

Public Report with Exempt Appendices Cabinet and Commissioners' Decision Making Meeting

Summary Sheet

Council Report

Cabinet and Commissioners' Decision Making Meeting – 12 September 2016

Title

Provision of Public Health services for 0-19 Integrated Public Health Nursing, Sexual Health and Drugs and Alcohol Recovery.

Is this a Key Decision and has it been included on the Forward Plan?

Yes, this is a key decision affecting all wards and relating to contracts valued in total at over £500,000.

Strategic Director Approving Submission of the Report

Teresa Roche Director of Public Health

Report Author(s)

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Ward(s) Affected

ΑII

Summary

Public Health obtained approval in December 2015 to review and revise the specifications for three major areas of the Public Health programme within the next 6 -12 months – Sexual Health, 0-19 Integrated Public Health Nursing Service and Drug & Alcohol Recovery Services – prior to a competitive tendering procurement process.

The reviews and revisions were completed in May 2016, and a European Union compliant tender process has now been carried out via the YORtender e-procurement system for the award of contracts relating to the provision of these services.

Recommendations

- 1. That the contract for 0-19 Integrated Public Health Nursing Services be awarded to The Rotherham NHS Foundation Trust (TRFT) for a period as advertised of three years with the option to extend for a further two years.
- 2. That the contract for Sexual Health Services be awarded to The Rotherham NHS Foundation Trust (TRFT) for a period as advertised of four years.

3. That the contract of Drugs and Alcohol Recovery Services be awarded to Lifeline Project Ltd. for a period of two years as advertised with an option to extend for a further two years.

List of Appendices

Details of Scoring for each tender: 1) Scoring Summary; 2) Drugs & Alcohol Recovery; 3) 0-19 Integrated Public Health Nursing Service; 4) Sexual Health Services. Financial detail of current and proposed values.

Background Papers

Tender submissions and evaluation documents are all stored on the YORtender eprocurement system.

Detail of Public Health proposed efficiency savings of 1.8% across commissioned services' Health Select Commission paper, 21st January 2016.

Reductions to the Public Health Grant and initial proposals for the Council achieving the savings. Cabinet Meeting 6th June 2016

Continuation of Public Health Services. Cabinet Meeting 11th July 2016

Consideration by any other Council Committee, Scrutiny or Advisory Panel No

Council Approval Required

No

Exempt from the Press and Public

The appendices to this report detail the individual scores and tender values and are exempt under paragraph three of Part I of Schedule 12A Information relating to the financial or business affairs of any particular person (including the Council).

Title: Provision of Public Health Services

1. Recommendations

- 1.1 That the contract for the provision of 0-19 Integrated Public Health Nursing Service be awarded to The Rotherham NHS Foundation Trust (TRFT) for a period as advertised of three years with the option to extend for a further two years.
- 1.2 That the contract for Sexual Health Services be awarded to The Rotherham NHS Foundation Trust (TRFT) for a period as advertised of four years.
- 1.3 That the contract for Drugs and Alcohol Recovery Services be awarded to Lifeline Project Ltd. for a period of two years as advertised with an option to extend for a further two years.

2. Background

- 2.1 The Council received these contracts by novation from the NHS as part of the transfer of the Public Health function in 2013. The services have now been reviewed by Public Health and new specifications developed to reflect the required changes.
- 2.2 The current providers of the three contracts are:
 - Sexual Health Services The Rotherham NHS Foundation Trust (TRFT)
 - 0-19 Integrated Public Health Nursing Service The Rotherham NHS Foundation Trust (TRFT)
 - Drugs and Alcohol Recovery Doncaster & South Humber NHS Foundation Trust (RDaSH) for Recovery Service; and Lifeline for the Peer Mentor & Service User Support Service.
- 2.3 The new sexual health services will deliver the statutory responsibility for the provision of open access sexual health and contraception services to the population. It includes a range of clinical services including Sexually Transmitted Infection testing and treatment and chlamydia screening. The new service will also focus on activity to target underserved sections of the population. The service outcomes include: improving chlamydia detection rates; decreasing late diagnoses of HIV; and, contributing to reducing teenage pregnancy rates.

The 0-19 Integrated Public Health Nursing Service will deliver Health Visiting and School Nursing Services in a more comprehensive model of delivery, and brings together these services along with a Targeted Family Support Service in a seamless model of delivery. The service will deliver on the national statutory requirements of child measurement and the Healthy Child Programme and a range of new, locally agreed priorities that have safeguarding and Early Help as a key priority. The service outcomes and outputs include: percentage of infants being breastfed at 6 to 8 weeks; the percentage of health reviews completed at school entry; the percentage of annual health reviews for Looked After Children completed within agreed timescales; and, the percentage of children included in the National Child Measurement Programme.

