



Derby City Council

## HEALTH AND WELLBEING BOARD 23 November 2017

Report of the Strategic Director of People  
Services

# ITEM 11

### **Livewell Delivery 2018/19 - update**

#### **SUMMARY**

- 1.1 At the September Health and Wellbeing Board (HWB), a paper was considered in private, relating to the Livewell service in 2018/19. The paper was considered in private due to sensitivities relating to staff employed within the Livewell Service. Due to the unprecedented challenging financial position of the Council which necessitated the Council considering the future of all discretionary services, there had been a standing proposal in the medium-term financial plan (MTFP) since 2016/17 to withdraw funding of the Livewell service at the end of March 2018. This is reflected in the current Council budget consultation.
- 1.2 Following further consideration by the cabinet member and the chief officer group in addition to discussion with health colleagues, the standing proposal within the Council's MTFP to end Livewell provision from 2018/19 was revised. The proposed saving was reduced from £1m to £700k with a plan to co-produce a new model of delivery within the financial envelope of £300k.
- 1.3 Subsequent constructive debate at the HWB, where concerns were raised by partners, and further consideration internally of the importance of tackling issues such as smoking, obesity and harmful drinking has led the Council to reconsider proposals in relation to Livewell.
- 1.4 Whilst the budget consultation is now live, the Council has agreed that it is a priority to continue to deliver behaviour change provision within the city to a level similar to that being currently delivered. Given this, the Council has secured (subject to approval) further one-off corporate support of up to a further £700K (in addition to the £300k previously identified) to continue Livewell provision in 2018/19. This will be formalised as an outcome of the public consultation on the budget.
- 1.5 As previously reported, the grant the Council receives for its public health responsibilities has reduced annually in real-terms by 4.7% since 2015 and will continue to do so until 2020. This obviously remains a challenge to us in our ability to fund our public health activity over the coming few years.
- 1.6 The financially challenging position of the Council previously reported to the HWB remains. Whilst we are now able to fund Livewell to a similar level in 2018/19, this is only because of the one-off use of reserves. At the moment there is no identified budget for provision from 2019/20 onwards.
- 1.7 Through the rest of this year and 2018/19 we will be reviewing Livewell to ensure that it is as effective and efficient as possible. We will also be exploring how to maintain

behaviour change provision from 2019/20 onwards. This will include working with our partners to co-produce a sustainable model of delivery for the future.

## **RECOMMENDATIONS**

- 2.1 To note the revised proposal of the Council to maintain Livewell provision at a similar level in 2018/19 to that currently provided.
- 2.2 To support and actively engage as appropriate in the design of a sustainable model of behaviour change delivery for 2019/20 onwards.

## **REASONS FOR RECOMMENDATION**

- 3.1 To support the HWB in meeting its responsibilities to improve the health and wellbeing of the local population.

## **SUPPORTING INFORMATION**

- 4.1 Livewell is the Council's lifestyle, behaviour change and Public Health prevention offer. At a current cost of £1m per year it delivers: smoking cessation; community health checks (statutory); weight management for adults and children; physical activity interventions; cardiac rehabilitation; and lifestyle interventions for individuals with learning disabilities.
- 4.2 Livewell currently supports over 3000 people per year: 750 weight loss, 1250 four-week smoking quits (including prescription and nicotine replacement therapy (NRT) costs), 1000 community NHS Health Checks and 150 children.
- 4.3 The service is recognised regionally and nationally as good practice for its delivery model and positive outcomes. In 2016/2017:
  - 66% of clients with a BMI $\geq$ 30 achieved a minimum of 5% weight loss;
  - 1199 Community NHS Health checks were delivered;
  - 1044 four-week smoking quits were achieved representing a 68% quit rate;
  - 47% of children achieved a minimum of a 3% reduction in BMI.
- 4.4 Since 2015, the grant the Council receives for its public health activities has reduced annually in real-terms by 4.7% and will continue to until 2020.

## OTHER OPTIONS CONSIDERED

5.1 A number of options have been considered including:

- Decommission Livewell as of 2018/19 as proposed within the 2015 budget consultation. Whilst the provision of behaviour change programmes is not a statutory requirement it is considered to be important in promoting health outcomes and reducing preventable morbidity and mortality.
- To significantly reduce the existing level of funding down to £300k requiring re-prioritisation of delivery.

5.2 The above options have been fully considered and felt not to effectively meet the needs of the local population in relation to behaviour change. Significant work has been undertaken to identify sufficient budget to maintain the provision at a similar level in 2018/19 despite all but one of Livewell's services, undertaking community health checks, not being statutory requirements.

### This report has been approved by the following officers:

<b>Legal officer</b> <b>Financial officer</b> <b>Human Resources officer</b> <b>Estates/Property officer</b> <b>Service Director(s)</b> <b>Other(s)</b>	Olu Idowu, Head of Legal Services Alison Parkin, Head of Finance – People Service's  Andy Smith, Strategic Director of People Services
<b>For more information contact:</b> <b>Background papers:</b> <b>List of appendices:</b>	Alison Wynn, tel: 01332 643106, email: alison.wynn@derby.gov.uk None Appendix 1 Implications

<b>IMPLICATIONS</b>
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### **Financial and Value for Money**

- 1.1 There is an evidence base demonstrating that investment in prevention activities such as smoking cessation, weight management, diabetes detection and social inclusion can deliver a return on investment.

There has been and will continue to be significant funding reductions for local government and public health grants making it increasingly challenging for the Council to maintain investment in its public health activities.

### **Legal**

- 2.1 Lifestyle and behaviour change provision, such as delivery of smoking cessation services, are not a statutory duty of the Council. The Council does, however, have a duty to provide or make arrangements to provide for health checks for eligible people. Livewell currently delivers part of this provision. The majority (around 80%) of health checks, however, are delivered by GPs.

The Council, under the Health and Social Care Act 2012 has a duty to take appropriate steps to improve the health of the people who live in their areas.

The Health and Social Care Act 2012 established Health and Wellbeing Boards as statutory committees of all upper-tier local authorities to act as a forum for key leaders from the local health and care system to jointly work to:

- improve the health and wellbeing of the people in their area;
- reduce health inequalities; and,
- promote the integration of services.

### **Personnel**

- 3.1 It is not anticipated that the proposal has an impact on staff resources.

### **IT**

- 4.1 There are no IT implications from this report

### **Equalities Impact**

- 5.1 Some customers who use the existing behaviour changes services are socially disadvantaged and represent those with inequitable lifestyles and health outcomes. In addition, Livewell specifically provides services for clients with learning disabilities.

## **Health and Safety**

- 6.1 There are no immediate H&S concerns

## **Environmental Sustainability**

- 7.1 There are no Environmental sustainability implications from this report

## **Property and Asset Management**

- 8.1 There are no Property and Asset implications from this report

## **Risk Management and Safeguarding**

- 9.1 There are no safeguarding issues identified.

There are no immediate risks associated with this report. There are potential future risks for 2019/20 onwards as no budget has yet been identified to maintain provision from this point. These will be further identified and monitored throughout 2018/19.

## **Corporate objectives and priorities for change**

- 10.1 This report supports the Council Plan objectives that all people in Derby will enjoy good health and wellbeing via good quality services that meet local needs