



Author/Lead Officer of Report: Karen Harrison;
Health Improvement Principal

Tel: 07802729580

Report of: *Greg Fell, Director of Public Health*

Report to: *Councillor Jackie Drayton, Cabinet Member for Children and Families*

Date of Decision: *2nd July 2020*

Subject: *Procurement of NHS Health Check Programme*

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|--|-----|-------------------------------------|----|-------------------------------------|
| Is this a Key Decision? If Yes, reason Key Decision:- | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| - Expenditure and/or savings over £500,000 | | <input checked="" type="checkbox"/> | | |
| - Affects 2 or more Wards | | <input checked="" type="checkbox"/> | | |
| Which Cabinet Member Portfolio does this relate to? <i>Children and Families</i> | | | | |
| Which Scrutiny and Policy Development Committee does this relate to? <i>Healthier Communities and Adult Social Care</i> | | | | |
| Has an Equality Impact Assessment (EIA) been undertaken? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| If YES, what EIA reference number has it been given? <i>774</i> | | | | |
| Does the report contain confidential or exempt information? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
| If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:- | | | | |
| <i>"The (report/appendix) is not for publication because it contains exempt information under Paragraph (insert relevant paragraph number) of Schedule 12A of the Local Government Act 1972 (as amended)."</i> | | | | |

Purpose of Report:

The purpose of this report is to seek permission to re-procure the NHS Health check programme. The NHS Health check programme is a mandated public health service. The contract with the current provider will end 31st August 2020.

Recommendations:

It is recommended that the Cabinet Member for Children and Families:

- (1) approves the re-procurement of the NHS Health check programme in Sheffield through a tender process and in accordance with this report. It is intended that the length of the contract will be 5 years with an estimated contract value of £185,000 per year. Please note the contract value may fluctuate each year due to the availability of funding and budgets.
- (2) delegates authority to the Director of Public Health, in consultation with the Director of Legal Services and the Director of Finance and Commercial Services to award the said contracts in accordance with the procurement strategy and this report.
- (3) to the extent not already delegated to them by the Leader's Scheme of Delegation, delegates authority to the Director of Public Health, in consultation with the Director of Legal Services and the Director of Finance and Commercial Services, to take any other decisions necessary in order to meet the aims and objectives of the report.

Background Papers:

(Insert details of any background papers used in the compilation of the report.)

| Lead Officer to complete:- | | |
|---|--|---|
| 1 | I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required. | Finance: Emile Blackwood |
| | | Commercial Services: Andrew Turpin |
| | | Legal: Gemma Day |
| | | Equalities: Rosie May |
| <i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i> | | |
| 2 | EMT member who approved submission: | <i>Greg Fell</i> |
| 3 | Cabinet Member consulted: | <i>Jackie Drayton</i> |
| 4 | I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Decision Maker by the EMT member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1. | |
| | Lead Officer Name: Karen Harrison | Job Title: Health Improvement Principal |
| | Date: 19 th May 2020 | |

1. PROPOSAL

In April 2013 the NHS Health Check became a mandated public health service in England. Local authorities are responsible for making provision to offer an NHS Health Check to eligible individuals aged 40-74 years once every five years.

The NHS Health Check programme is a Public Health programme in England for people aged 40-74. It is a risk assessment and management programme which aims to prevent or delay the onset of cardiovascular diseases including diabetes, heart disease, kidney disease and stroke. The NHS Health Check programme can help individuals reduce their risk by offering help and advice across a range of risk factors and lifestyle behaviours such as smoking, alcohol use, weight management, diet and physical activity. The programme also aims to reduce levels of alcohol related harm and raise awareness of the signs of dementia.

The Health check involves carrying out a cholesterol blood test and calculating someone's body mass index and lifestyle behaviours to use an accredited clinical assessment tool to calculate an individual risk of developing Cardiovascular disease within the next 10 years. We know that some people are at higher risk of developing CVD at an earlier age based on their ethnicity, living in areas of deprivation, having a previously recorded high blood pressure and having a learning disability of severe mental illness. Therefore this programme will be delivered to target those people at the highest risk.

We are looking for a provider who can assess the eligibility criteria and carry out the programme within the best practice guidelines. The successful provider can decide how to contact an eligible person but they must work with local communities to reach those most in need.

The contract with the current provider (Primary care Sheffield) will end on 31st August 2020 and it should be noted there are no further options to extend within the contract and that a further extension would risk breaching Public contract Regulations.

In order to ensure that provision continues permission is sought to re-procure the programme through a tender process. It is recommended that the length of the contract will be 5 years with an estimated contract value of £185,000 per year. A targeted approach will be used to reduce health inequalities and deliver the health check programme to those at higher risk of developing cardiovascular disease.

