

Public Health Services Scorecard - Dec 2017

PI Ref	Indicator	Polarity	National Average	Target	Data Freq.	Previous Year	Prior Quarter	Previous Quarter	Latest Quarter	Latest Year	RAG Nat. Ave.	RAG Target	Dir of Travel	Comments
Reducing alcohol and drug related harm														
NDTMS submission timetable 2017/18 Q2 data will be available for February 18 update														
1.1	Adults - Number of service users who have been in the service for more than 4 years. (CWP Case Notes)	Low is good		350	Qtly	326	265	257	242		N/A		▼	This indicator has dropped again this quarter. This quarter is also lower than the numbers reported in the same quarter last year (289 in 2016/17 Q1). This shows real improvement. This is due to various reasons including targeted work with this cohort, and is also aligned to improvements in successful completions in treatment.
						2015-16	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.2	Adults - Successful Completions of drug treatment, who do not represent within 6 months (Proportion of all in treatment): Opiates (PHOF 2.15)	High is good	6.6%		Qtly	7.3%	7.1%	8.9%	8.5%				▼	Despite a drop in the current quarter, the quarterly fluctuations are not significant and the rate remains similar to the national average. It is hoped that targeted work with this cohort will result in improvements in successful completions in treatment and thus a improvement in performance. This will be monitored through the contract review meetings with the provider.
						2015	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.3	Adults - Successful Completions of drug treatment, who do not represent within 6 months (Proportion of all in treatment): Non Opiates (PHOF 2.15)	High is good	36.7%		Qtly	46.5%	44.9%	38.7%	34.8%			N/A	▼	UPDATED NARRATIVE. Although this indicator looks in decline, the decrease is not significant and the rate remains similar to the England rate. The dip in performance was discussed with the provider during the contract review meeting in October. It was agreed that the Provider will undertake some target work to understand more about this cohort and also to emphasise the ‘visible recovery’ which aims to prevent
						2015	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.4	Adults - Successful Completions of alcohol treatment, who do not represent within 6 months (Proportion of all in treatment): Non Opiates (PHOF / NDTMS)	High is good	38.3%		Qtly	38.0%	42.2%	40.5%	39.9%			N/A	▼	UPDATED NARRATIVE. The overall performance for this indicator has seen a steady decline, however the rate is higher than the England rate. The dip in performance was discussed with the provider during the contract review meeting in October. It was agreed that the Provider will undertake some target work to understand more about this cohort and also to emphasise the ‘visible recovery’ which aims to prevent
						2015-16	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.5	Adults - Proportion of service users seen within 10 working days from Referral to Assessment for Drug Treatment	High is good		100%	Qtly	45.0%	81.9%	75.6%	90.0%		N/A		▲	There has been a significant improvement in the reduction of waiting times since the last quarter. This is the result of the changes in process for the development of the intake team and processess, which have now become embedded within the service delivery. The national target set by PHE is for 3 weeks, which CWP achieve and is better than the national average. The CEC target of 10 working days is aspirational to ensure that we can drive performance in this area.
						2015-16	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.6	Adults - Proportion of service users seen within 10 working days from Referral to Assessment for Alcohol Treatment	High is good		100%	Qtly	38.0%	85.2%	71.1%	92.9%		N/A		▲	There has been a significant improvement in the reduction of waiting times since the last quarter. This is the result of the changes in process for the development of the intake team and processes, which have now become embedded within the service delivery. The national target set by PHE is for 3 weeks, which CWP achieve and is better that the national average. The CEC target of 10 working days is aspirational to ensure that we can drive performance in this area.
						2015-16	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.7	Young People - First interventions waiting 3 weeks & under	High is good	97.0%	100%	Qtly	100.0%	100.0%	100.0%	100.0%				↔	Waiting times for Young People SMS has been consistent throughout the contract and is above the national average.
