Performance Overview Report - Policy & Resources Directorate

Reporting Period: Quarter 3 – Period 01st October 2013 to 31st December 2013

1.0 Introduction

1.1 This report provides an overview of issues and progress within the directorate that have occurred during the period.

2.0 Key Developments

2.1 There have been a number of developments within the Directorate during the period which include:-

Finance

- Although processing times remain one of the best in the region the implementation of the Governments welfare reforms continues to impact upon the administration of Housing Benefit with over 90% of the Council's Discretionary Housing Payment having now been allocated.
- The collection of Council Tax has saw a reduction of 1.67% as compared to the same period last year and there has been a significant increase in recovery action which has largely resulted from changes to the benefits system.
- As has been anticipated the wider implementation of reforms to the state benefit system continues to result in a high demand for welfare advice services with increased recovery activity placing additional demands on the Contact Centre.
- The movement of the Halton People into Jobs service to the Direct Link facility in Widnes has achieved accommodation savings and further consolidated front-line service delivery.
- The Councils Contact Centre Team has been awarded Team of the Year in the Councils inaugural Employee Recognition and Award Scheme.
- The Medium Term Financial Strategy (MTFS) was approved by Executive Board on 21st November 2013, which set out an expected funding gap of up to £46m over three years (2014-2017) and the key assumptions upon which this was based. The Council's 2014/15 base budget has been prepared within the framework of the MTFS.
- The Government announced the Local Government Finance Settlement on 18th December 2013 which provided details of the Provisional Grant Settlement for Halton for 2014/15 and indicative grant settlement figures for 2015/16. Overall the settlement inclusive of specific grants was broadly in-line with that forecast

as part of the MTFS. This will require budget savings to be achieved of £15.1m in 2014/15.

On 21st November 2013 Executive Board recommended initial 2014/15 budget reductions of £6.5m be considered and approved by Council on 11th December 2013. These budget proposals will be implemented immediately and will contribute to keeping spend within budget for the current financial year.

Human Resources and Organisational Learning and Development

- Following a period of consultation a process has now commenced for the transition to new reduced structures for the future delivery of Learning and Development and transactional processes for recruitment and pay.
- During the period work has continued to reduce the number of equal pay claims, provide support to a Members Topic Group on the Living Wage, a working group to formalise arrangements for Agile Working.

ICT and Administration Support Services

- Key corporate project requirements have continued to be delivered such as the continued implementation of SharePoint, web site development, electronic social care records, printer replacement and other major system upgrades.
- The Halton iPhone App will become live during February 2014 with a further development for Android devices being planned for release in early summer. The development was undertaken in-house and provides mobile public accessibility to a comprehensive range of information including job vacancies, traffic updates, public health data and waste collection timetables.
- The Windows to learning platform has now been released into the schools environment with a number of locations having already taken up this opportunity and a large number now interested. A short video of this new solution can be accessed via <u>http://www.halton.gov.uk/WindowsToLearning/index.html</u>

Legal and Democratic Services

- Labour intensive and time-critical work has continued throughout the reporting period to develop a constitution and operating agreement for the Combined Authority in addition to extensive support being provided to the Mersey Gateway Team in advance of financial close anticipated in Quarter 4.
- Following a review the Inside Halton resident's magazine will be circulated 3 rather than 4 times a year which will result in a saving of approximately £7,000 per year.

Policy, Planning, and Transportation.

- Construction work has now commenced on Local Pinch Point Schemes to improve traffic capacity and access to Sci-Tech Daresbury with planning approval for site connectivity work being granted prior to works commencing later this financial year.
- As part of the additional funding to local highway authorities which was announced by the Chancellor in his Autumn Statement Halton will now receive and additional £355k (2013/14) and £187k (2014/15) to help renew and repair the highways network.
- A major funding bid to the Liverpool City Region Local Transport Body for SJB Bridge Maintenance has been included in the shortlist of 12 regional projects recommended for progressing to the next stage of the bid process. Further information concerning the outcome of the process will be provided as and when this becomes available.
- The winter maintenance scheme commenced in October 2013 and by the end of December 220 tonnes of grit had been used, which is similar to that of 2010/11 although representing a 50% reduction over 2011/12 consumption. At present 950 tonnes are stockpiled with an additional 500 tonnes being delivered in January.
- A winter maintenance working group has now been established with Lafarge Tarmac and Warrington Borough Council to identify opportunities for further efficiencies across both authorities.
- Historically Halton has been heavily reliant upon and successful in applying for contaminated land funding totalling £3.4M since 2002. However DEFRA has now announced that it will no longer be funding the Contaminated Land Capital Projects Programme. Whilst the Council will continue to have a responsibility to investigate contaminated land, and publish a strategy as to how this will be done, the announcement by DEFRA will limit the future means by which such duties can be fulfilled.
- Work is progressing on the Widnes and Hale Green Belt Study with the initial site visits due for completion by the end of the January and initial sustainability assessments being undertaken.
- The Mid Mersey LSTF continues to work with companies based at Sci-Tech Daresbury to encourage travel by sustainable transport. Funding from the LSTF to extend the route and time the 200 bus service has proven successful with patronage on the overall service doubling. Additionally the launch of a Smart Travel Application for PC's and Smartphones is scheduled during Quarter 4.

