. This may include financial adjustments if agreed targets are not met. The commissioning framework also includes a timetable for re-tendering.

2 Performance Indicators

- 2.1 The performance against the indicators relevant to this Committee is laid out below, with more detail available in Appendix 1.

Indicator Description	Previous Status	Current Status	Direction of Travel
Prescribed Data Return			
National Child Measurement Programme - Participation Reception year (Annual)	Green (2011/12)	Green (2012/13)	↓
National Child Measurement Programme - Participation Year 6 (Annual)	Green (2011/12)	Green (2012/13)	↑
Local Indicator			
Infant Feeding –Proportion women breastfeeding at 6-8 weeks	Amber (Q3 12/13)	Red (Q4 12/13)	See Section

- 2.2 Performance of the indicators related to participation in child measurement programmes has been good. The programme achieves high levels of participation and has been consistently above the 85% target. For 2012/13, participation rates for Reception year were 92.2% and were 95.4% for Year 6, further ensuring the statistical significance of this indicator.
- 2.3 The proportion of Reception year children measured as obese has increased slightly from 8.6% in 2011/12, to 8.8% in 2012/13, however, this remains just below the 8.9% of 2010/11 and the 2012/13 national percentage of 9.3%.
- 2.4 Future reports will also identify local overweight and obesity rates; this will bring the reporting in line to the Public Health Outcomes Framework and 2014/15 Directorate Business Plan reporting process. Kent performance against these measures in 2012 was 21.7% in Year R (compared to a national rate of 22.2%), whilst in Year 6 it was 32.7% (compared to a national rate of 33.3%).
- 2.5 As detailed in section 1.4, datasets around infant feeding rates have not been collected recently, whilst national level health agencies have been deciding the approach. However, it is clear that rates of breastfeeding in Kent have been consistently below the national level, (in 2012/13 this was 40.6%, compared to 47.2%). A new service will be commissioned to support infant feeding, and a report on this process appears elsewhere on this agenda.

2.6 For 2014/15 it is proposed that additional Public Health indicators are presented in future reports. These are as follows:

- Pregnant women smoking at time of delivery (%)
- Under 18s conception (per 1,000)

It should be noted that these are annual figures and will not be presented quarterly. Trend data over previous years will be provided instead.

3. Conclusions

3.1 Performance against this set of indicators is good overall; however, to ensure performance is maintained and improved, Public Health continue to meet quarterly, monthly where appropriate, to address any emerging concerns or potential changes in performance.

3.2 Future reports will include more local Thanet data.

4. Recommendation(s)

Recommendation(s): The Thanet Health and Wellbeing Board are asked note the report

5. Background Documents

5.1 None

6. Contact details

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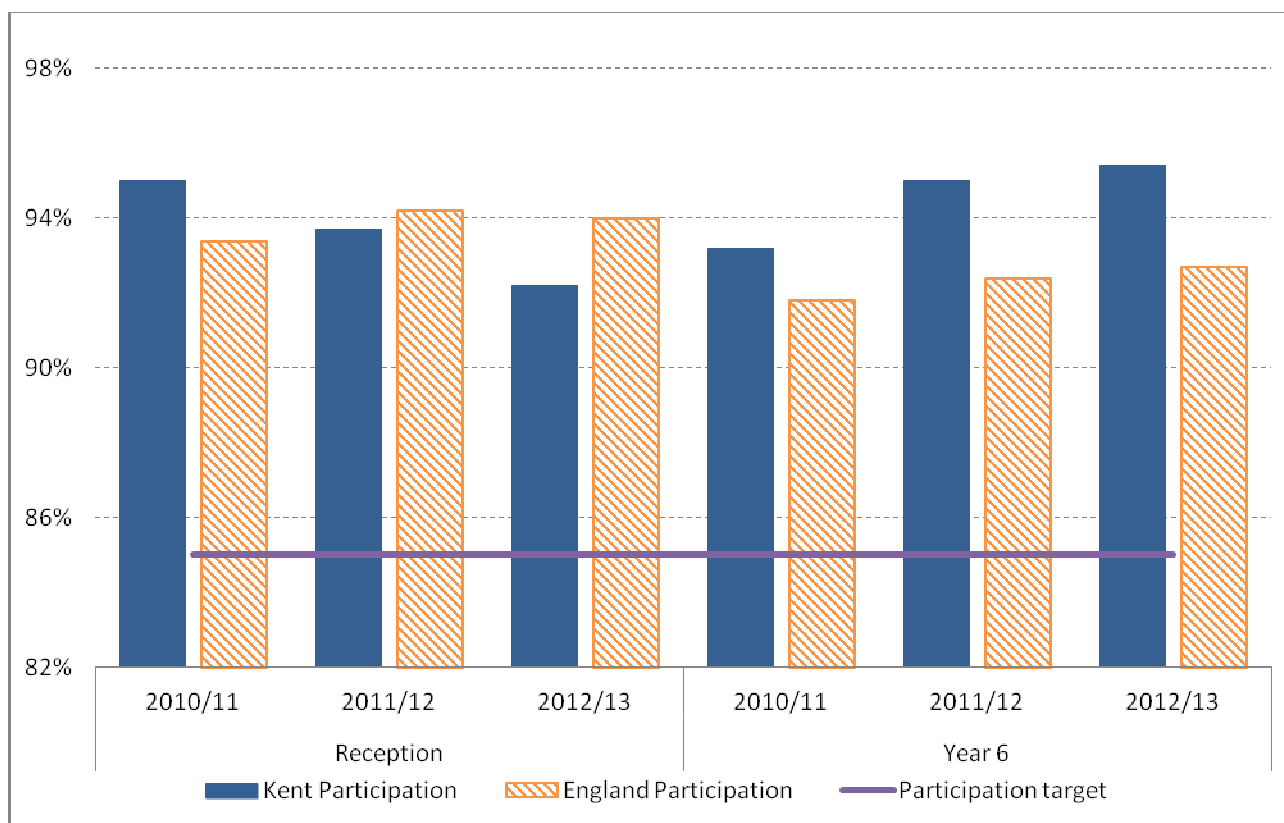
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Appendix 1:

