Cabinet – 14 December 2022

Future contracting arrangements for Integrated Sexual Health Services and Healthy Child Programme 0-5 and 5-19

Portfolio: Councillor Flint - Health and Wellbeing

Related portfolios: Councillor Elson – Children's Services

Service: Public Health

Wards: All

- Key decision: Yes
- Forward plan: Yes

1. Aim

To ensure that Walsall continues to provide a robust integrated sexual health service and Healthy Child 0-19 Programme using an appropriate and agreed commissioning mechanism from April 2023. Provision of these services including the mandated elements will ensure the health and wellbeing of the target population of Walsall.

2. Summary

- 2.1 The Health and Social Care Act 2012 places a duty on local authorities to provide,
 - Comprehensive sexual health services including long-acting methods of contraception, but excluding GP additionally provided contraception
 - Sexually transmitted infections (STI) testing and treatment, chlamydia screening and HIV testing
 - Specialist services, including young people's sexual health, teenage pregnancy services, outreach, HIV prevention and psycho-sexual counselling, sexual health promotion, services in schools, college, and pharmacies.
 - Health Visiting and support to remain well in pregnancy including quitting smoking in pregnancy delivered through the Healthy Child Programme 0-5. This service includes five mandated visits to all families in the first 2 ½ years of a child's life

- School Nursing and Teenage Pregnancy prevention support delivered through the Healthy Child Programme 5-19. Within this is the mandated National Child Measurement programme in Reception and Year 6.
- 2.2 These services are currently commissioned and provided by Walsall Healthcare NHS Trust. The current contracts are due to expire on 31 March 2023.
- 2.3 It is proposed, for the 12-month period 1 April 2023 to 31 March 2024, that a oneyear Section 75 Agreement will be entered into based on the current agreement for sexual and reproductive health services and the Healthy Child Programme.
- 2.4 Entering into a Section 75 agreement with Walsall Healthcare NHS Trust will allow Public Health officers to work with national and local partner agencies and Council colleagues to consider all commissioning options and comprehensively assess the opportunities and risks of a re-designed service and any proposed changes. it will also ensure that Walsall complies with the new Health and Social Act 2022 ensuring more collaborative commissioning
- 2.5 This is a key decision because it exceeds the threshold for "significant" expenditure of £500,000 and will impact upon all council wards.

3. Recommendations

- 3.1 That Cabinet approves entering into a Section 75 agreement for the provision of the integrated sexual health service, delivered by Walsall Healthcare NHS Trust from 1 April 2023 to 31 March 2024.
- 3.2 That Cabinet approves entering into a Section 75 agreement for the provision of the Healthy Child Programme 0-5 service contract delivered by Walsall Healthcare NHS Trust from 1 April 2023 to 31 March 2024.
- 3.3 That Cabinet approves entering into a Section 75 agreement for the provision of the Healthy Child Programme 5-19 service, contract delivered by Walsall Healthcare NHS Trust from 1 April 2023 to 31 March 2024.
- 3.4 That Cabinet delegates authority to the Director of Public Health, in consultation with the Portfolio Holder for Health and Wellbeing, for any further decisions required in relation to moving forward with the contracts.

4. Report detail

Context

Sexual and Reproductive Health services

- 4.1 Local authorities have a duty to provide open access services for contraception and for prevention, testing and treatment of sexually transmitted infections (STIs) for their residents. This is mandatory and entails the key principles of providing services that are free, confidential, open access and not restricted by age.
- 4.2 At present, Walsall Healthcare Trust deliver the Walsall Integrated Sexual Health (WISH) Service. This is based in a single location, across the road from the Walsall Manor Hospital site.
- 4.3 The service provides clinic-based interventions and provides governance to GPs and pharmacies to provide contraceptive (emergency contraception, long-acting reversible contraception, and condom distribution) and sexual health services (chlamydia screening) within community settings.
- 4.4 The cost of all testing and drug treatments, excluding HIV pre-exposure prophylaxis, is included within the contract. Currently, online and pharmacy testing services are commissioned as part of the main contract for WISH.
- 4.5 The current contract commenced in 2015 and integrated a number of separate contraception and STI services, it also mandated the introduction of online testing services. The current contract is due to expire on 31 March 2023.
- 4.6 Nationally and locally, a significant amount of new policy direction and local strategic planning will need to be translated for Public Health officers to confidently re-design and develop sexual and reproductive health services that can meet current and future priorities. This includes,
 - Walsall draft Sexual and Reproductive Health Strategy 2022/23
 - Towards Zero: the HIV Action Plan for England 2022 to 2025
 - Women's Health Strategy for England published July 2022
 - National Sexual and Reproductive Health Strategy/action plan to be published in 2022
 - National Sexual and Reproductive Health service specification and outcomes