- Following a number of collisions, the street lighting has been switched back on the junction of the A558 Daresbury Expressway and Pitts Heath Lane in Runcorn.
- Through the Halton Strategic Partnership Board work has commenced to develop the Local Service Support Framework for Universal Credit to ensure a joined-up approach for support to vulnerable groups.
- A Peer Challenge, undertaken as part of the LGA's self-improvement initiative and supported by the Policy and Performance Team, was undertaken and completed during quarter 3. Work that has been identified in light of recommendation is now being taken forward in conjunction with other developments such as the annual business planning cycle and the refresh of key documents such as the Corporate Plan and Sustainable Community Strategy.
- Work is being undertaken to pilot a Corporate Social Responsibility scheme called Halton CARES (Companies Acting Responsibly and Ethically), under which local businesses can join and achieve accreditation. Local businesses would provide pro bono work (free of charge assistance) in local communities for example to vulnerable individuals or community groups. The pilot proposal is being put before Environment and Urban Renewal PPB for support on 21st January.
- A Social Value Policy has been produced to meet our procurement commitments under the Public Services (Social Value) Act. Work is continuing as part of a core group of officers from HBC, the CCG and Voluntary and Community Sector, working with and funded by Social Value UK to produce a borough wide Social Value Charter with the aim to establish Halton as an area at the forefront of promoting the Social Value agenda. This is a year-long piece of work, however, the Charter and principles of Social Value are expected to be agreed by February 2014. Policy staff are also be involved in 'social proofing' the commissioning intentions within the Clinical Commissioning Group (CCG) 2 year plan as part of this work.

Public Health

- The Public Health team has led the development of the Joint Health and Wellbeing Strategy with cancer, alcohol, falls, mental health and child development as key priorities. The implementation of action plans to address these priorities is now having a positive impact.
- Working closely with the Community Development Team efforts have been concentrated on raising public awareness of lung and skin cancer symptoms in the community. Public Health Team volunteers continue to support and raise cancer awareness at events and data is collected at each event which includes gender, age and postcode.

- Many responses are recorded and followed up, with people encouraged to see their GP and the team have engaged one to one with around 1,500 people with many more via leaflets, posters and a national marketing campaign which is currently on the Television and Radio and national newspapers.
- The Public Health Stop Smoking service continues to work across a multitude of providers to increase quit rates with particular emphasis being placed on pregnant smokers and workplaces. Work is currently being undertaken to establish relationships with 5 Boroughs mental health trust to develop referral pathways for patients into the service and Halton has been selected as a pilot site for a sub-regional Chronic Obstructive Pulmonary Disease (COPD) initiative which will aim to increase referrals of clients with COPD into Stop Smoking.
- Regionally there has been a marked drop (12%) in people accessing all services in Cheshire/Merseyside due to the emerging popularity of the E cigarette (which are not recognised as a quit aid by the NHS) and the current economic downturn.
- A "Sun Safety" campaign, aimed at Early Years settings and Primary Schools, and also Environmental Health activity to mystery shop underage access to sunbeds have been undertaken to help prevent incidence of skin cancer in future years.
- Whilst alcohol rates are currently reducing the Alcohol Action Plan identifies further on-going action with key contacts and training for all front-line workers, including GP's, Alcohol Liaison Nurses and Children's workers etc., to identify and moderate unhealthy drinking behaviours. A social marketing campaign is also currently being developed to target women of childbearing age and those that are pregnant.
- The DoH programme to increase numbers of Health Visitors who deliver the universal child health programme is on target and a draft under 5's Child Development Strategy is in place and actions are underway with the 0 – 5 universal health programme also being delivered.
- Breastfeeding support is available across the borough and Halton has been awarded UNICEF Baby Friendly Status with frontline managers and staff being assessed as outstanding.
- The Halton Falls Pathway has been reviewed and subsequently redesigned to include both universal prevention and education, and specialist treatment services. A comprehensive action plan, as part of the Health and Wellbeing board, has been implemented to deliver a community wide approach embracing the full range of community services with a robust performance framework for monitoring and evaluation.