Key to KPI Ratings used:

GREEN	Target has been achieved or exceeded
AMBER	Performance at acceptable level, below Target but above Floor
RED	Performance is below a pre-defined Floor Standard
↑	Performance has improved relative to targets set
↓	Performance has worsened relative to targets set
↔	Performance has remained the same relative to targets set

Data quality note: Data included in this report is provisional and subject to later change. This data is categorised as management information.



Trend Data – Annual	2010/11		2011/12		2012/13	
	Year R	Year 6	Year R	Year 6	Year R	Year 6
Participation Kent	95.0%	93.2%	93.7%	95.0%	92.2%	95.4%
RAG Participation	Green	Green	Green	Green	Green	Green
Participation England	93.4%	91.8%	94.2%	92.4%	94.0%	92.7%
Kent % reported Obese	8.9%	18.4%	8.6%	18.3%	8.8%	18.3%
National % reported Obese	9.4%	19.0%	9.5%	19.2%	9.3%	18.9%
<i>Kent % obese & overweight</i>	22.9%	33.3%	21.7%	32.7%	21.7%	32.7%
<i>National % obese & overweight</i>	22.6%	33.4%	22.6%	33.9%	22.2%	33.3%

Commentary

The programme achieves high levels of participation and has been consistently above the 85% target. For 2012/13, participation rates for Reception year were 92.2% and were 95.4% for Year 6, further ensuring the statistical significance of this indicator.

The proportion of Reception year children measured as obese has increased slightly from 8.6% in 2011/12, to 8.8% in 2012/13, however, this remains just below the 8.9% of 2010/11, and the 2012/13 national percentage of 9.3%.

For Year 6, the percentage measured as obese remained stable at 18.3% and has not varied greatly from 2010/11, when it was 18.4%. Kent remains just below the national obese measurement of 18.9%.

It is critical that the programme is effectively linked to initiatives to reduce childhood obesity. Public Health is committed to prioritising action to reduce childhood obesity further. This is one of the core opportunities

