

Notice of Non-key Executive Decision

Subject Heading:	Direct award of NHS Health Check contracts to Havering General Practitioners
Cabinet Member:	Councillor Jason Frost, Lead Member for Public Health
SLT Lead:	Mark Ansell, Director of Public Health
Report Author and contact details:	Chris Atkin, Commissioner and Project Manager 01708 434480 <u>Chris.atkin@havering.gov.uk</u>
Policy context:	The NHS Health Check Programme is a statutory Public Health Service as outlined in the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations (2013), sections $4 - 5$.
Financial summary:	Current budget for NHS Health Checks is £200k per annum utilising a payment by results model and funded by the Local Authority Public Health Grant.
Relevant OSC:	Public Health
Is this decision exempt from being called-in?	No, it is a non-key decision by a member of staff

The subject matter of this report deals with the following Council Objectives

Communities making Havering	[x]
Places making Havering	[]
Opportunities making Havering	[]
Connections making Havering	[]

Part A – Report seeking decision

DETAIL OF THE DECISION REQUESTED AND RECOMMENDED ACTION

This reports seeks authority to direct award contracts for NHS Health Checks to General Practitioners based within Havering. The estimated value for NHS Health Checks is 200k per annum. My proposal is for the contract to begin June 1st 2020 with an end date of May 31st 2021, with an optional one year extension.

AUTHORITY UNDER WHICH DECISION IS MADE

Authority under which decision being made as outline in the Havering Constitution:

Part 3: Responsibility for Functions, Article 2 – Executive Functions 3.3 Powers of Members of the Senior Leadership Team

(b) To award all contracts with a total contract value of between £500,000 and £5,000,000 other than contracts covered by Contract procedure Rule 16.3.

STATEMENT OF THE REASONS FOR THE DECISION

Background

The NHS Health Check Programme is a nationally mandated service which aims to reduce the chance of heart attack, stroke or developing some forms of dementia in people aged 40 - 74. It achieves this by via assessment of the top seven risk factors impacting the burden of non-communicable disease in England, and providing service users with behavioural support and, where appropriate, treatment.

The objectives of the programme have been outlined below:

- 1) To promote and improve the early identification and management of the individual behavioural and physiological risk factors for vascular disease and the other conditions associated with those risk factors.
- To support individuals to effectively manage and reduce behavioural risks and associated conditions through information, behavioural and evidence based clinical interventions.
- 3) To help reduce inequalities in the distribution and burden of behavioural risks, related conditions and multiple morbidities.

4) To promote and support appropriate operational research and evaluation to optimise programme delivery and impact, nationally and locally.

Context

There were 44 GP practices registered within Havering, belonging to 3 Primary Care Networks (this was extended to 4 Primary care Networks as of June 2019). GP's are paid for the amount of invitations sent to eligible population and for the amount of health checks completed via a payment by results model. From Q1 to Q3 for 2019/2020, GPs have been underperforming within the targets set by Havering. The figures analysed by Public Health correspond to practices that have been consistently over achieving and have been asked to scale back performance to align with what has been contracted.

Other notable indications of underperformance are in relation to practices prioritising other clinics (EG Immunisations) above Health Check clinics. The JCU and Public Health team will be working collaboratively to ensure that performance can be improved where necessary.

Tracking of targets for Q1, Q2 and Q3 has been represented below in a RAG rating to represent performance against targets (health checks completed for eligible population per GP practice):

Q1, 2019 - 2020		
36%	25%	32%

7% of GP's were listed as over performing during Q1 of 2019/2020.

Q2, 2019 - 2020		
34%	23%	30%

13% of GP's were listed as over performing for Q2 of 2019/2020.

Q3, 2019 – 2020		
36%	23%	32%

7% of GP's were listed as over performing for Q3 of 2019/2020.

Data for Q4 has been deferred for return by Public Health England due to the COVID19 pandemic.

Finance

The total historic spend for NHS Health Checks has been outlined below:

2017/2018	£86,840.00
2018/2019	£170,275.00
2019/2020 (to date)	£124,535.00

It should be noted that the outgoings for invitations and completed Healthchecks has been underspent. The Public Health team and JCU will be working collaboratively to boost engagement with the GP's to drive performance.

The sums referred to above are the total amount paid to the 44 GP's that are registered to provide NHS Health Checks.

The Public Contract Regulations Section 32.(2).(b).(ii) states:

32.—(1) In the specific cases and circumstances laid down in this regulation, contracting authorities may award public contracts by a negotiated procedure without prior publication.

General Grounds

(2) 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.