- Through a series of events held during national Falls Awareness Week in June a number of local organisations worked together to educate 400 older people across Halton about the dangers, how to avoid falls and stay healthy.
- An integrated Child and Adolescent Mental Health Strategy that will focus upon prevention, early detection and treatment across Public Health, Children's Services and NHS provision has been developed. The Strategy focuses upon meeting the needs of local children, young people and their families and will focus upon the role of schools, GPs, Children's Centres and other local facilities to support the implementation of the Mental Health and Wellbeing Programme.
- An action plan for the Prevention and Early Detection of Mental Health problems has been developed, focussing largely on prevention to help provide a shift in attitudes and awareness of mental health issues. An overarching Mental Health Strategy is also in development, which will be further supported by the development of a Child and Adolescent Mental Health (CAMHS) Strategy.
- An extensive range of weight management services have been delivered across early year's settings, schools and the community to children and families. These include Fit4Life in all Primary Schools and some high schools and Fresh Start for adults and specialist weight management for the morbidly obese. Additionally a new flu immunisation programme has commenced for all 2 and 3 year olds.
- A project plan has been drawn up to facilitate the transfer of the trading standards service back to Halton. A principal trading standards officer has been appointed to manage the new service. Negotiations are on-going to agree the remaining staff to transfer

3.0 Emerging Issues

3.1 A number of emerging issues have been identified during the period that will impact upon the work of the Directorate including:-

Financial Management

- I. In December 2013 the Government announced the introduction of the Single Fraud Investigation Service (SFIS), which will investigate Social Security welfare benefit and Tax Credit fraud across Local Authorities, HM Revenue and Customs, and the Department for Work and Pensions (DWP). This will result in Council Benefit Investigation staff transferring to the DWP. Time scales provided by the DWP indicate that national rollout should commence in October 2014 and will be completed by March 2016.
- II. On 6th February 2014 the Executive Board will recommend budget proposals to be considered by Council on 5th March 2014. This will include additional budget reductions required in order to deliver a balanced budget for 2014/15.
- III. Support continues to be provided on the financial aspects of the Mersey Gateway development, partnership arrangements on the pooled budget with Halton CCG and the joint venture arrangements with the Science & Technology Facilities Council and Langtree for the development at Sci-Tech Daresbury. Progress continues to be made with Equal Pay Claims, to date over 900 claims have been cleared.
- IV. Planning has begun for preparation of the 2013/14 final accounts, the Council's External Auditor (Grant Thornton UK LLP) have commenced work in refreshing their understanding of the Council's processes and controls in financial systems.

Human Resources and Organisational Development

I. Significant changes to the Local Government Pension Scheme will be introduced form April 2014 with a move away from Final Salary to career average earnings. This will have an impact for both employees and the Councils processes. HR staff will begin detailed communication over the coming months with both employees and Cheshire Pensions, to ensure the successful implementation of the new arrangements.

ICT and Administration Support Services

II. Following the finalisation of discussions with the supplier new Contact Centre software will become operational during May 2014 that will provide enhanced capability and exceed the original tendered requirements.

- III. Picow Farm Road Records Management and data Centre is now complete and plans are now in place to develop the Scanning Centre and the necessary operating processes and procedures with the intention that commercial opportunities to further attract inward investment will be sought.
- IV. The ICT Data Centre will form a major part of the authority's on-going disaster recovery and business continuity arrangements and the 2014/15 capital programme will be aligned with developing this facility.
- V. Arrangements to meet the continued requirements of Public Services Network compliance, which form the Code of Connection the authority has to maintain to transact electronically, are now underway and the authority will be subject to an external audit during June 2014.

Policy, Planning, and Transportation.

- VI. Phase 2 of the 2013/14 carriageway structural reconstruction has been delayed due to poor weather conditions and has been rescheduled for completion in February 2014.
- VII. The DfT launched guidance for the next round of LSTF in late December 13. Funding will be available for 1 year (2015-16) and is for revenue projects only with an overall value of a bid is set a £1m, or for the LCR as a whole £5m. Applications to this fund need to be submitted by the end of March 2014 and currently there are discussions taking place amongst the Liverpool City Region on how best to proceed.

Public Health

- VIII. A Suicide Strategy is currently being developed as is an alcohol programme aimed at challenging social norms within secondary schools.
 - IX. A maternity services review is continuing to proceed and a flu immunisation programme is due to commence for all 4 year olds during the coming year.

4.0 Risk Control Measures

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements.

As such progress concerning the implementation of all high risk mitigation measures will be monitored in Quarter 2 and Quarter 4.

5.0 High Priority Equality Actions

Equality issues continue to form a routine element of the Council's business planning and operational decision making processes. Additionally the Council must have evidence to demonstrate compliance with the Public Sector Equality Duty (PSED) which came into force in April 2011.

