

COMMUNITY IMPACT ASSESSMENT

Directorate / Service Area		Officer undertaking the assessment
Public Health		Name: Dr Liz Robin Job Title: Director of Public Health Contact details: 01223 703259 liz.robin@cambridgeshire.gov.uk
Service / Document / Function being assessed		
2016/17 Public Health Savings: Out of Area Sexual Health Budget Reduction		
Business Plan Proposal Number (if relevant)	E/R 6.001 and 6.002	
Aims and Objectives of Service / Document / Function		
Sexual health clinics offer testing, treatment and contact tracing for people at risk of sexually transmitted infections. Services are 'open access' – i.e. people can refer themselves and are entitled to be seen. They are a mandated local authority public health service under the Health and Social Care Act (2012). When a Cambridgeshire resident is seen at a sexual health clinic funded by another local authority, Cambridgeshire County Council must pay for their treatment and a budget is set aside for this.		
What is changing?		
Budgets set aside for treatment of Cambridgeshire residents at sexual health clinics in other areas have seen lower demand than expected. Following procurement and implementation of a new sexual health service run by Cambridgeshire Community Services in October 2014, Cambridgeshire residents now have good access to community sexual health clinics around the county. The saving is therefore based on observed demand against the out-of-area sexual health budget being lower than predicted, resulting in underspend. Patients will still be entitled to attend out of area sexual health clinics if they wish to do so.		
Who is involved in this impact assessment?		
e.g. Council officers, partners, service users and community representatives.		
This CIA was compiled by Council officers		

What will the impact be?

Tick to indicate if the impact on each of the following protected characteristics is positive, neutral or negative.

Impact	Positive	Neutral	Negative
Age		X	
Disability		X	
Gender reassignment		X	
Marriage and civil partnership		X	
Pregnancy and maternity		X	
Race		X	

Impact	Positive	Neutral	Negative
Religion or belief		X	
Sex		X	
Sexual orientation		X	
The following additional characteristics can be significant in areas of Cambridgeshire.			
Rural isolation		X	
Deprivation		X	

For each of the above characteristics where there is a positive, negative and / or neutral impact, please provide details, including evidence for this view. Describe the actions that will be taken to mitigate any negative impacts and how the actions are to be recorded and monitored. Describe any issues that may need to be addressed or opportunities that may arise.

Positive Impact

None

Negative Impact

None

Neutral Impact

Because this saving is based on observed demand being lower than allowed for, and local residents are still entitled to attend out of area sexual health clinics if they wish to, this saving should not impact on any equality groups.

Issues or Opportunities that may need to be addressed

If demand for out of area sexual health clinics increases unexpectedly, then savings may be less than predicted and alternative in-year savings would be required.

Community Cohesion

If it is relevant to your area you should also consider the impact on community cohesion.

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Directorate / Service Area		Officer undertaking the assessment	
Public Health		Name: Dr Liz Robin Job Title: Director of Public Health Contact details: 01223 703259 liz.robins@cambridgeshire.gov.uk	
Service / Document / Function being assessed			
2016/17 Public Health Savings: Smoking cessation payments to GPs and pharmacies plus medication costs			
Business Plan Proposal Number (if relevant)	E/R 6.003 E/R 6.004		
Aims and Objectives of Service / Document / Function			
The County Council commissions 'level 2' smoking cessation services from GP practices and pharmacies. These services support people who wish to stop smoking and provide a combination of medication such as nicotine replacement therapy (NRT) on prescription, and evidence based one to one or group support for behaviour change. People are four times more likely to succeed in quitting when they use this service than if they try to quit without support or medication. When people succeed in stopping smoking is results in significant improvement to their health and in overall savings to the NHS due to their reduced risk of heart and circulatory disease, lung disease and cancers. It is important that smoking cessation services are easily accessible for people to use, so in Cambridgeshire we have tried to ensure that every GP practice offers a smoking cessation service – either through their own staff, for which payment is made, or through County Council CAMQUIT staff going into the GP practice to deliver clinics.			
What is changing?			
The demand for smoking cessation services in GP practices and pharmacies has reduced over the past few years. There has been a fall in the overall percentage of adults who smoke in the county, and increased usage of electronic cigarettes. Because GPs and pharmacies are paid per person receiving the service, the spend on these services has therefore reduced. Fewer people using the service also means lower medication costs. Due to other pressures, an increased number of GP practices have asked CAMQUIT staff to come in and provide an on-site clinic, which means they are no longer paid. These factors mean that the predicted spend against budgets for smoking cessation services and GP practices have reduced. The saving is therefore made against a predicted reduction in demand on the smoking cessation budget, but smoking cessation services will continue to be easily accessible around the County.			
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Religion or belief		X	
Sex		X	