						2015-16	2016/17-Q3	2016/17-Q4	2017/18-Q1					
1.8	Change in Anxiety scores from start to exit	Low is good		<0	Qtly			-0.90	-0.60		N/A		▲	Due to a change in provider for the Young Peoples element of the service a new indicator is available looking at the change in levels of anxiety reported by young people at the start of the intervention to the exit from service. Q1 reported a reduction from 5.2 to 4.6 (-0.6), this is a lower reduction than that achieved in 2016/17 Q4
								2016/17-Q4	2017/18-Q1					
1.9	Exessive drinking levels from start to exit	Low is good		<0	Qtly			-25.0%	-17.0%		N/A		▲	This a new indicator due to a change in provider for the Young Peoples element of the service. At the start of treatment, 67% of young people reported drinking excessively during a single episode. At treatment exit, this went down to 50%. Nationally the proportion of young people reported drinking excessively during a single episode decreased from 69% to 54%.
								2016/17-Q4	2017/18-Q1					
1.10	Persons under 18 admitted to hospital for alcohol-specific conditions	Low is good	37.4	36.6	Annual	49.80				44.00			▼	Annual data release. Rate has been steadily decreasing over last 8 time points, the rate is now not signifantly different from England. 99 admissions occurred in 3 years 2013/14-2015/16. Further work is needed in terms of the early intervention and prevent element of the YP service. A development plan has been produced with the new provider. The next data will be available April 2018.
						2012/13 - 14/15				2013/14 - 15/16				

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Improving Sexual Health and Wellbeing														
2.1	Rate of chlamydia detection per 100,000 young people aged 15 to 24 (PHOF 3.02)	Near target is good	1887	2300	Qtly	2762.0	1812.4	1833.0	1994.6	2083.2			↑↑↑	There has been a steady increase in the detection rate during 2017. However the rate is still below the national target. The provider has been set quarterly incremental targets with a view to reaching national target by Apr 2018. Figures equate to 197 diagnoses out of 9,876.5 15-24 year olds. Learning from Public Health England facilitated workshop in Sept.- PHE Identified that there was good conversion rates but still opportunities around screening men and partner notifications. Follow-up - ECT have produced an Action plan based on issues identified. Training event planned with pharmacies mid-Nov, Chlamydia screening in pharmacies will roll out post-event.
						2015	2017-1	2017-2	2017-3	2016				
2.2	Proportion of young people aged 15-24 screened for chlamydia	High is good	22%	30%	Qtly	35.0%	19.9%	16.1%	17.2%				▲	There has been a slight increase in the proportion of 15 to 24 year olds screened for chlamydia. Figures equate to 1,700 tests for 15 to 24 year olds. Learning from Public Health England facilitated workshop in Sept.- PHE Identified that there was good conversion rates but still opportunities around screening men and partner notifications. Follow-up - ECT have produced an Action plan based on issues identified. Training event planned with pharmacies mid-Nov, Chlamydia screening in pharmacies will roll out post-event.
						2015	2017-1	2017-2	2017-3					
2.3	Percentage of sexual health screens in under 25s taken at first attendance	High is good	68.4%	75%	Qtly	60.5%	87.7%	92.1%	92.2%				▲	Equates to 495 screens from 537 new attendances by this age cohort. The rate is well above target and steady. This suggests that the low rate in all screens in 2.2 above is either from repeat attendances to the service or outreach
						2015	2017-1	2017-2	2017-3					
2.4	Percentage of people with needs relating to STIs who are offered a HIV test at first attendance	High is good		80%	Qtly	66.3%	77.2%	82.3%	86.2%	62.4%			▲	Incremental targets appear to have had an impact. Resubmitted Q1 data shows target of 80% achieved in Q1, this new data remains provisional whilst checking figures with ECT. Rate has remained above target in Q2.
