



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

CABINET MEMBER

22 July 2021

Joint Report of the Executive Director of Adult Social Care and Health, the Managing Executive Director, Commissioning, Communities and Policy, the Director of Public Health, the Executive Director of Place and the Director of Finance & ICT

Performance and Revenue Outturn 2020-21

(Health and Communities)

1. Divisions Affected

1.1 Public Health, Coroners, Registrars, Trading Standards, Community Safety and Emergency Planning.

2. Key Decision

2.1 This is not a Key Decision.

3. Purpose

3.1 The purpose of this report is to provide the Cabinet Member with an update of the Council Plan performance position and the revenue outturn position of the Health and Communities portfolio for 2020-21.

4. Information and Analysis

4.1 Integrated Reporting

This report presents both financial and Council Plan performance data. The performance summary sets out progress on the Council Plan deliverables and measures led by the Health and Communities portfolio.

The remainder of the report gives a summary and detail on the revenue outturn position for the portfolio.

As an overview, the report shows that progress is "good" or "strong" for all of the Council Plan deliverables led by the portfolio. After the use of additional Covid-19 funding, the outturn position for 2020-21 is an underspend of £2.091m. It is calculated that £0.216m of savings have been achieved by the year end. This compares to target savings of £0.150m and the value of savings initiatives, which have been identified for implementation in the current year, of £0.216m.

4.2 Performance Summary

The following shows an overview of progress on the Council Plan deliverables and measures relating directly to Health and Communities.

Deliverable Progress



Performance Measures Against Target



Performance Measures Against Target

	2018/2019	2019/2020	2020/2021	Target	Performance
Percentage of children achieving at least a Good Level of Development (EYFS)	70.8%	70.8%			
Number of participants in Council delivered stop smoking programmes who stop smoking (projected)	860	1,158	1,529	1,050	★
Number participants in Council weight management programmes who achieve 5% weight loss (projected)		232	93	186	📌

Key ★ Strong ✓ Good ● Review 📌 Action ■ Data not available/Target not set

Progress is "good" or "strong" for all of the Council Plan deliverables led by the portfolio.

Key areas of success are:

- Pause Derbyshire team continues despite challenges as a result of the pandemic and service restrictions. Remote/digital delivery continues with additional creative solutions to engage this vulnerable group of women with focussed support around the Christmas period.
- The Community Response Unit is effectively supporting the system to respond to Winter Pressures and continues to support those affected by Covid-19.
- An online weight management programme is now in place and is supporting people virtually or via phone based advice and support in line with Covid-19 restrictions.

Key areas for consideration are:

- For the 0 to 5 service, the service is still undertaking work to catch up those who did not receive a 1 year and 2.5 year contact when this contact was suspended during the first lockdown in line with national guidance.
- The new pre-school contact at 3.5 years has not started yet as the staff involved with this contact have been focusing on the 1 year and 2.5 year contacts, however as soon as this has been completed the service will look to implement the new pre-school contact.

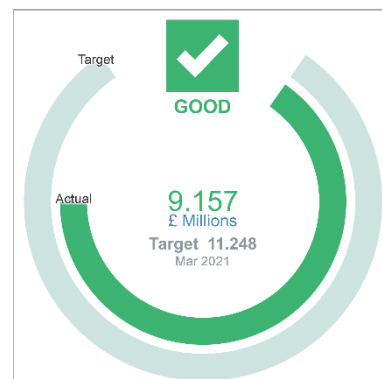
Further information on the portfolio's Council Plan performance are included at Appendix A.

4.3 Outturn Summary

The net controllable budget for the Health and Communities portfolio is £11.248m.

The Revenue Outturn Statement for 2020-21 indicates there is a year-end underspend of £2.091m.

