

## DRAFT SAVINGS PROPOSAL

London Borough of Tower Hamlets  
Medium Term Financial Strategy 2021-24

<b>Proposal Title:</b>	<b>0-5 Specialist Community Public Health Nursing (Health Visiting) – in contract efficiency saving</b>		
<b>Reference:</b>	SAV / HAC 011 / 21-22	<b>Savings Type:</b>	Procurement
<b>Directorate:</b>	Health, Adults & Community	<b>Savings Service Area:</b>	Public Health
<b>Directorate Service:</b>	Public Health	<b>Strategic Priority Outcome:</b>	3. People access joined-up services when they need them and feel healthier and more independent
<b>Lead Officer and Post:</b>	Somen Banerjee, Director of Public Health	<b>Lead Member and Portfolio:</b>	Cllr Rachel Blake, Deputy Mayor and Cabinet Member for Adults, Health and Wellbeing

Financial Impact:	Current Budget 2020-21	Savings/Income 2021-22	Savings/Income 2022-23	Savings/Income 2023-24	Total Savings/Income
Budget (£000)	7,050	(100)			(100)

  

Staffing Impact (if applicable):	Current 2020-21	FTE Reductions 2021-22	FTE Reductions 2022-23	FTE Reductions 2023-24	Total FTE Reductions
Employees (FTE) or state N/A	N/A	N/A	N/A	N/A	N/A

### Proposal Summary:

**0-5 Specialist Community Public Health Nursing** is a universal service supporting the wellbeing of young children and families. Elements of the service are mandated under Public Health Regulations.

The current contract runs for 5 years and it is currently in year 2 of the contracted period.

The contract value is 7.05m (the service includes health visiting and family nurse partnership).

It is proposed to apply a saving of 100k per annum to the service based on feasible 20/21 savings on operational aspects of the service (reduction of premises costs, and other aspects of operational non staff budgets)

In addition, the service will be part of the review of early years and early help services.

### Risk and Mitigations:

*What will the major risks on the project be?* Impact of service delivery – not anticipated

*What will their impact be on the project and Tower Hamlets Council?* Savings not achieved – low risk

*What are the possible mitigation strategies?* Discussion with provider (these are under way)

*Quantify the risk if possible, i.e. if the risk materialises the saving will reduce by £x. – up to 100k*

### Resources and Implementation:

*What are the resources needed to build up the proposal?*  
None specifically – existing resources are available.

*Is feasibility work required?*  
Review with provider - not anticipated

*What needs to happen for implementation? Timeline and activities required by month.*  
Discussion with provider to agree the timetable for implementation.

## SAVINGS PROPOSAL – BUDGET EQUALITY ANALYSIS SCREENING TOOL

Trigger Questions	Yes / No	If Yes – please provide a brief summary of how this impacts on each protected characteristic as identified in the Equalities Act 2010. This will need to be expanded in a full Equality Analysis at full Business Case stage.
Does the change reduce resources available to address inequality?	No	Efficiency saving
Does the change reduce resources available to support vulnerable residents?	No	
Does the change involve direct impact on front line services?	No	
<b>Changes to a Service</b>		
Does the change alter who is eligible for the service?	No	
Does the change alter access to the service?	No	
<b>Changes to Staffing</b>		
Does the change involve a reduction in staff?	No	
Does the change involve a redesign of the roles of staff?	No	
<b>Summary:</b>		
To be completed at the end of completing the Screening Tool.		
Based on the Screening Tool, will a full EA will be required?	<b>No</b>	
<b>Additional Information and Comments:</b>		