

Brighton & Hove City Council

Cabinet

Agenda Item 68

Subject: Public Health Community Nursing Services

Date of meeting: 26th September 2024

Report of: Cabinet Member for Adult Social Care, Public Health and Service Transformation

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Wards affected: All Wards;

Key Decision: Yes

Reasons Key: Expenditure which is, or the making of savings which are, significant having regard to the expenditure of the City Council's budget, namely above £1,000,000 and is significant in terms of its effects on communities living or working in an area comprising two or more electoral divisions (wards).

For general release

1. Purpose of the report and policy context

- 1.1 The report asks for agreement to re-procure the current Public Health Community Nursing (PHCN) contract for up to 5 years (3+2) from April 2025.
- 1.2 The PHCN contract comprises the city's Health Visiting and School Nursing services. This report details the rationale for decision to award a contract to the current local NHS Trust service provider under the new Provider Selection Regime made under the Health and Care Act 2022.

2. Recommendations

- 2.1 Cabinet approves the direct award of the PHCN contract to Sussex Community NHS Foundation Trust for a period of up to five years (3+2yrs)
- 2.2 Cabinet agrees to delegate authority to the Corporate Director of Housing Care & Wellbeing to finalise the terms for the contract and award the contract for PHCN for a term of five years.

3. Context and background information

The Public Health Community Nursing Service

- 3.1 The service is currently being delivered by Sussex Community NHS Foundation Trust (SCFT). It comprises a Health Visiting Service and a School Nurse service whose combined offer covers ages 0-19 yrs. The services are provided in line with the national [Healthy Child Programme](#) model with universal, targeted and specialist levels provided according to the needs of babies, children and families. Both services support multi-agency safeguarding casework.
- 3.2 Health Visitors are based in the city's Family Hubs and work closely with the wider early help system and with community midwifery to provide integrated support. They deliver [5 nationally mandated reviews](#) to all families with babies before their child reaches 2.5 years old and support with a range of health and wellbeing needs including infant feeding, child development and communication, safe sleeping, parent and child mental health.
- 3.3 The School Nurse team provides a named school nurse for every maintained, academy and free school in the city delivering a range of health and wellbeing support and advice to children and young people, parents and carers. In primary schools the School Nurse team delivers vision and hearing screening and the [National Child Measurement Programme](#)

Provider Selection Regime

- 3.4 The NHS Provider Selection Regime (PSR) which governs the procurement of healthcare services in England came into force on 1 January 2024, as part of regulations made under the Health and Care Act 2022. The PHCN service falls under the scope of the PSR and therefore must be re-commissioned in accordance with the PSR..
- 3.5 The PSR has a number of different routes to procuring services. Direct Award Process C is an available route which allows for the award of a service with the current service provider. Direct Award Process C can be used where the performance, contract value and service specification meet set requirements. The PHCN contract meets the criteria for the Direct Award Process C route. In April 2024 at the Council's Procurement Leads Meeting Councillors supported the proposal that the procurement should proceed under this route.

4. Analysis and consideration of alternative options

Option 1 Recommended

- 4.1 Direct award the service with the existing provider, SCFT and the existing annual contract value of £5,359,192
- 4.2 The proposed contract meets the eligibility requirements of Direct

Award Process C in that the existing provider is satisfying the original contract terms and conditions and will satisfy the proposed new contract terms and conditions, and the services are not changing considerably. Performance measured against the nationally benchmarked mandated checks for health visiting shows strong performance and better than regional and national performance.

- 4.3 Brighton & Hove performance against the suite of nationally benchmarked indicators is significantly better than England and the South east. The most recent data for 2023/24 shows continued improvement for Brighton & Hove across all 5 indicators.

Indicator	Brighton & Hove 23/24	Brighton & Hove 22-23	England 22-23	South East 22-23
New birth visit within 14 days	92.9%	91.6%	79.9%	82.6%
6-8 week review by 8 weeks	90.1%	89.6%	79.6%	84.2%
12 month review by 12 months	91.2%	88.8%	70.9%	74.6%
2-2.5 yr review	86.8%	81.2%	73.6%	76.3%
Totally or partially breastfed at 6-8 weeks	74.5%	71.3%	49.2%	No data

- 4.4 Both the Health Visiting and School Nursing services scored highly in terms of satisfaction in Public Health patient surveys of each service. See Appendix 2 for survey results
- 4.5 Continuing the service with this local NHS Trust further embeds social value providing quality employment and excellent integration with specialist and community health services and with the Council's Family Hubs programme and children's safeguarding.

