

Adult Social Care & Health Scrutiny Committee

Portfolio: Adult Social Care & Health

Strategic Intent

To help people retain independence and quality of life at home and provide early help and support as part of our neighbourhood and prevention approach. We will embed our home first ethos and admit fewer people into bed-based care and thereby reducing demand for long-term care. We will focus on our reablement and early help model as well as supporting our residents with learning disabilities. We will integrate our health and care services across Stockport through the new model of Integrated Health and Care, and aim to reduce inequalities via early intervention and targeted support as well as deliver efficient services that provide value for money.

CP priority	MTFP driver	Directorate and Service area	Proposal summary	Saving 24/25 (£000)	Lead Portfolio
Delivering for those who need it most Wellbeing in Neighbourhoods	Demand Management	Adult Social Care	<p>Maximising Prevention and Independence</p> <p>We will manage demand in our care management budgets through prevention and maximisation of independence for individuals. As part of our Community Led Support model we will use bookable appointments to offer improved information, advice and guidance earlier to individuals reducing the need for long term care.</p> <p>We will increase the use of Technology Enabled Care for individuals who access our services. This will enable more individuals to leave hospital and be supported in their own homes in the community.</p>	250	Adult Social Care & Health
Delivering for those who need it most Wellbeing in	Demand Management	Adult Social Care Care Management	<p>Care Act Application</p> <p>We will continue with our annual review programme. This work as required by the Care Act will focus upon enabling people to live as independently as possible in their own homes and avoid residential care wherever possible.</p>	1,000	Adult Social Care & Health

CP priority	MTFP driver	Directorate and Service area	Proposal summary	Saving 24/25 (£000)	Lead Portfolio
Neighbourhoods			We will further increase the use of direct payments to give people more choice and control over their care and we will use more technology enabled care to promote independence.		
Delivering for those who need it most Wellbeing in Neighbourhoods	Demand Management	Adult Social Care Care Management	Demand Management We will support more people to receive early advice and information on how to keep independent for longer in their own homes. This will enable people to live their life more independently without the need for higher levels of care especially residential care. We will continue to support more people to go 'Home First' from hospital. It is proposed that the service will not draw down on the demand monies that are built into the Medium-Term Financial Plan.	1,000	Adult Social Care & Health
			<u>Subtotal Demand Management</u>	2,250	
Delivering for those who need it most Wellbeing in Neighbourhoods	Value for Money	Adult Social Care Care Management	Managing the External Care Markets The service will work with the external provider market to ensure that optimum levels of commissioning are achieved and packages of care are appropriate to meet the assessed care and support needs of individuals.	250	
			<u>Subtotal Value For Money</u>	250	
Delivering for those who need it most Wellbeing in	Robust Corporate Governance	Adult Social Care Care Management	Better Care Fund Uplift Adult Social Care receives an annual uplift to its Better Care Fund. It is proposed to use £0.5m of this year's uplift to support the demand and demographic pressures in the	500	Adult Social Care & Health

CP priority	MTFP driver	Directorate and Service area	Proposal summary	Saving 24/25 (£000)	Lead Portfolio
Neighbourhoods			service.		
Delivering for those who need it most	Robust Corporate Governance	Adult Social Care Provider Services	<p>Service Delivery Model: Provider Services</p> <p>There are two vacant support work posts within the service. These will be removed.</p>	110	Adult Social Care & Health
Delivering for those who need it most Delivering efficient and effective services	Robust Corporate Governance	Public Health	<p>Grant maximisation (Public Health)</p> <p>Government has indicated that the public health grant will increase by £235k in April 2024, although this value is subject to change. The resulting increase in the core Public Health budget will be £140k less than the increase in the grant value. We will work to maintain service delivery within this revised budget.</p>	140	Adult Social Care & Health
Delivering for those who need it most Delivering efficient and effective services	Robust Corporate Governance	Public Health	<p>Contract reduction (Public Health)</p> <p>Contract review with targeted reduction on demand-led elements to reflect reducing demand for services.</p>	20	Adult Social Care & Health
Delivering for those who need it most Delivering efficient and	Robust Corporate Governance	Public Health	<p>Health Promise review (public health)</p> <p>Remove funding for a vacant policy post.</p>	22	Adult Social Care & Health