Sexual orientation		X	
The following additional characteristics can be significant in areas of Cambridgeshire.			
Rural isolation		X	

Deprivation		X	
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Positive Impact
None
Negative Impact
None
Neutral Impact
Because this saving is based on observed demand being lower than allowed for, and local residents are still able to attend smoking cessation services it should not impact on equalities groups. The scale of the saving is such that funding should still be available to promote smoking cessation services in areas of higher deprivation which also have higher smoking rates, and to pilot a harm reduction model for smokers who wish to quit more gradually, in accordance with NICE guidance .
Issues or Opportunities that may need to be addressed
Because this saving relies on a forecast reduction in demand, if demand rises unexpectedly then in-year savings may need to be found from alternative sources.

Community Cohesion

If it is relevant to your area you should also consider the impact on community cohesion.

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Directorate / Service Area		Officer undertaking the assessment	
Public Health		Name: Dr Liz Robin Job Title: Director of Public Health Contact details: 01223 703259 liz.robin@cambridgeshire.gov.uk	
Service / Document / Function being assessed			
2016/17 Public Health Savings: Vacancy management and removal			
Business Plan Proposal Number (if relevant)	E/R 6.005 and 6.007		
Aims and Objectives of Service / Document / Function			
The public health directorate staff carry out a range of functions to improve and protect health. These include provision of specialist public health advice and analysis, commissioning of public health services (over 80% of the total directorate budget), and direct delivery of some services such as CAMQUIT.			
What is changing?			
The salary budget for the directorate of approximately £2.4M has previously reflected the salaries of all posts, including vacant posts. This results in budgets being underspent as there are always some vacancies in the directorate due to staff turnover. It is proposed to reduce the salary budget by £115k, firstly by removing a vacant physical activity specialist post, whose role is now covered by a new contract with 'Everyone Health' for an integrated lifestyle service, and secondly by allowing a £100k saving for vacancy management – on the assumption that there will be an average vacancy rate of around 4.2% of all funded posts during 2016/17 which will be covered by existing staff.			
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and how the actions are to be recorded and monitored. Describe any issues that may need to be addressed or opportunities that may arise.

Positive Impact
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Negative Impact
None
Neutral Impact
It is possible that holding of vacancies would place additional pressure on public health staff with some impact on services to residents. However, because the vacancies in the public health directorate may affect a variety of different roles over the year, there is no predictable impact on one particular equalities group. The public health directorate has functioned effectively over recent years with this level of vacancies, resulting in underspend on the staff budget.
Issues or Opportunities that may need to be addressed

Community Cohesion

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COMMUNITY IMPACT ASSESSMENT

Directorate / Service Area		Officer undertaking the assessment	
Public Health		Name: Val Thomas Job Title: Director of Customer Services and Transformation Contact details:	
Service / Document / Function being assessed			
2016/17 Public Health Savings: Sharing of DPH and some public health staff members with Peterborough City Council			
Business Plan Proposal Number (if relevant)	E/R 7.103		
Aims and Objectives of Service / Document / Function			
The public health directorate staff carry out a range of functions to improve and protect health. These include provision of specialist public health advice and analysis, commissioning of public health services (over 80% of the total directorate budget), and direct delivery of some services such as CAMQUIT. The Director of Public Health oversees the work of the public health directorate and is a member of the Councils' Strategic Management Team.			
What is changing?			
The Council is piloting a shared Director of Public Health with Peterborough City Council and this also involves some 'subject matter expert' public health staff sharing their time with Peterborough. This arrangement brings some strategic advantages as several partner agencies such as the Cambridgeshire and Peterborough Clinical Commissioning Group, NHS England, the police and the fire service work across the two local authorities. This means that for a number of meetings, one DPH or member of public health staff can attend for both Cambridgeshire and Peterborough, when previously two would have been required. However it also means some reduction in the time spent on Cambridgeshire work for the staff involved.			
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Positive Impact

Deprivation: Because residents in Fenland, which has higher deprivation than other districts in Cambridgeshire, often use Peterborough services, there may be positive benefits to Fenland residents from a public health team which works across and understands services in both local authorities. This knowledge would make 'gaps' in service for Fenland residents less likely, and could increase effective working of public health services across boundaries.
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Negative Impact

Neutral Impact

With the exception of the positive impact outlined under 'deprivation' it is unlikely that these new working arrangements would have a specific impact on any equalities groups in Cambridgeshire.
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Issues or Opportunities that may need to be addressed
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Community Cohesion

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