

TONBRIDGE & MALLING BOROUGH COUNCIL

OVERVIEW AND SCRUTINY COMMITTEE

15 January 2020

Report of the Director of Planning, Housing & Environmental Health

Part 1- Public

Matters for Recommendation to Council

1 REVIEW OF PUBLIC HEALTH

Summary

This report explores the three previously identified options for the future provision of the One You Kent service within Tonbridge & Malling BC. Dependent on the option chosen by Members there may be future financial implications for the Council.

1.1 Background

1.1.1 At the meeting of this Committee on 29 August 2019 Members agreed to explore the following three options for ongoing provision of the One You Kent programme:

- 1) Adopt the principle that TMBC wishes to continue to deliver the programme by direct provision of funding above the KCC grant funding i.e. to continue the service in its current format and to continue to meet the current shortfall in funding up to a predetermined limit recognising in doing so this will generate budget growth (once the earmarked reserve is used up) and, in turn, add to the funding gap.
- 2) Adopt the principle that TMBC should only deliver the programme at a level fully funded by KCC i.e. to do as originally planned when the 'commissioning role' was introduced that the arrangement would be fiscal neutral.
- 3) Adopt the principle that TMBC should not be delivering this programme of work i.e. to discontinue delivering directly the One You service across Tonbridge & Malling and inform KCC that they would need to commission this service from another organisation.

1.1.2 The scoping report from the previous meeting is attached at **Annex 1**.

1.1.3 At the meeting on the 29 August 2019 Members confirmed that they wished to hear more about this service from the Director of Public Health, Kent County Council who commission the One You Kent programme as well as a local GP. Andrew Scott-Clark and Becky Prince (GP – Snodland surgery) have both accepted the invite to this meeting Members may wish to draw out from Andrew

Scott-Clark the impact of the One You service and any benefits of it being delivered through the district Council partnership approach in West Kent. It would be useful to hear Becky Prince's direct experience of the One You programme and the outcomes it has for her patients.

- 1.1.4 The scoping report laid out the budget position on current service delivery, which is the base position for option 1. KCC currently fund £125,143.06 per annum and TMBC currently have a savings reserve of £55,727 as at 31/3/20. Ahead of this report, KCC have informally indicated (ahead of their Public Health grant amount being confirmed) that they are intending to fund at the same level in 2020/21.
- 1.1.5 In 2015 a report was commissioned by the District Councils' Network (DCN). Its intention was to contribute to the understanding, assessment and development of the role of district councils in improving the health of their citizens and communities. It focussed on district councils' role in promoting public health through some of their key functions and enabling roles. It concluded that:
- a) Our health is primarily determined by factors other than health care. District councils are in a good position to influence many of these factors through their key functions and in their wider role supporting communities and influencing other bodies.
 - b) District councils face key challenges, the biggest of which is a fall in central government income. But public health reform and localism also create opportunities for them to increase their contribution to the health of their citizens. Moreover, many of their actions are likely to release savings to the public purse – primarily (but not solely) in the NHS. District councils therefore need to be more integrated in local health and social care policy than many currently are.
 - c) Among their core functions, housing, leisure and green spaces, and environmental health are key areas that affect public health.
 - d) District councils have an important role to play in supporting social capital by strengthening social networks and community-centred approaches to health, potentially through enabling greater volunteer involvement in health care support. These approaches have been shown to have strong and direct links to health, being as powerful predictors of mortality in older populations as common lifestyle risks, such as moderate smoking, obesity, and high cholesterol and blood pressure. They are also important in determining or averting health behaviours as well as resilience to, and recovery from, illness.
- 1.1.6 The One You team is integral to the delivery of the conclusions drawn out above by the DCN commissioned report.

1.2 Option 1 – TMBC continue to deliver One You programme in its current format

- 1.2.1 The table below provides a SWOT analysis for this option:

<p>Strengths</p> <p>Continues the positive and holistic approach to delivery of One You service within the wider district Council services.</p> <p>Continues the positive and strong working partnership across West Kent.</p> <p>Retain committed and hardworking team who are making a difference for residents.</p> <p>Continue with the progression of the newly formed One You Kent Countywide Partnership Meeting which focuses on continuous improvement and sharing best practice across all districts and KCHFT.</p> <p>Enables the current level of activity – dealing with 370 referrals and 135 participants in weight loss programmes.</p> <p>Helps to meet our corporate strategy aims where we state we remain committed to developing our dialogue with partners including those for health improvement and one of our key outcomes is to maintain effective joint working across West Kent on key issues such as health provision.</p>	<p>Opportunities</p> <p>Further develop the strong health links across the Council and with partner organisations particularly with housing and leisure</p> <p>Further develop the health in all policies agenda across the Council.</p> <p>Relook at the partnership across West Kent and if this provides any opportunity for rationalisation.</p> <p>To continue to raise the profile of this preventative work such that other partners e.g. health, community services will seek to also invest.</p> <p>Seek income generation opportunities.</p> <p>Improved efficiency in service through IT improvements.</p> <p>Seek additional funding opportunities.</p>
<p>Weaknesses</p> <p>This is not a mandatory service however has strong links into other such duties of the Council e.g. housing.</p> <p>Impact on senior management time - service needs to be managed within a head of service and Director portfolio so has an effect on resources available</p>	<p>Threats</p> <p>Future funding is uncertain so will represent budget growth once reserve fully spent.</p>

for the rest of the service, many of which are statutory.	
Funding burden on Council if there is a funding shortfall.	