Healthy Child Programme 0-19

4.7 Local authorities have a duty under the Health and Social Care Act 2012 to provide programmes to improve the health and wellbeing of all children 0-19 years and their families through the Health Visiting and School Nursing Service teams

working at Community, Universal, and Targeted and Specialist levels according to the child's need.

- 4.8 The Healthy Child Programme 0-19 is delivered by Walsall Healthcare Trust and contains two core programmes both with nationally mandated functions,
 - The Healthy Child Programme 0-5 Health Visiting service, which includes health visiting support to all families in Walsall (including refugees and migrants), Health in Pregnancy support and support to quit smoking in pregnancy. This service includes five nationally mandated visits to all families in the first 2 ½ years of a child's life. If a child requires more support, a greater input is given.
 - The Healthy Child Programme 5-19 which includes School Nursing, SEND school support and Teenage Pregnancy support. Support to other services such as the Black Country Mental Health Trust is also offered by this team. Within this is the mandated National Child Measurement programme in Reception and Year 6.
- 4.9 The Healthy Child Programme 0-5 contract was awarded to Walsall Healthcare NHS Trust following the completion of a compliant procurement process, by approval of the then Director of Public Health from 01 April 2017 with the option to extend the initial term by a further two consecutive twelve month periods, from 1 April 2020 to 31 March 2022.
- 4.10 In December 2020, due to the COVID-19 pandemic Cabinet agreed to extend public health commissioned services due to expire for a further 24 months, with an expiry date of March 2023. This included the integrated sexual health and Healthy Child Programme.

National Context

- 4.11 Following the publication of the Health & Care Act in July 2022, which describes the new arrangements for commissioning health and care services, a detailed appraisal of future commissioning options has been conducted.
- 4.12 There has been significant change to NHS systems recently due to the formation of Integrated care systems (ICSs) on 1 July 2022. The recently formed ICSs offers opportunities to plan and co-ordinate health and care services, including elements. There has been insufficient time to explore how this newly formed partnership can operate at a system, place and neighbourhood level. The Integrated White Paper states 'all places must adopt a governance model with three characteristics.
 - A clear, resource plan across the partner organisations for delivery of services within scope and for improving shared local outcomes

- A significant and growing proportion of heath and care activity spend within that place, overseen by and funded through, resources held by the placebased arrangements
- Over time demonstrate a track record against agreed or shared outcomes.
- 4.13 There has been significant change to NHS systems recently due to the formation of Integrated care systems (ICSs) on 1 July 2022. The recently formed ICSs offers opportunities to plan and co-ordinate health and care services, including elements. There has been insufficient time to explore how this newly formed partnership can operate at a system, place and neighbourhood level.

Future Commissioning Arrangements

- 4.14 Options for the future commissioning arrangements for these services have been carefully considered; These include, a competitive procurement, delivery of the services from within Walsall Council, or, establishment of a Section 75 agreement under the National Health Service Act 2006.
- 4.15 The preferred option is for a Section 75 agreement to be established between Walsall Council and Walsall Healthcare NHS Trust for the continued provision and improvement of these services.

