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CHIEF OFFICER IN CONSULTATION WITH COMMITTEE CHAIRMAN DELEGATED POWERS REPORT

UNITAS EFFICIT MINISTERIUM	
Title	Contract Endorsement Report for North Central London Genito-Urinary Medicine (GUM) and Sexual Health Reproductive Services (SRH) to enable the Council to execute the Contract
Report of	Director of Public Health, Directorate of Adults, Communities and Health
Wards	All
Status	Public
Enclosures	
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Summary

This report seeks authority to endorse a contract for the provision of North Central London Genito-Urinary Medicine (GUM) and Sexual Health Reproductive Services (SRH), following a Competitive Procedure with Negotiation procurement process, completed as a one-stage tender in 2017, for Lot 1a: the main Sexual Health Service and Lot 1b: additional services, including services to be provided in primary care settings in Barnet for GP provision of Long Active Reversible Contraception (LARC). In addition to the Pharmacy provision of Emergency Hormonal contraception to young people under 25 to enable the Council to execute the Contract.

Central and North-West London NHS Foundation Trust (CNWL), were awarded the Contract in July 2017 to deliver sexual and reproductive health services across the North Central Sub-Region. CNWL, demonstrated a strong clinical model for future integrated sexual health services working across a network of local services in North Central London. CNWL stated in their bid that they will provide seamless access across a network of openaccess, confidential and integrated sexual health services across Camden, Islington, Barnet and Haringey residents (NCL sub-region). They have over 20 years' experience in delivering sexual healthcare with outreach to vulnerable/at risk groups, and will ensure



referrals and pathways are in place with other services and resources to help meet wider needs. They offer "exemplary clinical care for all residents, so irrespective of which borough they live in they can access sexual health services rated as "Outstanding" by the Care Quality Commission (CQC, 2015)."

CNWL have one of the UK's largest dual trained (STI and contraception) team of clinicians and have been at the forefront of supporting the move to integrated sexual health allowing service developments that meet user needs.

The strategy for procuring a new model of sexual health services in Barnet was undertaken in partnership with Camden, Haringey and Islington, working together as a North Central London sub-region. The strategy aimed to improve access to sexual health services, providing fully comprehensive sexual health services for contraception, testing and treatment of sexually transmitted infections (STIs), including HIV testing and diagnosis. New on-line services for sexual health will provide information, risk assessment and signposting to sexual health and related services, including access to self-sampling HIV and STI kits for people who are asymptomatic and subject to risk assessment.

The decision to award the Contract in Barnet was taken by the Director of Public Health for Barnet and Harrow Joint Public Health function in line with the delegations made by the Cabinet Committee of Harrow Council on 10th December 2015, Harrow Council being the host authority (on behalf of LB Barnet).

The Public Health inter-authority agreement between Barnet and Harrow ended on 31st March 2018. Execution of the Genito-Urinary Medicine (GUM) and Sexual Health Reproductive Services (SRH) Contract had not been undertaken and completed by all the North Central London (NCL) Councils before the Inter-Authority Agreement came to an end.

As a result, and, to enable the Council to execute the Contract, this report is required. Details of the procured services together with financial contract values for the Genito-Urinary Medicine and Sexual Health Reproductive Services have been included on the Barnet Annual Procurement Forward Plan 2019-20. The Annual Procurement Forward Plan was authorised on 11th December 2018 at the Barnet Policy & Resources Committee.

Decisions

- 1. Endorse the award of the Contract for Lot 1a to Tenderer A (Central North-West London NHS Foundation Trust (CNWL) which commenced on 3rd July 2017 for an initial period of (five) 5 years with an option to extend for a further three (3) years of a one year by 1-year basis (5+1+1+1) for the sum of £1,650,000 in year one, and a total of £8,812,695 over the life of the Contract to enable the Council to execute this Contract.
- 2. Endorse award of the Contract for Lot 1b to Tenderer A (Central North-West London NHS Foundation Trust (CNWL) which commenced on 3rd July 2017 for a one-year pilot period with an option to extend this Contract for 5 years, subject to the outcome from the one-year trial provision, for the sum of £138,000 in year one, and total of £690,000 over the life of the Contract) to enable the Council to execute this Contract. The total Contract value for Lot 1b is included in the overall Contract value highlighted in decision 1 for Lot 1a.

