

Report to Cabinet

15 February 2023

Subject:	Expansion of the Cooperative working
	agreement
Cabinet Member:	Adult Social Care and Health - Cllr Hartwell
Director:	Director of Public Health
	Lisa McNally
Key Decision:	Yes
Contact Officer:	Consultant in Public Health
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1 Recommendations

- 1.1 That the Director of Public Health be authorised to add further services to the long-standing Co-operative working agreement with Sandwell West Birmingham Hospital (within the time frames necessary based on their current agreements) as follows:-
 - School Nursing and vision screening—currently provided by Sandwell West Birmingham Trust until 2024 following successful tender
 - Pilot a 2-year Healthy Pregnancy Service a new service with mutual contribution between SMBC, Integrated Care Board Tobacco control and the Trust to target those most at risk of poor maternity outcomes, and in the event this is successful at reducing poor birth outcomes, to continue the programme.
 - 1.2 That the Director of Public Health be authorised to review and increase the financial contribution to the co-operative agreement with Sandwell West Birmingham Hospital in line with current inflation and (max 15% over 3 years) to bolster service areas or invest in wider



















quality improvements identified as requiring extra resource due to local pressures.

1.3 That the Director of Public Health be authorised to increase contribution to the Co-operative working agreement with Sandwell West Birmingham Hospital where necessary, in accordance with the Scheme of Delegation to Officers.

2 Reasons for Recommendations

- 2.1 The cooperative working agreement is a great way to work with a provider jointly to get the best service for Sandwell residents. As such we wish to benefit further from the agreement by adding more services to it.
- 2.2 The Cooperative working agreement is due a review of costs as this has not been updated since its inception almost 6 years ago. The increase in costs are necessarily as we operate transparently regarding expenses and understand the outlay for the service is going beyond its budget. If the increase is within 15% of the cost envelope, it is not a good use of cabinet time to bring the request for the increase back to cabinet. This will also give some scope to fund any agreed service quality improvements in the future.

3 How does this deliver objectives of the Corporate Plan?

T.	The Best Start in Life for Children and Young People
(*)	The healthy pregnancy service support those most at risk of
	poor outcomes at birth.
(0)	People Live Well and Age Well
XXX /	The healthy pregnancy service support those most at risk of
	poor outcomes at birth, which could prevent infant loss and
	long term mental impacts
00000	Strong Resilient Communities
	The healthy pregnancy service support those most at risk of
	poor outcomes at birth, which could prevent infant loss and
	long term mental impacts.



















4 Context and Key Issues

4.1 PURPOSE OF THE REPORT

- 4.1.1 The council currently has a co-operative working arrangement with Sandwell and West Birmingham NHS Hospitals Trust (SWBHT) which commenced on 1 October 2016 for a period of five years extended to September 2026.
- 4.1.2 This report presents a proposal to add to the co-operative working arrangement. The agreement was set up, with a view that the relationship could be further built on.
- 4.1.3 When the agreement was renewed, a future projection of costs was requested due to the agreement receiving the same financial contribution from 2016 2026.

5 IMPLICATIONS FOR SANDWELL'S VISION

5.1 This proposal aligns to Ambition 2 of Sandwell's Vision 2030 – Sandwell is a place where we live healthy lives and live them for longer, and where those of us who are vulnerable feel respected and cared for. This decision would support the council's ambition to prevent ill health and improve long-term health and wellbeing by supporting and protecting our most vulnerable adults and children.

Proposed costs

Agreement	Time frame	Cost
Current Cooperative	To be renewed	HV - £5,876,442
agreement with Sexual	September 2026	BS - £507,625
health, Health visiting,		SH - £1,702,944
Best start and health		ICD- £43,000
protection		Total - £8,130,011 Per
		annum
Droposed Addition		
Proposed Addition		
School Nursing	To be renewed 2024	£1.966m per annum
•	To be renewed 2024 To be renewed 2024	£1.966m per annum Yr1 £53,244.65
School Nursing		Yr1 £53,244.65 Yr2 £54,309.54
School Nursing		Yr1 £53,244.65



















		5 (if used) £57,633.72
Healthy pregnancy	Two year pilot	£320,000 per annum.

6 Alternative Options

- 6.1 The team continues to retender the School nursing programme. Over the last ten years the service has mainly been provided by SWBHT, the contract was awarded to another provider, but then provided by SWBHT at the next two commissioning rounds.
- 6.2 Tendering out the healthy pregnancy service, which would lose the cooperative element, the combined staffing options and the opportunity to run the service at cost. Any underspend would be recycled back into the agreement.

7 Implications

Resources:

The Council's contribution to the co-operative arrangement for public health services will be met through existing public health staff.

There is therefore no budget pressure created by this proposal in relation to additional staffing. The proposals contain no changes to staff terms and conditions.

The cost of public health services to be subject to this arrangement, will be met from the ring-fenced government funded Public Health Grant.

There is a risk (which is currently assessed as red in the council's strategic risk register) that if the financial settlements for future years are not adequate then it will not be possible to maintain the services at the current levels of provision. The value of the services to be provided within the contract will therefore need to be agreed on an annual basis and provision will be made for this in the contract.



















There are currently no known implications for the council's material asset.

Future of the public health grant – should the Public Health grant be reduced or the fund no longer be protected by ring fence, we would work together with the trust – clearly set out in the legal contract - to reduce costs of these mandated services.

Legal and Governance:

This agreement is exempt from the Public Contracts Regulations 2015, pursuant to Regulation 12(7), which states that a contract concluded exclusively between two or more contracting authorities falls outside the scope of the regulations where all of the following conditions are fulfilled:—

(a) the contract establishes or implements a cooperation between the participating contracting authorities with the aim of ensuring that public services they have to perform are provided with a view to achieving objectives they have in common;

(b) the implementation of that co-operation is governed solely by considerations relating to the public interest; and

(c) the participating contracting authorities perform on the open market less than 20% of the activities concerned by the co-operation

Under S.1(1) of the Local Authorities (Goods and Services) Act 1970, public bodies and local authorities are permitted enter into agreements for the provision of any administrative, professional or technical services. Any agreement made in pursuance this section may contain such terms as to payment or otherwise as the parties consider appropriate.



















Risk:	The service will reduce the risk to women at highest risk of infant mortality. Performance of SWBT – this is part of the collaborative working agreement, which falls under the place-based governance. Service have been reported to be some of the best in the region for Health visiting and school nursing and will continue to be supported by collaborative meetings in which we work together to achieve the best outcomes. Value for money – due to the cooperative working agreement having an open financial book, we are seeing costs and recycling underspend into other areas of the agreement.
Equality:	Those most in need will receive the service. Those most likely to be at risk such as smoking, ethnicity, and underlying conditions.
Health and Wellbeing:	Could reduce negative outcomes for families from infant mortality, or poor birth outcomes.
Social Value:	Could reduce negative outcomes for families from infant mortality, or poor birth outcomes.
Climate Change:	None we can foresee.

8. Appendices

None.

9. Background Papers

9th December 2020 Cabinet Meeting – Permission to extend the agreement

29th September 2021 Cabinet Meeting – further approvals due to legal advice.

