- 1.2.2 This option enables TMBC to continue to deliver the One You services with all the wider benefits this has for the Council – further detail is provided in 1.3.3 below.
- 1.2.3 However it is recognised that this option is highly likely to represent budget growth once the Public Health reserve has been used up and the length of time that will take is unknown due to the commissioning funding coming from KCC and staff costs rising through inflation. Members will recall from the last report that when the service was introduced it was on the understanding that the ‘commissioning role’ would be fiscally neutral for TMBC. This option will not achieve that objective and indeed the gap may widen each year.

1.3 **Option 2 – TMBC continue to deliver One You programme at a level funded by KCC**

- 1.3.1 The table below provides a SWOT analysis for this option:

Strengths	Opportunities
<p>There will be no budget growth for the Council – the service will be managed within the annual KCC funding utilising the reserve (£55,727 as at 31/3/20, made up of underspends in public health in previous financial years) for any difference and staffing adjusted as required.</p> <p>Retains positive and holistic approach to delivery of One You service within the wider district Council services.</p> <p>Continues the positive and strong working partnership across West Kent.</p> <p>Retain committed and hardworking team (subject to level of KCC funding) who are making a difference for residents.</p>	<p>Further develop the strong health links across the Council particularly with housing and leisure.</p> <p>Further develop the health in all policies agenda across the Council.</p> <p>Relook at the partnership across West Kent and if this provides any opportunity for rationalisation.</p> <p>We continue to raise the profile of this preventative work such that other partners e.g. health, community services will seek to also invest.</p> <p>Seek income generation opportunities.</p> <p>Increased efficiency in service through IT improvements.</p>

<p>Continue with the progression of the newly formed One You Kent Countywide Partnership Meeting which focuses on continuous improvement and sharing best practice across all districts and KCHFT.</p> <p>Helps to meet our corporate strategy aims where we state we remain committed to developing our dialogue with partners including those for health improvement and one of our key outcomes is to maintain effective joint working across West Kent on key issues such as health provision.</p>	<p>Seek additional funding opportunities.</p>
<p>Weaknesses</p> <p>This is not a mandatory service however has strong links into other such duties of the Council e.g. housing.</p> <p>Impact on senior management time - service needs to be managed within a head of service and Director portfolio so has an effect on resources available for the rest of the service, many of which are statutory.</p> <p>There may be a reduction in the number of residents that can be assisted should the grant from KCC reduce significantly.</p>	<p>Threats</p> <p>Future funding is uncertain so shortfall for TMBC to fund (if any) will be determined year to year and may require staffing level changes, which could have staff retention and HR implications.</p>

- 1.3.2 This option enables TMBC to continue to deliver the One You services and all the wider benefits this has for the Council within the budget provided by KCC. In 2019/20 this has already happened with a reduction in the “Healthy Living Initiatives” budget from £23,000 to £10,000.
- 1.3.3 Without a doubt the delivery of the One You service by TMBC has paid dividends for our residents. The service has been able to influence the assessment criteria and process to enable wider district services as highlighted above e.g. housing to be explored with residents and where required issues to be addressed. It offers a

holistic approach to the resident ensuring that any underlying issues e.g. financial difficulties, poor housing conditions are also addressed at the same time as any lifestyle intervention. This is more likely to create a scenario where improving lifestyles can be maintained and prioritised. The West Kent partnership maintains that the districts are well placed to bring a number of additional benefits to the One You service and can help in offering a holistic approach for users. This combined with the strengths that KCHFT offer such as the stop smoking service mean that there are a variety of services and support on offer.

- 1.3.4 The One You team has successfully developed an extremely strong relationship with housing, leisure, benefits, environmental health and others that have many interlinked approaches, policies and aims around the improvement of the health and wellbeing of our residents.
- 1.3.5 The service has recently been through a “process mapping” exercise led corporately by IT services. This will result in the reengineering of the processes to determine if more efficient ways of working can be implemented. This could lead to assisting with the reduction in cost of the service without impacting on service delivery. In addition the IT system in use at the moment is being considered by the Head of IT as to whether any improvement can be sought in light of the Council’s move to improved mobile working etc.
- 1.3.6 Once the annual grant (or hopefully in the future longer term grant funding periods) are known T&M could plan accordingly to deliver the service within budget. If required this may mean some amendment to revenue budget/staffing changes within the team and the Public Health reserve could be used to allow for any period of adjustment.
- 1.3.7 We are aware that Sevenoaks DC operate to this model and apart from management costs do not top up the grant received from KCC. They have however been successful in accessing other sources of funding to add benefit to the work of the team. This is something we have identified

1.4 Option 3 - TMBC do not deliver the One You programme

- 1.4.1 The table below provides a SWOT analysis for this option:

Strengths	Opportunities
No financial risk to the Council.	The management resources currently used to manage the service can be utilised elsewhere in the wider Housing & Environmental Health service.