1. WHY THIS REPORT IS NEEDED

- 1.1 The Policy and Resources Committee authorised the Annual Procurement Forward Plan 2019-20 on 11th December 2018 which identified the Barnet Department of Public Health requirement GUM and SRH.
- 1.2 Procurement of and award of Contract of LB Barnet integrated GUM and as part of the North Central London sub-region happened in 2017. CNWL was awarded the Contract to deliver the service following a Competitive Procedure with Negotiation tendering process, for Lot 1a and Lot 1b. The NCL sub-region is comprised of the following collaborating Councils; Barnet, Camden, Islington and Haringey.
- 1.3 Previous Contracts with; Central London Community NHS Health Trust (CLCH) for the provision of Community Contraceptive services and; The Royal Free London NHS Trust for the provision of GUM services expired on 30th June 2017. From 3rd July 2017 there has been a new offer to residents in Barnet for sexual and reproductive health services. The new service provides an integrated comprehensive service for the treatment and/or prevention of STIs and contraception. It is a one stop shop service via a one lead provider model by CNWL.
- 1.4 Contracts for the provision of Emergency Hormonal Contraception (EHC) in community pharmacies and GP Community based services for the provision of Intrauterine Contraception Device (IUCD), Contraception Implants and sexual health services expired on 31st October 2017. These additional services were initially directly commissioned and contract managed within the Public Health Commissioning Team, are now subcontracted to CNWL and delivery commenced on 1st November 2017. CNWL will provide the desired clinical governance oversight in the delivery of services within primary care settings providing choice of treatment for Barnet residents.
- 1.5 The new service in the NCL sub-region is delivered through a hub and satellites delivery model with one lead provider covering the NCL sub-region. This one lead provider model has resulted in a reduction of providers across the sub-region from four NHS providers to one. In Barnet there are three level 2 community/satellite clinics with clinical support and oversight from the level 3 specialist service hub located in Camden, designated to treat the most complex STIs.

The new service will:

- incorporate triage: directing patients to the right place with the right level of care in Barnet and across the sub-region;
- provide fully comprehensive sexual health services in Camden and Islington, also serving Barnet and Haringey;
- provide level 2 services within three satellite locations in Barnet, with pathways to level 3 services in Camden and Islington, as needed;
- provide effective referral pathways with other services, including abortion services, gynaecology, HIV treatment and care, Accident and Emergency, drug and alcohol services, etc;
- provide support advice, training, capacity and skills for health professional;
- provide outreach/health promotion to identified vulnerable groups (or those with a low take up of services), including 'satellite' clinics and working closely with local young people's sexual health services, targeted clinic-in-a-box sessions for young people, sex workers and BAME communities;
- o provide the condom distribution card scheme (C-Card).

2. REASONS FOR RECOMMENDATIONS

- 2.1 Commissioning and procurement of sexual health services is a mandatory statutory requirement for the Local Authority under the Health and Social Care Act 2012.
- 2.2 Procurement of new services was conducted and led by Islington Council and was in accordance with The Public Contracts Regulations 2015. The procurement was subject to Light Touch Regime under Chapter 3 Section 7 Social and Other Specific Services. Under Regulation 76 the Council is free to establish a procedure, provided that procedure is sufficient to ensure compliance with the principles of transparency and equal treatment of economic operators (service providers).
- 2.3 The Contract notice was published in the Official Journal European Union (OJEU), Contracts Finder and London Tenders Portal (LTP) on 24 August 2016. The tender submission date was 11 October 2016. The tender documents included questions designed to ensure that the organisations met the minimum requirements to perform the Contracts.
- 2.4 All service providers who successfully expressed an interest were invited to tender and have access to the tender documents. Those who met the minimum requirements had their full tender, method statements and pricing evaluated and were invited to negotiate (as required). Following negotiations, the Invitation to Submit Final Tenders was submitted and then evaluated against the criteria within the tender pack. A consistent evaluation panel was arranged for each lot and included relevant commissioners, officers and clinical expertise.
- 2.5 It was the opinion of the Commercial, Contracts & Procurement Team in Harrow (on behalf of Barnet Council), that the procurement process had been conducted consistent with the principles of transparency, equality of treatment, fairness and non-discrimination and that CNWL demonstrated their submission was the Most Economically Advantageous Tender. The Commercial, Contracts & Procurement Team therefore fully supported the recommendations made.
- 2.6 On 15th June 2017, a summary report on the outcomes from the procurement process was presented to the Barnet Procurement Board for information only following the successful award of the Contract to CNWL, for the provision of NCL GUM and SRH. Barnet procurement Board were satisfied with the procurement process.
- 3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 One option that was considered and rejected was for Barnet Council to do nothing and to let community contraception, GUM, GP LARC and Community Pharmacy EHC contracts expire without replacing them. This option was rejected as the provision of sexual health services enables the Council to meet its statutory duties under the Health and Social Care Act 2012 for the mandatory requirement to commission and provide appropriate access to sexual health services.