Outturn against target budget

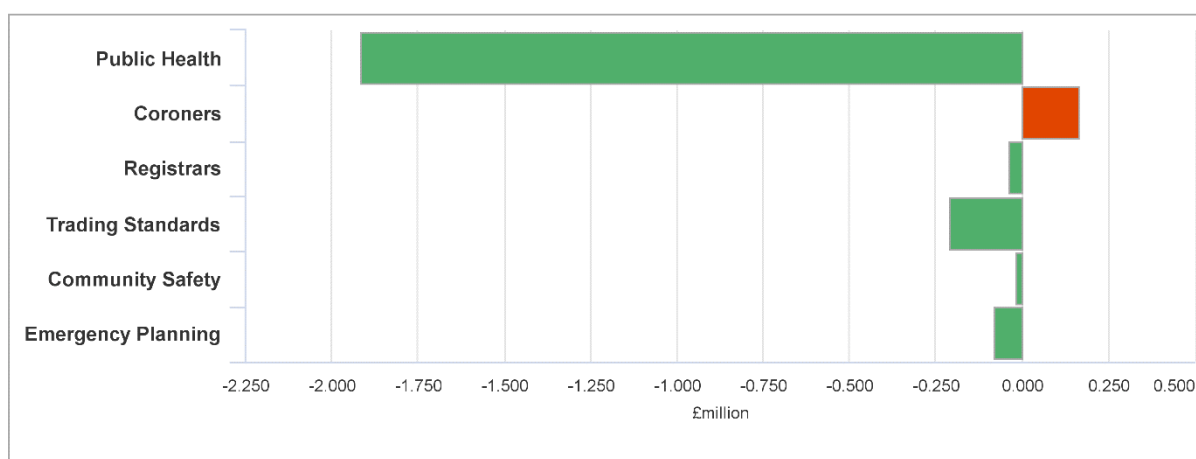


The significant areas which make up the outturn are shown in the following table and graph below:

Health and Communities Budget Items

	Controllable Budget £m	Actual Expenditure £m	Under (-)/Over Spend £m	Percentage Under (-)/Over Spend	Budget Performance
Public Health	5.978	4.064	-1.914	-32.0%	✓
Coroners	1.920	2.087	0.167	8.7%	✗
Registrars	0.177	0.139	-0.038	-21.5%	✓
Trading Standards	1.327	1.120	-0.207	-15.6%	✓
Community Safety	1.524	1.505	-0.019	-1.2%	✓
Emergency Planning	0.322	0.242	-0.080	-24.8%	✓
Total	11.248	9.157	-2.091	-18.6%	✓

Under (-)/Over Spend



4.4 Key variances

4.4.1 Public Health – Live Life Better Derbyshire, underspend £0.943m. Vacant posts and reduced activity/costs due to effects of Covid-19 restrictions

4.4.2 Public Health - Sexual Health, underspend £0.838m
Sexual Health GUM Clinical activity and thus costs reduced due to effects of Covid-19 restrictions.

4.4.3 Public Health - OBA Priorities, underspend £0.372m
Covid-19 restrictions have put several projects on hold or delayed the start date.

4.4.4 Public Health - Place Based Approach, underspend £0.350m
 Covid-19 restrictions have put several projects on hold or delayed the start date.

4.4.5 Coroners Service, overspend £0.167m
 Residual running costs on old premises, backlog of invoices relating to Pathology Fees and increase in postmortems and other professional services

4.4.6 Trading Standards, underspend £0.207m
 Staff vacancies held as part of the restructure and Covid funding previously erroneously thought to be not allowed to be claimed.

4.5 Covid Funding

The above figures include all additional costs incurred due to Covid-19 and the funding provided to cover those costs. The table below details these areas of expenditure.

Covid Funding

	Corporate Covid Grant £m	Ring-Fenced Departmental Grants £m	Recharged to Health £m	Total £m
Public Health				
Containment	0.000	1.124	0.000	1.124
Test & Trace	0.000	0.474	0.000	0.474
Clinically Extremely Vulnerable)	0.000	0.209	0.000	0.209
Community Testing	0.000	1.696	0.000	1.696
Emergency Assistance	0.000	0.808	0.000	0.808
Miscellaneous Additional Costs	0.000	0.000	0.000	0.000
Coroners	0.061	0.000	0.000	0.061
Registrars	0.716	0.000	0.000	0.716
Trading Standards	0.097	0.000	0.000	0.097
Community Safety	0.192	0.000	0.000	0.192
Emergency Planning	0.031	0.000	0.000	0.031
Total	1.097	4.311	0.000	5.408

4.6 Budget Savings

Budget reduction targets totalling £0.216m were allocated for the year. There was an over-achievement of savings of £0.066m that was brought forward to the current year. This has resulted in total reductions to be achieved of £0.150m at the start of the year.

