

Draft Revenue Budget and Capital Programme 2015/16 to 2018/19 for Social Care and Health Portfolios

Ward(s) All

Portfolio: Councillor D Coughlan - Social Care
Councillor I Robertson - Health

Summary of report

This report outlines the portfolio plans for future service delivery for the Social Care and Health portfolios. This includes Cabinet's draft revenue budget proposals and draft capital programme for 2015/16 to 2018/19 for consultation, for the panel to consider and make recommendations to Cabinet if they so choose.

Recommendation

The panel are recommended to:-

1. Consider the portfolio plans for future service delivery, and draft revenue proposals in this report, and make recommendations to Cabinet as appropriate.
2. Review and make recommendations to Cabinet as appropriate, on the draft capital programme for services within the remit of this panel.

Background papers

The Report to Cabinet on 29 October 2014 on the Medium Term Financial Plan

Reason for scrutiny

To enable consultation and scrutiny of the draft portfolio plans, draft revenue budget proposals, and draft capital programme for 2015/16 to 2018/19.

Signed:



Chief Financial Officer: James Walsh
Date: October 2014



Executive Director: Keith Skerman
Date: October 2014

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Executive Director
Date:

Rory Borealis
October 2014

Executive Director:
Date:

Jamie Morris
October 2014

Resource and legal considerations

Cabinet on 29 October 2014 presented their draft plans on future service delivery, including the draft revenue budget and draft capital programme for 2015/16 to 2018/19 for consultation.

The full budget papers can be accessed with this link:
<http://cmis/CMISWebPublic/Meeting.aspx?meetingID=2260>

The report includes the context in which the draft budget has been set, including the reference to council priorities and consultation arrangements.

Attached to this report are the portfolio plans applicable to the remit of this panel.

Citizen impact

The budget is aligned with council priorities. The report sets out the plans for future service delivery for the services within the remit of this panel. A careful consideration was made of how to ensure people with eligible needs had those would be met through review, redesign, and where appropriate consultation over the medium term.

Environmental impact

The impact on the environment is considered in all budget / capital programme proposals.

Performance management

Financial performance is considered alongside service performance. Managers are required to deliver their services within budget and there are comprehensive arrangements in place to monitor and manage this. The plans are geared to the implementation of the Care Act and Children and Families Act 2014 over the next few years, using the new Mosaic client record system being installed this year for future monitoring effectiveness and impact of the changes introduced.

Equality Implications

Service managers have regard to equalities in setting budgets / capital programmes and delivering services. Equality impact assessments will be undertaken as required prior to final recommendations being made to Council on the budget.

Consultation

This is a specific meeting for scrutiny to consider the draft revenue budget and draft capital programme for 2015/16 to 2018/19.

Consultation is an integral part of the budget process and arrangements are in hand to consult with a wide range of stakeholders (i.e. councillors, residents, service users, business sector, voluntary and community organisations, etc.). This is outlined in the budget report, which includes the finding from phase 1 of public/staff information gathering.

An update on feedback from phase 2 – consultation - will include scrutiny feedback and will be presented to Cabinet on 17th December.

Any changes to these proposals, following public consultation, will be reported to a future meeting of the panel, providing an opportunity to make further recommendations to Cabinet. Cabinet may wish to consider the feedback contained within this report in formulating their draft budget proposals.

There are two formal consultations underway regarding proposals to replace and change in house social care services: the residential respite care service at Fallings Health, and the employment related recruitability service. These will be reported to Cabinet and the Panel before the 2015/16 budget is set in February 2015.

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APPENDIX 1

PORTFOLIO: SOCIAL CARE

Summary of services within the portfolio

The portfolio covers social care services for adults and older people with physical disability, sensory impairment, learning difficulties, mental health issues, substance misuse, autism, HIV/AIDS. It also includes the responsibility for 'Money, Home, Job' (Revenues, Benefits, Housing and Customer Services)

Social Care

- Response, information, advice and signposting
- Preventative services, community alarms, tele-care, tele-healthcare

- Enablement and re-ablement
- Assessment and review
- Resource allocation and support planning
- Safeguarding of vulnerable adults
- Whole sector workforce planning and development
- Commissioning of services including residential, nursing, day care, home care, extra care (incl. Housing 21), supporting people and the learning disability and integrated community equipment pooled budgets
- Shaping and development of adult social care market
- Quality assurance of services
- Direct service provision: reablement, response, day and respite care, adult placements
- Housing related support for vulnerable groups