4. POST DECISION IMPLEMENTATION

4.1 No significant implementation will be required as it is a continuation of service provision and delivery of existing arrangements, following award of Contract in July 2017.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 This Contract will form part of the Council's statutory duties under the Health and Social Care Act 2012 to commission and provide appropriate access to sexual health services.
- 5.1.2 Barnet Sexual Health Strategy 2015-2020 which was accepted and approved by Barnet's Health and Wellbeing Board in 2015, supported the recommissioning of sexual health services.

Barnet key objectives of the strategy are:

- To prevent and reduce the transmission of sexually transmitted infections (STIs).
- To reduce the prevalence of undiagnosed HIV infection and improve early diagnosis particularly among target groups.
- To expand the provision of sexual health and reproductive services in primary care and community settings.
- To increase the uptake of contraception throughout the Borough by providing more choice in different healthcare settings.
- To reduce the rates of unintended pregnancies particularly repeat pregnancies.
- To improve the provision of services designed for young people's sexual health needs and to promote sex and relationship education.
- To promote the welfare of children and reduce the risks of child sexual exploitation (CSE) in Barnet.
- Prevent and reduce late diagnosis of HIV supporting Barnet Council's commitment to reducing late HIV diagnosis.
- To reduce the stigma associated with HIV and STIs.
- To expand sexual health promotion and reduce sexual health inequalities among vulnerable groups.
- 5.1.3 The Contract with CNWL is and will continue to be robustly monitored and reviewed including their performance through key performance measures and outcome indicators. Contract monitoring meetings occurred monthly during year 1 of the Contract, and now quarterly in the second year and during subsequent years of the Contract. The focus of meetings is to review the service provision and any other related matters.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

Finance & Value for Money

- 5.2.1 GUM and SRH, GP provision of LARC; and Pharmacy provision of Emergency Hormonal contraception to young people under 25 are sexual health services funded from the Public Health Grant. The Public Health grant is currently ring-fenced by the Department of Health via Public Health England (PHE).
- 5.2.2 The annual value of the core sexual health service contract excluding the block contract for contraception provision in primary care, will vary year on year for the next 5 years but the yearly contract value will not be less that £1.5m. Sexual health is a demand led statutory service and whilst assumptions have been made around the level of activity over the 5 years of the Contract, this level of activity cannot be confirmed. Activity across the NCL region are costed within the contract price representing 446,662 primary currencies (sexual health treatment interventions) and 305,328 secondary currencies when triggered. For Barnet residents, the level of primary triggers at the time of procurement were estimated at 94,761 and secondary triggers of 79,236. However, demand will fluctuate and the nature of the services provided (and therefore the currencies triggered) will change over the term of the Contract, both of which will affect the total price paid for services in any financial year.
- 5.2.3 The block contract (Lot1b) for Barnet at the time of procurement was assumed for year 1 only at a cost of £138k. Should this service be continued a further dialogue with the provider will be necessary, however it should be possible to accommodate this contract on an on-going basis within the overall financial envelope for sexual health services should this be required. This service relates to decision 2 above.

5.3 Social Value

5.3.1 Social Value was included as one of the award criteria scoring 5% for each lot 1a and Lot 1b. All participating Boroughs agreed to allocate 5% of the award criteria to social value. The most economically advantageous tender demonstrated their services can contribute considerably, offering added economic, environmental and social value across the sector – in line with and fully respecting the Public Services (Social Value) Act 2012.

5.3.2 CNWL's proposals included:

Lot 1 and Lot 1b

- Employment of local young people not in education, employment or training (NEET) through an apprenticeship scheme.
- Apprentices receiving payments of £150 per week, exceeding national agreed rates.
- Opportunities to develop and empower apprentices to become community sexual health champions
- The delivery of eight Business and Administration Apprenticeship places per year.
- Recruitment from hard to reach communities. Building local partnerships with local borough Voluntary Centre Services (VCS) and community groups.

- "Clinic Visits" for local residents.
- Commitment to promoting greater environmental sustainability and reducing environmental impact of services.
- Use of local suppliers.
- Signage for premises produced through CNWL's existing prison works programme.
- Recycling to minimise waste.