Section 75 model

- 4.16 A section 75 (S75) agreement is a legal agreement and formal partnership between a local authority and an NHS body under section 75 of the National Health Service Act 2006 (updated under the Health and Social Care Act 2012).
- 4.17 A Section 75 agreement will enable the Council and its partners to,
 - Integrate the health and care system, bringing together local government, NHS, and other partners to help meet the health and care needs of a local area, across healthcare, social care, public health.
 - Allows place and a single point of accountability. This can be achieved by aligning budgets.
- 4.18 The development of a Section 75 Agreement does not constitute a delegation of statutory responsibilities for these services. The Council must continue to ensure that the relevant regulatory requirements relating to the funding stream are met and it needs to consider the regulatory impact of decisions made. This is in line with the conditions attached to the use of the ring-fenced Public Health Grant.
- 4.19 Entering into a S75 agreement will allow public health officers sufficient time to redesign and reconfigure these services and explore future commissioning arrangements. This will include,

- Sexual and Reproductive Health Services reviewing the needs of the population in a post pandemic Walsall, developing a model that targets those who are most at risk of poor sexual or reproductive health and ensuring it can meet the changing needs of the population including opportunities for online self-testing and self-management.
- Healthy Child Programme Services ensuring the service offer meets the changing needs of families and that variations to contract can be made. Also gaining comprehensive stakeholder consensus on the future commissioning and modernisation intentions.
- 4.20 Additional benefits of the section 75 model include,
 - Stability for staff and the population being maintained because the existing service provision is continued. This further supports existing pathways across the sexual health system and Healthy Child Programme.
 - Benefits to improving health inequalities. There is no risk from reprocurement and changing provider or periods of provider transition that can further impact negatively on inequality.
 - Opportunities for more development, innovation and alignment with local authority and other NHS services.
 - Supporting local system principles of the Integrated Care System with focus on collaboration
- 4.21 The section 75 Integrated sexual and relationship Health service and Healthy Child Programme will continue to be monitored through contractual arrangements on a quarterly basis. Reporting requirements will be reviewed in partnership with WHT through the duration of the section 75.
- 4.22 There will be a collaborative focus on service delivery, meeting resident need and monitoring the use of aligned budget across all elements of provision.

Council Plan priorities

- 4.23 All the Council Plan priorities will continue to be supported by entering S75 partnership agreements for delivery of an integrated sexual and reproductive health service and Healthy Child Programmes, to reduce inequalities and make the most of potential.
 - Enable greater local opportunities for all people, communities and businesses.
 - Encourage our residents to lead more active, fulfilling and independent lives and maintain or improve their health and wellbeing
 - Council services are customer focused, effective, efficient and fair.
 - Children have the best start in life, are safe from harm, happy, healthy and learning well

• Empower our communities so that they feel connected and that they belong in Walsall. Create safe and healthy places whilst building a strong sense of community.

Risk management

- 4.24 Section 75 will ensure the Council can continue to meet the statutory Public Health duties and requirements within the integrated sexual health service and Healthy Child Programme.
- 4.25 Procurement challenge: S75 NHS Act 2006 enables partnering arrangements between local authorities and NHS bodies. Regulation 12 of the Public Contracts Regulations 2015 enables public bodies to co-operate in the provision of public services in public interest. The services are currently provided via s75 agreements drawn up with support from external legal advisers. Legal support will also be sought for the purposes of the new combined Section 75 Agreement. This risk is deemed as low as the Public Contract Regulations allows these types of agreements and that the report has clear recommendations.

Financial implications

- 4.26 The recommendations (section 3), to enter into S75 partnership agreements, will be implemented with no change to the current contractual values. The current contract value for the sexual health service is £1.77m per annum and for the Healthy Child Programme is £4.80m. Any potential changes in the budget will be met from within the public health grant and as a result, no additional costs are incurred in approving the recommendations set out in this report.
- 4.27 The sexual and reproductive health service and Healthy Child Programme for which the council is responsible will continue to be funded through the public health grant. The core condition of this grant is that it should be used only for the purposes of the public health functions of local authorities.

Legal implications

- 4.28 The Council has an obligation to provide a number of health service functions set out in section 2B of the NHS Act 2006 and the Local Authorities (Public Health functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013.
- 4.29 Local Authorities have been statutorily responsible for commissioning and delivering public services for sexual and reproductive health and Healthy Child Programme since 1 April 2013.

- 4.30 A Section 75 agreement is a legal agreement between a local authority and an NHS body under section 75 of the National Health Service Act 2006 (updated under the Health and Social Care Act 2012).
- 4.31 A Section 75 enables local authorities and NHS organisations to enter into arrangements in relation to the exercise of each other's health-related functions where such arrangements will provide a more streamlined service if they are likely to lead to an improvement in the way those functions are exercised.
- 4.32 The Section 75 agreement will include,
 - clearly defined shared performance measures
 - outcomes, aims and objectives
 - setting out the services to be delivered
 - governance arrangements including accountability, financial reporting, management of risks
 - exit strategy
 - treatment of any overspends/under spends.