Money, Home, Job

- Advice, customer application support, assessment, revision, payment, recovery of overpayments, customer queries, complaints and appeals of the following benefits and reliefs:-
 - Housing benefit
 - Council tax reduction scheme
 - Discretionary housing payments
 - Free school meals
- Disabled Persons' Parking permits (Blue Badge)
- The Crisis Support scheme
- The prevention, detection and investigation of benefit fraud and error, including the application of sanctions.
- Council tax - billing, collection, recovery and enforcement
- Non domestic rates (business rates) - billing, collection, recovery and enforcement
- Welfare rights– income maximisation, debt advice
- Supported Housing and homelessness
- Housing Standards and Improvements
- The First Stop Shop at the Civic Centre
- The Council's contact centre and switchboard
- Banking hall – corporate income collection service and social care payments

Portfolio Objectives / Outcomes / Purpose

Social Care

Our main aim is to assist people to live independent lives. To that end our prime interventions will be looking at ways in which a person can be supported to recover from the crisis that they presented to the Council when they wanted help. For some people this can be achieved through a bit of help by signposting to a community or voluntary sector organisation; for others they may need more help and may need a period of help to support recovery, reablement, rehabilitation or recuperation. We will focus on the outcomes from our interventions that assist with reducing or delaying the need for longer term help.

The broad aims are:

- To help citizens to access universal services
- To assist citizens to access mainstream services
- To provide access to a range of community based health and social care services
- To prevent citizens becoming socially excluded and needing more intensive and costly health and social care services by providing a range of practical services close to home
- To reduce dependence on services, and support independence and self directed support
- To commission good quality services that provide real choices for citizens to achieve their outcomes

Money, Home, Job

The purpose of this service is: 'Help me with my money, my home, my job'. The service helps people to become or remain independent and assists them with extra help when they fall into crisis and helps them to get back on their feet.

The service increasingly integrates what used to be stand-alone services so that the resident or business that needs help from the council receives a customer-focused service that addresses all of their needs in a streamlined way, making best use of public money in the round.

Financial summary

Table 1 details the revenue cash limits for the Social Care Portfolio for the next four years. Full details of savings and efficiencies for 2015/16 and 2016/17 are shown in table 2.

Table 1: Social Care Portfolio Cash limit 2015/16 – 2018/19				
	2015/16 £m	2016/17 £m	2017/18 £m	2018/19 £m
Opening cash limit	70.676	65.934	59.780	55.475
Base budget adjustment	(1.053)	0.050	0.137	0.000
Less: Savings / efficiencies - <i>see table 2 below</i>	(3.689)	(6.204)	(4.442)	(3.044)
Revised cash limit	65.934	59.780	55.475	52.431

Investment for pay, pensions and contractual inflation are made centrally, and will be allocated to services following confirmation of the final savings proposals.

Cash limits for 2017/18 and 2018/19 are based on indicative savings required, as government funding allocations are not yet available. High level service reviews are underway, the development of which will continue. Once the Spending Review 2015 is published, these will be reviewed.

Capital investment for the Social Care portfolio over the next four years is £13.445m. Full details of investment are shown in table 3.

2015/16 £m	2016/17 £m	2017/18 £m	2018/19 £m	Total £m
3.579	3.302	3.282	3.282	13.445

Proposed revenue savings and efficiencies

Table 2 details the revenue saving and efficiencies for Social Care Portfolio for both 2015/16 and 2016/17.

Table 2 : Proposed savings and efficiencies			
Saving reference	Detail of saving / efficiency	2015/16 £m	2016/17 £m
142	Access, Assessment & Care Management – redesign of care and support through the assessment and reviews of older people and those with physical disabilities using promotion of independence methods	1.684	2.421
143	Access, Assessment & Care Management – Learning Disabilities long term care placement review and resettlement efficiencies	0.200	0.400
144	Access, Assessment & Care Management – joint funded learning disability placements review and resettlement efficiencies – relating to people funded in care homes for whom a long term resettlement or therapeutic change can improve outcomes at lower cost		0.500
145	Access, Assessment & Care Management – reduction in administration costs through the implementation of the Mosaic IT system and related automation of invoices, billing, and financial transactions which will result in efficiencies		0.400
146	Commissioning – Memory Clinic funding – the CCG has agreed to a change of funding source for what is now a NHS service	0.200	
147	Commissioning – Housing 21 contract – further review of the extra care sheltered housing contract to find ways to switch to personal budgets and reduce overall cost (Policy)		0.250
148	Commissioning – review of service level agreements with third party organisations – redesign the prevention and diversion impact of investment in the voluntary sector, targeted at most cost effective user led outcomes		0.150
Saving reference	Detail of saving / efficiency	2015/16 £m	2016/17 £m
149	Mental Health – expand resettlement and care reviews of those in residential care and high cost packages, with promotion of independence support	0.400	
150	Mental Health – Section 75 review of partnership jointly with CCG with a view to more effective outcomes and targeted commissioning (Policy)		0.200
151	Commissioning – removal of recruitability payments to sheltered employment users - continue withdrawal of the subsidy for	0.104	