Option 2

- 4.6 Direct Award the service to the existing provider with a reduction in contract value.
- 4.7 Given that a high proportion of the costs are NHS clinical staff salaries any reduction in contract value will be reflected in a reduced service offer.
- 4.8 The Local Authority is required to commission the [5 nationally mandated reviews](#) therefore any reduction in contract value would need to be accounted

for by a commensurate reduction in contract activity above and beyond the mandated reviews. (See paragraph 8.3 for more details of this activity).

- 4.9 These services provide high quality early help and preventative health care to families. This early intervention supports improved outcomes across health, education and wider life chances over the life course which in turn contributes to reductions in the costs of targeted and specialist services. Any reduction in this contract activity is highly likely to impact negatively on children and family health and wellbeing now and in the future.

Option 3

- 4.10 A competitive procurement process under the Provider Selection Regime
- 4.11 The current provider consistently delivers excellent performance; good integration with specialist health and Family Hubs services; is a local provider delivering high quality employment and has Care Quality Commission inspection 'Good.'
- 4.12 There is no significant market for these services as the majority of Heathy Child Programme services nationwide are provided by local NHS Trusts. Locally the West Sussex service is provided by SCFT also and the service is being re-procured under the Provider Selection Regime with the same timetable as the Brighton and Hove Service. In East Sussex the service is provided by East Sussex Healthcare NHS Trust.
- 4.13 The timescales to undertake a competitive tender process will necessitate an extension to the current contract for 6 months from April 2025 and will entail significant additional work for what is likely to be little additional benefit.
- 4.13 A high proportion of the service costs are NHS salaries which means the opportunity to secure greater value for money via a competitive tender is extremely limited as these salaries are negotiated nationally. In addition the service requires appropriately qualified staff in order to deliver safe and effective healthcare.

5. Community engagement and consultation

- 5.1 Engagement has taken place with key stakeholders to inform re-commissioning of the service
- 5.2 Public Health worked with stakeholders and set up a steering group to agree the scope of a needs assessment and to develop and deliver two patient surveys for Health Visiting and School Nursing service users. Both the needs assessment and the surveys will inform the refreshed specification for the service from April 2025.
- 5.3 The stakeholder group included, Amaze, PaCC, Friends Families & Travellers, Brightpip, Mothers Uncovered, Maternity Voices Partnership, Trust for Developing Communities, Impact Initiatives, Health watch along

with council early years and school support services and the Provider service leads. This ensured a range of local voices, including those who may be seldom heard, informed the decision making on what evidence would inform the service specification going forward.

- 5.4 The surveys were delivered via the Health Visiting and School Nursing services and stakeholder groups and by the Maternity Voices Partnership for Brighton and Hove
Health Visiting Service - 70% of respondents were very or fairly satisfied with the health visiting service (1,064 responses)
School Nursing - 79% with primary school nurse support and 92% of secondary school nurse support. (47 responses)
(See Appendix 2 for a more detailed analysis of the survey returns).
- 5.5 The needs assessment captures local, regional and national evidence about what works to deliver high quality accessible 0-19 yrs Healthy Child Programme services. Commissioned research in Sussex to gather the voices of fathers and non-birthing parents form an integral part of the evidence base alongside maternity voices of Gypsy Roma and Traveller parents gathered in Sussex by Friends Families & Travellers.

6. Financial implications

- 6.1 This report indicates the need to re-procure the current Public Health Community Nursing (PHCN) contract which ends on March 25 for another 5 years from April 2025. The current value of the contract is £5,359m, which is been funded by a Public Health grant. By going for option 1, which is the recommended option, the value of the new contract remains the same as the previous contract and with the same provider. There is no financial implication as the contract value has already been budgeted for within the Public Health grant.

Name of finance officer consulted: Jamiu Ibraheem Date consulted (03/09/24)

7. Legal implications

- 7.1 The Council has a duty under section 12 of the Health and Social Care Act 2012 to take such steps as it considers appropriate for improving the health of the people in its area. The re-commissioning of the healthcare services detailed in this report must comply with The Health Care Services (Provider Selection Regime) Regulations 2023 (the "2023 Regulations"). This report recommends award of the contract for the service via Direct Award Process C under regulation 9 of the 2023 Regulations. This process may be used if the existing contract is due to expire, the Council proposes a new contract with the existing provider and is of the view that it is satisfying the existing contract and will likely satisfy the proposed new contract to a sufficient standard. This process gives the Council flexibility to award a contract without competition where there is unlikely to be overall better value in selecting a new provider. The recommendations in this report are in

keeping with the 2023 regulations and the existing provider meets the requirements of Direct Award Process C.

