

Health Scrutiny Panel – 15 November 2018 - Minutes Draft Budget and Medium Term Financial Strategy 2019-2020

The Portfolio Holder for Public Health and Wellbeing introduced a report on the Draft Budget and Medium Term Financial Strategy 2019-2020. She stated it was a challenging year for the Council, in setting the budget for 2019-2020. The projected budget deficit for 2019-2020 was in the region of £6 million. There would be an update provided on the deficit in January next year. The report before the Scrutiny Panel asked them to provide feedback to Scrutiny Board on the draft budget proposals and on the overall scrutiny process of the budget.

The Portfolio Holder stated that the Council had identified a total of £695,000 budget reduction and income generation proposals, which were being formally consulted on. Within Public Health there was a saving of £288,000 to be delivered through the integration of Public Health Service Contracts. She asked for the Panel's feedback on the Draft Budget and Medium Term Financial Strategy and for feedback on the overall scrutiny process. It was intended for the Scrutiny Panels responses to be provided to Scrutiny Board on 11 December.

The Chief Accountant stated that some of the savings were being made through budget efficiencies which did not require consultation, as they did not impact directly on service users. As an example she cited the use of one off grants and vacancy management. The appendix to the report detailed the savings where there would be an impact on the public.

A Member of the Panel commented that her perception had been that there had not been the same amount of publicity for the budget consultation events as in previous years. The Chief Accountant responded that they had advertised in the same way as previous years. The consultation process was still open and would close in December.

A Member of the Panel stated the Secretary of State for Health had given a speech recently about the importance of prevention in the health sector. He asked if there had been any communications from the Department of Health since the speech. The Portfolio Holder responded that there had not been any direct communication from the Department for Health. There were however local discussions taking place about how to work better collaboratively with partners on the preventive health agenda.

The Director of Strategy and Transformation of the CCG asked if an impact analysis was being carried out on any proposed savings. The Director for Public Health responded that on the subject of the Integrated Health Public Service contracts, there were historically a number of mandatory functions the Council had to undertake. These included several commissioned services, such as goods and alcohol, the healthy childhood programme, which incorporated childhood measurement and health visiting services and finally sexual health services. Traditionally the Council used procurement and tendering processes to achieve the best value for money against the outcomes they wanted to achieve for the people of Wolverhampton.

The Director for Public Health stated that the health and social care environment was changing with many shared goals and shared outcomes, which could be worked on together across organisations. Over the past year they had been working closely with the CCG on some of the key public health outcomes they were trying to improve. The joint working approach had been successful in improving the outcomes for health checks. They were also trying to do significantly more integrated working with the Royal Wolverhampton Health Trust, who currently held two core contracts, sexual health and the healthy childhood programme. A partnership approach rather than two separate contracts was essentially what was being proposed to help manage the budget, but also importantly to improve overall outcomes using a collective approach. It was this new approach which is what was being consulted on as part of an overall impact assessment. The Director for Strategy and Transformation of the CCG asked for the assessment and information gathered from the consultation to be shared with them. The Chief Executive of the RWHT added that the Trust was working very well in partnership with the Council's Public Health Department.

A Member of the Panel asked how far the work had progressed on the proposed integrated contracts. He was conscious that the new financial year was only four months away. He wanted to have a better understanding as to how much was aspirational compared to confident achievable proposals. The Director for Public Health responded that they had been having explorative discussions in relation to achieving the outcomes over the last year. Consultation would be required on the proposals and the legalities would need to be worked through. They were however confident that the approach was the correct one and work was going on at pace to achieve them within the next financial year.

A Member of the Panel asked about the oversight processes on the use of consultants and fixed term contracts. The Portfolio Holder responded that they received regular updates at Cabinet on short-term projects, the use of consultants and associated costs. Any consultants appointed had to be logical and add value. The Council had worked hard to reduce the number of consultants used to a manageable number.