

Notice of KEY Executive Decision

Subject Heading:	Permission to Direct Award the NHS Health Checks Contract via Process A of the NHS Provider Selection Regime Toolkit
Decision Maker:	Mark Ansell, Director of Public Health
Cabinet Member:	Councillor Gillian Ford, Cabinet Member for Adults and Health
ELT Lead:	Mark Ansell, Director of Public Health
Report Author and contact details:	Faith Nare Commissioner – Live Well T: 01708 431432 E: faith.nare@havering.gov.uk
Policy context:	<p>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 Health Watch Representatives) Regulations (2013), sections 4 – 5.</p> <p>The use of Health Checks contributes to Havering’s strategic objectives as outlined in the Joint Health and Wellbeing Strategy 2019/20 – 2023/24.</p>
Financial summary:	<p>The funding for the NHS Health Checks Service has been identified and secured from the ring-fenced Public Health Grant.</p> <p>The total cost of the one-year contract + 4 year extension (1+1+1+1) (subject to performance and funding) is estimated at £925,000.00 over the five-year period.</p>

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	2024/25 – Year 1 - £185,000.00 2025/26 - Year 2 - £185,000.00 2026/27 – Year 3 - £185,000.00 2027/28 – Year 4 - £185,000.00 2028/29 – Year 5 - £185,000.00 Total (1 +4 years) = £925,000.00
Reason decision is Key	Expenditure or saving (including anticipated income) of £500,000 or more
Date notice given of intended decision:	19 June 2024
Relevant Overview & Scrutiny Committee:	People OSSC
Is it an urgent decision?	No
Is this decision exempt from being called-in?	No

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

People - Supporting our residents to stay safe and well **X**

Place - A great place to live, work and enjoy

Resources - Enabling a resident-focused and resilient Council

Part A – Report seeking decision

DETAIL OF THE DECISION REQUESTED AND RECOMMENDED ACTION

This report seeks approval to direct award the NHS Health Checks contract via Direct Award Process A of the NHS Provider Selection Regime Toolkit for a period of one year with annual extension of up to 4 years (1+1+1+1) (subject to performance and funding) to Primary Care General Practitioners from 1st of August 2024 to 31st of July 2029 at a total value of £925,000.

AUTHORITY UNDER WHICH DECISION IS MADE

3.3 Powers of Members of the Senior Leadership Team (Constitution pre 1st April 2024)

Contract powers

- (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

Justification for Direct Award A approach:

Direct award process A is the most appropriate route as:

1. The existing contract has ended.
2. The proposed contract terms and conditions are not changing.
3. The London Borough of Havering has an existing provider for the relevant healthcare service related to this which the proposed contracting arrangement relates.
4. The London Borough of Havering is satisfied that the relevant health care services to which the proposed contracting arrangements relate to, are capable of being provided only by the existing provider due to the General Practitioners being the only available providers that can deliver this specialist service.

General Practitioners are in a unique position to deliver the NHS Health Checks programme as they have access to all patients' records and the programme's successful delivery relies on the GP's making contact with patients between the ages of 40 - 74. The limitations and constraints regarding data sharing issues, prevents third parties from be able to deliver the Health Checks programme across Havering and therefore can prevent the council from fulfilling its statutory duties.

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 Health Check programme can also be described as a Public Health risk assessment and management programme which aims to prevent or delay the onset of Cardiovascular disease including diabetes, heart disease, kidney disease and stroke.

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Cardiovascular disease is responsible for around one in four premature deaths in the UK and also accounts for the largest gap in healthy life expectancy.¹

Assessment of risk is aided by three measurements: for blood pressure, cholesterol and BMI. These are fed into an accredited clinical assessment tool which calculates the individual's risk of developing Cardiovascular disease within the next 10 years

The objectives of the programme have been outlined below:

- 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.
- To help reduce inequalities in the distribution and burden of behavioural risks, related conditions and multiple morbidities.