The value of the savings initiatives which have been identified for implementation in the current year is £0.216m.

The surplus between the total targets and the identified savings initiatives is £0.066m.



It is calculated that £0.216m of savings have been achieved by the year-end. The table below shows performance against the target.

Budget Savings Initiatives

	Budget Reduction Amount £m	Achieved by the end of 2020/21 £m	Shortfall (-)/ Additional Savings Achieved £m	
Community Safety – reduction in staffing	0.065	0.065	0.000	✓
Community Safety – cease funding Stop Hate	0.007	0.007	0.000	✓
Community Safety – Increase recharges for Training	0.008	0.008	0.000	✓
Trading Standards - Restructure	0.061	0.061	0.000	✓
Trading Standards – Cessation of Weight Restriction enforcement	0.025	0.025	0.000	✓
Registrars – increased charges	0.050	0.050	0.000	✓
Total Position	0.216	0.216	0.000	✓
Shortfall/(Surplus) of Identified Savings	-0.066	0.000	0.066	

	Budget Reduction Amount £m
Prior Year B/f	-0.066
Current Year	0.216
Budget Savings Target	0.150

4.7 Growth Items and One-Off Funding

- 4.7.1 Coroners service - £0.101m ongoing.
Increasing fees due to a national shortage of Pathologists.
- 4.7.2 Community Safety - Domestic Violence - £0.500m one-off.
Increasing costs of Domestic Violence service.

4.8 Earmarked Reserves

A detailed analysis of the earmarked reserves is shown below.

	Opening Balance £m	Additions £m	(Used)/ Returned £m	Closing Balance £m
Public Health ring-fenced Reserve	7.424	1.108	0.000	8.532
Public Health externally funded Reserve	0.244	0.000	0.004	0.240
Comm Safety DV prevention	2.142	0.000	0.520	1.622
Comm Safety	0.021	0.000	0.000	0.021
EM RR -Trusted Trade	0.044	0.000	0.000	0.044
Scams Prevention	0.057	0.000	0.000	0.057
EM Reserve - POCA	0.135	0.007	0.006	0.136
Syrian Refugee	0.079	0.000	0.000	0.079
Emergency Planning Reservoir reserve	0.078	0.000	0.000	0.078
Public Health ring-fenced Covid Community Testing funding Reserve	0.000	0.771	0.000	0.771
Public Health ring-fenced Covid Test & Trace funding Reserve	0.000	3.385	0.000	3.385
Public Health ring-fenced Covid CEV funding Reserve	0.000	0.698	0.000	0.698
Trading Standards - Covid work	0.000	0.046	0.000	0.046
Total	10.224	6.015	0.530	15.709

The earmarked reserves have been reviewed and all are required to meet commitment already agreed for 2021-22 onwards.

5. Consultation

5.1 Not applicable.

6. Alternative Options Considered

6.1 Not applicable

7. Implications

7.1 Not applicable

8. Background Papers

8.1 Held on file within the Commissioning Communities and Policy Department. Officer contacts – Karen Howes (Emergency Planning), Paula Littlewood (Community Safety, Trading Standards, Coroners and Registrars), David King (Public Health), Ellen Langton (Performance).

9. Appendices

9.1 Appendix A - Health and Communities End of Year Council Plan Performance Report 2020-21.

9.2 Appendix B - Considerations

10. Recommendation

That the Cabinet Member notes the report and considers whether there are any further actions that should be undertaken to address performance, where it has not met the desired level.