As a result the Board will receive further information following the completion of the Annual Equality Assessment which will be undertaken during Quarter 3.

6.0 Performance Overview

The following information provides a synopsis of progress for both milestones and performance indicators across the key business areas that have been identified by the Directorate.

Financial Management

Key Objectives / milestones

Ref	Milestones	Q3 Progress
FS 01	Report Medium Term Financial Strategy to Executive Board. November 2013	~
FS 03	Complete the Draft Abstract of Accounts for certification by the Chief Financial Officer by 30 June 2013 . Publish the Abstract of Accounts by 30 September 2013 .	~

Supporting Commentary

Medium Term Financial Strategy was reported to Executive Board on 21st November 2013 with the Draft Abstract of Accounts being certified by the Chief Finance Officer on 28th June 2013 as planned. Statement of Accounts for 2012/13 was approved by Business Efficiency Board on 18th September 2013 and published on the Councils web-site on 30th September 2013.

Key Performance Indicators

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
FS LI 05	Proportion of Council Tax that was due that was collected.	97.11%	96.00+	83.83	 ✓ 	∔
FS LI 06	The percentage of Business Rates which should have been received during the year that were received.	97.13%	96.00+	78.51	 Image: A start of the start of	¥
FS LI 08	Achieve investment returns for the year higher than the benchmark.	1.91	N/A	0.89	✓	⇔

Supporting Commentary

When compared to the same period last year there has been a reduction in the levels of collection of Council Tax (1.67%) and Business Rates (6.32%).

With regards to Council Tax this has largely resulted from the negative impact of the new Council Tax Reduction Scheme and changes to Empty Property Discounts.

In respect of Business Rates some large new assessments and increases in Rateable Values, in addition to a number of on-going rate avoidance schemes have led to a reduction in the collection rate.

Human Resources & Organisational Development

Key Objectives / milestones

Ref	Milestones	Q3 Progress
HRLD 01	To commence Real Time Tax information reporting to HMRC by June 2013 .	\checkmark
	To further enhance i-Trent system capabilities. March 2014	
HRLD 02	Promote and take forward the delivery of actions identified within the Corporate Peoples' Plan. March 2014	~
	Monitor and review the implementation of revised Employee Development Review (EDR) process. December 2013	

Supporting Commentary

The Council now complies with the requirements of HMRC in the provision of real time information to the tax office and iTrent capabilities are being enhanced through the

introduction of e-payslips which are currently being tested prior to any roll-out being agreed between management and trade unions.

Learning and Development opportunities continue to be provided in support of the Corporate People's Plan and the means by which learning needs can be identified continue to be explored, for example thorough the analysis of staff forums.

Key Performance Indicators

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
HRLD LI 1	The number of working days / shifts lost due to sickness (Corporate).	10.06	8.5	7.99	?	∔
ODHR LI 5	% of training delegates attending as proportion of places reserved.	88	85	81	~	∔
ODHR LI 6	The percentage of top 5% of earners that are:					
	a) Women	55.04	50	55.56	\checkmark	∔
	b) From BME Communities	2.91	1.0	2.73	\checkmark	↓
	c) With a disability	0.65	5.0	0.68	×	倉
ODHR LI 7	No of staff declaring that they meet the Disability Discrimination Act as a % of the total workforce.	1.36	7.50	1.44	×	1
ODHR LI 8	Minority of Ethnic Community staff as a % of total workforce.	0.89	1.00	1.16	~	1

Supporting Commentary

Sickness absence has increased when compared to the same period last year (6.61) and work continues with service managers to explore mitigating actions that can be pursued.

In relation to the workforce profile it is unlikely that the Council's ambitious targets in relation to disability can be achieved although both measures have shown a marginal increase when compared to the same period last year.

ICT Infrastructure

Key Objectives / milestones

Ref	Milestones	Q3 Progress
ICT 01	SharePoint and Records Management enhancement. March 2014	✓
	Continued Social Care Systems Service Support Programme. March 2014	~
	Schools Cloud Service Developments. September 2013	~
	Interactive Web Services and further SharePoint integration. March 2014	\checkmark
	Development of commercial ICT opportunity within Desktop, hosting and Disaster Recovery provision. March 2014	~
ICT 02	Continued development of document management and distribution services. March 2014	~
ICT 03	Deliver operational Records Management Unit Services. August 2013	 Image: A start of the start of
ICT 04	Conduct and evaluate point of contact satisfaction survey for ICT & Support Services. March 2014	\checkmark

Supporting Commentary

All objectives are progressing as planned or having been completed at this stage.

