

Cabinet – 11 December 2013

Public Health: Awarding the Stop Smoking Service contracts 2014/15

Portfolio: Councillor Zahid Ali, Public Health and Protection

Related portfolios: Councillor R Andrew, Councillor McCracken

Service: Public Health

Wards: All wards

Key decision: Yes

Forward plan: Yes

1. Summary

This report updates Cabinet about the progress of the procurement of the Public Health commissioned Stop Smoking services as set out in the Report to Cabinet on 24 July 2013 and seeks the delegated authority for the award of contracts at the conclusion of the procurement process. A further report on the award of all other Public Health contracts will be brought to Cabinet in February 2014.

2. Recommendations

- 2.1 That Cabinet note the progress in the procurement process of the Public Health Stop Smoking Services.
- 2.2 That Cabinet delegate authority to the Director of Public Health, in consultation with the Executive Director of Neighbourhood Services and the Portfolio Holder for Public Health and Protection, to vary or enter into contracts within the available budget for the Public Health commissioned Stop Smoking Services and sign or authorise the sealing of any deeds, contracts and other related documents in relation to such services.

3. Report detail

Current contracts

- 3.1 In September 2012, Cabinet received a report, approving the delegated authority to the Executive Director of Neighbourhood Services, in consultation with the then Portfolio Holder for Public Health and the Leader of the Council to enter into contractual arrangements for Public Health services for 2013/14.

Proposed contractual arrangements

- 3.2 The procurement of the Public Health commissioned Stop Smoking Services and the associated services, with an annual contract value of £982,277, is progressing to the Council's timetable. The Council's Procurement, Finance and Legal officers have all supported the procurement process.
- 3.3 Prior to the procurement exercise, substantial consultation was undertaken with the existing supplier market, neighbouring Local Authorities and procurement colleagues to maximise the design, attractiveness, sustainability and social value aspects of the framework. A framework agreement tender exercise to identify suitable service providers was completed on 13 November, when the bids were opened by Councillor Ali. Eight bids were received (from the five present provider agencies and three new provider agencies). The procurement unit has concluded the due diligence checks and all bidders have satisfied the baseline criteria, meaning that they progress to the quality & price evaluation.
- 3.4 The evaluation process is due to be concluded on 27 November 2013 and the contracts to be awarded by early January 2014 for the services to be delivered from 1 April 2014.
- 3.5 The intended contract(s) will be for 12 months with the option to extend for a further year, which will allow for renegotiation of the contract values based upon any future Council or Public Health budgetary implications.
- 3.6 These contracts will run as payment on activity so that providers will only be paid for completed work (measured by validation of 4 week and 12 week successful quitters). Prices agreed include payment for provision of pharmacotherapy (i.e. Nicotine Replacement Therapy products).

4. Council priorities

- 4.1 In September 2012 the Council adopted the Marmot Objectives as objectives for improving Health and Wellbeing and reducing inequalities for the people of Walsall. These objectives have provided the framework for the Joint Strategic Needs Assessment, the Health and Wellbeing Strategy and the Sustainable Communities Strategy, "The Walsall Plan". Existing and new Public Health expenditure for 2013/2014 and the Stop Smoking Services are specified, commissioned to deliver against these priorities.

5. Risk management

The Public Health Commissioner responsible for commissioning the Stop Smoking services has agreed contract values within the ring-fenced Public Health Grant. The Clinical Commissioning Group's Medicines Management Team have advised and approved the proposed model of direct supply of the Nicotine Replacement Therapy, by contracted providers. All approved providers will need to put in place a process led by an appropriately qualified clinical lead to ensure that any risks are covered by their organisation.

6. Financial implications

All the proposed expenditure set out in this paper will be managed within the ring-fenced Public Health grant to the Council for 2014/15 and 2015/16.

7. Legal implications

- 7.1 The proposals set out in this Report take into account the Council's responsibilities for Public Health as set out in the Health and Social Care Act 2012, the associated guidance and the conditions of the Public Health grant made to the Council for 2013/2014, as set out in Local Authority Circular (Dept. of Health)(2013)1. The Council's Legal Services have not been asked to consider or advise about such Council responsibilities or the governing legislation, relevant guidance and grant conditions.
- 7.2 All contractual arrangements must be procured in compliance with the Public Contracts Regulations 2006 (as amended), if applicable; and with the Council's Contract Rules. The Council's Legal Services team has worked with the Procurement Unit and Public Health Commissioners to develop the new form of contract and to review the existing arrangements.

8. Property implications

There are no property implications in these proposals.

9. Health and wellbeing implications

The primary intention of these proposals is to deliver improved outcomes in health and wellbeing for people of Walsall. Smoking is still the single greatest cause of illness and premature death in England, killing one in two smokers prematurely. Addressing rates of smoking not only tackles physical health issues but also addresses health inequalities as smoking is highest in poor communities and in those in routine and manual occupations. The Council's ambition to improve the health and wellbeing of the people of Walsall includes reducing the rates of regular smoking amongst young people, adults and pregnant women. These ambitions are the focal ambition of these contracted services.

10. Staffing implications

For the Council employed staff there are no employment implications. Any TUPE implications for provider agencies will be considered as part of the bid evaluation process and will become an issue for the provider agencies to resolve.

11. Equality implications

In order to achieve the ambition of the Health and Wellbeing Strategy to improve the health of the poorest people in Walsall fastest (thus reducing long-standing inequalities in health in the Borough) the Stop Smoking Services contracts will include performance measures which target people and groups within Walsall with the worst health outcomes. Issues of equality will form part of the evaluation of the quality of the tender bids.

12. Consultation

Both the public and partner agencies representing statutory agencies, provider agencies and the voluntary sector have been consulted on the Joint Strategic Needs Assessment and the Health and Wellbeing Strategy which have determined the Public Health commissioning priorities.

Background papers

Towards a Health and Wellbeing Strategy: Joint Strategic Needs Assessment
Health and Wellbeing Strategy 2013-2016

Author

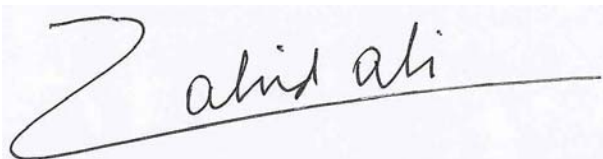
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2 December 2013

Councillor Zahid Ali
Portfolio Holder



2 December 2013