11. Reasons for Recommendation

11.1 Not applicable

12. Is it necessary to waive the call-in period?

12.1 No.

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Health and Communities End of Year Council Plan Performance Report 2020-21

Progress on Council Plan deliverables and key measures

Empowered and self-sufficient communities

 **Reviewed grants and developed a new offer to voluntary and community groups, learning from the remarkable response to the pandemic and supporting the sector to recover well, retain new volunteers and thrive**

Work has continued across the Voluntary and Community Sector (VCS) Grant Funding Review, putting in place the necessary plans for the next year (2021/22) to ensure that momentum is maintained on the review and key pieces of work across the review are commenced in the coming months.

The Council has worked closely with the VCS over the year to support the sector through the pandemic. The Council has maintained its grant funding commitment to all providers, increased funding where necessary and ensured any additional funding meets the needs of those responding to, or impacted by, the crisis.

The Council has developed and embedded a new approach for investing in VCS infrastructure to support the sector now and in the future and these newly established ways of working has established frequent VCS led engagement to identify the opportunities and challenges for the VCS relating to Covid-19. This has supported a wide range of planning going forward, which in turn puts the Council in a position to evaluate where we are and respond accordingly for planning from September 2021.

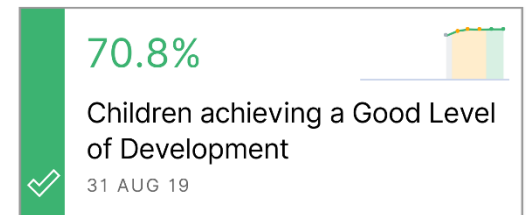
Work has also continued to establish a new, single approach to voluntary and community sector grant funding for the Council. Working groups, with representatives from across the Council, have been established, to deliver a new model for administering grant funding to the VCS, supporting the whole Council to improve its funding arrangements with the sector to allow it to recovery well from the impact of the pandemic and thrive in the future.

A focus on prevention and early intervention

✔ Embedded our newly redesigned universal and targeted 0-5s offer through Health Visiting services and Children’s Centres in partnership with the NHS

The 0-5 year Health Visiting Service is in the final stages of making sure any missed 1 year old and 2.5 year old reviews from the first Covid-19 lockdown period have been completed. The guidance at the time meant that all health visits were suspended with the exception of the antenatal and new birth visits only. The 0-5 year old health visiting service has also been working closely with the Early Help team to increase the number and quality of Early Help Assessments being completed by Health Visitors.

Due to Covid-19 the Early Years Foundation Stage assessments didn't take place in 2020, therefore this data has not been updated.



✔ Embedded the “Pause Project”, an innovative programme to address the needs of women who have had multiple children removed from their care and to prevent this cycle recurring

The Pause Project have delivered the Community 1 cohort since February 2020 and this will be ongoing upto the 18 month end point. Pause has worked with 107 referred women with a range of unmet needs which include domestic violence, housing, debt, mental illhealth, substance misuse and children in care. By working systemically and in partnership across a number of organisations and pathways the project has acheived improvements for the women engaged. Data indicates that the greatest presenting need in the last 12 months has been mental health (72%) and domestic violence (63%).

29 women are directly engaged with the Pause programme (target being 32) equating to a 91% maintenance rate and this exceeds the contractual threshold of 80%. This involvement with the project is outstanding due to the challenges to models of delivery due to impact of the pandemic.

Other targets met include 100% of women maintaining contraception (LARC); 0 pregnancies reported and 0 further care proceedings. All 29 women are now registered with a GP; 7 women are registered with a dentist and 13 women now in Education, Training, Employment or Volunteering. 19 of these women have already received 12 months of intensive support.

Qualitative evidence through self-reporting indicates 100% improvement across multiple issues and ongoing working towards individual goal- setting by women.

The Pause team comprises 4 practitioners - with an average practitioner caseload of 6-8 people. Community 2 has begun recruitment with 97 referrals, including from women leaving care.

External evaluation of the programme by the University of Sussex is will take place throughout 2021.

✔ Increased the number of people taking part in smoking cessation and weight management programmes to improve outcomes

The stop smoking and weight management services continue to be delivered virtually and via telephone due to the impact of Covid-19.

