

Brighton & Hove City Council

Adult Social Care and Public Health Sub- Committee

Agenda Item 25

Subject: Public Health Locally Commissioned Services

Date of meeting: 10th January 2023

Report of: Rob Persey, Executive Director, Health and Adult Social Care

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Ward(s) affected: All

For general release

1. Purpose of the report and policy context

1.1 The purpose of this report is to describe the commissioning and provision of Public Health Locally Commissioned Services (LCSs) from General Practices and Community Pharmacies and to seek approval from the Adult Social Care and Public Health Sub-Committee to undertake a procurement process for the ongoing delivery of these Services at the end of their current Contracts.

2. Recommendations

2.1 That the Sub-Committee delegates authority to the Executive Director, Health and Adult Social Care to procure and award a contract for Locally Commissioned Services via a Prior Information Notice (PIN) as a call for competition for an initial period of three (3) years with two (2) optional extension periods of a further three (3) years each (Three (3) Years + Three (3) Years + Three (3) Years in Total) and delegates authority to the Executive Director, Health and Adult Social Care to grant those extensions, subject to satisfactory performance.

3. Context and background information

3.1 Locally Commissioned Services (LCSs) a set of public health services that are commissioned and funded by Public Health using the Public Health grant and other Public Health funding streams. They are purchased via local General Practices and local Community Pharmacies and are specifically focused on patients registered within GP practice lists.

These services help meet the Public Health Outcomes of Health Improvement, reducing numbers of people living with preventable ill health, and people dying prematurely, whilst reducing the gap, between communities and increasing

health life expectancy. They also address the Brighton and Hove Health & Wellbeing Strategy - Starting Well (e.g. young peoples' sexual health), Living Well (eg Stop Smoking, LARCs) and Ageing Well (eg NHS Health Checks). The Services provided under each Contract are as follows;-

General Practitioner LCSs include the following:

- Alcohol Identification and Brief Advice (AIBA)
- Long-acting reversible contraception (LARC)
 - Contraceptive Implant Fittings and Removal
 - Intra Uterine Contraception Device (IUCD) Fittings and Removals
- NHS Health Checks
- Stop smoking service
- Substance Misuse shared care
- Young people's sexual health (advice, STIs, contraception, pregnancy tests, and onward referrals)

Community Pharmacy LCSs include the following:

- Community pharmacy stop smoking service which covers the generic adult smoking cessation service plus the following
 - Young Persons Stop Smoking Service
 - Nicotine Replacement Therapy Voucher Scheme
 - Provision of Varenicline on Patient Group Direction
- Sexual Health and Contraceptive Service; emergency hormonal contraception plus advice, C-Card condoms plus, chlamydia tests, and as an additional optional service chlamydia treatment.
- Healthy Living Pharmacy service to improve uptake and access of health improvement services and advice, health campaigns.

3.2 There are a range of reasons why services are commissioned in General Practices including:

- cost effectiveness as the services benefit from the cost of premises and salaries covered by existing NHS contracts
- understanding of a person's health and wellbeing via patient records
- professional clinical skills, clinical governance and prescribing competencies
- the patient list and access to the population - most people are registered with a GP Practice, know where their GP practice, are used to visiting it
- some of the LCSs can be delivered or initiated opportunistically whilst people are there for other issues (eg Alcohol Identification & Brief Advice)
- several of the LCSs align with other functions of primary care such as routine checks for patients with long term health conditions eg asthma and stop smoking support, diabetes and alcohol IBA.

Community Pharmacies are;

- spread across most wards in the city so are readily accessible
- often people do not need an appointment
- Pharmacists are clinically trained

- Pharmacy staff are trained and skilled at supporting behavior change in an environment some may find more convenient than their GP surgery.

National evidence has demonstrated that advice from a health care professional particularly a clinician such as a GP or pharmacist does have a bigger impact on behavior change (eg Stop Smoking) than by other staff. There are different service solutions in place for those who are unregistered or seldom attend a GP practice.

3.4 The Contracts for the Locally Commissioned GP Services expires on the 30th of June 2023.

The Contracts for the Locally Commissioned Pharmacy Services expires on the 31st of March 2023.

3.5 The budget for the Locally Commissioned GP Services is agreed annually and is estimated at £2,151m for the three years of the new Contract (approximately £717,000 per year). This is an estimate based on 5-year averages. Payment is mostly against activity, plus a small proportion to support access to training, and only the Substance Misuse Shared Care includes a service engagement sum.