						2014	2017-1	2017-2p	2017-3	2015				
2.5	Percentage of LARCs prescribed as a proportion of all contraception (including injectables)	High is good	37.0%	42%	Qtly	37.0%	38.4%	41.0%	42.2%	37.0%			▲	Equates to 252 out of 597 contraceptions reported. Measured against target on a quarterly basis. Although annual figure slightly below target, quarterly data is showing steady improvement and has achieved target this quarter.
						2014	2017-1	2017-2	2017-3	2015				
2.6	Percentage of LARCs prescribed as a proportion of all contraception (excluding injectables)	High is good	28.0%	33%	Qtly	27.0%	28.5%	33.0%	30.8%	24.0%			▼	Equates to 184 out of 597 contraceptions given. Measured against target on a quarterly basis. Total number of LARCs prescribed is down in this quarter, an increase in injectables means this rate is lower and dropped below target.
						2014	2017-1	2017-2	2017-3	2015				
2.7	HIV patients with a late diagnosis (PHOF 3.04)	Low is good	46.6%		Annual	41.9%				35.7%			▼	Although Cheshire East rate has decreased since 2009-11 the decrease is not significant and the rate remains similar to England rate i.e. is not significantly different.
						2012-14				2013-2015				
2.8	Under 18 conceptions per 1,000 females aged 15-17 (as a proxy outcome for contraception)	Low is good	22.8		Qtly	17.8	23.2	14.7	14.6	17.4			▼	Quarterly data is provisional. There was an unusual increase in the last quarter of 2015, however rates have steadily decreased since and are now below the the post-2015 Q4 blip. Rates remain below the national average.
						2014	2015-4	2016-1	2016-2	2015				

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Best Start in Life (0-19 Services)														
PHE submission timetable 2017/18 Q2 Health Visiting data now available														
3.1	Percentage of pregnant women that receive an antenatal visit by a Health Visitor	High is good	30%	95%	Qtly	39%	176	137	110				▼	NEW DATA. Some previous quarters data has changed from that reported on previous PMF as a result of the provider continuing to review data accuracy. Numbers of women attending for ante-natal review at 28 weeks has dropped this quarter, this may be due to a delay in data collection and may improve by the next PMF iteration. This will be raised with the Provider at the next contract review meeting. Local target is under review to bring it into line with the 30% national average.
						2015-16	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.2	Percentage of births that receive a face to face NBV within 14 days by a Health Visitor	High is good	88%	90%	Qtly	96%	83%	82%	88%				▲	NEW DATA. Previous quarterly data has been changed from last PMF as a result of a review of data accuracy by the Provider. Target figure has reduced to 90% in accordance with last PMF recommendation. This brings it more in line with national average and achieved rates of comparator authorities. Performance for Q2 is below target (the remaining 11% of families received the NBV after 14 days) but an increase on the previous quarter. Families who do not receive an NBV within 14 days receive the visit after 14 days.
						2015-16	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.3	Percentage of children that receive a 6-8 week review by the time they reach 8 weeks	High is good	83%	90%	Qtly	95%	83%	88%	54%				▼	NEW DATA. There has been an decline in performance in Q2. This will be raised with the Provider at the next contract review meeting. Target figure has reduced to 90% in accordance with last PMF recommendation. This is still above national average and achieved rates for comparator authorities.
						2015-16	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.4	Percentage of infants being breastfed at 6-8 weeks	High is good	44%	45%	Qtly	45%	44%	47%	48%				▲	NEW DATA. Some previous quarterly data has been changed due to a review of data accuracy by the Provider. Latest breastfeeding rates are above target and national rates. There are a number of possible reasons for the improvement - the Infant Feeding Co-ordinator post at Macclesfield Hospital has been filled after many months of being vacant, the 0-19 service has increased the number of volunteer BF Peer Supporters and there has been an increase in the number of food establishments achieving Baby Welcome status as a result of joint working with Food Hygeine inspectors
						2014/15	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.5	Percentage of Children that received a 12 month review by 15 months	High is good	83%	90%	Qtly	86%	83%	80%	85%				▲	NEW DATA. There has been a improvement in performance from last quarter but we will need to see several more quarters at this level to see if this is an upward trend. This will be raised with the Provider at the next contract review meeting.Target has been reduced to 90% in line with recommendation at last PMF. This is still a challenging target which is well above national average and above average of comparator authorities.
