

Prison social care

Date: 21st February 2024

Report of: Interim Deputy Director Integrated Commissioning

Report to: Director of Adults & Health

Will the decision be open for call in? Yes No

Does the report contain confidential or exempt information? Yes No

Brief summary

Leeds City Council commissions Practice Plus Group (PPG) to deliver social care in HMP Leeds and HMP Wealstun in line with the local authorities obligations under the Care Act 2014. The current contract commenced on 1st June 2019 until 31st March 2021 with an option to extend for a further 3 years which was invoked. The contract value over the 3 year extension period to 31st March 2024 is £403,089.

This report sets a proposal to vary the existing contract under Contracts Procedure Rule (CPR) 26.1 by modifying the end date of the contract for a period of an additional twelve months. This will allow the contract timescales to align with NHS England's timescales for commissioning the primary care and mental health provision within the prisons. It will also allow the Council time to complete a service review.

The total cost of the additional 12 month period until 31st March 2025 will be a maximum of £134,363 which equates to approximately 33% of the contract value.

A variation to the existing contract with Practice Plus Group is required to enable continued delivery of the service and to align with the NHS commissioning cycle.

Recommendations

- a) The Director of Adults and Health is recommended to approve the use of Contract Procedure Rule 26.1 to modify the end date of the contract with Practice Plus Group for the provision of social care in HMP Leeds and HMP Wealstun (DN418612). The approval is for a period of an additional 12 months to the existing contract commencing on 1st April 2024 until 31st March 2025 at a maximum cost of £134,363.

What is this report about?

- 1 The Care Act 2014 imposed a duty upon local authorities to identify, assess and deliver care to individuals in prison. Offenders with eligible care and support needs should be able to access the care they need comparable to in the community. This duty was put in place from April 2015.
- 2 To satisfy this requirement, Leeds City Council commissions PPG to identify, assess through the role of a trusted assessor and deliver care for individuals with identified need. This contract pays for 0.5 Trusted Assessor role and 3 x healthcare assistants.
- 3 At HMP Leeds there is a health and social care wing where the social care trusted assessor and healthcare assistants are based. The cells in this unit are single cell and are slightly larger than an average cell to assist individuals who use wheelchairs. In addition to those placed on this unit, other prisoners from around the prison can access the social care facility for additional support with their activities of daily living.
- 4 For prisoners based at HMP Wealstun who are assessed as having eligible needs, arrangements are in place for them to be transferred to the health and social care unit in HMP Leeds to receive support from the social care assistants if needed.
- 5 NHS England commissions PPG to deliver the primary care, drugs, dental, mental health and pharmacy services within the Leeds prisons. This contract expires on 31/3/25. There is very close working relationship between the staff employed to deliver social care and those employed under the NHS England contract. The Prison Head of Healthcare and Deputy Head of Healthcare are both posts that sit under the NHS England contract but that manage the social care contract and staff. Across the prisons in the Yorkshire & Humber region all local authority contracts for delivering social care are delivered by the same provider that has the NHS England primary care contract.
- 6 The current contract extension period expires on 31st March 2024.
- 7 A 10% financial efficiency saving was made to this contract, in line with wider council efficiencies, when the 3 year extension period was invoked on 1st April 2021 reducing the contract value from £149,292 to £134,363 per annum.

What impact will this proposal have?

- 8 The scope and nature of the service is not impacted by the variation to the contract. This proposal will enable the continuance of this service and for re-commissioning options to be aligned in timescales with NHS England.
- 9 An Equality Diversity Cohesion Integration screening has been completed and is attached. There are no issues to be addressed.

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

Health and Wellbeing

Inclusive Growth

Zero Carbon

- 10 'Investing to ensure better and more equal access to essential services in health and learning, developed with and accessible for every community across Leeds'.
- 11 This service, in line with the Local Authority's requirements under the Care Act 2015, provides social care assessment and support to individuals in Leeds prisons, this includes preventative work and support to individuals to manage conditions in the prison setting.

What consultation and engagement has taken place?

Wards affected: All wards

Have ward members been consulted? Yes No

- 12 Discussions have taken place with PPG and with NHS England's commissioners on the proposal to vary the contract by 12 months to align with the NHSE commissioning timescales. Ongoing communications with NHS England's commissioners in relation to this service will be put in place as they progress their commissioning process.
- 13 An Equality Diversity Cohesion Integration screening has been completed and is attached. There are no issues to be addressed.

What are the resource implications?

- 14 The annual contract value for this service £134,363. For this additional 12 month period, discussions have taken place with PPG about any potential further efficiencies that can be made. This block contract has not had any inflationary increases since it was put in place in June 2019. Pay levels for the staff have increased by approximately 17% in that time which along with the 10% efficiency reduction represents a significant reduction in real terms. PPG are not able to identify further efficiencies to this contract for the next 12 months.
- 15 During the 12 month variation period a service review will be completed and consideration will be given to the format of the contract going forward and resources required for the demand levels identified.
- 16 Depending on NHS England resources and priorities, and the joint review, it could be that a further direct provision will be required with PPG, which will be subject to approvals and decision by the LA following the extension period within this report.

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

- 17 The variation to the contract to continue for a further 12 months will allow for service continuity during the period of the service being reviewed.

What are the legal implications?

- 18 Under the terms of the contract there is no further option to extend.
- 19 This contract is below thresholds under the Public Contracts Regulations 2015 and any variation of contract is governed by the Contracts Procurement Rules. This is a Significant Operational Decision which is not subject to call-in and there are no grounds for keeping the contents of this report confidential under the Access to Information Rules.
- 20 A contract variation is permissible under CPR 26.1 where the variation does not amount to a material change of the original contract. It is considered that this variation does not amount to a material change as
- The additional services for 12 months "have become necessary" to ensure a continuation of existing services while a service review is being undertaken and to align with NHS England's primary care commissioning timescales.
 - A change of provider would not be practicable for logistical reasons around the social care contract and its interdependencies with the NHS England contract.

- The value of the proposed variation is £134,363, which equates to approximately 33% of the contract value. Taking the above factors into account, the increase in value of the contract is not deemed material as it is less than 50% of the initial contract value.
- In making the final decision, the Director of Adults and Health should be satisfied that the course of action chosen, as to varying the contract, is the best course of action for the Council and should be satisfied that in doing so it represents best value for the Council.

Options, timescales and measuring success

What other options were considered?

21 The option to progress straight to a procurement exercise was considered. However, discussion with other local authorities across the Yorkshire & Humber region has evidenced that best commissioning practice is delivered through joint endeavour with NHS England. No other local authority has carried out a competitive procurement for this service due to the unique nature, and the strong links and dependency between the service that delivers social care and the service that delivers the NHS England primary care contract.

How will success be measured?

22 This contract will be subject to the same Working Age Adults commissioning team contract management procedures throughout the additional 12 month period as have been in place since the beginning of the contract.

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

23 The Commissioning Programme Leader will oversee implementation of the additional 12 month period in conjunction with the Commissioning Contract Manager. PPG as the commissioned service will manage the continuation of service provision through the extended 12 month period.

Appendices

- Equality, Diversity, Cohesion and Integration Screening

Background papers

- None