In relation to Social Care Systems support developments with regards to children's Services are complete and in line with requirements and a project to consider Adult Services has commenced with requirements being mapped and planned for test during the second quarter of 2014.

The development of commercial opportunities is progressing well with services now being delivered for the Mersey Gateway Project and the Halton Clinical Commissioning Group.

The results of the contact satisfaction services have now been received and analysed. Results have been largely positive and encouraging and work is now being undertaken to identify the ways in which services can be improved further. The full details of the survey findings will be published in the March Team Brief and the April 2014 issue of the InTouch magazine.

Key Performance Indicators

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
ICT LI 1	Average availability of the Council's operational servers (%).	99	99	99.99	✓	î
ICT LI 2	Average availability of the Council's WAN infrastructure (%).	99	99	99	 ✓ 	1
ICT LI 4	% of all responsive repairs completed within 2 working days.	92	80	93	 ✓ 	1
ICT LI 8	Average working days from order to completion of a new PC.	9	10	8	~	1

Supporting Commentary

Infrastructure and availability remains robust and although there have been some oneoff outages as a result of power issues at Rutland House these have been resolved within 30 minutes of each event.

Responsive repair and PC completion times remain extremely positive.

Legal & Democracy

Key Objectives / milestones

Ref	Milestones	Q3 Progress
LOD 01	Secure renewal of Lexcel and ISO Accreditations. January 2014	√
LOD 03	To ensure that all members have been given the opportunity of having a MAP meeting.	~

Supporting Commentary

Work to secure renewal of accreditations is progressing according to plan, although it has been agreed that the inspection will be held on 31st March 2014, Member MAP meetings continue to place as we move throughout the year.

Key Performance Indicators

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
LD LI 03	Average Time taken to issue prosecutions from receipt of full instructions (working days).	7	10	10	 ✓ 	⇔
LD LI 04	Average time taken to send out first draft business lease from receipt of complete instructions from Property Services (working days).	15	20	20	✓	⇒
LD LI 05	Average time taken to file application for Care proceedings at Court from receipt of all written evidence from client department (working days).	1	3	1	 ✓ 	⇔
LD LI 15	% satisfaction with Inside Halton.	99	90	95%	N/A	N/A

Supporting Commentary

All measures remain on track to achieve annual target.

The Inside Halton reader's survey showed that 95% of readers were either satisfied, or very satisfied with the magazine. Readers complimented the 'What's On' section and updates in the magazine on the Mersey Gateway.

Policy, **Planning** and **Transportation**

Key milestones

Ref	Milestones	Q3 Progress
PPT 01	Review progress, revise SJB maintenance strategy document and deliver 2013/14 major bridge maintenance works programme. March 2014 .	 Image: A start of the start of
PPT 02	To deliver the 2013/14 LTP Capital Programme March 2014.	 Image: A start of the start of
РРТ 03	Develop and consult on a local flood risk strategy for Halton (June-Nov 2013) and progress to adoption by March 2014 .	\checkmark

PPT 07	Mersey Gateway – Full business case approval, Financial close and	
	Contract award and mobilisation – November 2013.	l



2013/14 major bridge maintenance works programme is underway with individual work delivery being adjusted in line with budget availability as Target Costs for individual Task Orders are agreed.

In relation to the Local Transport Plan Plan (LTP) Capital Programme the delivery of integrated transport schemes is well underway with around 10 schemes at various locations having been completed. Construction of further transport and highway improvement schemes is due to commence in January at local neighbourhood centres at Moorfield Road and Ditchfield Road, Widnes.

With regard to the Road Maintenance element the programme of footway reconstruction is nearing completion for this year. Phases 1 & 2 of the Carriageway reconstruction & resurfacing schemes are complete with Phase 3 works imminent in February 2014.

Programme and Design work for next year's Phase 1 Footway and Carriageway schemes are well underway in line with the Annual Plan.

The draft Local Flood Risk Strategy has been reviewed by the Environment Agency and a formal partner / stakeholder consultation is currently in progress. It is anticipated that the public consultation will be undertaken during February 20104 and completed by the end of March 2014.

Whilst the Mersey Gateway Business Case was submitted to the Department for Transport in November 2013 the Financial Close has now been deferred until the end of February 2014.

