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|--------------------------|-----------------------------------------------------------------------|------------------------------------------|---------------------------|
| <b>Subject:</b>          | <b>Re-commissioning of Healthwatch services</b>                       |                                          |                           |
| <b>Date of Meeting:</b>  | <b>8<sup>th</sup> June 2021</b>                                       |                                          |                           |
| <b>Report of:</b>        | <b>Executive Director for Housing, Neighbourhoods and Communities</b> |                                          |                           |
| <b>Contact Officer:</b>  | <b>Name:</b>                                                          | <b>John Reading</b>                      | <b>Tel: 07517 131 351</b> |
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| <b>Ward(s) affected:</b> | <b>All</b>                                                            |                                          |                           |

**FOR GENERAL RELEASE**

**1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 The report seeks the approval of the Adult Social Care and Public Health Sub-Committee to re-commission a Healthwatch service for Brighton & Hove
- 1.2 The current contract ends on 31<sup>st</sup> March 2022.

**2. RECOMMENDATIONS:**

Either

- 2.1 That the Sub-Committee approves the re-commissioning of the Healthwatch contract and delegates authority to the Executive Director for Housing, Neighbourhoods and Communities to procure and award a three year contract and to grant a two year extension (subject to satisfactory performance).

Or

- 2.2 That the Sub-Committee instructs the Executive Director for Housing, Neighbourhoods and Communities to award a grant of £178,600 per annum to HealthWatch Brighton & Hove CIC for the provision of local HealthWatch Services for three years, subject to annual Budget Council.

Or

- 2.3 That the Sub-Committee instructs the Executive Director for Housing, Neighbourhoods and Communities to direct award a three year contract to HealthWatch Brighton & Hove CIC for the provision of local HealthWatch Services.

**3. CONTEXT/ BACKGROUND INFORMATION**

- 3.1 The Council has a statutory responsibility to have in place a Local Healthwatch service as set out in Part 14 Local Government & Public Involvement in Health Act 2007(as amended by the Health and Social Care Act 2012) and Part 6 NHS

Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012.

3.2 The Council is required by law to establish a contractual agreement (grant or contract) with a social enterprise that delivers Healthwatch activities.

3.3 The statutory functions of a Healthwatch service and the high level elements of the required service provision are to:

- Obtain the views of people about their needs and experiences of local health and social care services. Local Healthwatch make these views known to those involved in the commissioning and scrutiny of care services.
- Make reports and recommendations about how those services could or should be improved.
- Promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services.
- Provide information and advice to the public about accessing local health and social care services and the options available to them.
- Make the views and experiences of people to Healthwatch England, helping them carry out their role as national champion.
- Make recommendations to Healthwatch England to advise the Care Quality Commission to carry out special reviews or investigations into areas of concern.

3.4 The current contract expires on 31<sup>st</sup> March 2022. A waiver of the Council's Contract Standing Orders was granted in March 2018 to facilitate the direct award of a new two-year contract for Healthwatch services from 1<sup>st</sup> April 2019 to 31<sup>st</sup> March 2021 to the existing supplier (Healthwatch Brighton & Hove). This was to maintain a period of stability while a Sussex wide configuration of Healthwatch was explored to mirror and work in synergy with the emerging integrated structures for health and social care across the county.

3.5 A further waiver was granted in 2020 to facilitate the extension of the current two year contract with the existing provider Healthwatch Brighton and Hove CIC from 1<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022. This was to ensure that the delivery of Healthwatch services are maintained during the Covid-19 pandemic, to reduce the work impact on Healthwatch staff and volunteers, and to maintain a period of stability whilst the national emergency continues, and future recovery takes place.

3.6 The current service provider, Healthwatch Brighton and Hove CIC, has a good reputation in the city, performs well through the contract management reporting, and is well regarded by Healthwatch England. It is expected that this provider will express an interest in the new contract.

3.7 Having waived Contract Standing Orders for three years, with sound rationale, the officer recommendation is that a contract is now procured (using the PIN process described below) for an initial period of 3 years, starting April 2022, with the ability for it to be extended for a further two years (subject to satisfactory performance).

