

## Risk Assessment to Substance Misuse

Summary of risk assessment in 2014/15 when the cuts were proposed originally.

**The impact of budget cuts**

1. A proposal of taking forward a budget cut of £357,440 has been identified with further savings in line with the reduction of the public health grant over the term of the contract.
2. The reduction is a 15% cut from the current budget portfolio with further cuts over 5 years this could rise to 25%.
3. This reduction carries significant clinical risk as well as direct impact on the expected crime rates, hospital admissions, demand on social care and potential rise in communicable disease in York.
4. The DTORS (Drug Treatment Outcomes Study)(Jones 2009)<sup>[i]</sup> report, commissioned by the Home Office and published in 2009, implies a benefit-cost ratio of approximately 2.5:1 in net terms for every £1 spent a saving of £2.50 is made. Conversely if a saving is made against the direct service delivery for every £1 saved a cost of £2.50 should be expected in other front line services. On this accepted formula a reduction of £357,440 will net a cost of £893,600 within other public services.
5. The budget portfolio is based on the regional average spend from the public health grant, which is estimated at 30% of the full budget (excluding the new children's portfolio) national formula is set by Public health England at 34%.

**Risk management**

6. In compliance with the councils risk management strategy the following risks have been identified relating to the proposed budget cut, re procurement of the services brings minimal risk.

Impact scoring using CYC guidance

Risk	Likelihood	Impact	Score	Matrix risk score
Financial impact	5 Highly probable	Catastrophic	5	25
Compliance	4	Minor	2	10

and regulation impact	Probable			
Target customer base	5 Highly probable	Catastrophic	5	25
Authority reputation	5 Highly probable	Moderate	3	16
Health and safety	3 Possible	Catastrophic	5	23

7. The main risk associated with a budget reduction as proposed will be the capacity of the available service provision. It is clinically unsafe to reduce the medical offer so services which offer support to those who do not require medical intervention will need to be reduced. This means that some people requiring alcohol interventions will be unable to access services.  
In addition, interventions such as in patient detoxification, blood borne virus vaccinations (hep B), basic health care, any criminal justice related activity, support for families are likely to be effected by the cuts.
8. Local headlines such as “More York Drinkers ending up in hospital”<sup>[1]</sup> indicate a real juxtaposition for our way forward, publicly stating our commitment to alcohol issues being a key public health issue and then proposing significant cuts to those services.

1. [http://www.yorkpress.co.uk/news/14593899.More\\_York\\_drinkers\\_ending\\_up\\_in\\_hospital/](http://www.yorkpress.co.uk/news/14593899.More_York_drinkers_ending_up_in_hospital/)

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<sup>[i]</sup> Jones A., Donmall M., Millar T. et al. (2009) [UK] Home Office. <http://www.dtors.org.uk/>

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<sup>[1]</sup> [http://www.yorkpress.co.uk/news/14593899.More\\_York\\_drinkers\\_ending\\_up\\_in\\_hospital/](http://www.yorkpress.co.uk/news/14593899.More_York_drinkers_ending_up_in_hospital/)