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

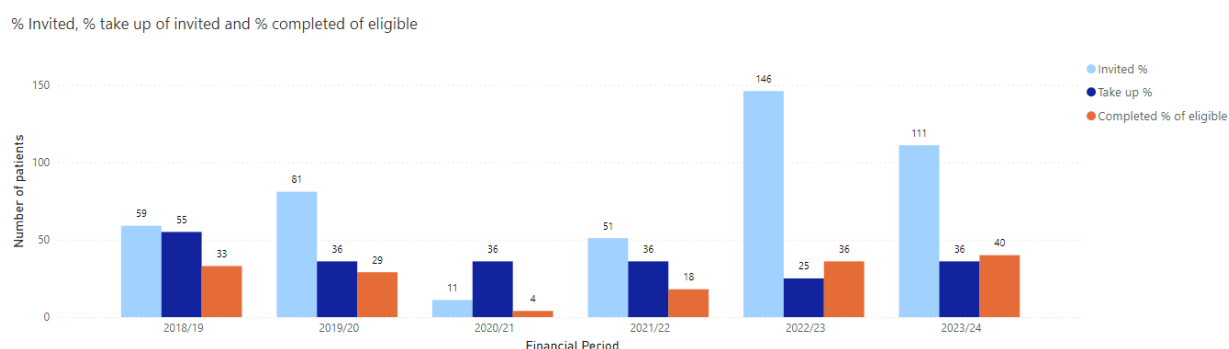
Local Context

There were 44 GP practices registered within Havering, belonging to 4 Primary Care Networks (this was extended to 5 Primary Care Networks as of June 2024). 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.

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.

There are currently 46 GP Practices in Havering participating in the provision of NHS Health checks.

Data is collated using the Power Bi Dashboard as shown below:



Service Description and Outcomes:

The service will contribute to achievement on the following outcomes from the Public Health Outcomes Framework:

- Reduction in mortality rate from causes considered preventable
- Reduction in Under 75 mortality rate from all cardiovascular diseases

¹ <https://www.england.nhs.uk/ourwork/clinical-policy/cvd/>

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- Reduction in Under 75 mortality rate from all cardiovascular diseases considered preventable
- Reduction in Excess weight in adults
- Increase in Percentage of physically active adults
- Reduction in prevalence of smoking among persons aged 18 years and over
- Increase in take up of NHS Health Check programme by those eligible – health check offered
- Increase intake up of NHS Health Check programme by those eligible – health check take-up
- Reduction in Recorded Diabetes
- Reduction in Alcohol-related hospital admissions

Service Pathway:

The practice will operate a call/recall process that ensures that every eligible patient in the practice cohort is invited to have an NHS Health Check once every five years.

The practice will make up to two attempts to invite patients for a NHS Health Check. At least one of these attempts should be through a formal written letter with an accompanying patient leaflet. Practices should choose the most appropriate mix of invitation methods for their population. The Council will provide each practice with a suggested invitation letter template to use (please see schedule 2). The DSHC NHS Health Checks Team will provide advice and information on how to order patient information leaflets and other promotional materials; local NHS Health Check marketing material (posters and patient leaflets) for the corresponding year will be sent out to practices.

The practice will offer patients a choice of appointments for the initial risk assessment. All attempts to contact patients will be recorded using the agreed local template. Those that did not attend (DNAs) should be managed in line with the practice's own local DNA policy

Training of Health Care Professionals

All healthcare professionals who wish to participate in the delivery of this service achieve and maintain appropriate clinical competence and that they have undertaken suitable education and training including training on how to deliver lifestyle advice (e.g. Dementia Training Tool³).²

Ensuring Best Value

£185,000 has been allocated from the Public Health Grant annually to fund the contract for Health checks. Health Checks are currently paid on a payment by results model, Havering pays £5 per invitation sent out for a Health checks and £20 for each Health check completed.

Performance of the service is monitored via the NHS Health Checks Power BI Dashboard. The dashboard shows information on Health Checks eligibility, invites sent out, invitations paid for and completions. The data shown is in line with the specific that needs to be met which is set out in the contract. (see appendix 1)

GP Practices have access to the dashboard as they can access information such as:

- The Practice's Eligible Population for the year
- The Practice's potential earnings for 'offer' and 'completed' NHS Health Checks
- The payment that the Practice will have been paid including the historical information on this.

Performance meetings are held quarterly with the Commissioner and Public Health Practitioners leading to ensure the GPs are meeting their targets and not going over their eligible thresholds

² [NHS Health Check Best Practice Guidance](#)

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for both invites and completions. If a GP Practice goes over the threshold, this is communicated via email to remind them of this. Where a Practice has gone over, they are advised that they will only be paid for their annual eligible threshold.

Recommendation:

This paper seeks to recommend the Direct Award of the NHS Health Checks programme. The commissioning of NHS Health Checks is a statutory requirement of Councils resulting from The Local Authorities (Public Health Functions and Entry to Premises by Local Health Watch Representatives) Regulations 2013. The Health Checks are an important means by which the health of the population can be improved, by identifying individuals who would benefit both from clinical support and lifestyle interventions.