3.6 The budget for the Locally Commissioned Community Pharmacy Services is agreed annually is estimated at £0.537m for the three years of the new Contract (approximately £179,000 per year). This is an estimate based on 5-year averages. Payment is mostly against activity, a small amount to support access to training.

3.7 The Council contracts with all GPs and Community Pharmacies that can meet the requisite quality standards. The Council currently holds contracts with 49 of the 51 Community Pharmacies and all the 34 GP Practices in the city. Each practice or pharmacy has an individual contract with their specific selected set of services identified.

3.8 All services under the LCS are purchased in accordance with set fees for each element of specified activity and are for paid based on delivery. For the 19/20 and 20/21 delivery periods, the budget for the Services was not exhausted, however the impact of Covid19 pandemic needs to be taken into consideration relating to this.

3.9 Practice and Pharmacy incomes vary depending on their levels of activity and the number of LCSs they have signed up to deliver. As such, budgets are monitored quarterly and if necessary, thresholds are set per provider to prevent activity exceeding overall budget.

4. Analysis and consideration of alternative options

4.1 Local authorities have a statutory duty to reduce health inequalities and improve the health of their local population by ensuring that there are public health services aimed at achieving the outcomes delivered by these LCSs.

4.2 The total value of the Locally Commissioned GP Services over the lifetime of a Three Year + Three Year + Three Year (9 years) Contract is estimated as £6,453m.

4.3 The total value of the Locally Commissioned Pharmacy Services over the lifetime of a Three Year + Three Year + Three Year (9 years) Contract is estimated as £1.61m.

4.4 The Services fall within the ambit of the 'Light Touch Regime' of the Public Contracts Regulations 2015. The total contract value is more than the relevant threshold of £663,540. Given this, the Services must be advertised to the market. Direct award to the existing providers is not recommended as it carries a high risk of challenge.

4.5 The Health and Care Act 2022 supports joined up provision within a system however as the Local Authority is the commissioner, BHCC are required to act in line with the Public Contracts Regulations 2015.

As the Services are paid for on a set rate of fees, as set out in the services specification and are based on national guidance, evidence-base, good practice and to meet specific local needs. The Council effectively contracts with most of the market provided they meet quality standards, the recommended options have been made to (1) ensure the organisations meet these quality standards and (2) to reduce the administrative burden of running an open selection process that meets the requirements of the Public Contracts Regulations. It is important to reiterate that because the rates are set, there is no commercial benefit to a competitive tender.

4.6 In the pursuit of 'quality', 'continuity' and 'comprehensiveness' of care as expressly permitted under the Light Touch Regime of the Public Contracts Regulations 2015, the award of the Contracts shall be limited to those Providers already providing support or assessment to a Service User. (E.g. a GP can only provide the support by referring their existing patients).

Option 1 – Prior Information Notice as a Call for Competition with a Three Year + Three Year + Three Year Contract

4.7 Under this option, a Prior Information Notice as a Call for Competition will be advertised on the central government website 'Find a Tender'. All the GPs and Community Pharmacies wishing to provide the Services will be required to submit an expression of interest to the Council. It is planned this process will be as straight forward as possible.

4.8 All the organisations that can meet the required quality standards and agree to sign up to the Council terms and conditions will then be awarded a Contract. This is a compliant route to market.

4.9 At the end of each three (3) year period, the Council will set the new revised rates for the Services and vary the Contracts accordingly.

4.10 Utilising a longer Contract Period, will minimise the administrative burden of ensuring compliance with Public Procurement Law and will ensure an open and transparent process.

Option 2 - Direct Award of the Services for shorter periods of One (1) Year (GPs) and Three (3) Years (Pharmacies)

4.11 If the GP Service Providers are awarded a single year Contract, the total contract value is estimated as £717,000. If the Pharmacy Services are awarded for a three-year Contract, the total contract value is estimated as £537,000 (3 x £179,000). On this basis, the total contract value of each Service is less than the relevant 'Light Touch Regime' procurement threshold of £633,540. A direct award will also be compliant with the Council Light Touch Regime CSOs as value for money is demonstrable in the set rates.

4.12 All the organisations that can meet the required quality standards and agree to sign up to the Council terms and conditions will be direct awarded a Contract.