Weaknesses	Threats
<p>The strong links to other Council services that often adds value both for the Council and the resident may be lost.</p>	<p>There remains a need for the Council to ensure that the health and wellbeing of residents is considered across all services. The momentum and focus for this may be lost.</p>
<p>The ability to steer the direction of the One You service e.g. ensuring housing needs are being identified may be lost.</p>	<p>A loss of focus on staff health and wellbeing.</p>
<p>The often “good news” and positive stories for the Council of residents being helped to transform their lives will be lost. Residents are not guaranteed the holistic support to maintain a healthy lifestyle.</p>	<p>Possible HR costs associated with six members of staff.</p>
<p>Loss of a committed and dedicated team who make a difference for our residents.</p>	<p>Impact on wider partnership. Becomes less sustainable for other parties to continue.</p>

- 1.4.2 This option could lead to an external organisation delivering the One You service across T&M. In East Kent KCC commission Kent Community Health Foundation Trust (KCHFT) to deliver the One You service. Historically there have been some challenges in this approach in terms of the links between district services and the KCHFT delivering the One You Service in a joined up and holistic approach centred around the person. In order to address these challenges KCC launched a Quarterly One You Kent Countywide Partnership Meeting to identify areas for improvement, share best practice and to ensure all partners are linked up with the delivery of the service across Kent. This is still in its infancy but a number of improvements have already taken place such as KCHFT opening up their training offer to the districts at a very reduced rate. The development of a Network event for all advisors in West Kent and KCHFT has also been scheduled for January 2020. Advisors will hear a number of presentations from drug and alcohol services and social prescribing in their areas. This is also an opportunity for the Districts to present to the KCHFT staff the benefits the district advisors can offer (such as housing and debt advice and how/when to refer) and likewise KCHFT can offer advice on how to signpost into their stop smoking services in West Kent. KCHFT do have some One You advisor resource in the T&M area targeting the lower quintile areas and although we have never received a housing referral for any of their clients they have confirmed that they regularly signpost to districts when housing/debt or other district related issues are raised. Currently T&M One You advisors are in touch with the housing team on a very regular basis and taking advice on how best to help residents sustain healthier living. This difference leads

officers at TMBC to conclude that there is a huge advantage for the resident to receive the One You service via the district Council and they receive a much better service.

- 1.4.3 This option also poses a serious risk to the West Kent partnership. Sevenoaks have expressed concern should this option be taken as shared resources and posts have been established e.g. One You support officer, IT and call centre. Although there are no contractual implications for TMBC there is a significant impact on the remaining two local authorities within the partnership.

1.5 Legal Implications

- 1.5.1 There is no mandatory duty for Tonbridge & Malling B.C. to deliver this service although it does link in strongly with other parts of Council services where there are mandatory duties e.g. housing.
- 1.5.2 Should option 2 or 3 be preferred, there will be HR implications for current staff. These have already been discussed with the HR Manager and staff have been briefed on the Overview & Scrutiny process and offered the opportunity to discuss their individual circumstances.

1.6 Financial and Value for Money Considerations

- 1.6.1 There is currently a Public Health reserve that stands at £55,727 as at 31/3/2. This is made up from savings on previous years Public Health grant. KCC currently fund TMBC £125,143.06 per year. The grant from KCC does not increase year on year in line with expected rate of living increases.
- 1.6.2 Option 1 will have the most impact with future year's delivery representing budget growth and in turn adding to the corporate funding gap and the savings and transformation target once the Public Health reserve is used up. The KCC grant does not increase with cost of living pay awards so the gap will increase.
- 1.6.3 Option 2 will maintain a status quo with the KCC Public Health grant funding so that the programme is amended each year in line with the grant received. The Public Health reserve could be utilised in this option to fund any period where staffing changes are required to bring the service in line with the available funding.
- 1.6.4 Option 3 may incur initial costs from redundancies however in the medium and long term will have no impact on Council's budget. This scenario would be dealt with following the Council's Retention, Recruitment and Redundancy policy.

1.7 Risk Assessment

- 1.7.1 None arising from this report.

1.8 Recommendations

1.8.1 Members are recommended to consider the three options in light of the information provided in this report and input from the invited speakers and APPROVE an option for the One You (Public Health) function from the following;

a) continue to deliver the One You service in its current format, accepting that this will require funding input from TMBC at current or higher than current levels depending on KCC Public Health funding grant

b) continue to deliver the One You service within the budget envelope of the KCC Public Health funding grant, accepting that this will require dynamic service management and work with partners to consider rationalisation of the West Kent service to maintain that budget position

c) discontinue delivery by TMBC of the One You Service, accepting that this may, dependant on the outcome of discussions with the other West Kent partners, result in redundancies

Background papers:

Nil

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