The Drugs and Alcohol Recovery Service will amalgamate two existing services to deliver a new recovery focussed model (rather than the previous maintenance model) that is based on self-help and peer support to assist the long term recovery of people

(aged 18 and over) from alcohol and drug addiction in Rotherham. The new service will operate both from a central base 'Carnson House' 1 Moorgate Road, S60 2EN, but also in community venues such as community resource centres, and will address barriers to recovery including employment and housing issues. The service outcomes will be to increase the number of people successfully completing and exiting treatment.

- 2.4 Following an EU compliant procurement process, the Council received tender submissions from 2 suppliers for 0-19s Child Health, 2 suppliers for sexual health and 4 suppliers for drugs and alcohol recovery which were opened by Councillor David Roche via the YORtender electronic procurement system on the dates indicated below.
- 2.5 Tender evaluation panels were held for each service area comprising the following members

Service	Panel	Panel Members		
	Date			
0-19 Integrated	11/07/16 &	Giles Ratcliffe, Consultant in Public Health,		
Public Health	29/07/16	RMBC		
Nursing		Karla Capstick, Head of Locality and		
Service		Children's Centres Lead, CYPS, RMBC		
Opening date:		Caroline Burrows, Public Health		
6 July 2016		Commissioning Lead, NHS England		
		Yorkshire and Humber		
		Sarah Whittle, Assistant Chief Officer,		
		Rotherham Clinical Commissioning Group		
		Lorna Byne, Category Manager, RMBC		
		Youth Cabinet representatives (for part of		
		the scoring process)		
Sexual Health	15/07/16	Gill Harrison, Public Health Specialist, RMBC		
Opening date:		Jo Abbott, Public Health Consultant – Health		
7 July 2016		Protection, RMBC		
		Sharon Ainslie, Sexual Health Lead,		
		Yorkshire, Humber and North East, Public		
		Health England		
	1010=110	Lorna Byne, Category Manager, RMBC		
Drugs and Alcohol	13/07/16	Debbie Stovin, Alcohol and Drugs		
Recovery		Commissioning Manager, RMBC		
Opening date:		Jacqueline Wiltschinsky, Consultant in Public		
6 July 2016		Health, RMBC		
		Melanie Earlam, Acting Health & Wellbeing		
		Programme Lead, Yorkshire & Humber,		
		Public Health England		
		Lorna Byne, Category Manager, RMBC		

3. Key Issues

Please refer to Appendices for further information

3.1 There were two bids received and formally assessed for the **Sexual Health Services**, from TRFT and a second provider. Both bids scored well in relation to quality, scope of service and price and the overall scores were very close. This will be fed back to the

- unsuccessful provider. TRFT is the preferred provider as their bid described a service more closely reflecting the required service specification.
- 3.2 There were four bids received and assessed for the **Drugs and Alcohol Recovery** service. At the present time the Recovery Service is run from Carnson House which is owned by Lifeline, but purchased using Department of Health capital funding. A Memorandum Of Understanding (MOU) is in place with RMBC to continue to use the building for the recovery service at zero rent for a 20 year period. As Lifeline will be the new providers of the Recovery Service this will integrate the service provider and the building ownership to a single organisation. The top two scores within the quality method statements for the services were close with a larger gap for the other two bids. Feedback will be provided to all the unsuccessful providers. Lifeline is the preferred provider as despite the close result within the quality scores, Lifeline scored highest for quality and remained the preferred provider when the pricing score was incorporated.
- 3.3 Two bids were received and formally assessed for the **0-19 Integrated Public Health Nursing Service**, from TRFT and a second provider. The second providers' submission was well above the allocated cost envelope and therefore scored very low on price. However, although the scores were very close TRFT also scored higher for Quality, and therefore was the preferred bidder on both counts.

4. Options considered and recommended proposal

4.1 The scoring summary for each bidder is included within the exempt appendices.

5. Consultation

- 5.1 Market testing and 'meet the buyer' events were held to consider the models for the sexual health and the 0-19 Integrated Public Health Nursing Service. This included consultation with stakeholders and potential providers.
- 5.2 Prior to tender, a consultation exercise was undertaken in 2015 in relation to the drugs and alcohol recovery services which shaped the model in the specification.
- 5.3 The service model and programme of activity for service users in the drugs and alcohol service has already been piloted. Amendments were made via the group that has managed the implementation of the new recovery building 'Carnson House', as part of the conditions of the capital grant that funded the building for the new service.
- 5.4 Consultation with RMBC Children & Young People's Services, Rotherham Clinical Commissioning Group, and Head teachers was undertaken prior to tender regarding different aspects of the 0-19 specification. In addition, learning from neighbouring authorities' recent tender exercise was incorporated into the specification regarding scope and pricing, to avoid a situation where no suitable suppliers bid for the tender.

