Public Healt	h Savings 2019/20 Description	2019/20	Details of saving	Service delivery implications	Staffing Implications
HO4	Efficiencies & Income in Registrars	Savings	Improved use of ICT & additional income	None	None
H12	Additional Income generation by Help2Change	-	Provision of Health screening to external organisations	None	None
H13	Innovation by Help2Change	63,000	Introduction of "Health TV" & sale of advertising space	None	None
H15	Reduction in posts in Help2Change/ Review of NRT	65,000	None Reduced provision of health promotion services such as smoking cessation & obesity prevention	Reduction in the provision of Nicotine Replacement Therapy with only supplies provided to pregnant women. Reduction in the provision of advice and support to individuals and families seeking assistance to lose weight.	Loss of 2-3 staff
H16	Review of parking enforcement	100,000	Introduction of additional measures to ensure that all appropriate parking fees are recovered	Introduction of a range of measures to support the Council's Parking Strategy, ranging from the introduction of barrier control systems at off street parking and changes to staffing	Not at present
A29 A30	Help2Change staffing restructure & integration as A29 above		Use of voluntary redundancy and staff moving to new roles outside of the council and restructure of the team.  as A29 above	Reduced capacity within the service to deliver health promotion programmes such as Help2Quit, Help2Slim, Health Checks as A29 above	3 staff have left the service due to VR or move to a new role. as A29 above
A31	Review of HElp2Change Contract		Reduction in the service contract for non-mandated	Reduction in the provision of programmes such as	as A29 above
		105.000	health promotion services.	promoting physical activity and community development health promotion services.	
A32	Social Prescribing		Reduction in the roll-out of social prescribing	Slow the roll out of social prescribing to additional areas. Integration of the service model with Lets Talk Local and Care Coordination	Integration will enable the programme to achieve efficiencies. Interim staff contracts will be concluded.
C18	0-25 Public Health Nursing Service	75,000	Management of a children's centre hub to be provided by NHS	As part of an integrated approach with Children's services and its reorganisation of these Hubs one of the centres will be managed by the NHS enabling resources to be reallocated to children's Services. The NHS will include the management as part of its 0-25 PHNS contract	None
C19	0-25 Public Health Nursing Service	386,000	Reduce investment in non-mandated child health programmes such as school nursing	Currently School Nurses provide a range of health promotion and child development surveillance to school age children. This service will be phased out and it will mean that teaching staff, parents and children will not have access to physical and mental health advice from this service. This will reduce some of the safeguarding support available to schools.	Not directly as these staff are employed by the NHS
H20	Senior Management salary saving	36,000	Non-replacement of a senior management post	None	None
H21 H22	Vision Screening Contract  LAC Funding		contract re-negotiation and savings achieved Renegotiation of current service with NHS and savings	None None	None None
H23	Health Visiting	40,000	achieved No further payments of NHS Powys for patients	As the council is funded on a resident basis for its HV	None
		·	registered with Shropshire GPs but living in Wales.	service we are stopping the cross boundary charge for services supplied to patients resident in Wales.	
H24	Redesign of Sexual Health Services	50,000	Renegotiation of current contract with the service provider	Reduction in the number of sessions provided and the centralisation of some provision.	None directly as staff are employed by the NHS
H25	Sexual Health: services to Residents from Wales	90,000	Whilst Shropshire can recharge patients from other areas of England if their residents attend a clinic in Shropshire, at present we cannot do so for residents from Wales. As we are only funded for our own residents we will cease to provide services unless their is exceptional clinical need.	Patients resident in Wales will be redirected to services in Wales unless there are exceptional clinical need. There should be no implications for Shropshire residents	None
H26	Sexual Health Service: Pathology	50,000	Centralisation of the Pathology service contract and greater efficiency	None	None
H27	NHS Library Contract	5,000	Cessation of contract with NHS library Service at SaTH	None	None
H28	Infection Prevent & Control	30,000	No longer hold a contingency reserve for dealing with significant outbreaks of infection	Shropshire Council General reserve will provide any additional funding needed to support measures to deal with a significant outbreak of infection	None
H29	Mental Health Promotion	20,000	Cease to provide a dedicated resource to support mental health promotion	Cease the provision of mental health promotion resources or funding to voluntary sector providers to support campaigns such as suicide prevention.	None directly
Н30	Specialist Advice and support	12,040	Cease to provide a dedicated resource to support local promotion of national public health campaigns	Reduced ability to tailor national health promotion campaigns to suit local needs	Fixed contract staff will no longer be employed
H31	Reduce Community Training Budget	54,960	Reduce the support for training of staff in health promotion/disease prevention techniques.	Reduced capacity to enable staff to extend knowledge and skills, with knock on implications for rolling out health promotion and behavioural change programmes.	None directly
H32	Tender of Substance Misuse Detox Service	30,000	Carry out a tender for a substance misuse in-patient detox service and negotiate the necessary budget reduction	Reduction in the number of residential detox admissions, therefore reduced availability of residential detoxification for appropriate patients.	None as staff are not employed by Shropshire Council
Н33	Tender of Community Substance Misuse Service	30,000	Carry out a tender for a substance misuse service and negotiate the necessary budget reduction	Reduction in the number of satellite services provided	None as staff are not employed by Shropshire Council
H34	Review of Prescribing budget	80,000	Review current expenditure on prescribed drugs to achieve more cost effective use of resources	Patients may need to be prescribed more conventional medications that are nationally approved but may be less acceptable to them.	None
Н35	Reduced supervised consumption		Reduced provision of supervised consumption of medication by community pharmacies	Patients will have reduced access of supervised consumption that may place them at greater risk of harm. There is also a greater risk of medication being diverted to illicit sale.	None
H36	Recommissioning of Adult's Children and Public Health Services		Integration of service responsibilities to achieve efficiency savings and a whole council responsibility to achieve national and local public health outcomes. This will include the decommissioning of some health promotion services; integration of roles to provide some efficiency savings; creation of a single integrated commissioning team and new performance requirements for all services in order to achieve the required public health outcomes	Reduced health promotion provision for people at risk of health conditions such as atrial fibrillation, obesity related illnesses such as diabetes and heart disease	Loss of up 25 staff
H37	Digital Transformation	59,260	More effective use of the new digital technology to reduce the need for external out of hours support	Service provide in house rather than a contract with an external provider	None
Total Public Hea	alth Savings	3,092,280		er production	