

Report to Cabinet

20 July 2022

Subject:	Health Checks Service
Cabinet Member:	Councillor Suzanne Hartwell
	Cabinet Member for Adults, Social Care and
	Health
Director:	Lisa McNally
	Director of Public Health
Key Decision:	Yes
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1 Recommendations

- 1.1 That the Director of Public Health be authorised to tender the Health Checks contract for a prime provider to deliver Health Checks for an initial period of two years up to a total cumulative maximum value of £320,000 for the vatable price (£266,667+20% = £320,000) which would total capped budget of £640,000 over two years.
- 1.2 That the Director of Public Health be authorised to award and enter into a contract with the successful bidder, on terms to be agreed by the Director of Public Health, for the provision of NHS Health Checks Services.
- 1.3 That the Director of Law and Governance & Monitoring Officer be authorised to enter into and execute, under seal as may be required, any contracts or ancillary documentation in relation to the award of contract referred to in recommendations above.
- 1.4 That the Director of Public Health be Authorised to use an exemption to rule 9 of the Council's Procurement and Contract Procedure Rules 2018-2019 to waive the requirement for the advertisement of a health checks IT system on the Council's portal, and instead allow the direct award of a



















two year contract to Health Diagnostics for the maintenance of the existing health checks IT system, to be aligned to the period that the new delivery model of health checks commences at a maximum value of £80,000 per annum.

- That the Director of Law and Governance and Monitoring Officer to 1.5 award a contract to Health Diagnostics for a health checks IT management system for a period of two years for a maximum value of £80,000 per annum on terms to be agreed by the Director - Public Health.
- 1.6 That the Director of Public Health be authorised to use an exemption to rule 8.7 of the Council's Procurement and Contract Procedure Rules 2018-2019 to waive the requirement for a minimum of 3 written tenders and instead allow the direct award of a two year contract to Health Diagnostics for the maintenance of the existing health checks IT system.

2 **Reasons for Recommendations**

- In the Cabinet paper 9th October 2019 we had put forward the plan to 2.1 cease the current prime provider contract and commission directly with GPs to provide Heath checks. However, shortly after this was agreed and the contract ended, the COVID-19 pandemic occurred, and we were unable to work with GPs at that time.
- 2.2 We wished to start the procurement with GPs this year. We sought advice from Bevan Brittan Solicitors and were informed that our initial approach to advertise to an approved list of primary care providers is now not permitted under the Light Touch Regime of the Public Contracts Regulations 2015 as we must contract with Any Qualified Provider and not limit this to GPs. As a result, the information contained in the Cabinet Report in 2019 (which referred to commissioning directly with GPs only to provide Heath checks) may now not be entirely correct due to the recent advice that we must contract with Any Qualified Provider and not limit this to GPs.
- 2.3 In addition, the Health Economy landscape has changed since 2019 and the Health and Care Partnership is maturing. Over these two years we will be looking at the potential to integrate NHS Health Checks with the primary care framework Sandwell and West Birmingham Clinical Commissioning Group (CCG) have with their GP practices, this





















- approach would align with current activity across the Borough such as the Joint Outcomes Framework.
- 2.4 We are now proposing that we return to a procurement of a Prime Provider for a period of 2 years. Whilst the health economy transitions to the new care structure from a Clinical Commissioning Group to the Integrated Care Partnership and recovers from the COVID pandemic.
- 2.5 Nationally, the government is reviewing the current delivery models and indicators of the NHS Health Checks services. We are only looking to work with a prime provider for 2 years as during that time the government review will be finalised and as such there maybe changes needed and new requirements to the service.
- 2.6 We do not currently have a service in place due to rightly pausing the process during the COVID Pandemic
- 3 How does this deliver objectives of the Corporate Plan?



People live well and age well

The New Health Checks Service would contribute to delivering against this objective in the Corporate Plan.

4 Context and Key Issues

4.1 **Health Checks**

- 4.2 This service supports People live well and age well.
- 4.3 The NHS Health Check is a national risk assessment and prevention programme that identifies people at risk of developing heart disease, stroke, diabetes and kidney disease. They are aimed at anyone between 40 and 74 years of age excluding those who have been previously diagnosed with a cardiovascular condition or are being treated for certain risk factors such as high blood pressure or high cholesterol. Commissioning and monitoring the NHS Health Check is a mandatory public health function in the Health and Social Care Act 2012. This means that there is a obligation on the Council to commission them.



