						2015-16	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.6	Percentage of children who receive a 2-2.5 year review by 2.5 years	High is good	75%	75%	Qtly	68%	81%	72%	78%				▲	NEW DATA. Despite an improvement in performance in Q2 17-18, this is still lower than previous years performance. The reasons for this are being explored with the Provider at the contract review meetings.
						2015-16	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.7	Percentage of children who received a 2-2.5 year review using the ASQ of those that had a 2-2.5 year review	High is good	88%	90%	Qtly	82%	86%	89%	90%				▲	NEW DATA. This indicator has changed and the provider is now required to undertake the ASQ-SE (as opposed to ASQ) which is a longer assessment. Quarterly performance has improved and has now hit the 90% target.
						2015-16	2016/17 -Q4	2017/18 - Q1	2017/18 - Q2					
3.8	Proportion of Reception age pupils whose height and weight is recorded as part of the NCMP	High is good	96%	96%	Annual	95.6%				96.6%			▲	Target has been amended to 96% in accordance with recommendation from last PMF and in line with national average. Participation rate of 96.6% for 16-17 school year meets target.
						2015-16				2016-17				
3.9	Proportion of children aged 4-5 classified as overweight or obese (PHOF2.06i)	Low is good	22%	22%	Annual	19.1%				19.2%			▲	2015/16 latest PHOF data available. 2016/17 provisional data available - 772 children measured were overweight or obese. Significantly better than England. No significant change from 2015/16 data. Second lowest in the North West and within the best performing quintile (20%) nationally.
						2015-16				2016-17p				
3.10	Proportion of Year 6 children whose height and weight is recorded as part of NCMP	High is good	94%	94%	Annual	90.0%				91.2%			▲	Target has been amended to 94% in line with national average. Participation rate of 91.2% is below target and national average. The reasons for this will be explored with the Provider as part of monthly NCMP meetings and a plan put in place to increase participation rates in Year 6 for 17-18 school year.
						2015-16				2016-17				
3.11	Proportion of children age 10-11 classified as overweight or obese (PHOF2.06ii)	Low is good	34%	34%	Annual	29.4%				29.7%			▲	2015/16 latest PHOF data available. 2016/17 provisional data available - 1041 children measured were overweight or obese. Significantly better than England. No significant change from 2015/16 data. Second lowest in the North West.
						2015-16				2016-17p				

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Healthy Lifestyles														
4.1	Percentage of the eligible population aged 40-74 offered an NHS Health Check (Cummulative) (PHOF2.22iii)	High is good	56%	68%	Qtly	42.3%	65.5%	72.0%	72.0%	65.5%				Numbers of people offered a Health Check dropped in Q2, with only 5.5% of eligible population being offered as opposed to 6.6% in Q1. However, this is an improvement on Q2 2016/17 (note: there is a seasonal effect around Health Checks so this provides the best point of comparison). Annual PHOF data released on PHE fingertips is as at year end 2016/17 and shows us worse than England average.
						2013-16	2016/17-Q4	2017/18-Q1	2017/18-Q2p	2013-17				
4.2	Percentage of eligible population aged 40-74 offered an NHS Health Check who received an NHS Health Check (Cummulative) (PHOF2.22iv)	High is good	49%	57%	Qtly	58.8%	54.4%	53.1%	49.4%	54.4%				The proportion of people taking up an offer of Health Checks this quarter has increased to 50% from 40% in Q1, however because the percentage of eligible population offered a Health Check was less this has resulted in a cumulative decrease . Annual PHOF data released on PHE fingertips is 'as at year end 2016/17' and shows us better than England average.