2. HOW DOES THIS DECISION CONTRIBUTE?

2.1 *Improving health and wellbeing*

Delivering the NHS Health Check programme will contribute to making Sheffield a place where people have good health through the prevention or early detection of a number of conditions, allowing individuals to be better informed to manage and improve their quality of life, and/or to be given treatment for cardiovascular disease and be placed on a specific register to ensure

appropriate care can be given.

Reducing inequalities

A proportionate universalism approach will be used to deliver the programme and will be at a scale and intensity proportionate to the degree of need. The programme will be universally available, although targeted to meet the needs of those at higher risk of developing cardiovascular disease and who may belong to one of the most disadvantaged groups in Sheffield.

Good value for money

In Sheffield 0.4% of the Public Health grant is spent on the health checks programme. Many local authorities spend a higher percentage of their Public health budget on Health checks but perform poorer than Sheffield when comparing percentage of eligible people who have received a Health check to percentage of public health grant spent. It is therefore felt that in Sheffield the programme is good value for money.

3. HAS THERE BEEN ANY CONSULTATION?

- 3.1 The council is not required to consult on the proposal as this is a statutory programme that will be delivered within the boundaries of the mandate.

4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

4.1 Equality of Opportunity Implications

- 4.1.1 The contract needs to specify that delivery of the NHS Health check programme will be delivered to those at higher risk of developing CVD based on:
Ethnicity (BAME groups)
Living in the highest quintile of deprivation
Having a learning disability or severe mental illness
A previously recorded raised blood pressure or raised CVD risk
- 4.1.2 Any new contract needs to ensure that the provider has the skills to engage and communicate with the community and voluntary sector, and can ensure alternative methods of delivery rather than just through GP surgeries as the target group may be less likely to be registered with a GP.
- 4.1.3 Any new contract needs to ensure that the provider has the competency to identify and communicate with target groups, including accessible communication formats for disabled people and the ability to translate materials into the most popular community languages.

4.2 Financial and Commercial Implications

- 4.2.1 Undertaking a procurement exercise for the provision of Health Checks ensures that Sheffield City Council meets its obligations featured under

the 2015 PCR regulations.

- 4.2.2 The estimated contract value is £185,000 per annum and the proposed contract term is 5 years. Funding will be reviewed annually and will also be subject to regular ongoing monitoring to ensure the Provider is delivering what we need.
- 4.2.3 The contract will be formed from Sheffield City Council's Standard Terms and Conditions and therefore allows the contract varied in terms of budget and also terminated by the Council should our requirements change.
- 4.2.4 The financial team have reviewed the report and conclude that there aren't any further financial implications for Sheffield City Council.
- 4.3 Legal Implications
 - 4.3.1 Local Authorities have a responsibility under the The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 to provide the Health Check Assessment to eligible individuals in a local authority's area once every five years. An eligible individual is someone who is aged from 40 to 74 years.
 - 4.3.2 Local Authorities also have 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*'. This includes areas such as providing information and advice, providing services or facilities designed to promote healthy living (whether by helping individuals to address behaviour that is detrimental to health or in any other way), providing services or facilities for the prevention, diagnosis or treatment of illness.
 - 4.3.3 It is intended that the contract which is awarded following a successful tender process will be for 5 years with appropriate break and variation clauses to enable earlier termination or amendments to the contract if required by the Council. These clauses will cover eventualities such as a reduction in funding.
 - 4.3.4 The procurement of any goods, works or services by the Council must be undertaken in accordance with all relevant provisions of the Council's Constitution including its Contracts Standing Orders and all applicable Procurement rules (Public Contracts Regulations 2015).
 - 4.3.5 If there is a change in provider then, then this may have an impact on the staff providing the service and therefore TUPE may apply. This will be drawn to the bidder's attention so they are able to consider the potential impact of this.
 - 4.3.6 Data protection regulations must be followed at all times and a data sharing agreement will be put in place.

4.4 Other Implications

4.4.1 None

5. **ALTERNATIVE OPTIONS CONSIDERED**

5.1 **Alternative Option 1- Stop the programme.**

Rejected as this would be a breach of the mandate and could have financial and reputational consequences.

Alternative Option 2 - Service redesign.

Rejected as the current model is robust and working well.

Alternative Option 3 - Direct Award to the same provider.

Rejected due to procurement regulations not allowing a direct award under these circumstances. This option would place the Council in breach of the Public Contracts Regulations 2015 without first opening the opportunity to the market.

6. **REASONS FOR RECOMMENDATIONS**

6.1 A tender process is the preferred outcome as it allows for innovation and competition to drive quality improvement and give value for money. The length of contract has been recommended to be 5 years as this allows the provider to invest in the programme to improve quality and performance and realise the benefits. The health check programme is a 5 year programme so having a contract of the same length is advantageous as it will allow the provider to complete a full health check cycle.

Outcomes

- ✓ Increase number of eligible people being invited for a health check
- ✓ Increase the number of people receiving a health check
- ✓ Reduce health inequalities
- ✓ Improve health and wellbeing