

OFFICER DECISION RECORD

For staff restructures, please also complete an RA1 form to update the HR Portal. This is attached at Annex 2.

Decision Ref. No:
2016/7/PH/Trihealth

Box 1

DIRECTORATE: Public Health

DATE: 05/09/16

Contact Name: Amy Booth

Tel. No.: 01302 737934

Subject Matter: TriHealth budget reduction (changes to service)

Box 2

DECISION TAKEN:

To reduce the TriHealth contract value by £8,669 for remainder of 16/17 and £6,192 for 17/18. In order to manage the Public Health budget reductions, TriHealth Integrated Sexual Health Service will reduce the number of days of service provision at the town centre site(s) from six to five, by closing the Wednesday clinic. P2P service will be reduced from a visit to a contact in line with Project 3.

Box 3

REASON FOR THE DECISION:

On 4th June 2015 the chancellor announced a £200m reduction in non-NHS Department of Health spending, which has been translated into an in-year reduction in the Local Authority Public Health grants. The 2015/16 in year cut for Doncaster has now been confirmed at £1.464m or 6.2% (Letter from DOH 4th November 2015). The current assumption for the budget shortfall for 16/17 is £2.5m. The Comprehensive Spending Review (CSR) on 25th November 2015 also announced a further reduction in the size of the Public Health Grant.

In light of this shortfall, the Provider of the Integrated Sexual Health Service (TriHealth) has agreed to a financial reduction in their annual contract value. A number of options for managing this reduction were proposed by the Provider. Epidemiological data plus the results of a brief consultation with the service users was considered to inform service delivery and the decision to close Wednesday Hub provision was reached. P2P provision will reduce from a visit to a contact in line with Project 3.

Service users were consulted via paper surveys in the clinic waiting rooms at both DRI and ELGH, over a two-week period. In total, 226 service users completed the survey regarding the closure of the town centre clinics on a Wednesday. The majority reported that they had used the clinic for contraception (81%), followed by: STI testing (36%), emergency contraception (21%), general advice and information around sexual health (15%), treatment for STIs (10%) and 'something else' (9%).

The majority of service users reported that the evening and weekend opening hours

would be helpful for them (75%). In addition, the majority noted no concerns about the closure of the clinic on a Wednesday. Amongst the 29 who did note their concerns, the main factor was the reduction in flexibility of the service and that it reduces service user's options. Also noted was the difficulty in accessing their General Practice for appointments (for contraception).

Closure of the Wednesday town centre provision can be mitigated by condensing the activity into the remaining 5 days of service provision. The service will still be able to offer late night opening on a Monday and a weekend clinic on a Saturday. In addition the service can extend Thursday opening hours to offer late night provision.

Box 4

OPTIONS CONSIDERED & REASONS FOR RECOMMENDED OPTION:

If other options were considered, please specify and give reasons for recommended option

A paper detailing service change options was circulated. Closure of spoke clinics was also considered, however, it was decided that the service should maintain community provision.

Box 5

LEGAL IMPLICATIONS:

Section 2B of the National Health Service Act 2006 (as amended by Section 12 of the Health and Social Care Act 2012) introduced a new duty on Councils in England to take appropriate steps to improve the health of the people who live in their area.

Section 1 of the Localism Act 2011 provides the Council with a power to do anything that an individual generally may do.

In taking this decision the decision maker must be aware of their obligations under section 149 Equality Act 2010. This section contains the Public Sector Equality Duty (PSED). It obliges public authorities, when exercising their functions, to have '**due regard**' to the need to:

- a) Eliminate discrimination, harassment and victimization and other conduct which the Act prohibits;
- b) Advance equality of opportunity; and
- c) Foster good relations between people who share relevant protected characteristics and those who do not.

The relevant protected characteristics under the Equality Act are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. The duty also covers marriage and civil partnerships, but only in respect of eliminating unlawful discrimination.

Case law has established the following requirements for the PSED to be exercised lawfully:

- The equality duties are an integral and important part of the mechanisms for ensuring the fulfilment of the aims of anti-discrimination legislation;
- The relevant duty is on the decision maker personally. What matters is what he or she took into account and what he or she knew. The decision maker cannot be taken to know what his or her officials know or what may have been in the minds of officials in proffering their advice;
- It is important to record the steps taken by the decision maker in seeking to meet the statutory requirements in order to demonstrate that the duty has been discharged;
- The decision-maker must assess the risk and extent of any adverse impact and the ways in which such risk may be eliminated before the adoption of a proposed policy. It is not sufficient for due regard to be a “rear-guard action” following a concluded decision;
- In order to be able to discharge the duty the decision-maker must have information about the potential or actual equality impact of a decision. This information will often be gained in part through consultation;
- The duty must be exercised in substance, with rigour, and with an open mind rather than a ticking box approach; while there is no duty to make express reference to the regard paid to the relevant duty, reference to it and to the relevant criteria reduces the scope for argument;
- General regard to issues of equality is not the same as having specific regard, by way of conscious approach to the statutory criteria;
- Officers reporting to decision makers, on matters material to the discharge of the duty, must not merely tell the decision maker what he/she wants to hear but they have to be “rigorous in both enquiring and reporting to them”;
- Although it is for the court to review whether a decision-maker has complied with the PSED, it is for the decision-maker to decide how much weight should be given to the various factors informing the decision, including how much weight should be given to the PSED itself;
- The duty is a continuing one.

Decision makers should in particular note that the duty is for them personally. It is not sufficient to rely on advising officers to discharge the duty by the preparation of the due regard statement and this report. Decision makers must themselves read and actively take into consideration the due regard statement and the consultation materials.

Decision makers should also note that as the duty is a continuing one, it will be necessary for decision-makers to have due regard again at the time at which subsequent decisions may be taken. There should be a record/audit trail of how due regard has been shown.

The decision maker must also pay regard to any countervailing factors, which it is proper and reasonable for you to consider. Budgetary pressures, economics and practical factors will often be important. The weight of these countervailing factors in the decision making process is a matter for the decision maker.

The contract provides for variations and amendments to be made. Legal Services will provide support and advice to vary the contract in accordance with this report.

**Name: Nicky Dobson_ Signature: _____By email__ Date: _11th August 2016
Signature of Assistant Director of Legal and Democratic Services (or**

Name: Dan Charlesworth Signature: ___By email_____ Date: 11th August 2016
Signature of Assistant Director of Finance & Performance
(or representative)

Box 9

ICT IMPLICATIONS:

There are no ICT implications in relation to this decision.

Name: Peter Ward (ICT Governance & Resources Officer)

Signature:

Date: 22/08/16

Signature of Assistant Director of Customers, Digital & ICT
(or representative)

Box 10

ASSET IMPLICATIONS:

There are no immediate asset implications arising out of this Officer Decision Record

Name: Gillian Fairbrother (Assets manager, Project Co-ordinator)

Signature: by email

Date: 2nd September, 2016

Signature of Assistant Director of Trading Services and Assets
(or representative)

Box 11

RISK IMPLICATIONS:

To be completed by the report author

If the service was to maintain Wednesday opening and P2P contact then the service would have to make more significant changes to the model of service delivery, which would carry greater risk and have a greater impact on the sexual health of the Doncaster population.

(Explain the impact of not taking this decision and in the case of capital schemes, any risks associated with the delivery of the project)

Box 12

EQUALITY IMPLICATIONS:

To be completed by the report author

None. An impact assessment has been completed.

Name: Amy Booth Signature: Date: 11.08.16_
(Report author)

**Box 13
CONSULTATION**

Officers

(In addition to Finance, Legal and Human Resource implications and Procurement implications where necessary, please list below any other teams consulted on this decision, together with their comments)

Members

Under the Scheme of delegation, officers are responsible for day to day operational matters as well as implementing decisions that have been taken by Council, Cabinet, Committee or individual Cabinet members. Further consultation with Members is not ordinarily required. However, where an ODR relates to a matter which has significant policy, service or operational implications or is known to be politically sensitive, the officer shall first consult with the appropriate Cabinet Member before exercising the delegated powers. In appropriate cases, officers will also need to consult with the Chair of Council, Committee Chairs or the Chair of an Overview and Scrutiny Panel as required. Officers shall also ensure that local Members are kept informed of matters affecting their Wards.

Please list any comments from Members below:

**Box 14
INFORMATION NOT FOR PUBLICATION:**

Name: Signature: Date:
Signature of FOI Lead Officer for service area where ODR originates

Box 15

Signed: ___Rupert Suckling_ **Date:** 6th September 2016
Director

Signed: _____ **Date:** _____
Additional Signature of Chief Financial Officer or nominated representative for Capital decisions.

Signed: _____ **Date:** _____
Signature of Mayor or relevant Cabinet Member consulted on the above decision (if required).

- **This decision can be implemented immediately unless it relates to a Capital Scheme that requires the approval of Cabinet. All Cabinet decisions are subject to call in.**
- **A record of this decision should be kept by the relevant Director's PA for accountability and published on the Council's website.**
- **A copy of this decision should be sent to the originating Directorate's FOI Lead Officer to consider 'information not for publication' prior to being published on the Council's website.**
- **A PDF copy of the signed decision record should be e-mailed to the LA Democratic Services mailbox**