

# Report seeking authority to procure a new NHS Health Checks service which will replace the existing provision

Date: 29 March 2023

Report of: Head of Public Health (Older People, Long Term Conditions and Cancer)

Report to: Director of Public Health

Will the decision be open for call in?  Yes  No

Does the report contain confidential or exempt information?  Yes  No

## Brief summary

The Council's existing contract with the Leeds GP Confederation to deliver the NHS Health Checks Service (DN370138) is due to expire on 30 March 2024, and there is no further extension provision. This report is seeking approval to procure a new 5 year contract (with an up to 36 months extension provision) with the Leeds GP Confederation for NHS Health Check service using Regulation 32 (2) (b) (ii) of the Public Contracts Regulations 2015 - negotiated procedure without prior publication of a notice.

## Recommendations

The Director of Public Health is recommended to:-

- a) approve authority to put an offer, in principle, to the Leeds GP Confederation, as outlined in this report under Regulation 32 (2) (b) (ii) of the Public Contracts Regulations 2015, to enter into negotiations to establish a new contract for the provision of a new NHS Health Check contract for a period of 5 years commencing 1<sup>st</sup> April 2024 (with an option to extend for a period of up to 36 months in any combination) with a maximum budget of £520,000 per annum plus up to a potential maximum of £550,000 of Public Health Reserves will be available over the first two years. (The budget is £4,710,000 for the overall contract period if all extensions are used).
- b) approve the use of 100% quality tender evaluation criteria, in accordance with Contract Procedure Rules (CPRs) 15.2 (b).
- c) note that a further report to approve the contract award which will be a direct consequence of this key decision will be submitted for approval at the end of the procurement process and will therefore be a significant operational decision at most which will not be subject to call in.

## **What is this report about?**

- 1 This report sets out the rationale to grant authority to procure an NHS Health Check Service under Regulation 32(2) (b) (ii) of the Public Contracts Regulations 2015 - negotiated procedure without prior publication of a notice - and directly award a contract to the Leeds GP Confederation for the provision of the service from 1 April 2024.
- 2 Leeds City Council is nationally mandated to commission the NHS Health Check programme to its eligible population. The NHS Health Check programme aims to prevent cardiovascular disease (CVD) and associated conditions through the early assessment, awareness, and management of risk factors. It targets eligible adults between the ages of 40-74 to spot the early signs of stroke, kidney disease, heart disease, type 2 diabetes and dementia and offers advice, support, and interventions to reduce their overall risk. These conditions have the greatest impact on the most deprived communities, so the NHS Health Check also provides an opportunity to help reduce health inequalities. Leeds has been offering NHS Health Checks to its eligible population since 2009 from all GP practices.
- 3 The current NHS Health Check service contract in Leeds is provided by the Leeds GP Confederation and commenced 1st April 2019 with a contract value of £520,000 per annum. This contract was for a period of three years with an option to extend for a further two years, which was invoked in November 2021.
- 4 Two short term pilots commenced in 2022 with Reed Wellbeing Ltd managed by the Leeds GP Confederation to deliver an additional 2,400 NHS Health Checks in Practices following reduced delivery during Covid. It is proposed that the new contract will be a mixed model using the capacity and efficiencies of the GP practice provision along with a community outreach model to target and maximise uptake from key at risk groups.
- 5 Leeds City Council Public Health team have been working with partners, stakeholders, and the public to review the NHS Health Check programme to inform how this service is delivered going forwards as part of the re-procurement process.