OTHER OPTIONS CONSIDERED AND REJECTED

Option 1: Do nothing and end the contract

This option is not advised as this will place the Local authority in breach of its statutory duty under the Public Health Service as outlined in the Local Authorities (Public Health Functions and Entry to Premises by Local Health Watch Representatives) Regulations (2013), sections 4 – 5.

Option 2: Enter into a jointly commissioned agreement with our neighbouring local authorities

This option is not advised as the contract timelines for the NHS Health Checks make this approach difficult to negotiate at present.

PRE-DECISION CONSULTATION

None

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

Name: Faith Nare

Designation: Commissioner – Live Well

Signature: *F Nare*

Date: 20/06/2024

Part B - Assessment of implications and risks

LEGAL IMPLICATIONS AND RISKS

Under Section 12 (1) of the Health and Social Care Act 2012, each local authority must take such steps as it considers appropriate for improving the health of the people in its area.

The Council has the power to procure and award this contract under Section 111 of the Local Government Act 1972, which allows the Council to do anything which is calculated to facilitate, or is conducive or incidental to, the discharge of any of its functions.

The Council also has a general power of competence under Section 1 of the Localism Act 2011 to do anything an individual can do, subject to any statutory constraints on the Council's powers. None of the constraints on the Council's s.1 power are engaged by this decision.

The overall value of the proposed contract is £925,000. The proposed direct award is compliant with Regulation 7 of Direct Award Process A of the Health Care Services (Provider Selection Regime) Regulations 2023 (PSR). Officers confirm that submission for publication on the UK e-notification service has taken place for the notice of the award and hence it is in compliance with Regulation 7 PSR.

For the above reason, the Council may proceed with awarding the contract via Direct Award Process A of the Provider Selection Regime.

FINANCIAL IMPLICATIONS AND RISKS

This decision paper is seeking permission to direct award the NHS Health Checks Contract via process A of the NHS Provider Selection Regime Toolkit. The contract will be a 1-year contract with the option of a 4-year extension (1+1+1+1) to commence on 1st August 2024.

The total cost of the 5-year contract is estimated to be £925,000 which equates to £185,000.00 per annum. This contract is paid by payments by results, Havering pays £5 per invitation sent out for a Health checks and £20 for each Health check completed. The maximum Havering will pay is £185,000. This will not add any additional pressure on the Public Health ring-fenced grant and the NHS Health Check contracts costs are budgeted for annually within the grant allocation.

As this contract is grant funded there will be contract variation clauses and exit clauses written into the contract to mitigate the risk of the grant ceasing or significantly reducing.

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

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Havering has a diverse community made up of many different groups and individuals. The council values diversity and believes it essential to understand and include the different contributions, perspectives and experience that people from different backgrounds bring.

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, gender, race and disability, sexual orientation, marriage and civil partnerships, religion or belief, pregnancy and maternity and gender reassignment.

The Council demonstrates its commitment to the Equality Act in its decision-making processes, the provision, procurement and commissioning of its services, and employment practices concerning its workforce. In addition, the Council is also committed to improving the quality of life and wellbeing of all Havering residents in respect of socio-economics and health determinants.

HEALTH AND WELLBEING IMPLICATIONS AND RISKS

Residents accepting the offer of an NHS Health check receive information about their risk of cardio-vascular disease including stroke and heart attack and advice about how they can reduce that risk including where they can get help e.g. with stopping smoking. People may also be identified who would benefit from pharmaceutical intervention e.g. statins, which the GP will prescribe. As such, the commissioning of NHS health checks by the Council is likely to improve the health of the population served. Health checks may also reduce inequalities in health but only if communities that are most at risk of CVD e.g. more disadvantaged communities participate in proportion to their greater need.

ENVIRONMENTAL AND CLIMATE CHANGE IMPLICATIONS AND RISKS

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.

BACKGROUND PAPERS

None

APPENDICES

Appendix 1

[Open in Power BI](#)

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

Details of decision maker



Signed:

Name: Mark Ansell

Cabinet Portfolio held:

CMT Member title: Director of Public Health

Head of Service title

Other manager title:

Date: 1/8/24

Lodging this notice

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The signed decision notice must be delivered to Committee Services, in the Town Hall.

For use by Committee Administration

This notice was lodged with me on _____

Signed _____