

ANNEX B: SUMMARY TABLE 2016/17 PUBLIC HEALTH SAVINGS

Savings proposal	Value £000	Impact on outcomes	Impact on equalities groups	Strategic fit	Feasibility of implementation/ Specific risks
Sexual health – reduction in budgets for out of area treatments Ref. BP table 3: E/R 6.001, E/R 6.002	26k (Pboro) + 115k (other areas) = £141k	No impact – the saving is based on predicted underspend for a demand led service	No impact – the saving is based on predicted underspend	Good: Our strategy has been to increase the accessibility of community sexual health clinics within the County (new sexual health contract with CCS) reducing need for out of county attendances.	Feasible - predicted underspend. Some risk of a cost pressure if there is unexpected increase in out of area activity with no budget allocated.
Smoking cessation – predicted underspend on medication and payments to GPs and pharmacies Ref. BP table 3: E/R 6.003, E/R 6.004.	£170k	Some impact Smoking cessation services improve health outcomes and save money for the NHS and social care. Therefore it would be better for the health system if demand was higher. However prevalence of smoking has fallen in Cambridgeshire so this level of underspend may be inevitable.	Smoking is more common in areas of deprivation, some minority ethnic groups, people with mental health problems.	This is an observed reduction in demand rather than a strategic intention. This level of saving would still allow piloting of NICE guidance on smoking harm reduction, which is very cost effective.	Feasible – predicted underspend given reduction in demand. Some risk of a cost pressure if demand rises again with insufficient budget allocated.
Physical activity: remove vacant post in PH programmes team Ref. BP table 3: E/R 6.005	£15k	Minimal impact – the post has been vacant some time and responsibilities will be delivered through new integrated lifestyles contract	Minimal impact	Good – our strategy has been to bring a range of lifestyle services together into one integrated contract	Feasible
Resource library underspend – no contingency for additional health promotion resources Ref. BP table 3: E/R 6.006	£5k	Minimal impact – if resources are needed, this will have to be funded from project budgets	Minimal impact	Neutral	Feasible
Public health directorate staffing – vacancy management Ref. BP table 3: E/R 6.007	£100k	Some impact on delivery if vacancies are held when they would otherwise be filled. However this saving is in line with the level of underspend due to staff turnover and vacancies observed in previous years.	No obvious impact – although this would depend on the nature of vacancies.	Neutral	Likely to be feasible given observation of previous years.
Income generation – shared DPH post and PH office Peterborough Ref. BP table 3: E/R 7.103	£80k	Minimal, providing workload across two authorities is manageable within existing resources.	Minimal	Good strategic fit – encourages joint working with Cambridgeshire and Peterborough CCG on wider health issues.	Already undergoing one year trial period, appears feasible.