In the context of this contract, General Practitioners are the only suitable supplier as they have sole access to the confidential medical data necessary to ascertain the invitations and commit to completing Health Checks for those eligible. Any other private healthcare suppliers outside of the borough would need to factor in costs in administrative tasks, the logistical impact on supplying health checks to service users within a different geographical setting and the need for a comprehensive GDPR risk assessment and information sharing agreement for a large number of eligible population. These constraints do not represent best value to the Council.

The existing contract for NHS Health Checks expired as of 31st March 2020. Due to COVID19 it is anticipated that no GP's practices would be inviting eligible service users for health checks due to the risk of infection for the latter part of Q4 2019/2020.

My recommendation is for a one year contract with optional one year extension, to allow for a flexible commissioning exercise to take place following the climax of proposed contract (for example, joint commissioning/finances with STP members).

OTHER OPTIONS CONSIDERED AND REJECTED

Option 1 – Do nothing and do not contract General Practitioners to provide an NHS Health Check service.

Option 2 – Pursue a collaborative commissioning exercise with other STP members.

This option was explored but ultimately abandoned due to the current tight turnaround to have a contract in place and due to the current COVID19 pandemic making necessary engagement with GP's and colleagues impossible to achieve. Other potential routes of commissioning would include partnership with other STP members and seeking input from practices utilising a co-production model. Liaising with other local authorities to share ideas and best practice would give Havering a wider view and useful benchmarking data in the future.

PRE-DECISION CONSULTATION

The contract has been discussed at the NHS Health Check working group and has been discussed with public health, procurement and legal colleagues.

NAME AND JOB TITLE OF STAFF MEMBER ADVISING THE DECISION-MAKER

Name: Chris Atkin

Designation: Commissioner and Project Manager, Joint Commissioning Unit

Signature: C.Atkin

Date: 22/05/2020

Part B - Assessment of implications and risks

LEGAL IMPLICATIONS AND RISKS

Under the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013, the Council has a duty to provide or make arrangements to secure the provision of health checks to be offered to eligible persons in its area.

Officers seek to award various contracts to each General Practitioner in the Borough in compliance with such duty.

The value of the proposed contract is well below the threshold for Light Touch Services (as listed in Schedule 3 of the Public Contract Regulations 2015). The Council is therefore under no obligation to advertise the contract opportunity in the OJEU.

Although the Council's Contracts Procedure Rules require each procurement with an estimated value of £100,000 or above to be subject to a formal tender exercise in conjunction with SPU, this report seeks approval to make the awards directly without undertaking a competitive process.

Officers have therefore obtained a waiver of the relevant Contract Procedure Rule (CPR 9.9) in accordance with the procedure set out in CPR14.

FINANCIAL IMPLICATIONS AND RISKS

The cost of the NHS Health Check Programme will be met via the Public Health ringfenced grant from Cost Centre A48004 (NHS Health Checks).

A budget of £200k is available for this contract in 2020/21, and actual costs are determined on a payment by results basis. Previous years costs have always been less than £200k, and due to the Covid pandemic, lower activity is expected on this contract during 2020/21, resulting in a further anticipated saving against this budget line.

In light of the Covid-19 pandemic, all business as usual activities have ceased, including contract and procurement and the Council has been unable to complete the procurement exercise for a new contract. Any savings associated with the re-tender of this contract will be revisited when the current procurement restrictions are lifted.

HUMAN RESOURCES IMPLICATIONS AND RISKS (AND ACCOMMODATION IMPLICATIONS WHERE RELEVANT)

The recommendations made in this report do not give rise to any identifiable HR risks or implications that would affect either the Council or its workforce.

EQUALITIES AND SOCIAL INCLUSION IMPLICATIONS AND RISKS

The Public Sector Equality Duty (PSED) under section 149 of the Equality Act 2010 requires the Council, when exercising its functions, to have due regard to:

- (i) The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- (ii) The need to advance equality of opportunity between persons who share protected characteristics and those who do not, and;
- (iii) Foster good relations between those who have protected characteristics and those who do not.

Note: 'Protected characteristics' are age, sex, race, disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council is committed to all of the above in the provision, procurement and commissioning of its services, and the employment of its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing for all Havering residents in respect of socio-economics and health determinants.

BACKGROUND PAPERS

None

Part C – Record of decision

I have made this executive decision in accordance with authority delegated to me by the Leader of the Council and in compliance with the requirements of the Constitution.

Decision

Proposal agreed

Delete as applicable

Proposal NOT agreed because

Details of decision maker

Signed

Name: Mark Ansell

Cabinet Portfolio held: CMT Member title: Head of Service title Other manager title:

Date:

Lodging this notice

The signed decision notice must be delivered to the proper officer, Debra Marlow, Principal Democratic Services Officer in Democratic Services, in the Town Hall.

or use by Committee Administration	
his notice was lodged with me on	