7.2 The Council's Contract Standing Orders will also apply.

Name of lawyer consulted: Sian Stevens Date consulted (03/09/24):

8. Equalities implications

8.1 The recommended option in the paper to Cabinet is to sustain the current contract value which means if that is agreed there is no expectation that the service delivery will disproportionately impact on service users with protected characteristics.

8.2 If the decision is to re-commission at a contract value below the current annual value there is a risk of disproportionate impact on those with protected characteristics. The Local Authority is mandated to deliver the 5 health visiting reviews and these are delivered within a wider range of support and care with an enhanced offer for those families with additional needs.

8.3 Any reductions in service delivery as a result of a lower contract value would likely be required from activity outside the [5 nationally mandated reviews](#). These comprise support for children with special education needs & disabilities and their parents and carers, perinatal mental health support to birthing people and partners, school nurse capacity to support all schools and/or safeguarding work and for both services a potential reduction in face to face appointments

9. Sustainability implications

9.1 The current provider Sussex Community NHS Foundation Trust (SCFT) has a Green Plan in place as required under the [Health and Care Act 2022](#) and the requirements laid out in [Greener NHS » Delivering a net zero NHS \(england.nhs.uk\)](#).

9.2 The SCFT [Green Plan - Care Without Carbon 2021](#) encompasses all the areas in the Brighton & Hove Sustainability Implications checklist including targets for reducing emissions, active travel, Personal Protective Equipment, procurement, staff wellbeing.

10. Health and Wellbeing Implications:

10.1 Public Health Community Nursing provides a key health service to babies, children, young people and families in the city. The Brighton & Hove service follows the [Healthy Child Programme](#) which is a proven model for delivering early help to families that prevents ill health and supports life-long health and wellbeing. The recommended proposal provides for continuity of a well evidenced quality service with excellent performance that meets the needs of families in Brighton and Hove.

Other Implications

11. Procurement implications

- 11.1 The proposed procurement route is compliant with The Health Care Services (Provider Selection Regime) Regulations 2023, which is the legislation that governs the award of contracts for this type of service. The existing provider has passed all of the selection criteria required for the contract and the key criteria for service delivery have been assessed by officers.
- 11.2 Should the recommendations of this report be agreed by Cabinet, a public notice of intention to award will be published and the contract awarded following a mandatory standstill period.
- 11.3 The contract provider is a locally based NHS trust delivering high quality care with qualified practitioners delivered in local communities alongside the Council's Family Hubs programme and in the city's schools and colleges. The Service evidences excellent relationships with partners in the Community & Voluntary Sector, specialist health services and council services working with children young people and families.
- 11.4 As an NHS employer it provides high quality employment and evidences an effective educator programme supporting training into Specialist Community Public Health Nurse roles and progression to more senior specialist roles.
- 11.5 The Trust's Green Plan includes commitments to improve the health and wellbeing of people involved in the Trust's supply chain, improving the wellbeing of staff and a range of targets such as reducing the carbon footprint of staff journeys,

12. Crime & disorder implications:

- 12.1 The Health Visiting and School Nursing teams provide a universal service and are therefore a key service in identifying needs early and timely signposting of families to support. Both services also provide health expertise in safeguarding processes led by the children's social work service.
- 12.2 The School Nursing service in supporting pupil and student wellbeing contributes to more children and young people staying in school and college which is a protective factor in relation to criminal and sexual exploitation of children and young people. This service also works closely with the Drug Alcohol and Sexual Health team within Ru-ok? the Council's Children and Young People's Substance Use and Sexual Health Service, providing joint drop in sessions in secondary schools.

13. Conclusion

- 13.1 Health Visiting and School Nursing are core health services for families

in the city. They are provided by a local NHS Trust with excellent benchmarked performance and strong integration with local services and communities.

- 13.2 Health Visiting and School Nursing provide essential prevention health services that reduce health inequalities and improve health and wellbeing and wider outcomes across the life course; any reduction in the contract value will impact negatively on families who need an enhanced offer.
- 13.3 The service must be re-procured using the Provider Selection Regime and the quality of the existing provider and eligibility make a direct award the best option to ensure continuity and quality of service.
- 13.4 This paper therefore seeks Cabinet approval for the direct award for the PHCN contract for up to 5 years (3 +2yrs) from 2025-2030.

Supporting Documentation

Appendices

1. Appendix 1 Outline of the Health Visiting and School Nursing services with performance data
2. Appendix 2 Health Visiting and School Nursing patient survey headlines