



Havering

LONDON BOROUGH

Title	Public Health Spending Review Consultation – Summary of Findings
Date	10th March 2016
Author	Daren Mulley, Public Health Commissioner
Version	1.0
Status	Draft
Release	10th March 2016

1. Introduction

As part of the Council’s public health spending review, the public consultation on the public health budget proposals launched on Wednesday 10th February 2016 and ran for four weeks, closing on 9th March 2016. The consultation process was publicised through Havering’s own communication channels. Analysis of the data was completed by the Council’s Public Health service.

2. Consultation Process

For the consultation, a report and survey were produced to support the engagement and record the views of stakeholders and wider public. The report, titled ‘Consultation on the use of the public health grant in Havering’¹ outlined the Council’s priorities for maintaining investment in public health services. In addition, the report also featured the details of the potential services that could be decommissioned in the Public Health spending review. The report concluded with an invitation for stakeholders and the wider public to share their views on the proposal through an on-line or postal survey or by email.

Regarding the on-line and email/postal consultation, the survey consisted of three questions. The first question asked survey users to identify themselves as either residents, Council Staff, Councillor, Health & Social professional or a member of staff from one of the services facing possible decommissioning. Questions two and three consisted of two stages. The first stage was a closed question inviting survey users to answer yes or no. The second stage invited users to add their comments to the two questions below;

- Question 2: Do you support the proposal to direct the public health grant to the areas outlined?

¹ Havering Council (2016) *Consultation on the use of the public health grant in Havering*
<https://www.havering.gov.uk/Documents/Public-health/Public-Health-Grant-Consultation.pdf>

- Question 3: Do you agree that the services suggested for decommissioning should be decommissioned?

3. Publicity

The consultation was well supported with publicity, including:

- Link to Public health landing page on the Council's website
- Link to the Council's Consultations web page where consultation is publicised alongside all other consultations
- Link to publication within Havering Care Network
- The article was published within The News (Global Email)
- The article was published within the Health & Well-being e-newsletter

4. Structure of the Report

What follows is a summary report of the responses received to the consultation. In Section 5, data is presented regarding the respondents of the survey. In Section 6, the report summarises an analysis of the key themes and issues that arose from the comments that respondents added to each of the two survey questions through the on-line survey. In Section 7, the report summarises the email and postal responses to the consultation. For both sections 6 and 7, full transcripts of the comments are available on request. The final section of the report concludes with a reflection on the significance of the report within the wider context of the Council's need to make savings.

5. Survey Responses

In total, 52 people responded to the on-line survey. An analysis of the respondents showed the following groups and individuals completed the survey;

- 25 Havering Residents
- 12 Council Staff Members
- 9 Health and social care professionals
- 1 Secondary School staff member
- 2 Gym members
- 1 Voluntary Sector Organisation (name not given)
- 2 Staff members from a service that's at risk of decommissioning

In total, the Council received 4 responses by email. The first email was a joint response on behalf of BHR University Hospitals NHS Trust Joint Chairs of Trust Wide Smoking Cessation Group and the Honorary Consultant Physician and Smoke Free Lead. The other 3 emails were sent by one pharmacist.

6. On-line Survey Analysis

6.1 Question One: Do you support the proposal to direct the public health grant to the areas outlined?

In total, 51 people responded to this question with 53% of respondents supporting the public health grant proposal and 47% disagreeing with the proposal. Regarding additional comments, in total 24 survey users responded with a breakdown of the themes outlined in the table below;

Themes	No of Comments
Smoking	6
General Public Health Services Proposals	6
Children & Young People Services	6
Cancer Physical Activity Programme	4
Health Zones	2

Table 1: Breakdown of Comments by Theme for Question Two

In summary, the comments on smoking focused on the effectiveness of smoking cessation interventions and questioning the future access of smoking cessation services locally. In addition, respondents stated that smoking remains the leading cause of preventable diseases that impact upon health inequalities and the likely increase in demand for NHS care to treat long-term conditions caused by smoking. The comments regarding public health services highlighted the importance of maintaining investment in these services in order to prevent future health inequalities. In contrast, respondents argued that the current services were too targeted at certain socio-economic groups. With regards to children and young people, responses highlighted the importance of the targeted nature of the services and their work with children at risk of sexual exploitation. Comments on the physical activity programme for cancer patients came from service users who briefly described the positive benefits of participating in the programme. Finally, the two comments on health zones questioned the proposal to place them in local libraries.

6.2 Question Two: Do you agree that the services suggested for decommissioning should be decommissioned?

In total, 52 people responded to this question with 85% disagreeing and 15% agreeing to the decommissioning plans. Regarding additional comments, in total 41 survey users responded focusing on the themes below;

Themes	No of Comments
Cancer Recovery Programme	17
Smoking	16
Children & Young People Services	6
Obesity	1
Chlamydia	1

Table 2: Breakdown of Comments by Theme for Question Three

In summary, the survey received a high proportion of comments from service users on their experience of participating in the 'Moving Forward' physical activity programme for cancer patients. This included service users highlighting the benefits of the programme citing increased confidence, physical health and peer support that

has assisted in improving their recovery. In addition, the Council's on-line survey also received a number of comments from both service users and professionals who shared their views on the likely negative impact of decommissioning the stop smoking service. This included the views that there is a strong evidence base on the efficacy of stop smoking services, that a reduction in access to stop smoking support will impact disadvantaged groups as well as increase the risk of longer term costs to the NHS and the Council. With regards to children and young people services, responses focused on the impact of reducing services for vulnerable young people who will be at risk of poor mental health and sexual health outcomes. The single comment on chlamydia proposed a delay in decommissioning for the pan-London testing service to begin in 2017. The single comment on obesity suggested the importance of educating children on healthy eating in order to prevent obesity in adulthood.