6. Timetable and Accountability for Implementing this Decision

6.1 To ensure continuity of services, and allow a reasonable period for mobilisation Procurement and Public Health aim to notify providers at the end of September 2016.

- 6.2 Once agreed by Cabinet, tender intention award letters will be issued and following a 10 day standstill period formal award letters will be issued to the providers. Providers must then indicate their agreement to the terms and conditions in writing to RMBC.
- 6.3 As soon as this process is completed, providers will need to agree the detail of mobilisation plans with Public Health to enable work to commence on transferring the services to be in place by 1st April 2017 for 0-19 and Sexual Health Services and 1st February 2017 for Drugs and Alcohol Recovery Services.

7. Financial and Procurement Implications

- 7.1 The contracts were subject to a full transparent EU procurement process, managed through YORtender. The period for submission of tenders was extended from the minimum required period of 35 days to 45 days to allow potential providers as long as possible within the time frames to submit tenders, recognising the complexity of the services.
- 7.2 All three contracts will be awarded to value lower than the advertised tender value. The tender value was reduced to reflect budget efficiency savings agreed by Council on 2nd March 2016. The total value of reductions across the three contracts includes both these identified savings, plus further savings necessary as a result of confirmed future reductions in the Public Health Grant notified by Government.

8. Legal Implications

- 8.1 Standing Order 48 requires contracts valued at £50,000 and above to be tendered. This has been completed via the YORtender system.
- 8.2 EU legislation states that contracts with a value of over approximately £164,000 must be advertised in the Official Journal of the European Union. This action has also been completed.
- 8.3 New contracts will need to be put in place which will require involvement of RMBC Legal team given the value of the contracts.
- 8.4 Public Health have agreed with RMBC Legal Services the formal Terms & Conditions for Public Health commissioned services.

9. Human Resources Implications

- 9.1 The 0-19 Integrated Public Health Nursing Service is currently provided by TRFT, so there are no TUPE implications arising from the award of this contract. However, in order to deliver the proposed model, the provider has indicated it will require a restructuring of staff across the 0-19 services. This will be managed by the provider during mobilisation and throughout the first year of the contract.
- 9.2 As TRFT are the current providers of the Integrated Sexual Health Service in Rotherham there are no TUPE implications. The Trust has, however, outlined a revised service model in line with the service specification which will have some implications for current staff and will be managed by the provider as part of the mobilisation plan. They have stated that they do not envisage any redundancies.

9.3 Within the **Drugs and Alcohol Recovery Service** there are 8 staff employed by the current provider of the Recovery Service, Rotherham Doncaster & South Humber NHS Foundation Trust (RDaSH), and one staff member of Lifeline as current provider of the Peer Mentor & Service User Support Service who will be TUPE'd to the new integrated Recovery Service. The providers will manage this process as part of the mobilisation plan.

10. Implications for Children and Young People and Vulnerable Adults

10.1 All the specifications include detailed requirements in relation to the need to comply with both legislation and local procedures for the Safeguarding of Children and Adults.

11 Equalities and Human Rights Implications

11.1 The implications regarding Equalities and Human Rights have been assessed for each supplier who submitted tender bids.

12. Implications for Partners and Other Directorates

12.1 0-19 Integrated Public Health Nursing Service

As a continuation of the current provider the transition and mobilisation impact on partners and other directorates will be much reduced. However, the new specification requires significant transformation of the service and new models of working. Through mobilisation and beyond, partners and other directorates will need to work in partnership with Public Health and the preferred provider to enable the successful delivery of the new specification, which may include new ways of working.

12.2 Sexual Health

As TRFT currently provide the Integrated Sexual Health Service in Rotherham their links with local partners and other directorates will continue. The new delivery model introduces a new third sector partner (Mesmac) who will work with the Trust to develop health promotion activities, targeted at people most in need of sexual health services.

12.3 Drugs and Alcohol Recovery

RDaSH and Lifeline both currently provide elements of the Drugs and Alcohol Recovery service in Rotherham. RDaSH are also currently the providers of the clinical treatment service for drugs and alcohol, which is also due to go out to tender in 2017. Lifeline (the preferred provider) and RDaSH will be required to continue working in partnership to achieve positive outcomes for service users in Rotherham as part of a wider treatment system.

13. Risks and Mitigation

13.1 EU Regulations state a 10 day standstill period is required upon notification of the preferred bidders. If any contractor believes they have been treated unfairly in the procurement process they have the opportunity to submit a challenge within this 10 day period. If such an objection is received no appointment can be made until it is fully resolved.

14. Accountable Officer(s)

Approvals Obtained from:-

Mark Scarrott, Finance Manager
Ian Gledhill, Principal Officer, Legal Services
Helen Chambers, Interim Procurement Manager
Odette Stringwell, Human Resources Business Partner

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