CP priority	MTFP driver	Directorate and Service area	Proposal summary	Saving 24/25 (£000)	Lead Portfolio
effective services					
			<u>Subtotal Robust Corporate Governance</u>	792	
			Total MTFP savings	3,292	

Project	Maximising Prevention & Independence (£0.250m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most Wellbeing in Neighbourhoods
Senior responsible officer	Sarah Dillon
MTFP Lens	Demand Management
Service	Adult Social Care (ASC) – Service Wide
Proposal summary	<p>Maximising Prevention & Independence</p> <p>We will manage demand in our care management budgets through prevention and maximisation of independence for individuals. As part of our Stockport Local model we will use bookable appointments to offer improved information, advice and guidance earlier to individuals reducing the need for long term care.</p> <p>We will increase the use of Technology Enabled Care for individuals who access our services. This will enable more individuals to leave hospital and be supported in their own homes in the community.</p>
How will the saving be achieved 24/25	<p>We will work to maximise prevention and improve outcomes for individuals, helping us to support people earlier, seek to improve their independence and therefore manage demand.</p> <p>We will ensure that the assessed care needs of individuals are met through the most effective way for each</p>

Project	Maximising Prevention & Independence (£0.250m)
	<p>person, supporting personalisation and independence. We will seek to support individuals with a learning disability to work towards greater independence. For example, for some people this may mean we support them to work towards greater independence through accessing education and paid employment.</p> <p>National research and best practice indicates that there are further opportunities to support individuals to maintain their independence within the community. We are exploring opportunities to better use technology and developing our Technology Enabled Care (TEC) Strategy.</p> <p>Supporting this programme is our Stockport Local model. The first phase will see the introduction of community based appointments where individuals can discuss their needs and access information, advice and guidance in a timely way.</p>
Any benchmarking information available to compare Stockport with comparable authorities	<p>National and regional benchmarking has indicated that;</p> <ul style="list-style-type: none"> • Stockport has the third highest number of residential placements in Greater Manchester. • Stockport has the second highest number of Day Care Placements in Greater Manchester. • There are further opportunities to support individuals to maintain their independence within the community.
Workforce impact. Outline any changes to the workforce as a result of this proposal	<p>There will be no changes to staffing as a result of this proposal.</p>
Outline any internal / organisational impact of the proposal	<p>The following organisational impacts have been identified;</p> <ul style="list-style-type: none"> • This programme of work will be interdependent with the other savings proposals described within Demand Management. • Social work practitioners will continue to ensure that any proposals developed meet the individual assessed care and support needs. • Inflation levels may mean increased costs for technology enabled care kit, placing further pressures on ASC budgets.
Outline any risks or changes to service delivery and impact this proposal may have on service users	<p>The following risks have been identified;</p> <ul style="list-style-type: none"> • The Council needs to be able to access to new technology and understand will this have an impact on supporting individuals to live independently reducing the need for more traditional commissioned services.
<p>Delivering the change</p> <p>List key milestones and</p>	<p>Our Technology Enabled Care (TEC) programme is about adopting sector wide best practice and so has already commenced with the following milestones identified;</p>

