

Public Report Delegated Officer Decision

## **Committee Name and Date of Committee Meeting**

Delegated Officer Decision - 18 March 2024

#### **Report Title**

Officer Decision Record to award a Call Off arrangement referenced as a 'Work Order' to Connect Healthcare Rotherham CIC via the Non-core Framework Agreement, to deliver the additional activities required in the utilisation of the Local Stop Smoking Services and Support Grant 2024/25.

## Is this a Key Decision and has it been included on the Forward Plan? No

#### Strategic Director Approving Submission of the Report

Ian Spicer delegated to Ben Anderson, Director of Public Health

#### **Report Author(s)**

Michael Ng, Operational Commissioner (Public Health) Michael.ng@rotherham.gov.uk

#### Ward(s) Affected

Borough-Wide

#### **Report Summary**

Connect Healthcare Rotherham CIC was awarded the 21-152 Integrated Public Health & Lifestyle Behaviour Change contract and Non-Core Framework, referenced 20-336, which commenced 1 October 2023 and are the only supplier under the Framework Agreement. This report outlines the decision to award a Work Order to the total value of £344,845 (The Non-Core Work Order) to Connect Healthcare Rotherham CIC via the Non-core Framework Agreement. The Non-Core Work Order is required to deliver specific activities in the utilisation of the of the Local Stop Smoking Services and Support Grant 2024/25, which was agreed by Cabinet on 12 February 2022.

#### Recommendations

1. To agree to award the non-core Work Order to Connect Healthcare Rotherham CIC for additional activity in the utilisation of the Local Stop Smoking Services and Support Grant .

#### List of Appendices Included

Appendix 1 - Tobacco Control Work Plan (2022/23 – 2024/25) Appendix 2 – Connect Work Order 01

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# **Background Papers**

Cabinet Report: Local Stop Smoking Services and Support Grant 12 February 2024 The Khan review: making smoking obsolete. Swap to Stop Cabinet Report: Tobacco Control Review 16 October 2023 Notice of motion: Tobacco Control 12 April 2023 Health and Wellbeing Board 25 January 2023 Cabinet Report: Public Health, Healthy Lifestyle Services Pathway 16 May 2022

## Consideration by any other Council Committee, Scrutiny or Advisory Panel

Name of Committee – Click here to enter a date. Name of Committee – Click here to enter a date.

## **Council Approval Required**

No

# Exempt from the Press and Public

Yes

An exemption is sought for Appendices 2 under Paragraph 3 (Information relating to the financial or business affairs of any particular person (including the authority holding that information)) of Part I of Schedule 12A of the Local Government Act 1972 is requested, as this report contains commercially confidential information. It is considered that the public interest in maintaining the exemption would outweigh the public interest in disclosing the information as public release could jeopardise delivery of the project.

**Contract Ref 21-152Officer** Decision Record to award a Call Off arrangement referenced as a 'Work Order' to Connect Healthcare Rotherham CIC via the Non-core Framework Agreement, to deliver the additional activities required in the utilisation of the Local Stop Smoking Services and Support Grant 2024/25.

1.	Background		
1.1	As described in the Cabinet Report: Local Stop Smoking Services and Support Grant 12 February 2024, Rotherham was awarded a Local Stop Smoking Services and Support Grant 2024/25 of £384,845 for 2024/25.		
1.2	£344,845 of this has been allocated to Connect Healthcare Rotherham CIC (Connect) to continue the delivery of additional service provision relating to the Local Stop Smoking Services and Support Grant 2024/25 aims.		
1.3	<ul> <li>The funding will stimulate additional quit attempts, link smokers to effective interventions, boost community stop-smoking service (CSSS) capacity, build professional competence, and strengthen partnerships within local healthcare systems.</li> <li>The section below highlights the proposed activity, which aligns with the strategic aims detailed in the Work Plan, with the majority of the grant</li> </ul>		
	being allocated to the CSSS.		
1.4	<ul> <li>Below is a summary of the strategic aim and proposed activity as described in the Cabinet paper on 12 February 2024.</li> <li>Encouraging smokers to quit through increased staff support, expanding the number and reach of cessation interventions, which includes improved access to stop smoking aids.</li> <li>Reducing inequalities in smoking rates: by providing targeted support in high-need areas and to high-risk groups.</li> <li>Coordinating tobacco control efforts: through a clear communication and training programme.</li> <li>Preventing smoking initiation: by promoting local quit services and fostering positive social norms.</li> </ul>		
1.5	The total value of the Non-Core Work Order awarded under this Officer Decision is £344,845		
2.	Key Issues		
2.1	Work order 001 (Appendix 2) outlines the additional service activity to be delivered by Connect under the Local Stop Smoking Services and Support Grant.		
2.2	This was agreed in principle by Cabinet 12 <sup>th</sup> February 2024		