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PPT LI 02	Net additional homes provided.	N/A	552	N/A	N/A	N/A
PPT LI 03	Number of affordable homes delivered (gross).	N/A	100	N/A	N/A	N/A
PPT LI 04	% of planning applications processed:					
	'Major' applications > 13 weeks	66.7	60	56.3	×	î
	'Minor' applications > 8 weeks	30.9	83	51.5	×	î
	'Other' applications > 8 weeks	70.4	83	91.1	~	î

Key Performance Indicators

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Q3 2013 – 14

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PPT LI 11	Damage to roads and pavements (% dangerous damage repaired within 24 hours).	74	98	99	 ✓ 	Î
PPT LI 15 (Ex NI 178)	Bus service punctuality, Part 1: The proportion of non-frequent scheduled services on time (%):					
	a) Percentage of busses starting route on time	97.74	97.80	97.48	\checkmark	ᠿ
	b)Percentage of busses on time at intermediate timing points	89.31	97.40	90.46	✓	î
PPT LI 17	Number of passengers on community based accessible transport.	275,518	255,000	189,039	×	∔
PPT LI 19	Number of local bus passenger journeys originating in the authority area in one year (000s).	5,491	5,500	3,979	×	¥

Performance in determining planning applications continues to improve in line with the team now being fully staffed.

Damage to roads and pavements is now being undertaken through the new Highways term contract with Lafarge Tarmac undertaken under a new suite of incentivised performance indicators. This greater degree of contractual control in combination with new methods of reporting and instructing Priority 1 & Priority 2 work has brought performance back in line with target.

Bus service punctuality continues to improve as we move throughout the year and it is anticipated that the annual target will be achieved.

Halton Community Transport has indicated that the fall in journeys is due to a reduction in coach journeys being undertaken within the current year. It is anticipated that journeys will remain static for the remainder of 13/14. Additionally bus patronage within Halton continues to decline overall. However, Q3 has improved greatly on the Q2 figure of 2,640 with a 50% increase in passenger numbers.

Public Health

Key milestones

Ref	Milestone	Q3 Progress
РНО3	Work with the public and service providers to raise awareness of the early signs and symptoms of bowel, breast and lung cancer so we can identify it an early stage in the population. March 2014	 ✓

Supporting Commentary

As reported within the Key Developments Section of this report The Public Health Team have concentrated their efforts on raising public awareness of lung and skin cancer symptoms in the community working closely with the Community Development Team.

Ref	Milestone	Q3 Progress
PH 03	Increase smoking quitter rates amongst 16+ age range by working with local Hospital Trusts and the local 'Stop Smoking Service'. March 2014	?

Supporting Commentary

As reported within the Key Developments section of this report the Health Improvement Stop Smoking service continues to work across a multitude of providers to increase quit rates.

Ref	Milestone	Q3 Progress
РН ОЗ	Reduce obesity rates in the local population, thereby reducing the incidence of bowel cancer through promoting healthy eating and screening programmes for adults and children via a range of services. March 2014	~

Supporting Commentary

Public Health commission weight management programmes for children and adults across Halton Borough.

An extensive range of services have been delivered across early year's settings, schools and the community to children and families. During quarter one, 22 programmes were delivered across children's settings engaging over 500 children and 100 parents. The adult service, which is delivered as a joint service with Halton and Warrington Hospital, has seen 2000 adults engaged on the service with 100% of those completing the programme recording between 3 - 5% weight loss at 12 weeks.

Ref	Milestone	Q3 Progress
PH 03	Meet the target for the take up of Human Papilloma Virus (HPV) vaccination in girls 11-13, to reduce cervical cancer rates by working proactively with the School Nursing Service and GPs. March 2014	 ✓

HPV vaccination which protects women against cervical cancer is undertaken during the academic school year. HPV rates for all three doses are consistently on or above the England average (please note available evidence is for Halton and St Helens).

Ref	Milestone	Q3 Progress
РН ОЗ	Work proactively with GPs, all service providers, Alcohol Liaison Nurses, teachers in schools to reduce the number of people drinking to harmful levels and alcohol related hospital admissions given the rise in pancreatic and liver cancer rates. March 2014	✓

Supporting Commentary

An Action plan for the Reduction of Harm from Alcohol has been developed as part of the Health and Wellbeing Strategy. The plan identifies on-going action with key contacts and training for all front line workers including GPs, Alcohol Liaison Nurses, and children's workers etc., to identify and moderate unhealthy drinking behaviour. Alcohol rates are currently reducing.

Ref	Milestone	Q3 Progress
РН ОЗ	Implement and monitor the new Cancer Action plan to decrease morbidity and mortality from cancer locally. March 2014	✓

Supporting Commentary

An Action plan for the Prevention and Early Detection of Cancer has been developed as part of the Health and Wellbeing Strategy. The plan identifies an overall target of a 1% Reduction in under 75 mortality rate from cancer (Baseline 2010 – 147.96/100,000). A "Sun Safety" campaign, aimed at Early Years settings and Primary Schools, and also Environmental Health activity to mystery shop underage access to sunbeds have been undertaken to help prevent incidence of skin cancer in future years.