Project	Maximising Prevention & Independence (£0.250m)
delivery dates (where known)	<ul style="list-style-type: none"> • First draft of TEC strategy and initial recommendations – August 23 • Socialisation and communication of the TEC strategy – November – December 23. • Finalisation and launch of the TEC strategy – December 23 • Implementation plan to be developed – Jan 24 • Savings to be realised – from April 24. <p>The remainder of these savings are currently being scoped, in doing so milestones will be identified.</p>
Will reserves/ double running be needed in order to deliver this proposal?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Is a separate EqIA (Equalities impact assessment) needed?	Yes, EqIA has been written and will continue to be developed and updated alongside the proposals.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Care Act Application (£1.000m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most
Senior responsible officer	Sarah Dillon
MTFP Lens	Demand Management
Service	Adult Social Care (ASC) – Support & Care Management
Proposal summary	<p>Care Act Application</p> <p>We will continue with our annual review programme. This work as required by the Care Act will focus upon enabling people to live as independently as possible in their own homes and avoid residential care wherever possible.</p> <p>The programme will ensure that individuals receive personalised care and;</p> <ul style="list-style-type: none"> • Have the choice, control and support they need to live independent lives. • Can access outstanding quality and tailored care and support.

Project	Care Act Application (£1.000m)
	<ul style="list-style-type: none"> Find Adult Social Care fair and accessible <p>We will further increase the use of direct payments to give people more choice and control over their care and we will use more technology enabled care to promote independence.</p>
<p>How will the saving be achieved 24/25</p>	<p>Care Act reviews will continue to be undertaken for individuals to ensure that their care and support needs are being met in a personalised and strengths based way.</p> <p>We will undertake reviews and reassessments to ensure that each individual's support plan is able to meet their assessed levels of need. This includes ensuring that we have the appropriate funding in place for each individual. Care and support needs may in future be delivered through a combination of commissioned and universal services.</p>
<p>Any benchmarking information available to compare Stockport with comparable authorities</p>	<p>Stockport has the third highest number of residential placements in Greater Manchester.</p>
<p>Workforce impact. Outline any changes to the workforce as a result of this proposal</p>	<p>No.</p>
<p>Outline any internal / organisational impact of the proposal</p>	<p>The following organisational impacts have been identified;</p> <ul style="list-style-type: none"> This programme of work will be interdependent with the other savings proposals described within Demand Management. There will be no changes to service delivery
<p>Outline any risks or changes to service delivery and impact this proposal may have on service users</p>	<p>The following risks have been identified;</p> <ul style="list-style-type: none"> Availability of cost effective care provision in borough.
<p>Delivering the change List key milestones and delivery dates (where</p>	<ul style="list-style-type: none"> Project implementation planning Dec 23 – Jan 24 Project Delivery 31st March 2025

Project	Care Act Application (£1.000m)
known)	
Will reserves/double running be needed in order to achieve this?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Is a separate EqIA (Equalities impact assessment) needed?	No EqIA required as reviewing activity is an expected requirement under Care Act legislation and should be regarded as business as usual.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Demand Management (£1.000m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most
Senior responsible officer	Sarah Dillon
MTFP Lens	Demand Management
Service	Adult Social Care (ASC) – Support & Care Management
Proposal summary	<p>Demand Management</p> <p>We will support more people to receive early advice and information on how to keep independent for longer in their own homes. This will enable people to live their life more independently without the need for higher levels of care especially residential care. We will continue to support more people to go ‘Home First’ from hospital.</p> <p>It is proposed that the service will not draw down on the demand monies that are built into the Medium-Term Financial Plan.</p>
How will the saving be achieved 24/25	<p>The service improvement and transformation programme is enabling the Council to ensure that ASC is delivered in the most efficient and effective way and provides the right service delivery models to maximise the outcomes for the residents of Stockport. Examples include;</p> <ul style="list-style-type: none"> • Stockport Local model – brining effective early triage, information, advice, guidance and prevention services to reduce the need for long term care where this is possible.

