

**Report of Commissioning and Contracts Officer**

**Report to Director of Public Health**

**Date: 24<sup>th</sup> January 2018**

**Subject: Request to initiate contract extensions and variations with Leeds Community Healthcare NHS Trust and GPs to enable key public health services to be maintained in accordance with Contracts Procedure Rules 21.1 contract extensions and 21.7 contract variations**

Are specific electoral wards affected? If yes, name(s) of ward(s):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, access to information procedure rule number: Appendix number:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Summary of main issues**

1. In April 2013, local authorities took the lead from the NHS for improving the health of their local communities. As part of this process, public health budgets were protected under the ring-fenced grant in order to drive local efforts to improve health and wellbeing by tackling the wider determinants of poor health.
2. This report is seeking to initiate the last available 12 months extension provision within the contracts with Leeds Community Healthcare NHS trust to deliver health protection - infection control, healthy child pathway and early start service (health visiting) services and with GPs to deliver NHS health checks. The contract extensions are required to ensure continuity of these key public health services until 31<sup>st</sup> March 2019. This additional time will enable the council to complete service reviews and re-commissioning for these services with the aim to achieve long term, value for money solutions, which deliver high quality outcomes for the council and service users.
3. In addition, the report is seeking approval to vary the NHS health checks and early start service contracts to ensure the contracts and funding reflect the services being delivered for the council.

## Recommendations

4 The Director of Public Health is recommended to approve:

- a 12 month extension of the contract (9TVG-HXC1VS) held with Leeds Community Healthcare NHS trust for the delivery of Health Protection (infection control service) in accordance with Contract Procedure Rule (CPR) 21.1.
- a 12 month extension of the contract (9TVG-RGPSVB) held with Leeds Community Healthcare NHS trust for the delivery of the healthy child pathway services in accordance with CPR 21.1.
- a 12 month extension of the contract (9RLG-STKYJH) held with Leeds Community Healthcare NHS trust for the delivery of the early start (health visiting) service and a variation to the contract annual value as defined in Appendix 1 in accordance with CPRs 21.1 and 21.7.
- a 12 month extension of the contract (9TVH-DR496I) held with GPs for the delivery of NHS health checks service and a variation to the payment schedule as defined in Appendix 1 in accordance with CPR 21.1 and 21.7.

## **1. Purpose of this report**

- 1.1 The purpose of this report is to set out the rationale for seeking 12 month contract extensions to the current public health contracts provided by Leeds Community Healthcare NHS trust (LCH) (health protection - infection control, healthy child pathway, early start service (health visiting)) and GPs (NHS health checks) in accordance with Contracts Procedure Rules (CPRs) 21.1 (Contract extension). This is the last extension provision available on these contracts meaning that they will expire on 31<sup>st</sup> March 2019.
- 1.2 The report is also seeking approval for contract variations to the early start service (health visiting) and NHS health checks services in accordance in with CPR 21.7 (contract variation).
- 1.3 Full details of the proposed extensions and variations are provided in Appendix 1.

## **2. Background information**

- 2.1 On 1<sup>st</sup> April 2013, the Leeds Primary Care Trust ceased to exist and the Public Health function transferred to Leeds City Council as set out in the Health and Social Care Act 2012. Through a Statutory Instrument under the Act functions, resources, ring-fenced budget and assets and liabilities, including contracts, transferred to the Council via two transfer schemes.
- 2.2 In order to ensure service continuity and compliance with the Council's CPRs, Public Health worked with the Projects Programmes and Procurement Unit (PPPU) to ensure all public health contracts were reviewed and providers were formally awarded contracts based on Department of Health terms and conditions.
- 2.3 New contracts were awarded to GPs to deliver NHS health checks, and to LCH for both infection control and healthy child pathway services (incorporating specialist community public health nursing (5-19 years) and dental public health services) on 1<sup>st</sup> April 2015. These new 2 year contracts (with 2 x 12 months extension provision) ensured longer term stability and continuity of these public health services whilst service reviews are undertaken to inform future service remodelling and re-commissioning. Details of these contracts are provided in Appendix 1.
- 2.4 Public Health took over the commissioning responsibility for healthy child programme (HCP) for 0-5 year olds (incorporating health visiting and family nurse partnership (FNP) programmes) from NHS England on 1<sup>st</sup> October 2015. The early start service (health visiting) contract was for 18 months with the provision to extend for further 2 x 12 months. The contract provides the HCP for 0-5 year olds in Leeds and consists of a universal programme of 5 statutory contacts with families. This contract was subject to a contract variation on 1<sup>st</sup> April 2017 to remove the FNP programme (which was a more targeted approach to deliver the HCP to young first time parents) as a consequence of the findings of an evaluation study and the central government public health grant cuts.
- 2.6 Commissioning and monitoring of the NHS health checks is one of the mandatory public health functions for Local Authorities. Leeds has been offering NHS health checks to eligible citizens since 2009 delivered in GP practices. The NHS health check service is an activity based contract with GP practices across Leeds.