## **What impact will this proposal have?**

- 6 All eligible people will receive an invite for an NHS Health Check.
- 7 It is proposed to adopt a mixed model delivery of NHS Health Checks predominantly through GP practices subcontracted by the Provider with some testing of community outreach delivery for some key at risk groups which includes those from both ethnically diverse and most deprived communities but also those most likely to be high risk of Cardio Vascular Disease. Key at risk groups will be targeted and uptake maximised. Work will take place with third sector organisations to raise awareness and increase uptake. The accessibility for NHS Health Check offer would be maintained by providing choice to the person around venue, location and timing whilst established GP Practice pathways, blood testing infrastructure, staff skill and economies of scale are cost effective.
- 8 The additional community outreach could be provided in multiple ways by the Lead Provider, The Leeds GP Confederation, if approved as the procurement route. Possible options include:
  - Subcontract a third-party model of delivery
  - Leeds GP Confederation to employ staff to deliver out in the community
  - Primary Care Networks to develop community model of delivery

- 9 Accessible (including evenings/weekends) high quality NHS Health Checks will be offered in accordance with Best Practice guidance and standards.
- 10 The Programme of catch up activity will be continued where invites/uptake was significantly impacted during the period 2020-22 due to Covid-19. Pilots in the current contract have provided some additional capacity however there are 25,020 outstanding health checks to be delivered as part of a catch up. The Office for Health Improvement and Disparities (OHID), formerly Public Health England, have indicated that they expect this to be delivered over a 5-year period from 2023.
- 11 The GP Confederation is a Member Led organisation that unites and represents over 90 GP Practices across the city. All the advantages of GP Practice provision apply, however, the following benefits specifically apply to the Leeds GP Confederation as a lead Provider.
- Reduced management cost as only dealing with one provider
  - Use of existing IT infrastructure (System1, EMIS) input, extraction and recall. Patient data access ensures that eligibility is checked. To put the IT infrastructure in place with an alternative Provider would incur significant costs and require Practices to be willing to share data along with agreeing protocols.
  - Current GP Practice model uses existing venous blood testing without additional incurred costs – more cost effective, higher quality assurance and referral opportunities
  - Digital aspect of NHS Health Check can feed directly from and into the clinical system building on the pilot that has been developed by the GP Confederation. Some practices already established this.
  - Extended access appointments can offer flexible appointment times across evening and weekends if utilized. The GP Confederation manage the contracts for this provision. This service gives service users more options to obtain NHS Health Checks.
  - There is much more control to deliver LCC's core values. There is much more ability to influence and commission on outcomes
  - The GP Confederation have experience of developing, implementing and evaluating a pilot for community outreach in current contract, therefore in a good position to build on and manage a successful community outreach service.
  - Contractual issues will be easier to resolve with one provider
  - Negotiated Procedure will allow the opportunity to negotiate and build on outcomes and value for money.
- 12 An Equality, Diversity, Cohesion and Integration Assessment has been completed in relation to this decision.

**How does this proposal impact the three pillars of the Best City Ambition?**

- Health and Wellbeing       Inclusive Growth       Zero Carbon

- 13 This service will contribute to Best Council Plan's health priorities, namely:

- Reducing health inequalities and improve the health of the poorest fastest
- Supporting healthy, physically active lifestyles
- Supporting self-care, with more people managing their own health in the community

14 Furthermore, it will support the Leeds Health and Wellbeing Strategy priority of “A stronger focus on prevention”.

### What consultation and engagement has taken place?

Wards affected: It is a City Wide Service

Have ward members been consulted?  Yes  No

- 15 Public health and the Adults and Health commissioning team have undertaken consultation around the proposals detailed within this report with the existing Provider, the GP Confederation.
- 16 Various pieces of insight gathering were conducted including a Citizens Panel online survey (91 respondents from Leeds residents) and an external organisation (Social Marketing Gateway) was commissioned to conduct research targeting public and professionals delivering NHS Health Checks. In addition an open event was held in December 2022 to share key headlines from the NHS Health Check review were shared and consultation on key considerations to maximise NHS Health Check uptake.
- 17 A report on the proposals was taken to the Public Health Programme Board on 23<sup>rd</sup> January 2023 for discussion.
- 18 The Executive Member for Public Health was briefed on 9th February and in March 2023.
- 19 Advice has been sought from Procurement and Commercial Services (PACS) throughout the service review and recommissioning process, and will continue during the direct award procurement process