						2013-16	2016/17-Q4	2017/18-Q1	2017/18-Q2p	2013-17				
4.3	Percentage of eligible population aged 40-74 received an NHS Health Check (Cummulative) (PHOF2.22v)	High is good	27%	33%	Qtly	24.9%	35.7%	38.3%	41.0%	35.7%				Numbers continue to increase for Health Checks with Q2 2017/18 higher than Q2 2016/17, 3010 Health checks delivered (note: there is a seasonal effect around Health Checks so this provides the best point of comparison). Annual PHOF data released on PHE fingertips is 'as at year end 2016/17' and shows us worse than England average.
						2013-16	2016/17-Q4	2017/18-Q1	2017/18-Q2p	2013-17				
4.4	Smoking Prevalence (PHOF 2.14 APS)	Low is good	16%	0%	Annual	12.5%				13.3%		N/A		2016 data latest available. Not significantly different than England. No significant change from 2015 data. Based on survey data.
						2015				2016				
4.5	Number of 4 week quitters (P&P)	High is good		1400	Qtly	1255	394	313	170	1554	N/A			Number subject to large scale seasonal fluctuations
						2015-16	2016/17-Q4	2017/18-Q1	2017/18-Q2	2016-17				
4.6	Smoking status at time of delivery	Low is good	11%	8%	Qtly	12.5%	16.1%	13.0%	13.0%					Although the quarterly rate functuates there has been no significant change. Based on hospital data.
						2015-16	2016/17-Q4	2017/18-Q1	2017/18-Q2					
4.7	Number of pregnant quitters (P%P)	High is good			Qtly	43	9	6	13		N/A	N/A		As small numbers numbers prone to fluctuations
						2015-16	2016/17-Q4	2017/18-Q1	2017/18-Q2					
4.8	Number of mental health quitters (P&P)	High is good			Qtly	43	21	13	21		N/A	N/A		As small numbers numbers prone to fluctuations
						2015-16	2016/17-Q4	2017/18-Q1	2017/18-Q2					
4.10	Number of alcohol brief interventions (4 x Alcohol Providers)	High is good			Qtly			15	35		N/A	N/A		Service only recently launched. But there has been Increase in numbers of alcohol brief interventions since initial quarter.
								2016/17-Q4	2017/18-Q1					
4.11	Proportion of the adult population meeting the recommended '5-a-day' on a 'usual day' (adults) (PHOF 2.11)	High is good	52%	55.7%	Annual	59.7%				55.2%				2015 data latest available. Significantly better than England. No significant change from 2014 data. Based on survey data. The launch of One You Cheshire East healthy eating services is expected to impact on this indicator over time. However, the timescale is too short at the moment to show impact.
						2014				2015				
4.12	Number of dietary interventions (ESAR)	High is good			Qtly			17	28		N/A	N/A		Ongoing work is being undertaken to increase numbers for this programme
								2017/18-Q1	2017/18-Q2					
4.13	The percentage of adults classified as "inactive" (PHOF - 2.13)	Low is good	22%		Annual	20.8%						N/A		Significantly better than England. New methodology used so no trend data availble. Data is from the Active People Survey, only available annually.
						2015/16								
4.14	Number of physical interventions (ESAR)	High is good			Qtly			148	194		N/A	N/A		Numbers are continuing to rise for this programme. But actions have been set with the provider to increase this rate further.
								2017/18-Q1	2017/18-Q2					
4.15	Percentage of adults classified as overweight or obese (PHOF 2.12)	Low is good	65%	62%	Qtly	66.6%				66.9%				Significantly better than England. No significant change from 2014 data. Data is from the Active People Survey, only available annually.
						2012-14				2013-15				
4.16	Number of adults achieving 5% weight loss following weight management interventions	High is good			Qtly			16	21		N/A	N/A	↑↑↑	Numbers of individuals achieving 5% weight loss are continuing to rise for this programme. But actions have been set with the provider to increase this rate further.
								2017/18-Q1	2017/18-Q2					