Project	Demand Management (£1.000m)
	<ul style="list-style-type: none"> • Improved online presence to support individuals to self-serve. • Implementation of an enhanced Technology Enabled Care offer. <p>Collectively the programme will enable the service to manage the increase demands which are being seen nationally for ASC services.</p>
Any benchmarking information available to compare Stockport with comparable authorities	<p>National and regional benchmarking has indicated that;</p> <ul style="list-style-type: none"> • Stockport has the third highest number of residential placements in Greater Manchester (GM). • Stockport has the second highest number of Day Care Placements in GM.
Workforce impact. Outline any changes to the workforce as a result of this proposal	No.
Outline any internal / organisational impact of the proposal	<p>The following organisational impacts have been identified;</p> <ul style="list-style-type: none"> • This programme of work will be interdependent with the other savings proposals described within Demand Management.
Outline any risks or changes to service delivery and impact this proposal may have on service users	<p>The following risks have been identified;</p> <ul style="list-style-type: none"> • Availability of cost effective care provision in borough. • Increasing demand for Adult Social Care
<p>Delivering the change</p> <p>List key milestones and delivery dates (where known)</p>	ASC budget to be set as part of the Annual Council budget setting process in February 2024.
Will reserves/double running be needed in order to achieve this?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Is a separate EqIA (Equalities impact	No EqIA is required at this stage.

Project	Demand Management (£1.000m)
assessment) needed?	
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Managing External Care Markets (£0.250m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most Wellbeing in neighbourhoods
Senior responsible officer	Sarah Dillon
MTFP Lens	Value for Money
Service	Adult Social Care (ASC) – Support & Care Management
Proposal summary	Managing External Care Markets The service will work with the external provider market to ensure that optimum levels of commissioning are achieved and packages of care are appropriate to meet the assessed care and support needs of individuals.
How will the saving be achieved 24/25	The Council is one of the few remaining within the North West region that pay bed based care providers net of an individual's financial contribution. This means that responsibility for collecting income from individuals is currently with the external care providers. It is necessary for the Council to move to paying the external care sector gross to be consistent with the sector norms.
Any benchmarking information available to compare Stockport with comparable authorities	National and regional benchmarking has indicated that; <ul style="list-style-type: none"> • Stockport has high fee rates compared to other LA's – 2nd highest ceiling rate out of 22 Local Authorities (LA) in NW region for Residential Dementia and the highest for Standard Nursing. • 7 out of 22 other North West LA's pay care providers in the same way we do currently (net).
Workforce impact. Outline any changes to the workforce as a result of this proposal	There will be no changes to staffing as a result of this proposal.
Outline any internal / organisational impact of the proposal	There will be no changes to the organisation as a result of this proposal.

Project	Managing External Care Markets (£0.250m)
Outline any changes to service delivery and impact this proposal may have on service users	There will be no changes to service delivery.
Delivering the change List key milestones and delivery dates (where known)	<ul style="list-style-type: none"> • Autumn 2023 - programme governance in place and communication plan drafted. • January 2024 – Implementation timescales to be agreed by ASC SMT and communication to take place with the care sector. • TBC – Gross payments live for all new clients. • April 2024 - All existing clients have been moved across to gross payment terms.
Will reserves/ double running be needed in order to deliver this proposal?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation. Further engagement will take place with external care providers as part of the 2024/25 fee setting process.
Is a separate EqIA (Equalities impact assessment) needed?	No EqIA is required at this stage.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Better Care Fund Investment (£0.500m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most Wellbeing in Neighbourhoods
Senior responsible officer	Sarah Dillon
MTFP Lens	Robust Corporate Governance
Service	Adult Social Care (ASC) – Service wide
Proposal summary	Better Care Fund (BCF) Investment ASC receives an annual uplift to its BCF. It is proposed to use £0.5m of this year's uplift to support the demand