	apprenticeships whilst expanding support to volunteering, vocational and training opportunities in partnership with colleges (Policy)		
152	Provider – Fallings Heath respite care - review and replace residential provision with a wider range of alternatives, subject to consultation. No carers will receive a reduction	0.260	0.020
153	Provider – review and redesign day opportunities that produce cost effective non buildings based options using Gosscote as a " hub" for these users and staff (Policy)		0.517
154	Provider – Links to Work - replace current service with a redesigned service that supports users to access volunteering, vocational and training opportunities in partnership with colleges and employers (Policy)		0.300
155	Strategic Development – review community alarm and related services in line with the new charging policy, and the implementation of the Care Act. Proposals would require consultation and procurement follow on (Policy)		0.570
156	Strategic Development – withdraw subsidy to apprenticeships, whilst revising the vocational support, access to work placements and volunteering with LINKS to Work which will also be revised	0.271	
157	Strategic Development – review of Programme Office following the implementation of the Care Act and Children and Families Act, and related changes, leading to a reduced need for support with changes managed with the service	0.100	0.100
158	Strategic Development – review of Paris & Performance team following the implementation of the MOSAIC customer relationship management IT system and associated systems, leading to reduced due to new automated support functions	0.050	0.050
159	Money, Home, Job - review and restructure across the service	0.398	0.158
160	Money, Home, Job – cease the bus service that provides a mobile first stop shop (Policy)	0.022	
161	Money, Home, Job – provide more efficient ways for residents to pay in or collect money from the council		0.072
162	Money, Home, Job – improve the arrangements for residents contacting the council by telephone		0.096
	Total	3.689	6.204

Where draft savings options are denoted as ‘policy’ changes in the above table, these will be supported by further details as shown on the following pages.

Proposed capital investment

Table 3 details the capital investment for Social Care Portfolio over the next four years.

Table 3: Social Care Portfolio Capital Investment 2015/16 – 2018/19					
Capital Project	2015/16 £m	2016/17 £m	2017/18 £m	2018/19 £m	Source of funding

Preventative Adaptations & Supporting Independence	0.250	0.760	0.750	0.750	Council
Health through Warmth	0.150	0.150	0.150	0.150	Council
Aids & Adaptations	0.750	0.760	0.750	0.750	Council
Disabled Facilities Grant	1.632	1.632	1.632	1.632	External
Social Care Community Capacity Grant	0.797				External
Total	3.579	3.302	3.282	3.282	

A reserve list of schemes is also identified to start should funds become available in year. The following schemes are forecast –

- Preventative adaptations & Supporting Independence (additional allocation)
- Aids & Adaptations (additional allocation)

Draft Proposal – reference 147: Housing and Care 21 – Extra Care Services

Estimated Net Saving		
2015 / 2016	2016 / 2017	Implementation cost
-	£250,000	-

1. Description of the Savings Proposal

- 1.1 Further review of the extra-care sheltered housing contract during 2015/16 to find ways to switch to personal budgets and reduce overall costs by £250,000 during 2016/17 out of an annual sum of approximately £4.5 million.

2. Implications Associated With Savings Proposal

2.1 Corporate Plan

Allowing people to receive their service via a personal budget will help them to make decisions about how they can retain as much independence as possible within the physical environment of the extra care courts which are designed to support a community of residents in each scheme to take part in a choice of activities during the day.

2.2 Customers

Residents of the five extra care schemes run by Housing and Care 21.

2.3 Employees / Staffing

The staff are directly employed by Housing and Care 21 and further partnership work is needed before any direct impact on staffing levels can be identified.

2.4 Partners

The service is delivered by Housing and Care 21 under contract with the council.

2.5 **Economic Implications**

These services are specific to the contract with Housing and Care 21 so there is no significant impact on other parts of the Walsall economy.

2.6 **Environmental Implications**

No direct implications.