Ref	Milestone	Q3 Progress
PH O4	Facilitate the Early Life Stages development which focusses on a universal preventative service, providing families with a programme of screening, immunisation, health and development reviews, and health, well-being and parenting advice for ages 2½ years and 5 years. March 2014	

Through the Health and Wellbeing Strategy a draft under 5's child development strategy is in place and actions are underway towards meeting this target. The 0-5 universal healthy child programme is being delivered and includes all components.

The Department of Health programme to increase the numbers of health visitors who deliver the universal child health programme is on target in Halton.

Ref	Milestone	Q3 Progress
PH O4	Facilitate the Halton Breastfeeding programme so that all mothers have access to breastfeeding-friendly premises and breastfeeding support from midwives and care support workers. March 2014	 ✓

Supporting Commentary

As reported within the key developments section of this report Breastfeeding support is available across the borough, and offered to all breastfeeding women.

Ref	Milestone	Q3 Progress
PH O5	Working with all service providers, implement the action plan to reduce falls at home in line with the Royal Society for the Prevention of Accidents (ROSPA) guidance as outlined in the new Falls Strategy. March 2014	√

Supporting Commentary

The Halton Falls Pathway has been reviewed and subsequently redesigned to include both universal prevention and education, and specialist treatment services. A comprehensive action plan, as part of the Health and Wellbeing board, has been implemented to deliver a community wide approach embracing the full range of community services with a robust performance framework for monitoring and evaluation.

Through a series of events held during national Falls Awareness Week in June a number of local organisations worked together to educate 400 older people across Halton about the dangers, how to avoid falls and stay healthy.

Ref	Milestone	Q3 Progress
PH O6	Implement the alcohol harm reduction plan working with a range of providers including schools, focusing on preventive interventions and behaviour change to target the following vulnerable groups – pregnant women, women with babies and young people under 16 years. March 2014	✓

A social marketing campaign is currently being developed targeting women who are of childbearing age and pregnant, to ensure they understand the harm that alcohol can cause their baby.

Ref	Milestone	Q3 Progress
РН О7	Implement the Mental Health and Wellbeing Programme in all schools and provide training for GP Practices and parenting behaviour training in the Children's Centres. March 2014	~

Supporting Commentary

An integrated Child and Adolescent Mental Health Strategy that will focus upon prevention, early detection and treatment across Public Health, Children's Services and NHS provision has been developed.

The Strategy focuses upon meeting the needs of local children, young people and their families and will focus upon the role of schools, GPs, Children Centres and other local facilities to support the implementation of the Mental Health and Wellbeing Programme.

Ref	Milestone	Q3 Progress
PH O7	Implement the Mental Health and Wellbeing Action Plan to improve the physical wellbeing of people with mental ill health. March 2014	\checkmark

Supporting Commentary

An Action plan for the Prevention and Early Detection of Mental Health Problems has been developed as part of the Health and Wellbeing Board Strategy. A range of actions across the whole life course have been developed, focussing largely on prevention to help provide a shift in attitudes and awareness of mental health issues. An overarching Mental Health Strategy is in development, which will be further supported by the development of a Child and Adolescent Mental Health (CAMHS) Strategy.

Key Performance Indicators

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PH LI 03	Excess weight rates in Primary School Age Children ¹ : In Reception (Age 4-5	Latest published data (2010/11) 28.4%	Maintain in line with the North West average	(2012/13 data) 25.1%	 Image: A start of the start of	倉
	In Year 6 (Age 10-11	37.5%	are age	36.6%	\checkmark	倉
PH LI 04	MMR Immunisation Rates for children (By age 2).	90%* (2011/12)	95%	95.4%* (Quarter 2)	\checkmark	Î
PH LI 05	Infant Mortality Rates (3 year rolling average)	4.8 (2009-11)	4.75 (based on 3 year rate)	4.1* (2010-12)	~	î

Supporting Commentary

Data for 2012/13 compared to 2010/11 demonstrates a significant reduction in the proportion of children with excess weight. A 3.3% reduction for Reception age children, which is outstanding progress, and a 1.1% reduction for Year 6 age children, which is very good progress.

MMR rates for children aged 2 have made very good progress. Halton now has one of the highest immunisation rates in the North West.

Infant mortality rates have shown a slight improvement, and are lower (better) than the target. This is due to a wide range of work on smoking cessation and sudden infant death syndrome.