5.4 Legal and Constitutional References

- 5.4.1 The Services delivered under this Contract are subject to the 'Light Touch Regime' under Regulations 74 to 76 of The Public Contracts Regulations 2015.
- 5.4.2 In light of Procurement's assurances, Legal are satisfied that the procurement procedure has been carried out in accordance with The Public Contracts Regulations 2015 and the Council's Contract Procedure Rules.
- 5.4.3 HB Public Law had an input into the Contract terms and conditions based on instructions received prior to tender.
- 5.4.4 Where contracts (with a value of £500,000 and above) are within Budget, authorisation is required via a Full Officer DPR from the Chief Officer with delegated authority, in consultation with the Theme Committee Chairman as outlined in the Council's Constitution Article 10 Table B (Contract Procedure Rules January 2018).

5.5 Risk Management

- 5.5.1 The Contract has already been awarded and therefore unlikely to raise any public concern as the services are already in operation.
- 5.5.2 As part of the tender, bidders were asked to submit an implementation plan for initiating the Service, including:
 - Timeframe for setting up the new service and details of activities and relevant staff responsibilities.
 - Key risks with initiating the Contract and how these would be managed by the bidder.
- 5.5.3 The bidders' implementation plans were reviewed as part of the tender process. Following contract award, implementation plans were finalised with the successful bidder (CNWL). Service mobilisation followed a project management approach which included recording and managing risks.
- 5.5.4 Alongside the Implementation and Risk Plan, a Performance Framework was agreed prior to initiating the service. The service specification includes performance and outcome measures which will continue to be monitored and reviewed through contract management throughout the term of the Contract.

5.6 Equalities and Diversity

5.6.1 The core provisions of the Equality Act 2010 (the Act) came into force on 1st October 2010 and the Public-Sector Equality Duty (section 149 of the Act) came into force on 5th

- April 2011. Under Section 149, the Council must have due regard to the need to eliminate discrimination, harassment and victimisation prohibited under the Act and to advance equality for opportunity and foster good relations between those with protected characteristics and those without.
- 5.6.2 The protected characteristics are age, disability; race, gender reassignment, pregnancy and maternity, religion or belief, sex and sexual orientation. They also cover marriage and civil partnership regarding eliminating discrimination.
- 5.6.3 Any organisation providing public sector services is subject to scrutiny by the Council to ensure that delivery complies with the Public-Sector Equality Duty. This duty will continue to be monitored under the Contract.

5.7 Corporate Parenting

5.7.1 There are no direct implications for children. However, CNWL sexual health services are open to young people, with a caveat for example that Pharmacy provision of Emergency Hormonal contraception should be to young people under 25. Under the Contract, there are designated young people's opening times to attend sexual health clinics.

5.8 Consultation and Engagement

- 5.8.1 There was no public consultation.
- 5.8.2 The case for change and procurement of sexual health services in Barnet were informed by:
 - -Barnet Sexual Health Needs Assessment and Service Review (2015) and;
 - -Barnet and Harrow Sexual Health Strategy 2015-2020.
- 5.8.3 Patient and Public Involvement: A soft marketing questionnaire was sent out to all GUM providers. A GUM provider's workshop was held in Central London on 14 May 2015 with attendance from nearly all the NHS Trusts. During the needs assessment and sexual health services review in Barnet, focus group discussions were held with targeted groups including young people, service users and other key stakeholders in the Borough. A brief survey questionnaire was developed by the London Sexual Health Transformation Project Team and service users were asked to complete paper copies in waiting rooms in GUM clinics. In addition, posters and leaflets were given out and displayed in reception areas to encourage users to complete the survey online.

6. BACKGROUND PAPERS

- 6.1 London Sexual Health Transformation Project, Harrow Council Cabinet Report, 10th December, 2015; https://www.harrow.gov.uk/www2/documents/s131523/Sexual%20Health%20Transformation%20Project%20-%20Main%20Report.pdf
- 6.2 Update on Major Public Health Contracts and Proposed Future Procurement Activities, Harrow Council Cabinet Report, 20 November 2014;

 http://www.harrow.gov.uk/www2/documents/s117466/Public%20Health%20Contracts%20-%20Main%20Report.pdf

- 6.3 Barnet Sexual Health Strategy-2015-2020; https://barnet.moderngov.co.uk/documents/s26345/Appendix%20A.pdf
- 6.4 Barnet Sexual Health Needs Assessment and Service Review and Research, October 2015: Barnet Sexual Health Needs
- 6.5 Annual Procurement Forward Plan 2019/2020: https://barnet.moderngov.co.uk/ieListDocuments.aspx?Cld=692&Mld=9460&Ver

Chairman: Has been consulted
Signed
19-02-2019
Date
Chief Officer: Decision maker having taken into account the views of the Chairman
Signed 15-02-2019
Date