2.7 **Health and wellbeing implications**

The development of the extra care schemes has been successful in providing older people with an alternative to having to go in to a care home and thus maintaining a higher level of independence in line with the Health and Well Being Strategy.

2.8 **Other Council Services**

No implications for other council services.

3. **Associated Risks**

3.1 Reducing the extent to which individuals are supported to lead independent lives in the extra care courts may raise the risk of them having to enter residential care funded by the council at greater cost.

3.2 Some people (older, disabled, whose first language is not English) may find the personalisation agenda difficult to understand and may struggle to take on the additional responsibilities that go with having greater freedom and choice so the council will continue to offer a traditional approach to service delivery.

4. **Consultation and customer feedback**

4.1 The process of supporting people to receive a personal budget is handled via the individual assessment and care management process.

5. **Legal Implications**

5.1 The council will need to mutually agree these changes with Housing and Care21 with whom there is an ongoing positive working relationship.

5.2 If the variation to the Housing21 contract is deemed to be a material variation, then there is a risk of challenge that the council has not procured the varied contract in the correct way. Legal services will advise as to whether the proposed variation is likely to be deemed material.

6. **Equality Implications**

An initial screening form has been completed. A full EQIA will be completed as part of the review.

Draft Proposal – reference 150: Dudley Walsall Mental Health Partnership Trust

Estimated Net Saving		
2015 / 2016	2016 / 2017	Implementation cost
-	£200,000	-

1. Description of the Savings Proposal

- 1.1 There will be a review of the current S75 partnership agreement between Walsall Council and Dudley Walsall Mental Health Partnership Trust for the provision of mental health social care services. A number of social care staff (e.g. social workers and care co-ordinators) are hosted within the Trust so as to support improved joint working with health staff such as nurses and psychiatrists. In this way people with mental health problems are supported more effectively to recover from mental illness.
- 1.2 It is planned that the review and any subsequent changes to practice and management will deliver savings of £200k in 2016/17

2. Implications Associated With Savings Proposal

- 2.1 **Corporate Plan**
Supporting people to overcome mental health problems is an important part of promoting health and well-being and helping people to sustain their employment.
- 2.2 **Customers**
People with mental health problems who receive support from Dudley Walsall Mental Health Partnership Trust.
- 2.3 **Employees / Staffing**
Currently there is 39 FTE's council staff employed with this partnership arrangement. There are potential efficiencies in re-integration of Council staff with other Social Care functions.
- 2.4 **Partners**
The service is provided in partnership with Dudley Walsall Mental Health Partnership Trust.
- 2.5 **Economic Implications**
There no economic implications other than the impact on staff.

2.6 Environmental Implications

There are no environmental implications of this change.

2.7 Health and wellbeing implications

The focus will be primarily on statutory responsibilities to assess and meet the needs of people with mental health problems, thus promoting early recovery.

2.8 Other Council Services

The review will examine opportunities for further integration of adult social care services with children's services.

3. Associated Risks

- 3.1 A full risk analysis will be undertaken that assesses implications on staffing levels and the impact on the effectiveness of meeting needs. This saving could lead to a different relationship with the Trust as a result of aligning and defining roles in a different way.

4. Consultation and customer feedback

- 4.1 A full consultation with key patient and carer representative group will be undertaken as part of the review. All key partner agencies will be included.

5. Legal Implications

- 5.1 A full assessment of any risk arising out of legal duty and risk of challenge following implementation of this proposal will be undertaken as part of the review.

6. Equality Implications

- 6.1 An initial EqIA has been undertaken. A full EqIA will be conducted as part of the review.

Draft Proposal – references 151, 153 and 154: Employment and day time support services for people with a learning disability (consolidation of three budget lines: recruitability; day opportunities; and Links to Work.

Estimated Net Saving		
2015 / 2016	2016 / 2017	Implementation cost
£104,000	£817,000	-

1. Description of the Savings Proposal

- 1.1 The savings will be achieved by a review of the employment and daytime support services for people with learning disabilities. There are just over 300 people

using these services and the review will take their views into account and ensure that their eligible needs are met

- 1.2 This policy paper covers three separate budget lines of savings proposals: £104K from removal of recruitability payments to sheltered employment users, £517k from review and redesign of day opportunities; and £300K from Links To Work.
- 1.3 Specific savings targets are accredited to each service in each of the years 2015/16 and 2016/17. The review will encompass all three services and so the distribution of savings solutions in each year may be spread across all three services.
- 1.4 The review of these services will include options to increase the use of personal budgets, explore new ways of delivering services (e.g. social enterprise) and be conducted in partnership with other stakeholders. The review will explore ways in which those people currently attending these services will be able to access opportunities for training, apprenticeships, work placements, supported employment and so on.