### What are the resource implications?

- 20 A potential maximum of £550,000 of public reserves is to be used specifically for the NHS Health Checks catch-up programme due to the Covid-19 pandemic where activity was very low. £400,000 will be allocated to fund a catch-up programme to be delivered in the first two years of the contract and this will include testing of community delivery. £150,000 of the maximum budget of £550,000 has been allocated to 2023/24 for increased NHS Health Check activity and if any of the activity-based funding is remaining this shall be added to the catch-up programme. The catch up budget would deliver the outstanding 25,020 NHS Health Checks, highlighted in section 10. Finance colleagues have confirmed that this public health reserves could be used as part of the new contract but would have to be used within the first two years of the new contract.
- 21 Continuation of any community delivery would need to be funded from the core £520,000 service budget envelop after year 2. Any changes to funding levels will managed through the

variation and change mechanism within the contract terms and conditions. This process will be informed by evaluation of effectiveness and value for money from community delivery in the first 2 years of the contract.

- 22 The proposed model is cost effective by using established GP Practice pathways, blood testing infrastructure, staff skills and economies of scale

### **What are the key risks and how are they being managed?**

- 23 Contract managing a large service and budget to committed to one organisation. Although only one provider the provision of the activity is actually subcontracted to over 90 Provider (GP practices), which mitigates this risk. Service risks (e.g., recruitment to posts, contractual issues) are actively discussed and managed as part of the NHS Health Check project meetings, where the need for escalation to manage a particular risk is determined. The majority of provision is still within GP Practices which can be affected by other priorities e.g. Covid vaccination programme, however this is mitigated by the flexibility of the addition of community outreach service.
- 24 An agreement in principle has been sought from the existing provider (Leeds GP Confederation) to progress with the discussions under the procurement route. This is going through their Governance processes and is due to be agreed at their Strategic Board on 22nd March 2023. Therefore, the risk that the Leeds GP Confederation could choose to step away from the delivery of this contract in March 2024 is being mitigated by assurances being sought.
- 25 There is a risk of funding levels preventing participation in the service by GP Practices due to inflationary pressures. To mitigate this, Leeds City Council will work with the provider to ensure the level of targets are deliverable within the budget envelope but this may mean a reduced level of service.

### **What are the legal implications?**

- 26 This is a key decision, and is subject to call-in, as the value of the contract is greater than £500,000 and was published on the forthcoming decisions on 19/01/2023. Future decisions arising from this report, for example the decision to award the contract, will also be treated as a consequence of that key decision and will therefore be significant operational decisions at most.
- 27 This report does not contain any exempt or confidential information under the Access to Information Rules
- 28 The Council believes that the decision to award a new contract to Leeds GP Confederation for the provision of an NHS Health Check service is permitted pursuant to Regulation 32(2)(b)(ii) of the Public Contracts Regulations 2015 which states: The negotiated procedure without prior publication may be used for public works contracts, public supply contracts and public service contracts in any of the following cases:- (b) where the works, supplies or services can be supplied only by a particular economic operator for any of the following reasons:- (ii) competition is absent for technical reasons,...but only....where no reasonable alternative or substitute exists and the absence of competition is not the result of an artificial narrowing down of the parameters of the procurement;”

- 29 This would be on the grounds that competition is absent due to the requirement for access to the GP patient records, which only the Leeds GP Confederation can provide. Due to the costs that would be incurred to gain access to patient records and the requirement for each individual Practices to be willing to share data along with agreeing protocols, no reasonable alternative or substitute exists, and the absence of competition is not the result of an artificial narrowing down of the parameters of the procurement.
- 30 A market sounding exercise was undertaken in August 2022 in order to assess the reaction of the market. Responses were limited with 5 submissions received including from the existing Providers Leeds GP Confederation and Reed Wellbeing. Whilst the other submissions had experience of providing small capacity NHS Health Check services in other areas, again the cost of gaining access to patient data to the required capacity for a Leeds service would be prohibitive.

## Options, timescales and measuring success

### What other options were considered?

- 31 An options appraisal for the model of delivery has been undertaken to consider the advantages and disadvantages of potential delivery models. (see Appendix 3 for information about the advantages and disadvantages of each option). Option 4 Mixed Model was selected.

