

## SWYFT Stop Smoking Service:

2016/17 proposal:

- 2% reduction to total service cost budget (£403,107 – saving would be £8,062)
- 15% reduction to the total medication budget (RMBC contribution to medication budget £92,000 – saving to RMBC would be £13,800. The remainder of the budget is funded by Rotherham CCG, and this reduction would generate a saving for them of £25,950). The medication budget was underspent in 14/15 and is expected to be so again in 15/16, so this reduction is bringing the budget closer into line with expected spend.

To achieve these savings the service will need to demonstrate revised delivery models, such as the increased use of stop smoking groups and telephone support and reduced one-to-one support. Commissioners have proposed thresholds for activity targets that reflect the national decline in attendance at stop smoking services seen since the service specification and targets were drawn up. There is no final agreement to these proposals as yet but the aim is to reach agreement at the contract review meeting on 19 January 2016.

	<b>1 low impact</b>	<b>2</b>	<b>3</b>	<b>4 high impact</b>
Patient Care	X The service offers a flexible delivery model that can adapt as required for example reduced one-to-one interventions and increased group delivery. This minimises the impact on direct patient care.			
Staff Impact (frontline)	X As above. The service currently uses some bank staff and those numbers could be reduced in the first instance to minimise impact on permanently employed staff.			
Impact on partners (e.g. pushing cost elsewhere)	X If impact on frontline delivery is minimised then cost should not be pushed to other parts of the health and social care system			
Deliverability Time & Resource	X Proposals not yet agreed however discussions have been underway for some time.			