2. **Implications Associated With Savings Proposal**

2.1 **Corporate Plan**

The overall aim is to support people with learning disabilities to achieve as much independence as possible by meaningful activities, training and employment. This is line with the corporate aim of supporting people to maintain as much independence, health and well-being as they can.

2.2 **Customers**

Adults with eligible social care needs with learning disability who currently use employment support services and/or day time support services.

2.3 **Employees / Staffing**

The savings may mean a number of redundancies as follows:

- Recruitability 3 FTEs
- Day Services 20 FTEs
- Links to Work 10 FTEs

2.4 **Partners**

These services are primarily provided by the Council, but there is some partnership working with voluntary agencies such as MENCAP. The review will be conducted in partnership with these agencies, colleges, user and carer groups, and other community organisations.

2.5 **Economic Implications**

The review will be conducted closely with businesses and colleges and aim to open up opportunities for training, apprenticeships, work placements, supported employment and so on.

2.6 Environmental Implications

There is no environmental impact.

2.7 Health and wellbeing implications

The aim of the review is to sustain the health and well-being of the people who are using these services by finding alternative ways in which they can receive support. A reshaping of the services will give service users and carers the opportunity to reflect up their packages of care, through a personal budget and direct payments system in order to get their life balances right.

2.8 Other Council Services

There is no direct impact upon other council services. It might be that there is less need for people to use transport provided by the council.

3. Associated Risks

Any changes that are proposed will have been developed in full consultation with service users and their families and all partners and stakeholders, and ensure that the health and well-being of eligible service users is maintained, keeping people safe. The statutory rights and duties of the Council will be fully met.

4. Consultation and customer feedback

A full consultation with all stakeholders including partner agencies, colleges, user and carer groups, and other community organisations will be conducted as part of the review process.

5. Legal Implications

Those people who are assessed as being eligible to receive social care support will continue to receive this in the form of a personal budget with which they will be able to choose how they are supported. This will include supported employment, work placements, training and other meaningful activities during the day.

6. Equality Implications

These services are targeted specifically upon people with disabilities, particularly learning disabilities. The full EQIA will be conducted as part of the review to ensure that equality issues are taken in to account.

Draft Proposal – reference 155: Review Community Alarm and Related services

Estimated Net Saving		
2015 / 2016	2016 / 2017	Implementation cost
-	£570,000	-

1. Description of the Savings Proposal

- 1.1 There will be a review of Community Alarm and related services which are linked to call handling and response services. The review will also consider related charging arrangements for these services.
- 1.2 It is planned that the review and any subsequent changes to practice and management will deliver savings of £570k in 2016/17.

2. Implications Associated With Savings Proposal

2.1 Corporate Plan

Community alarm and response services support people to retain their independence at home.

2.2 Customers

People who are using the council community alarm service.

2.3 Employees / Staffing

There is a call handling team and staff providing a rapid response to call outs and they may be affected by the outcome of this review.

2.4 Partners

This is a council run service.

2.5 Economic Implications

There no economic implications other than the impact on staff.

2.6 Environmental Implications

There are no environmental implications of this change.

2.7 Health and wellbeing implications

People access the community alarm service because of the extra sense of security associated with their being a rapid response to an incident in the home such as a fall. The review will ensure that access to a community alarm service is still available for those who wish to purchase it, and thus promote independence, health and well-being.

2.8 **Other Council Services**

These services are provided within the Social Care and Inclusion Directorate. There may be strong link in the future to other call handling arrangements within the council.

3. **Associated Risks**

- 3.1 A full risk analysis will be undertaken to ensure that a community alarm service is available to those who wish to purchase it.

4. **Consultation and customer feedback**

- 4.1 A full consultation with key user and carer representative groups will be undertaken as part of the review. All key partner agencies will be included.

5. **Legal Implications**

- 5.1 A full assessment of any risk arising out of legal duty and risk of challenge following implementation of this proposal will be undertaken as part of the review.

6. **Equality Implications**

- 6.1 An initial EqlA has been undertaken. A full EqlA will be conducted as part of the review.