Project	Better Care Fund Investment (£0.500m)
	and demographic pressures in the service.
How will the saving be achieved 24/25	An element of the BCF inflationary uplift will be used to support the delivery of ASC.
Any benchmarking information available to compare Stockport with comparable authorities	There is no benchmarking information available.
Workforce impact. Outline any changes to the workforce as a result of this proposal	There will be no changes to service delivery or staffing as a result of this proposal.
Outline any internal / organisational impact of the proposal	<p>The following organisational impacts have been identified;</p> <ul style="list-style-type: none"> • Consideration will need to be given to the 2024/25 BCF planning documents when they are released to ensure the Locality continues to invest its BCF to planning guidance priorities. • Collaboration between Health and Social Care partners will inform investment priorities. • BCF uplift needs to fund any pay awards for staff aligned to BCF schemes.
Outline any risks or changes to service delivery and impact this proposal may have on service users	There will be no changes to services delivery and no direct impact on individuals.
<p>Delivering the change</p> <p>List key milestones and delivery dates (where known)</p>	To be agreed as part of the BCF planning process. Reductions in investment will be applied from 1 st April 2023.
Will reserves/ double running be needed in order to deliver this proposal?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.

Project	Better Care Fund Investment (£0.500m)
Is a separate EqIA (Equalities impact assessment) needed?	No EqIA is required at this stage.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Staffing – Service Delivery Model (Provider Services) (£0.110m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most
Senior responsible officer	Sarah Dillon
MTFP Lens	Demand Management
Service	Adult Social Care (ASC) – Specialist Services
Proposal summary	Staffing – Service Delivery Model (Provider Services) There are two vacant support work posts within the service. These will be removed.
How will the saving be achieved 24/25	Removal of two vacant posts within the service.
Any benchmarking information available to compare Stockport with comparable authorities	There is no benchmarking available to support this proposal.
Workforce impact. Outline any changes to the workforce as a result of this proposal	Yes, there will be a reduction of two vacant posts.
Outline any internal / organisational impact of the proposal	The following organisational impacts have been identified; <ul style="list-style-type: none"> • It is important that the service has the right staffing model in place to discharge statutory duties and effectively manage demand. • Recruitment and retention issues place additional pressure on staffing budgets.

Project	Staffing – Service Delivery Model (Provider Services) (£0.110m)
Outline any changes to service delivery and impact this proposal may have on service users	There will be no changes to service delivery.
Delivering the change List key milestones and delivery dates (where known)	Vacant posts will be removed following budget council in February 2024.
Will reserves/ double running be needed in order to deliver this proposal?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Is a separate EqIA (Equalities impact assessment) needed?	Yes, EqIA will be appropriate and undertaken where proposals have an impact on service delivery.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Grant maximisation (Public Health) (£0.140m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most Delivering efficient and effective services
Senior responsible officer	Jilla Burgess-Allen
MTFP Lens	Robust Corporate Governance
Service	Public Health
Proposal summary	Grant maximisation (Public Health) Government has indicated that the public health grant will increase by £235k in April 2024, although this value is subject to change. The resulting increase in the core Public Health budget will be £140k less than the increase in

Project	Grant maximisation (Public Health) (£0.140m)
	the grant value. We will work to maintain service delivery within this revised budget.
How will the saving be achieved 24/25	This saving has the greatest impact on services commissioned from NHS providers, where cost increases are being driven by NHS pay settlements. The saving will limit the growth funding available to offset cost increases.
Any benchmarking information available to compare Stockport with comparable authorities	Stockport has the (joint) second lowest spend per head of population on Children's Public Health in GM.
Workforce impact. Outline any changes to the workforce as a result of this proposal	Subject to further development.
Outline any internal / organisational impact of the proposal	Achieving this saving while maintaining service delivery will require close partnership working with NHS providers.
Outline any changes to service delivery and impact this proposal may have on service users	<p><u>Risk</u></p> <p>Not investing the full grant allocation in public health improvements risks worsening population health outcomes, increasing inequalities, and will increase future demand in health and care services. Attempts to mitigate will be made through contract negotiations and service review.</p>
<p>Delivering the change</p> <p>List key milestones and delivery dates (where known)</p>	Programme is currently being scoped.
Will reserves/ double running be needed in order to deliver this proposal?	Attempts to mitigate the risk of use of reserves will be made through contract negotiations and service review.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Is a separate EqIA (Equalities impact assessment) and/ or an	Yes, EqIA will be appropriate and undertaken where proposals have an impact on service delivery.