### **3. Main issues**

- 3.1 The proposed extensions are for a further 12 months from 1<sup>st</sup> April 2018, which mean that the contracts will expire on 31<sup>st</sup> March 2019. This will be the last period of extension available. The LCH services have already been subject to a contract variation to reduce their annual contract value and have continued to be able to demonstrate value for money and quality against performance targets within the service specification.
- 3.2 Continuity of these services is required to maintain progress towards meeting the public health responsibilities of the Council, and towards meeting the priorities set out in the health and wellbeing strategy. If these services do not continue, there would be disruption to service users and a risk to the wider public health agenda.
- 3.3 This report is also seeking contract variations for two of the contracts (early start service and NHS health checks) detailed in Appendix 1. The variation to early start service involves realigning the contract value to reflect the workforce delivering the health visiting service under this contract and the infant mental health service commissioned by the Clinical Commissioning Group (CCG) (and funded by the Council). The variation to the NHS health checks involves an adjustment to the existing payment schedule to be activity and outcome based therefore paying GPs for achieving 50%, 75% and 100% of their annual target.
- 3.4 The Council is proposing to keep all other contractual terms and conditions unchanged for the remainder of the contracts. It is the intention for the contract manager to work in partnership with LCH and GPs to develop an effective transition plan for these services if needed as a result of the service review and re-commissioning projects.
- 3.6 Public Health is currently working with PPPU and other partners to undertake service review and re-commissioning projects for projects for the healthy child pathway services, including the health visiting element of the early start service, infection prevent and control service and long term conditions (NHS Health checks) with the intention for new arrangements to be in place to deliver the services covered in this report from 1<sup>st</sup> April 2019. Approvals in relation to these projects will be obtained in due course in separate reports.

### **4. Corporate considerations**

#### **4.1 Consultation and engagement**

- 4.1.1 Consultation about the contract extensions and variations has been undertaken with the Executive Member for Health, Wellbeing & Adults, LCH and GPs.

#### **4.2 Equality and diversity / cohesion and integration**

- 4.2.1 An equality and diversity screening assessment (see Appendix 2) has been undertaken in regard to this decision to extend and vary the contracts detailed in Appendix 1.
- 4.2.2 The strategic reviews and re-commissioning of these key public health services are being subject to separate project specific equality and diversity impact assessments.

### **4.3 Council policies and best council plan**

4.3.1 Continuity of the services provided by the LCH and GP contracts supports the delivery of the council's public health responsibilities and priorities, which will help to deliver:

- Vision for Leeds 2011 to 2030
- Joint Health and Wellbeing Strategy 2016 - 21
- Best Council Plan 2017-18
- Leeds Health and Care Plan

### **4.4 Resources and value for money**

4.4.1 The cost of these contract extensions is met by revenue Public Health funding. These contracts have already been subject to a reduction in funding as a consequence of the central government cuts to the Public Health grant. No additional cuts are proposed as part of the contract extensions apart from a contract variation to the early year service, which aligns the council funding of two services delivered by LCH according to their workforce.

4.4.2 The contract extensions are required to ensure continuity of these key public health services whilst providing sufficient time to complete the service review and recommissioning projects, which will deliver cost effective long term arrangements for the services detailed in this report.

### **4.5 Legal implications, access to information, and call-in**

4.5.1 The extension of the contracts is a key decision due to the annual value of the contracts and is subject to Call In. There are no grounds for treating the contents of this report as confidential with the Council's Access to Information Rules.

### **4.6 Risk management**

4.6.1 In approving the contract extensions for an additional 12 months, it allows for the continuity of provision and time to formulate and /or undertake procurement exercises for future procurement exercises for future service provision

## **5. Conclusions**

5.1 The contract extensions are required to ensure no disruption to services whilst the council completes the service review and re-commissioning projects, whose aim is to achieve a long term, value for money solutions, which deliver high quality outcomes for the Council and service users.

5.2 Throughout the 12 month extension period, these contracts will continue to be closely contract managed to ensure robust performance monitoring takes place, value for money is being achieved for the Council and that there is a smooth transition between the existing and new arrangements to deliver these services.

## **6. Recommendations**

6.1 The Director of Public Health is recommended to approve:

- a 12 month extension of the contract (9TVG-HXC1VS) held with Leeds Community Healthcare NHS trust for the delivery of Health Protection (infection control service) in accordance with Contract Procedure Rule (CPR) 21.1.
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- a 12 month extension of the contract (9TVH-DR496I) held with GPs for the delivery of NHS health checks service and a variation to the payment schedule as defined in Appendix 1 in accordance with CPR 21.1 and 21.7.

## **7. Background documents<sup>1</sup>**

7.1 None

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<sup>1</sup> The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.