For stop smoking the number of people setting a quit date in Quarter 4 has been the highest quarter for 2020/21 (656 quit dates set) and is higher than 2019/20 (556 quit dates set) in the same period. To date 338 participants have achieved a 4 Week Quit. Based on our current quit rate of 65% the forecast is 452 individuals to achieve a 4 Week Quit for Quarter 4.

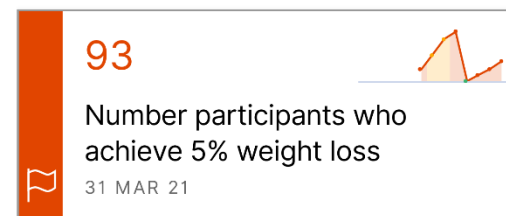
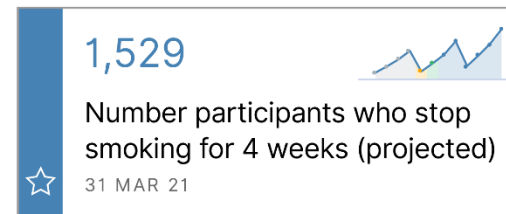
Overall in 2020/21 the stop smoking service has significantly increased the number of people achieving a 4 week Quit with a forecast of 1529 compared to 1159 in 2019/20.

For weight management the Quarter 4 forecast is that 150 individuals will complete the programme, 136 (77%) will lose weight and 42 (24%) will achieve a 5 % weight loss.

Overall 432 people are expected to complete a weight management programme in 2020/21 with a forecast of 374 (87%) participants losing weight and 93 (22%) achieving a 5% weight loss.

Covid-19 has impacted on the performance of the weight management service in 2020/21. We suspended service delivery in March 2020 and did not resume until August 2020. The prolonged nature of the pandemic has impacted upon individual's motivation to lose weight and there is evidence that the anxiety and stress arising from lockdowns has led to people gaining weight due to 'comfort eating'. In addition our Health Improvement Advisors have had a greater focus over the past year on people's wellbeing and supporting clients generally.

March figures for both services are year end projections and will be confirmed once all participants have completed the courses started during Quarter 4.



★ Integrated the Community Response Unit, established during the pandemic, in the Council's strategic approach to improving health and wellbeing

The current Community Response Unit (CRU) model is evolving to meet the needs of communities as we recover from Covid-19 and progress through the road map. The Winter Pressures referral mechanism has ensured good links through to integrated housing support as well as supporting those directly impacted by Covid-19. A phased plan has been drafted to integrate the CRU into the strategic approach to health and wellbeing and Public Health recovery work. However, in Quarter 4 the focus remained on response and supporting local residents, particularly those who are shielding due to lockdown arrangements.

Since the end of March 2020 the Community Response Unit has:

Written to 43,000 clinically extremely vulnerable residents to let them know we were there to help, and called around 10,000 clinically extremely vulnerable residents who have registered on the national shielding system to offer support;

Taken 11,817 calls and provided support to 4,471 Derbyshire residents of which 1,643 were clinically extremely vulnerable;

Supported 2,468 requests for support with food and shopping, 1,640 requests for prescription collections and 589 requests for support with social isolation e.g. friendly phone calls.

Key ★ Strong ✔ Good ○ Review 📧 Action ■ Data not available/Target not set

Considerations

a) Financial

As detailed in the report.

b) Other

In preparing this report the relevance of the following factors has been considered: prevention of crime and disorder, legal and human rights, equal opportunities, human resources, environmental, health and property and transport considerations.

Report Sign Off and Version Control

Report Title	
Author	
Meeting and Date	
Version	
Key Decision (published)	
Exempt item (notice of private meeting published)	

Implications	Name and Comments	Date Approved
Finance		
Legal		
Human Resources		

Information Technology		
Equalities		
Corporate Objectives and priorities for change		
Consultation		
Other – please specify		

Author's Directorate Sign Off

		Date
Managing Executive Director/Executive Director		
DMT – if applicable		
CMT – if applicable		
Cabinet Member briefed		
Other – please specify		