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PH LI 06 (SCS HH5a)	All age, all-cause mortality rate per 100,000 Males (Previously NI 120a) 2011	811.4 (2010)	755.2	747.0 (Oct 12 to Sep 13)	✓	î
PH LI 07 (SCS HH5b)	All age, all-cause mortality rate per 100,000 Females (Previously NI 120b) 2011	573.6 (2010)	567.9	613.8 (Oct 12 to Sep 13)	?	+
PH LI 08 (SCS HH6)	Mortality rate from all circulatory diseases at ages under 75 (Previously NI 121) 2011	74.0 (2011)	73.3	70.9 (Oct 12 to Sep 13)	✓	1

^{*}Data is provisional or from local unpublished sources

¹ Data available and reported one year in arrears – 11/12 actuals now confirmed with the Department of Health

² Data only available & published annually

PH LI 06: Halton has already met the target for reducing male mortality rates and is making good progress in this area.

PH LI 07: Local data shows rates have fluctuated recently but there has been no overall reduction since 2010, this is due in the main to our cancer rates for females. 2011 is latest published data and Halton was worse than England average.

PH LI 08: There has been significant improvement in reducing circulatory diseases as ages under 75. Halton has already met this target and is making very good progress.

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PH LI 09 (SCS HH7)	Mortality from all cancers at ages under 75 (Previously NI 122) 2011	126.4 (2011)	125.1	138.6 (Oct 12 to Sep 13)	×	+
PH LI 10 (SCS HH8)	16+ current smoking rate prevalence – rate of quitters per 100,000 population (Previously NI 123)	1235.5 (2011/12)	1263.6	296.6 (Quarter 2)	?	¥

Supporting Commentary

The cancer mortality rate for Halton is worse than the England average. There are high rates of lung cancer amongst older women due to previously high rates of smoking.

Halton's smoking rate is just above the national average. Smoking quit rates are seasonal with most people quitting in January. We cannot yet say whether we will meet the target for 2013/14, as data is cumulative. Rate of quitters for 2012/13 did not reached expected targets. This was partly due to population changes from census data but predominantly related to the impact of electronic cigarettes which are impacting upon those achieving quit status (e-cigarettes are not an NHS recognised quit tool).

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PH LI 11 (SCS HH2)	Prevalence of Breastfeeding at 6-8 weeks	17.81%	24%	25.5%	\checkmark	Î

Supporting Commentary

6-8 week breastfeeding rates have increased and are very close to being on target. There is a strategy and action plan under development to maintain these improvements.

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PH LI 12 New SCS Measure Health 2013-16	Falls and injuries in the over 65s (Public Health Outcomes Framework)	2962 (2011/12)	TBC	2848.8* (2012/13)		î

There has been some progress in a reduction in falls and injuries in the over 65's. With the new Falls Strategy and Action Plan it is anticipated there will continue to be a reduction in this area.

Ref	Measure	12 / 13 Actual	13 / 14 Target	Q3 Actual	Q3 Progress	Direction of travel
PH LI 13 (SCS HH1)	Alcohol related hospital admissions, AAF > 0, rate per 100,000 population (previously NI 39)	2837	3142	3184* (Oct 12 to Sep 13)	×	¥
PH LI 14 (SCS HH1)	Admissions which are wholly attributable to alcohol AAF = 1, rate per 100,000 population	994.5 (2011/12)	1039	1038.2 (Oct 12 to Sep 13)	?	¥

Supporting Commentary

PH LI 13: It is difficult for the council to meet this target as it includes people admitted to hospital for conditions that could be related to alcohol but may not be, e.g. kidney dialysis may be as a result of alcohol abuse but may also be the result of diabetes. Current Q3 data shows an increase in admissions.

PH LI 14: The 2012/13 local rate is provisional data and will be updated nationally in early 2014. Current quarter data shows an increase in the rate from 2012/13 although is currently below target. There is seasonal variation in alcohol admissions so this increase is in line with expected increases in admission for this quarter. The national trend is also one of a year on year increase.

7.0 Application of symbols

Symbols are used in	Symbols are used in the following manner:				
Progress	Objective	<u>Performance Indicator</u>			
Green 🖌	Indicates that the <u>objective is</u> on course to be achieved within the appropriate timeframe.	Indicates that the annual target <u>is on</u> <u>course to be achieved</u> .			
Amber ?	Indicates that it is <u>uncertain</u> or too early to say at this <u>stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	Indicates that it is <u>uncertain or too</u> <u>early to say at this staqe</u> whether the annual target is on course to be achieved.			
Red 🗴	Indicates that it is <u>highly</u> <u>likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	Indicates that the target <u>will not be</u> <u>achieved</u> unless there is an intervention or remedial action taken.			
Direction of Travel	Indicator				
Where possible <u>pe</u> following convention		dentify a direction of travel using the			
Green 🔶	Indicates that performance is better as compared to the same period last year.				
Amber 📛	Indicates that performance is period last year.	the same as compared to the same			
Red 🖊	Indicates that performance is worse as compared to the same period last year.				
N/A	Indicates that the measure car last year.	nnot be compared to the same period			