4.13 Reducing the Contract Period and ability to extend will require Council officers to seek approval to procure the Services on a shorter commissioning cycle. This would include attending committee and re-administering the required governance and award for the Services on a shorter commissioning cycle. It is also less desirable as it lacks the openness and transparency objectives advocated for in the Public Contracts Regulations 2015 and it may be viewed as a disaggregation of spend with the intention of avoiding the competition requirements of those Regulations. In addition, given the limited commercial or quality benefits of taking this option, it is not recommended.

5. Community engagement and consultation

5.1 All services are based on needs assessments that include community engagement and consultation and include the details of population data including protected characteristics. Service user feedback is gathered as part of the service specifications.

6. Conclusion

6.1 It is recommended that the Health and Adult Social Care Sub-committee delegates authority to the Executive Director, Health and Adult Social Care to re-procure the Locally Commissioned Services Contracts via a Prior Information Notice (PIN) as a call for competition for an initial period of three (3) years with two (2) optional extension periods of a further three (3) years each. [Three (3) Years + Three (3) Years + Three (3) Years in Total]

7. Financial implications

7.1 The provision of Locally Commissioned Services from General Practices and Community Pharmacies is funded within the ring-fenced Public Health grant (Health & Adult Social Care directorate).

7.2 The planned budget for financial year 2023/24 is in line with this report and overall contract sum of £0.896m per annum (£0.717m for General Practices and £0.179m for Community Pharmacies). However, the Public Health grant allocation has not been confirmed for financial year 2023/24 which may impact on the availability of funding, though it is anticipated that financial resources will be available to enable the commissioning of the services detailed above up to financial year 2025/26.

Name of finance officer consulted: Sophie Warburton Date consulted (dd/mm/yy): 16/12/2022

8. Legal implications

8.1 The Council is required to comply with the Public Contracts Regulations 2015 in relation to the procurement and award of contracts above the relevant financial thresholds for services, supplies and works. The Council's Contract Standing Orders (CSOs) will also apply.

Name of lawyer consulted: Pamela Milford Date consulted (dd/mm/yy): 14/12/22

9. Equalities implications

9.1 The service contracts will include specific requirement that the service provider must act in line with Equality Act legislation, ensuring equity of access and reasonable adjustments taking into consideration protected characteristics. It is unlawful to discriminate between or against Service Users on the grounds of age, disability, gender reassignment, marriage or civil partnership status, pregnancy or maternity, race, religion or belief, sex, sexual orientation, or any other non-medical characteristic.

9.2 The services are required to adhere to The Equality Act (2010), the Public sector Equality Duty (2011) and the Public Sector Bodies (Websites and Mobile Applications) (No.2) Accessibility Regulations 2018 in ensuring services are appropriate and accessible to all. The provider will participate in equality impact assessments annually and as required and respond to needs assessments such as the Pharmaceutical Needs Assessments regarding how to improve access for populations.

9.3 The provider will collect, monitor and analyse data for all protected characteristics to inform and ensure equitable access to the service. Remedial action will be taken in a timely fashion if data is not collected, or equity access challenges are identified.

9.4 Certain of the service specifications include additional focused work to address health inequalities experienced by certain populations – Stop Smoking services and NHS Health Checks. The service commissioners will specifically review activity data for equity of access and uptake for these services as well as for protected characteristics.

10. Sustainability implications

- 10.1 Full consideration will be given to BHCC Sustainable Procurement Policy. Where possible and proportionate, sustainability requirements will be incorporated into the Service Specification to maximise the Social, Ethical and Environmental value delivered by the Providers in the delivery of the Services.

11. Other Implications

Social Value and procurement implications

- 11.1 Social value will be a requirement of the specification for the contracts where possible and proportionate and will be measured by key performance indicators. The commissioning of Community Pharmacies and General Practices within the city supports this approach as well as is a core function of the local health and care provision alongside other local services and businesses.

Crime & disorder implications:

- 11.2 All councils are subject to a statutory duty (s17 Crime and Disorder Act 1998) to do all they can to reasonably prevent crime and disorder in their area across the range of services delivered within their communities. Please consider whether the decisions contemplated, or activities reported have potential to impact on community safety and, if relevant, include here a summary of the impact. Focus on measures that will help to prevent crime and disorder, including the misuse of substances and re-offending.

Public health implications:

- 11.3 As explained in this paper this service is a public health service to improve health and wellbeing outcomes and reduce health inequalities. The Council is committed to improving public health and wellbeing and to reducing inequalities across the city.

Supporting Documentation

None