- 3.8 A Prior Information Notice ('PIN') as a Call for Competition is the procurement route proposed as this allows for any interested parties to express interest in the contract, whilst also enabling a more simple and cost effective route to contract should only one potential provider express that interest. This route ensures that there is open and transparent procurement that is compliant with the requirements of the Public Contracts Regulations 2015. It is an appropriate route to follow where it is considered that there is a limited market for the Services advertised.
- 3.9 Where more than one organisation expresses an interest, then bids that are submitted are evaluated by a panel of council officers under the chair of a procurement manager, with the highest score being awarded the contract, the final decision being that of the Executive Director for Housing, Neighbourhoods and Communities under delegated authority. Questions are set on quality, including social value, and price.
- 3.10 Monitoring of the contract awarded would take place through three monthly performance reports based on an agreed set of outcomes, as is the case under the current contract.

#### **4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS**

- 4.1 Whilst a further contract extension might be seen as allowing a further period of stability for the current provider, extending on a year by year basis is of itself potentially destabilising and does not allow the organisation to create longer term plans and improvements. This is not a recommended option.
- 4.2 Ceasing to provide this service is not an option as it is a statutory requirement.
- 4.3 Providing the service in-house is not an option because the legislation requires that local Healthwatch is provided by a social enterprise through a contractual agreement (e.g. a contract or a grant).

##### **Option to provide a Grant for 3 years**

- 4.4 One option would be to award a grant to the incumbent local Healthwatch provider of £178,600 per annum for a period of 3 years. This is a legal option, which some authorities use for their Healthwatch arrangements. Normally grants are appropriate where the Council wishes to support an organisation rather than secure a service, the delivery of which is highly prescribed. Where the Council is required to provide a service it must ensure the service is provided fully in accordance with its obligations; otherwise the Council is at risk of legal challenge on the ground that it is in breach of its statutory duty. As a grant, the detailed service provision cannot be specified, measured or managed in the same way as under a contract.

##### **Option to Directly Award a contract for 3 years**

- 4.5 A further option would be to award a contract to Healthwatch Brighton & Hove CIC for a period of 3 years, with no provision for extension. The financial value of a 3 year contract (rather than 3 plus 2 years) would be such that the award of the

contract could be made directly, without a requirement for advertising through the PIN process.

- 4.6 This option would achieve the greater ability to specify and monitor the service which a contract provides as opposed to a grant. It would mean that the contract would need to be considered again in three years' time, which may be seen as providing less security and stability for both the provider and the Council.

## **5. COMMUNITY ENGAGEMENT & CONSULTATION**

- 5.1 There has been no community engagement or consultation in regard to this report's recommendations. However, if the Committee approves the recommendations, it will be the intention of officers to seek views on the specification for the new contract with health and social care providers in the city.

## **6. CONCLUSION**

- 6.1 The council has a statutory responsibility to have in place a Local Healthwatch service and the current contract expires in March 2022.
- 6.2 Re-commissioning and award of a new contract will give developmental stability to the successful bidder.

## **7. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications:

- 7.1 The current Healthwatch contract costs £178,600 per year. The price of the contract in subsequent years is always subject to the annual budget planning that the council does in February of each year.

*Finance Officer Consulted: Michael Bentley*

*Date: 11/05/21*

### Legal Implications:

- 7.2 As set out in the body of the report, the Council is required to secure the provision of a local Healthwatch service by the Local Government and Public Involvement in Health Act 2007 (as amended). The nature of these requirements are prescriptive and the Council will wish to ensure that it continues to meet the statutory obligations placed on it. A contract in excess of three years in length would require a procurement process to be undertaken pursuant to the public Procurement Regulations 2015, as set out in the report, because it would be above the financial threshold. The other options for delivery are set out in the body of the report

*Lawyer Consulted: Elizabeth Culbert*

*Date: 12/05/21*

- 7.3 Equalities Implications:

An EIA will be prepared prior to re-commissioning. Preparatory work is underway with a survey to community and voluntary organisations seeking their views on Healthwatch. The survey is attached as Appendix 1.

7.4 Sustainability Implications:

None

7.5 Brexit Implications:

None

7.6 Any Other Significant Implications:

None

7.7 Crime & Disorder Implications:

None

7.8 Risk and Opportunity Management Implications:

None

7.9 Public Health Implications:

Healthwatch services make an important contribution to improving local health and social care services, and in making residents in the city aware of services and how to access them.

7.10 Corporate / Citywide Implications:

None

## **SUPPORTING DOCUMENTATION**

### **Appendices:**

1. Healthwatch re-commissioning Equality Impact Assessment questionnaire