- 4.4 Sandwell Council previously commissioned a private company to deliver Heath Checks.
- 4.5 We had requested permission for an alternative approach to deliver health checks via a partnership arrangement between local primary care centres and the voluntary sector. Primary care being the logical setting for clinical governance reasons (as the health checks require blood samples to be taken, sharps to be disposed of and medical records to be accessed), the addition of the voluntary sector partnership would improve the extent to which health checks reach those most in need of them. In our new maturing health economy, we are wishing to procure the service with a prime provider moving across to a more primary care centric model in the longer-term plan.
- 4.6 The overall value would be a total cumulative maximum value of £320,000 for the vatable price (£266,667+20% = £320,000) which would total capped budget of £640,000 over two years. This would be paid on a mix of tariff per health check and setting up costs.
- A digital health diagnostics system is already installed in local primary care settings and it is considered for continuity and the mitigation of service disruption, the existing supplier is maintained, subject to approval by Cabinet of an exemption to direct award a contract to Health Diagnostics. This was the agreed provider before the pandemic, all software has been installed on GP systems but has not been in use yet due to the procurement being paused. If the exemption is not approved, the existing system would need to be uninstalled and potentially a new system installed. As stated this was an approved and agreed provider who has not yet being able to enact the system which was agreed.

5 Alternative Options

5.1 We continue to not provide a health checks service – as a nationally mandated service this will come with national scrutiny.



















5.2 We move forward with an Any Qualified Provider procurement approach, which means we could contract with GPs, private companies and other Qualified Providers from local to national whom are compliant against the tender criteria, who are able to provide health checks across the Borough in a mosaic of provision.

6 Implications

Resources:

The recommendations within the report is in two parts, an agreement to tender for a Health Checks Prime Provider up to a total cumulative value of £320,000 for the vatable price (£266,667+20% = £320,000) which would total capped budget of £640,000 over two years.

Then the related IT Management System, Health Diagnostic a period of two years for a maximum value of £80,000 per annum (£160,000 in total excluding VAT – if applicable). Which was agreed, set up and installed following the Cabinet paper in October 2019, but put on pause due to the pandemic. Uresh Patel in ICT has supported this work and requires no further ICT input or resource.

The corporate risk management strategy has been complied with to identify and assess the risks associated with the decisions being sought. This has concluded that the most important risk is that a mandated service is not tendered and put in place. Following this would be of lower significance risks around embedding and the success mobilisation and deliver of the provider, which would be addressed in the applicant questioning phase of the tender, where at an early stage we will ensure measures are in place to mitigate risk to an acceptable level, such as engagement, delivery, relationships, communications, patient care pathway.

Legal and Governance:

The total value of the tender for Health Checks Contract is £640,000, inclusive of VAT. It is therefore over the threshold for a Light Touch Regime procurement (£663,540). As a result, it is not caught



















by the Public Contracts Regulations 2015, save for the need to advertise the award of the contract on the Government's Contracts Finder portal. However, the Council's Procurement and Contract Procedure Rules would need to be adhered to.

The value of the contract proposed to be directly awarded to Health Diagnostics is approximately £160,000 for a two year term and is below the procurement threshold for supply of goods/services (£213,477). As a result, it is not caught by the Public Contracts Regulations 2015, save for the need to advertise the award of the contract on the Government's Contracts Finder portal. With regard to awarding the contract to Health Diagnostics, the Council's Procurement and Contract

Procedure Rules 2018-2019 would also need to be

Rule 8.7 of the Council's Procurement and Contract Procedure Rules requires a minimum of 3 written tenders for contracts over £100,000. Where it is the intention to deviate from this requirement, an exemption must be sought. As a result, an exemption to Rule 8.7 of the Council's Procurement and Contract Procedure Rules would need to be secured to waive the requirement to obtain a minimum of three tenders. Further to this, Rule 9 of the Council's Procurement and Contract Procedure Rules 2018-2019 requires advertisement on the Council's portal. As a result, an exemption to Rule 9 of the Council's Procurement and Contract Procedure Rules would need to be secured to waive the requirement for the advertisement of a health checks IT system on the Council's portal, and instead allow the direct award of a two year contract to Health Diagnostics.

Uresh Patel in ICT has supported this work and requires no further ICT input or resource.

Risk:

A risk review was completed previously on this service as it is maintaining sustainable delivery of mandatory service which previously existed the main risk is not having a service in place and enhancing accessibility to key priority groups such as people with





adhered to.















	disabilities and those living with mental health conditions.
Equality:	A screening exercise was completed previously on this service and found that a full Equality Impact Assessment was not required as the report is concerned with maintaining sustainable delivery of an existing service in a way that enhances accessibility to key priority groups such as people with disabilities and those living with mental health conditions.
Health and Wellbeing:	This service, as mentioned, is a mandated service to support health and wellbeing of the Sandwell population providing health checking for those aged 40-74 who did not know they had indicators of illness.
Social Value	The provisions set out in this report will contribute to greater focus of spend within the Borough, contributing to the inclusive growth agenda that will result in increased social value. We will ensure wherever possible that local people and services are put at the forefront of the
	procurement of this service from recruiting and training local people where possible.

7 **Appendices**

Appendix A – Equality Impact Assessment Appendix B – Health Checks Risk Register PRIVATE

Background Papers 8

Cabinet paper from 9th October 2019

