Draft Proposal – reference 160: Cease the bus service that provides a mobile First Stop Shop

Estimated Net Saving		
2015 / 2016	2016 / 2017	Implementation cost
£22,253	-	-

1. **Description of the Savings Proposal**

- 1.1 The proposal involves the decommissioning of the First Stop Shop Express. The bus currently visits limited locations, Willenhall and Darlaston on a regular basis giving residents and shoppers the opportunity to hop on board and enquire about council services. The bus has computers which enable customers to apply for bus

passes, report fly tipping, report anti-social behaviour or access information about other council services.

2. **Implications Associated With Savings Proposal**

2.1 **Corporate Plan**

The proposal may have a very minor impact upon the delivery of the following aspects of the Council's *priorities set out in the Sustainable Community Strategy "the Walsall Plan"*:

- **Improving health, including wellbeing and independence for older people.**

The bus may be contributing towards promoting independence for some older people who access it when it stops within their community.

- **Creating safe sustainable and inclusive communities.**

The bus may be contributing towards making communities more inclusive by providing access to report issues such as anti-social behaviour reporting or fly tipping.

2.2 **Customers**

- Providing the bus service is not a statutory function.
- On average the bus is accessed by 14 customers per working day.
- Many services cannot be dealt with directly by the staff on the bus, benefit enquiries for example are redirected via a telephone number to staff at the civic centre.

2.3 **Employees / Staffing**

Two members of staff are required every time the bus is used. Removing this facility will allow a review of workloads and it is expected that this will allow a reduction of one member of staff.

2.4 **Partners**

No Implications.

2.5 **Economic Implications**

No Implications.

2.6 **Environmental Implications**

Reduction in fuel emissions.

2.7 **Health and wellbeing implications**

There could be an impact on wellbeing but this would be very limited, as all services are also offered in libraries and via the First Stop Shop at the Civic Centre.

2.8 **Other Council Services**

There may be a marginal increase in front-line demand within libraries or the first stop shop.

3. **Associated Risks**
No identified risk because the same services are available in the first stop shop and other locations.
4. **Consultation and customer feedback**
Consultation will be undertaken as part of the council's overall budget consultation. Additional face to face consultation will be taking place with customers that use the bus in November 2014.
5. **Legal Implications**
The legal implications are minimal as it is not a statutory service and service users can use other suitable routes to access the council services that they need.
6. **Equality Implications**
An equality impact assessment has been carried out which indicates that there will be limited impact on customers given the small number of people that access services via the bus and the existence of other access routes such as the First Stop Shop. The EqIA will be reviewed following the face to face consultation planned for November 2014.

PORTFOLIO: HEALTH

Summary of services within the portfolio

Health Improvement:

- Sexual health services - contraception
- Sexual health services - advice, prevention and promotion
- NHS health check programme
- Programmes and services to reduce levels of adult obesity
- Programmes and services to reduce levels of childhood obesity
- National child measurement programme
- Nutrition initiatives including promotion of breastfeeding
- Programmes and services to increase adult physical activity levels
- Programmes and services to increase children's physical activity levels
- Adult Drug misuse - prevention and treatment programmes
- Adult Alcohol misuse - prevention and treatment programmes
- Drug and alcohol prevention and treatment services – young people
- Smoking and tobacco - Stop smoking services and interventions
- Smoking and tobacco - Wider tobacco control
- Children 5–19 public health programmes including the School Nursing Service
- Health and work, including the Healthy Workplace Programme
- Programmes to prevent accidents including falls prevention
- Public mental health promotion
- Dental public health promotion
- Water fluoridation

Health Protection:

- Sexual health services – Sexually transmitted infection testing and treatment
- Local authority role in health protection
- Local authority role in surveillance and control of infectious disease
- Public health aspects of environmental hazards protection
- Health emergency planning including cold weather and heat wave planning

Healthcare Public Health:

- Interventions to identify and reduce risk of disease by screening
- Actions to mitigate poor physical and mental health
- Actions to reduce long term disability and loss of independence
- Specialist public health advice
- Improving primary care

General prevention activities

- Community safety, violence prevention and social exclusion

- Local initiatives to reduce excess deaths from seasonal mortality
- Population level interventions to reduce and prevent birth defects (supporting role)
- Wider determinants of health

Information and Intelligence

- Population needs assessment and strategy

Portfolio Objectives / Outcomes / Purpose

Walsall council receives a ring fenced grant from the Department of Health, via Public Health England (PHE), to enable the council to discharge its statutory duty to achieve population level improvements in public health. In 2014/15 the council received an allocation of £15.8 million.