3.	Options considered and recommended proposal		
3.1	Two options have been considered, which are:		
	Option 1 – to award the Work Order 006 Connect Healthcare Rotherham CIC. The original procurement was designed to provide the flexibility to enable a response to the relevant funding stream in the manner detailed in this report.		
	Option 2 – to do nothing and risk losing the additional grant funding.		
3.2	The recommendation is to award the Work Order to Connect in utilisation of the Local Stop Smoking Services and Support Grant as per the Cabinet paper. This is due to Connect being the commissioned Community Stop Smoking provider, and the activities contained in the non-core Work Order.		
4.	Consultation on proposal		
4.1	Consultation on the Grant funding is described in the Cabinet paper of the 12 February 2024		
4.2	The Tobacco Control Steering Group have worked in partnership to develop the updated Tobacco Control Work Plan (2022/23 – 2024/25). The group membership includes Council Directorates (Adult Care, Housing and Public Health, Regeneration and Environment and Children and Young People's Services), Connect Rotherham Healthcare CIC, The Rotherham NHS Foundation Trust and Rotherham Doncaster and South Humber NHS Trust and representation from South Yorkshire Integrated Care Board Rotherham Place. The Work plan was approved by the Health and Wellbeing Board on 25 January 2023 and endorsed by Cabinet on 16 October 2023.		
5.	Timetable and Accountability for Implementing this Decision		
5.1	The Work Order contract commencement is the 1 April 2024.		
6.	Financial and Procurement Advice and Implications (to be written by the relevant Head of Finance and the Head of Procurement on behalf of s151 Officer)		
6.1	The grant of £384,845 is ring-fenced for use solely of stopping smoking services. The grant conditions state that the Local Authority cannot disinvest in Stop Smoking activities and this will be assessed based on NHS statistics and not LA RO3 returns. The ICB/Trust will also be required to maintain their spending.		

6.2	The Council awarded a Core Contract and Non-Core Framework 1st October 2023 following an openly advertised competitive process undertaken in line with the Social and Other Specific Services provision of the Public Contract Regulations (as amended). Both the Core and Non-Core Framework were established on the basis of an initial 4-year term commencing 1st October 2023, with the option to extend annually for a further five years at the discretion of the Council.		
6.3	On the 1st January 2024 Health Care Services (Provider Selection Regime) Regulations 2023 were introduced and the scope of the services described within this report would now align with the new Health Care Services legislation as follows:-		
6.4	Regulation 29 - Transitional Provision29 (3) These Regulations apply to(b) any contract award procedure commenced on or after 1st January2024 for the award of a contract to be based on any frameworkagreement for relevant health care services between one or morerelevant authorities and one or more providers whether or not theframework agreement was concluded in accordance with theseRegulations or before 1st January 2024.In this instance the Council is commencing the award of a new WorkOrder/Call Off Contract via a framework agreement which wasconcluded before 1st January 2024.		
6.5	Regulation 18 – Contracts Based on a Framework Agreement         18 (3) Where a framework agreement is concluded with a single provider, a relevant authority may award a contract without a competition in accordance with that framework agreement.         In this instance the Council has created a None Core Framework Agreement with a single provider and as such is permitted to complete an award/call off without a competition in accordance with the original framework as established.		
7.	Legal Advice and Implications (to be written by Legal Officer on behalf of Assistant Director Legal Services)		
7.1	The Council entered into the Non-core Framework Agreement with this provider in 2023. At that time the Public Contract Regulations 2015 (PCR's) (as amended) applied to the procurement of health and social care services. The Health Care Services (Provider Selection Regime) Regulations 2023 apply to such services after the 1st of January 2024, and must be complied with for the procurement to be lawful. Legal has approached this report on the assumption that the services to be procured under the call-off contract may be relevant health care		