Option 1	GP Practice delivery
Option 2	Community outreach delivery in a non GP setting
Option 3	Pharmacy Delivery
Option 4	Mixed model (Predominantly GP practice delivery with some testing of community outreach delivery for some key at risk groups)

- 32 Option 4 would enable further testing of and building capacity for community delivery approaches to determine if the approach can yield greater uptake from key at risk groups whilst maintaining the current delivery through General Practice as the predominant delivery mechanism. This would also ensure that the existing links with General Practice infrastructure are maintained, including access to the GP clinical system.
- 33 In addition, findings from the review (Appendix 1) suggest that the current Leeds approach and GP Provider approaches in other areas generally perform better overall in comparison to community provision but with some evidence suggesting that community settings may yield better NHS Health Check uptake in some most likely to benefit groups e.g. most deprived and South Asian. Also, public insight in Leeds shows that NHS Health Check delivery in General Practice is valued and supported but there is also an ask for greater availability and accessibility. Insight from the stakeholder event suggests potential added value from community approaches and greater working with the third sector in the delivery of NHS Health Checks.
- 34 A Procurement Route Options Appraisal was also undertaken, see Appendix 4 Procurement Route Options Appraisal for the advantages and disadvantages of each option. Option 2 was selected.

Option 1	Citywide coverage using individual GP practices via Direct Award under negotiated procedure for predominant NHS Health Check provision and focused community outreach
Option 2	Citywide coverage using GP Confed as lead provider via Direct Award under negotiated procedure for predominant NHS Health Check provision and focused community outreach. (As part of the negotiated procedure, project team to determine whether it is best for Confed. to directly provide community outreach (ie appoint staff) or sub-contract this element out to a third party)
Option 3	Competitive Tender Exercise for predominant NHS Health Check provision and focused community outreach
Option 4	Assuming Option 2 using Confed as lead Provider is adopted; two contracts to deliver: <ul style="list-style-type: none"> <li>1) Predominant NHS Health Check provision <ul style="list-style-type: none"> <li>- Direct GP Confed as lead provider</li> </ul> </li> <li>2) Focused Community Outreach via Competitive Tender</li> </ul>

### How will success be measured?

- 35 As part of the negotiated procedure, the Leeds GP Confederation will be required to submit method statements outlining their approach to deliver the requirements set out in the service specification. This report seeks approval to undertake 100% quality tender evaluation criteria, in accordance with Contract Procedure Rules (CPRs) 15.2 (b). The rationale for this being there is a set budget envelope available for the NHS Health Check programme with payments awarded for activity/target of being able to reach a certain number of NHS Health Checks. This will seek to ensure that delivery and the best quality service is maximised for the budget available.
- 36 Performance frameworks and monitoring processes will be specified within the new service requirements, and Public Health and Adults and Health Commissioning will undertake robust contract management of the new contract to ensure value for money, delivery of the intended outcomes and improved service quality. Draft performance outcomes can be seen in Appendix 2 Key Principles, which will be further developed during the Review.

### What is the timetable and who will be responsible for implementation?

- 37 The NHS Health Check Project Team comprising public health specialists, adults and health integrated commissioning team and PACS will be responsible for implementing the decisions proposed in this report. The new contract will be in place from 1st April 2024. The proposed governance steps are stated below.

Jan – March 2023	Baseline Service Specification drafted
April – June 2023	Dialogue with Leeds GP Confederation
July 2023	Bid submitted by Leeds GP Confederation and evaluated
July 2023	Report submitted to Public Health Programme Board
September 2023	Contract Award Report submitted to Delegated Decision Panel
October 2023	Award Contract

October 2023- March 2024	Mobilisation of Contract
1 <sup>st</sup> April 2024	Contract commences

### **Appendices**

- Appendix 1 – Leeds NHS Health Check Review Paper
- Appendix 2 – NHS Health Checks Key Principles
- Appendix 3 – Model Options Appraisal
- Appendix 4 – Procurement Route Options Appraisal

### **Background papers**

- None.