Procurement Implications / Social Value

- 4.33 The proposed Section 75 agreement will continue to support Social Value through the individual schedules for sexual health and 0-19 services.
- 4.34 This will continue to be monitored through the partnership arrangements demonstrating how they offer Social Value in economic, environmental and/or social benefits to their employees and residents. The Council's Social Value Toolkit will be used as a guide.

Property implications

4.35 There are no property implications arising out of this report.

Health and wellbeing implications

- 4.36 Continuing to commission these services will enable the Council to promote health and wellbeing for Walsall residents and improve health outcomes.
- 4.37 Key to the Councils' response to Covid-19 is mitigating the health and wellbeing impact of the pandemic. Covid-19 is having a long-term impact on our residents' health and wellbeing. It is the intention of the Council and Public Health to understand this impact and review services based on this learning.

Reducing Inequalities

- 4.38 The principles and actions contained within this report are in full accordance with the Marmot objectives because service users will have increased independence, improved health and can positively contribute to their communities and benefit from a safe and healthy environment.
- 4.39 Engagement with target groups and potential service users, including groups that share a protected characteristic, will be undertaken as part of the service design process. This will inform the changes to service delivery to ensure that potential adverse or negative consequences are minimised or eliminated and that positive impacts are maximised. The Equality Analysis will also be updated following this work, at the start of the new financial year.
- 4.40 The service specifications will include a requirement to identify and provide services that meet any specific needs of protected groups as identified in analysis and to share data and actively participate in the evaluation of the services so that access and outcomes among protected groups can be monitored.
- 4.41 It will also detail the requirement to undertake engagement work with target groups, the wider community and NHS services and organisations working with these populations. This will help to minimise barriers, improve engagement for people with more complex needs and actively tackle health and wellbeing inequalities

Staffing implications

4.42 There are no staffing implications arising out of this report.

Climate Impact

4.43 The environmental impact of the proposed agreement is limited; however, the intention to provide an improved digital offer for sexual health services and to explore more local and community-focused services is likely to have a positive environmental impact. It will contribute towards a reduction in car, motorcycle, and taxi journeys among service users.

Consultation

4.44 Consultation will take place as part of the service re-designs to put residents and other key stakeholders at the centre of the service, which is based on assessed needs.

5. Decide

Cabinet is requested to consider the proposal to enter into Section 75 agreement for the delivery of statutory public health services; the integrated sexual health contract and the Healthy Child Programme 0-5 and 5-19 for a period of 12 months from 1 April 2023 – 31 March 2024, as set out in the report and to agree the recommendations as outlined in section 3.

6. Respond

Subject to Cabinet approval of the recommendations, Public Health will work with corporate colleagues to:

- Enter into S75 partnership arrangements by 31 March 2023
- Complete a review and re-design of the services during 2023/2024.

7. Review

- 7.1 Once the Council has entered into a S75 partnership agreement with WHT, the arrangements will be reviewed in relation to key performance and quality reviews are per the schedule set out by the partnership through Walsall Together.
- 7.2 Public Health will return to Cabinet in 2023 to seek approval to delegate authority to the Director of Public Health to review and update Section 75 partnership agreements for the re-designed integrated sexual and reproductive health service and the Healthy Child Programme 0-5 and 5-19.

Appendices

None

Background papers None

Author

Dr Uma Viswanathan Consultant Public Health ⊠ <u>uma.viswanathan@walsall.gov.uk</u> ☎ 653751 Dr Paulette Myers Consultant Public Health ⊠Paulette.Myers@walsall.gov.uk ☎653744

David Walker Senior Public Health Development Manager ⊠ <u>David-L.Walker@walsall.gov.uk</u> ☎ 653729

Esther Higdon Senior Public Health Development Manager ⊠ Esther.Higdon@walsall.gov.uk ☎ 653724

Stephen Gunther Director of Public Health

5 December 2022

GRO-

Councillor Flint Portfolio holder

5 December 2022