The Public Health grant is provided to the council to discharge its responsibilities to:

- Improve significantly the health and wellbeing of local populations
- Carry out health protection and health improvement functions delegated from the Secretary of State
- Reduce health inequalities across the life course, including within hard to reach groups
- Ensure the provision of population healthcare advice.

Our key priorities, informed by the Joint Strategic Needs Assessment and outlined in the Walsall Health and Wellbeing Strategy, are to:

1. Improve health and wellbeing in Walsall
2. Reduce health inequalities
3. Give every child the best start in life
4. Improve health and wellbeing through healthy lifestyles: Making 'healthier choices easier'
5. Reduce the burden of preventable disease, disability and death
6. Promote healthy ageing and independent living.

In 2014/15, £1.2M of the Public Health grant has been released into a Transformation Fund, through a process of disinvestment in some existing Public Health services. Money released in this way will be reinvested across council service areas which will be commissioned to deliver Public Health outcomes.

The Public Health Transformation Fund aims to:

- Support the delivery of priority local health and wellbeing activities
- Facilitate collaborative and integrated approaches to population health and wellbeing
- Improve value for money by evaluating the outcomes of activities and the associated impact on Walsall residents, the Council and its partners.
- Leverage wider public health benefits across the far larger spend of Walsall Council.

Financial summary

Confirmation has been received that the 2015/16 grant allocation will not be subject to a financial uplift, therefore we expect this to be £15.8m. We await confirmation of the

following three years allocation. Table 1 details the savings and efficiencies for the Health Portfolio for both 2015/16 and 2016/17 and table 2, the proposed areas for investment.

There are no capital schemes proposed for this portfolio.

Table 1: Proposed savings and efficiencies

Programme Area	Potential Savings 2015/16 £	Potential Savings 2016/17 £	What is the savings option?	Details of the option	Impact on the customer / purpose / risks	Mitigations
PH1 : Sexual Health: Contraception services, prevention, testing and treatment of sexually transmitted infections (STIs).	53,000	70,000	Reduce contract values for some elements of sexual health activity	Rationalisation of services providing HIV prevention activity, reduction of Chlamydia screening and other outreach activity. Redesign of service to provide more integrated delivery.	Increased STI rates, and teenage conceptions. Reduced capacity to diagnose HIV at an early treatable stage of infection. Some prevention work will be lost and reduced ability to manage demand for expensive mandated open access Genitourinary Medicine services. Increased costs to the NHS and other partners.	Outreach activity to be included in the contracts for core sexual health services
PH2 : Drugs and Alcohol: Prevention and treatment services for alcohol and drug misuse	390,141	70,000	Reduce expenditure through a retendering exercise and a reducing year by year contract values.	Reduce capacity of the service through tendering a redesigned service with a single provider agency to maximise economies of scale. Optimise the transfer of patients into primary care to reduce drug costs.	Reduced prevention activity, increased waiting times, potential impact upon safeguarding for vulnerable children and adults, negative impact on crime and community safety, increased costs to NHS with increased hospital admissions and potential increase in blood-borne viruses and drug and alcohol related overdose and deaths.	Seek funding through Safer Walsall Partnerships for crime reduction elements of the service, although this could create additional referrals to a service operating at full capacity.
PH3 : 0 to 5 Healthy Child Programme: Promotion of breastfeeding and programmes to reduce maternal obesity	45,000	0	Reduce contract value, reduce staffing and scope of service	Reduce capacity of whole service Reduce cost of specialist midwife Decommission the Maternal and Early Years service.	Impact on infant mortality and morbidity. Possible negative impact on link between midwifery service and breastfeeding support service. Breastfeeding is protective against obesity which may rise as a result. Decrease in Healthy Start vitamins in pregnancy delivered (currently very low). Less support for Maternal obesity in pregnancy which increases costs of care. Groups that will notice the difference: Parents and carers, Children's Centres.	Increased role of community midwives and health visitors with an increase in the role of volunteer peer supporters.