	services under Schedule 1 of the PSR that must be procured using a procurement procedure that complies with the PSR regime.		
	The CPV codes covered by the PSR Regulations include the generic code 85100000-0 for health services and 85312500-4 for rehabilitation services provided to tackle individual substance misuse. The antismoking services that are the subject of this call-off could not be said to be exclusively for the provision of individual rehabilitation to addicts of smoking, since they also focus on education concerning health risks. On balance and given that CPV codes are to be interpreted widely save where there is another CPV code that more precisely describes the activity, Legal advises that the Council should take the view that 85100000-0 is the applicable CPV code here.		
7.2	The Non-Core Framework Agreement enables the Council to make call- off contracts from time to time with the provider for additional services of the kind envisaged in this Officer Decision Report. Under Regulation 29 of the PSR's, which deals with transitional arrangements between the PCR and PSC procurement regimes, call-off contracts that are made after 1st January 2024 under a pre-PSR Framework Agreement are deemed to be compliant with the new PSR procurement regime if they meet two conditions: i. That the call-off arrangements specified in the Framework Contract were complied with, and ii. That the call-off complies with Regulation 18 of the PSR Regs, including the notice requirements set out in Regulations 18 (5-6).		
7.3	The process of making an award through a call off contract under the Non-Core Framework includes the requirement that the Council and the provider must agree a work order in the form described in this Officer Decision Report.		
7.4	Additional Social Value will be sought with the provider as part of the core contract.		
8.	Human Resources Advice and Implications		
8.1	There are no HR implications arising from this report for the Council.		
9.	Implications for Children and Young People and Vulnerable Adults		
9.1	Supporting adults to quit increases the likelihood of children living in smoke-free homes.		
9.2	The grant funding is to support smokers to quit tobacco; the current commissioned service provided by Connect Healthcare Rotherham CIC includes a Young Person Stop Smoking service, which is delivered in partnership with the school nurses as part of the 0-19 Service (The Rotherham NHS Foundation Trust) for young people aged 12 and over who are dependent on nicotine.		

9.3	<ul> <li>The aim to reduce variation in smoking rates and will also direct efforts to support Rotherham's most vulnerable groups, including:</li> <li>People with mental health conditions.</li> <li>People working in routine and manual jobs.</li> <li>Communities in areas of high deprivation.</li> <li>Ethnic groups with a high smoking prevalence.</li> <li>LGBTQIA+ people.</li> </ul> The referral route via NHS Health Checks will support engagement with this population as the delivery of NHS Health Checks prioritises the populations of GP practices with the highest levels of deprivation.			
10.	Equalities and Human Rights Advice and Implications			
10.1	Some demographic groups are known to have higher rates of smoking and, therefore, be at greater risk of tobacco-related ill health, including people from lower socioeconomic groups. The grant activity will increase the number of interventions available in more communities across borough, alongside upskilling more services to refer to Connect to reduce smoking in our communities which will help to reduce this health inequality.			
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11.	Implications for CO2 Emissions and Climate Change			
11.1	There are no specific implications for CO2 emissions and climate change from this change in approach. If successful in reducing tobacco consumption in Rotherham, there will be indirect benefits along the tobacco supply chain.			
12.	Implications for Partners			
12.1.	Additional capacity within the community stop-smoking service will enable providers across the borough to play a more focused role in referring smokers they see in front-line services to access quick and effective support to quit. The community Stop Smoking service can receive referrals from any source, including self-referral and online.			
13.	Risks and Mitigation			
13.1	Some of the smoking population might be described as more clinically complex (for example, they may have higher levels of tobacco dependency, live more complex lives or have a range of additional clinical needs or long-term conditions). Over time, there will be a greater proportion of the smoking population remaining in this group. This can make the task of the services more difficult over time whilst potentially increasing the cost of these interventions. To mitigate this challenge, it			

	Ben Anderson – Director of Public Health.		
14.	Accountable Officers		
	The Public Health Commissioning team will manage compliance with the grant conditions via quarterly contract management meetings, which will monitor and manage grant spending, ensuring that services are delivered as outlined in the grant conditions, with the Public Health Senior Management Team and the Tobacco Control Group will have oversight of the grant spending via quarterly reporting.		
13.2	Failure to meet the grant conditions of maintaining the current spending on stop-smoking services and not delivering services as set out in the grant reporting conditions could lead to DHSC withholding up to 30% of the allocated financial year's funding.		
	is important that services are resourced and that the most recent evidence-based practice is used with this group.		

Approvals obtained on behalf of Statutory Officers: -

	Named Officer	Date
Chief Executive	Sharon Kemp	Click here to
		enter a date.
Strategic Director of Finance &	Judith Badger	Click here to
Customer Services		enter a date.
(S.151 Officer)		
Head of Legal Services	Phil Horsfield	Click here to
(Monitoring Officer)		enter a date.

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