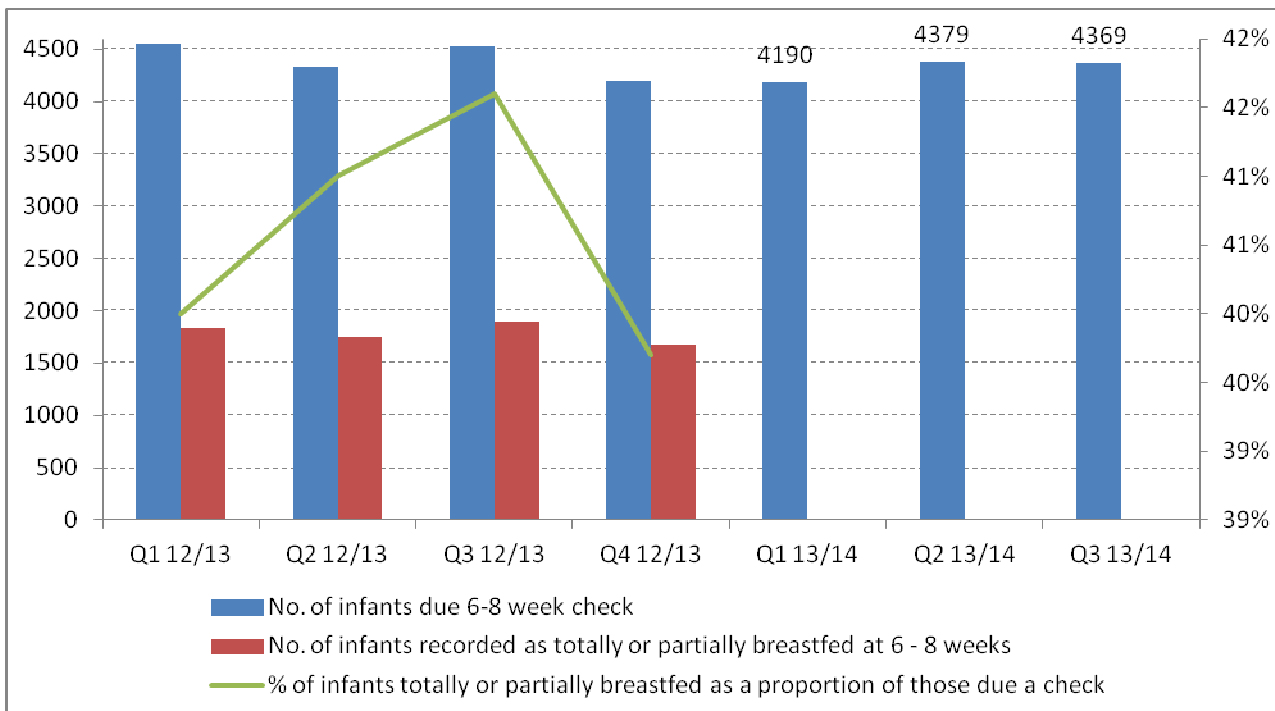
to work effectively across the Council as well as with other partner colleagues.

The NCMP relates to Public Health Outcome Framework Indicators 2.06i and 2.06ii (Excess Weight – obese and overweight)

Data Notes: Higher values are better for Participation. Obesity lower values are preferred. Performance assessment for this indicator is based on the participation rate. Obesity for children is defined as being above the 95th percentile on the Body Mass Index, based on the weight distributions recorded between 1963 and 1994. Data includes state maintained schools only is based on schools location, not pupil address. Data Source: HSCIC. Indicator reference: PH/CYP/01

Infant Feeding - Proportion of women breast feeding at 6-8 weeks

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Trend data – by Quarter	2012/13				
	Q1 (Apr -Jun)	Q2 (Jul-Sep)	Q3 (Oct-Dec)	Q4 (Jan-Mar)	Full 2012/13
Number of infants due 6-8 week check	4,555	4,336	4,531	4,200	17,622
Number of infants recorded as totally or partially breastfed at 6-8 weeks	1,833	1,754	1,897	1,671	7,155
% of infants totally or partially breastfed as a proportion of those due a check	40.2%	40.5%	41.9%	39.8%	40.6%
RAG Rating (46%)	Amber	Amber	Amber	Red	Amber
National (where available)	47.1%	47.5%	47.4%	46.6%	47.2%

Commentary

Collection of infant feeding status has been re-instated (February 2014) following the temporary suspension from April 2013. In response to concerns raised around non-collection, Kent Public Health worked with GPs to review and resolve any issues with Child Health Information systems and future data submissions. This also provided an on-the-ground opportunity to look at how data collection will be included in the specification for the new service.

The tender process for a new service will go out in April 2014 with the aim of the new service being in

place from October 2014.

Previous data has highlighted particular concerns about prevalence of breastfeeding in some localities and local work is taking place in these areas. Community services have been re-provided short-term in West Kent and Swanley to fill a gap. Services in Dartford and Gravesham were re-provided earlier in the year.

Breastfeeding prevalence is Public Health Outcome Framework Indicator 2.02i

Data Notes: Source: DH Integrated Performance Measure. Indicator Reference PH/AH/03