Project	Grant maximisation (Public Health) (£0.140m)
EIA (Environmental impact assessment) needed?	
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Contract reduction (Public Health) (£0.020m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most Delivering efficient and effective services
Senior responsible officer	Jilla Burgess-Allen
MTFP Lens	Robust Corporate Governance
Service	Public Health
Proposal summary	Contract reduction (Public Health) Contract review with targeted reduction on demand-led elements to reflect reducing demand for services.
How will the saving be achieved 24/25	This saving will be achieved through a reduction in the budget provision for these activities.
Any benchmarking information available to compare Stockport with comparable authorities	No.
Are there staffing reductions/ implications?	No.
Outline any internal / organisational impact of the proposal	No changes to provision are anticipated, but measures to reduce growth in activity levels may be needed in future years to ensure that this saving is achieved recurrently.
Outline any changes to service delivery and impact this proposal may have on service users	This proposal would reduce the budget to match recent years' spend. It does not directly change service delivery but may mean that in future we are unable to fund increases in the cost or demand for these services.

Project	Contract reduction (Public Health) (£0.020m)
Delivering the change List key milestones and delivery dates (where known)	Budget to be adjusted as part of budget setting at start of the Financial Year 2024/25. Close monitoring of activity to take place and measures introduced to bring activity in line with the budget available if required.
Team required to support delivery/ cost of delivery	No.
Will reserves/ double running be needed in order to deliver this proposal?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Risk to delivery and mitigating actions (including dependencies to other proposals)	Not investing the full grant allocation in public health improvements risks worsening population health outcomes, increasing inequalities, and will increase future demand in health and care services. Attempts to mitigate will be made through contract negotiations and service review, but there will be a reduction or cessation of services for residents.
Is a separate EqIA (Equalities impact assessment) and/ or an EIA (Environmental impact assessment) needed?	No EqIA is required at this stage.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.

Project	Health Promise review (Public Health) (£0.022m)
Lead portfolio	Adult Social Care & Health
Council Plan Priority	Delivering for those who need it most Delivering efficient and effective services
Senior responsible officer	Jilla Burgess-Allen

Project	Health Promise review (Public Health) (£0.022m)
MTFP Lens	Robust Corporate Governance
Service	Public Health
Proposal summary	Health Promise review (Public Health) Remove funding for a vacant policy post.
How will the saving be achieved 24/25	The Health Promise was established several years ago to align resource from the public health grant with activity undertaken by other areas of the Council, which directly contribute to delivery of public health duties. This post has achieved the embedded change expected and is no longer required. Funding for this post will be removed from budgets.
Any benchmarking information available to compare Stockport with comparable authorities	No.
Workforce impact. Outline any changes to the workforce as a result of this proposal	No.
Outline any internal / organisational impact of the proposal	Relevant issues will continue to be addressed by Public Health officers working closely with colleagues across the Council.
Outline any changes to service delivery and impact this proposal may have on service users	The loss of this expertise risks reducing our effectiveness in preventing ill health through the wider determinants of health.
Delivering the change List key milestones and delivery dates (where known)	Establishment to be adjusted as part of budget setting process for 2024/25.
Team required to support	No.

Project	Health Promise review (Public Health) (£0.022m)
delivery/ cost of delivery	
Will reserves/ double running be needed in order to deliver this proposal?	No.
Is public consultation needed?	No specific consultation on this proposal is needed, however we have sought views on all our change proposals through our overall budget public consultation.
Is a separate EqIA (Equalities impact assessment) and/ or an EIA (Environmental impact assessment) needed?	No EqIA is required.
Is a separate EIA (Environmental impact assessment) needed?	No EIA is required.