Programme Area	Potential Savings 2015/16 £	Potential Savings 2016/17 £	What is the savings option?	Details of the option	Impact on the customer / purpose / risks	Mitigations
PH4 : 5 to 19 Healthy Child Programme: Walsall school nursing service this is the public health nursing service for children aged 5 to 19 years	100,000	0	Reduce contract value with loss of 1 WTE (currently 14 school nurses against a recommended 19 school nurses) and reduced scope of service	Reduce capacity of the service through tendering a redesigned service with a single provider agency.	Increased longer term costs. Teenage pregnancy increases, emotional health and wellbeing decreases leading to increase in antisocial behaviour, more parenting support needed, increase in numbers of looked after children increasing, less support for behaviour management. Less support for care leavers and school staff. Reduction in parenting courses offered. Elements of Public Health prevention work on sex and relationships education (SRE), support for governors, support for special educational needs and disabilities and work with young carers may be reduced.	New provider may demonstrate efficiency savings and reduced overheads so be able to deliver a more comprehensive service.
PH5 : Healthy Weight/Physical activity. These services help people to maintain a healthy weight through lifestyle support	155,000	45,000	Decommission /reduce investment in adult weight management programmes	Remodelling the service through procurement should enable us to provide a service to the same number of patients (albeit at lower level of intervention) within the reduced financial envelope	Decommission specialist weight management services. Impact on residents who are very overweight and have not been able to lose weight though less intensive programmes. Impact on NHS England as may lead to increase in demand for bariatric surgery and other health services.	As the service is being remodelled service availability for adults would continue, although there would be reduced access to more intensive programmes. However, there will be access to new less intensive services. Increased targeting of services would help to mitigate some of the risks.

Programme Area	Potential Savings 2015/16 £	Potential Savings 2016/17 £	What is the savings option?	Details of the option	Impact on the customer / purpose / risks	Mitigations
PH6 : Health Trainers. These services help people to develop healthier behaviour and lifestyles in their own communities	62,000	20,000	Reduce contract value.	Restrict support to certain subgroups e.g. those at highest risk of long term conditions. Negotiate a lower payment for the existing service.	A limit on the support offered may not achieve the results anticipated from the programme. Negotiating a lower payment will result in a more limited service.	Increased targeting of services on vulnerable groups will maximise reduction of health inequalities.
PH7 : Work and Health. These services aim to improve the health of the working age population	30,000	10,000	Reduce investment in healthy workplace programme support. Generate income through charging for Healthy Workplace Programme.	Use Council Public Health, HR and Environmental Health support to supplement the healthy workplace programme. Charge companies who do not meet inclusion criteria for access to healthy workplace programme or individual elements depending on the needs of the company.	Reduced capacity through healthy workplace programme to target hard to reach groups with poor health outcomes. Less resource to support small and medium sized enterprises Reduced capacity to develop structures and provide targeted support to residents who are out of work due to ill health.	Transformation funding used to increase Council HR and Health and Safety support to the programme. Costs of programme will need to be covered by local companies that do not meet inclusion criteria.
PH8 : Local Authority Role In Health Protection These services protect the population from infections including those acquired in hospitals	134,000	0	Disinvestment from Hospital Infection Control	This can be done in 2015/16 following discussion with the current providers and action to mitigate the impact of disinvestment in 2015/16 if necessary	Reduced levers on hospital infection control services with impact on wider community, care homes and primary care	Walsall Healthcare Trust to absorb costs of service.
PH9 : Population Mental Health - These services aim to improve the emotional wellbeing of the population	133,000	0	Reduce investment in population mental health programmes.	Decommission two contracts relating to population mental health	Extremely limited population mental health initiatives, impact on mental wellbeing and suicide rates	Explore opportunities to align with social care through Public Health Transformation Funding. Roll out of the 5 Ways to Wellbeing initiative

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PH10 : NHS Health Checks programme: The NHS Health Check programme is provided to 40 to 74 year olds to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia	12,000	5,000	Reduce budget for NHS Health Checks programme	Achieve savings from I.T. software and programme support	Minimal	n/a
PH11 : Employees and overheads	90,000	30,000	Reduce staffing and spend on departmental overheads	Vacancy management / replacement of vacant posts at lower grades	Reduced expertise in the department, recruitment and retention adversely affected	Increase matrix working.
Total	1,204,141	250,000				

Table 2 - Proposed areas for Transformation Fund investment

Investment Area	Service Area
Teenage Pregnancy	IYPSS
Early Intervention/Children's Centres	Early Intervention and Family Support
Healthy Schools Programme	School Improvement
Air Quality and Respiratory Health	Pollution Control
Healthy Takeaway Awards, Workplace Health and Safety, Tobacco Control	Environmental Health
Sports development	Sports and Leisure Services
Health and work	Regeneration, Employment and Skills
Occupational Health and work	Human Resources
Health through warmth	Housing, money, home, jobs
Community allotments/ranger service	Green Spaces
Possible areas identified including drug rehabilitation, community development, mental health, advocacy older people	Social Care