7. Postal & Email Responses

The Council received no surveys by post. With regards to emails, the Council received 4 emails.

In summary, the first email was a joint response on behalf of BHR University Hospitals NHS Trust Joint Chairs of Trust Wide Smoking Cessation Group and the Honorary Consultant Physician and Smoke Free Lead. In summary, this response was concerned that disinvesting in SSS would have a disproportionate effect on disadvantaged groups as smoking prevalence is much higher in these groups and they need more intensive support to quit. In addition, the response argued that disinvestment would significantly increase acute and emergency admissions to local NHS Trusts and long-term social care costs. The other three emails were sent by a pharmacist. In summary, the responses put forward the views that health checks should be decommissioned instead of the stop smoking service whilst questioning the efficacy of e-cigarettes in reducing smoking.

8. Significance of the Consultation

The results of this consultation are one element which the Council needs to take into account when setting priorities and making decisions. Other factors which should be given consideration include:

- a) The need to reduce the Public Health grant spend
- b) Priorities outlined in the Public Health spending review
- c) The demographic make-up of the Borough that impact upon demand for services
- d) Policy changes which impact on the Council
- e) Local political priorities

Cumulative Equalities Impact Assessment

Public Health Spending Review

Introduction and context

Havering has a diverse community made up of many different groups and individuals. The Council values diversity and believes it essential to try to understand the different contributions, perspectives and experience that people from different backgrounds bring to our community.

The Public Sector Equality Duties and Financial Decisions

The recent downturn in the economic climate has had a significant impact on public authorities. Financial constraints have already resulted in many authorities, including Havering, making important decisions about the services they provide. These decisions include efficiency drives, budget reductions, reorganisations, redundancies and service reductions.

The Equality and Human Rights Commission is concerned that some decisions may have a disproportionate effect on certain groups of people, and may be contrary to the statutory equality obligations to which public authorities are subject. While acknowledging the difficult economic environment in which public authorities are now operating, the Commission is emphasising the mandatory nature of the equality duties, and the importance of public authorities meeting their duties when making significant decisions. The equality duties are legal obligations which should remain a priority, even in times of economic difficulty. The duties are a valuable tool to help ensure that decisions do not create or perpetuate inequality.

To ensure that its services and decisions do not discriminate against or adversely affect any equality group differently, the Council undertakes Equalities Impact Assessments (EIAs) of individual propositions and Cumulative Equality Impact Assessments of packages of proposals that are related to one another (e.g. as a result of the annual budget setting process). This analysis is currently being undertaken in respect of the Public Health spending review. The individual EIAs and this overarching, cumulative EIA of the entire package of proposals identify what effect, or likely effect, will follow from the implementation of the review for different groups in the community.

Each relevant service area has identified existing arrangements that can be decommissioned in order to achieve the required savings. Each individual proposal has been subject to an EIA which sets out how the Council will work with providers and service users to ensure the impact of the loss of service is minimised as far as possible. Where possible, the Council's overarching approach to achieving the target savings necessary from the review has been to focus its limited resources on those with the greatest needs.

As with most public sector organisations, the achievement of budget reductions in Havering is an ongoing process and as such the EIAs supporting the review, as well as this Cumulative Equality Impact Assessment, are living documents that will continue to be updated.

Findings of the Cumulative Equality Impact Assessment and Mitigating Actions

Our analysis of the potential impacts of all of our spending review proposals has shown that there may be some cumulative impacts on the following groups:

a) Children & young people

The majority of these specific proposals will impact directly on children and young people; on those services designed for and specifically targeted at certain age ranges and cohorts of children and young people (e.g. children identified as being in need of weight management support, young women who require counselling and young people at risk of poor sexual health outcomes) and those more generally available to these age groups. However, this must be seen in the context of the council's overall expenditure on children and young people rising subsequently to accommodate additional demands to safeguard young people through the council's statutory children's services and through continued investment in early help.

To mitigate the impacts of this as far as possible, the Council will work with providers to signpost children, young people and services to alternative local and national services and to develop better and earlier types of help and services to support children, young people and families to prevent their needs from escalating. By doing this the Council has sought to ensure that children and young people in the borough have access to the widest range of opportunities to achieve their potential within the financial envelope that is available. Increasingly, as resources reduce, we will be targeting our resources on the most vulnerable children and families.

b) Adults

One of the proposals will impact directly on adults, in particular the stop smoking service that has been designed and targeted at certain groups of adults who smoke including pregnant women and those from other disadvantaged groups who are more likely to smoke and less able to get support for themselves. However, there has been a shift in both tobacco use and nicotine replacement product use. An increasing number of Havering residents are accessing nicotine replacement products themselves, most notably the use of e-cigarettes. In addition, there has also been an increase in the number of on-line tools that can provide support for smokers who wish to quit. To mitigate the impacts of this as far as possible, the Council will therefore work with the provider to signpost adults to alternative local and national services for support in reducing their smoking.

Additional Mitigating Actions

As well as the actions described above, the Council will formally notify and work with all providers in developing a decommissioning process appropriate to the circumstances of each service. In decommissioning each service, the Council will have due regard to lawfulness, fairness, openness and transparency when working with each provider. This will involve both the Council and provider developing a robust service decommissioning plan that will include assigning roles and responsibilities, prioritising actions and timescales; consultation and communications so that the provider, service users and relevant stakeholders are informed of the closure of each service and the information to access alternative local and national support services.

