

HEALTH SCRUTINY COMMITTEE	Agenda Item No. 6
14 March 2017	Public Report

Report of the Director of Public Health		
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INTEGRATED HEALTHY LIFESTYLES SERVICE CONTRACT IMPLEMENTATION

1. PURPOSE

- 1.1 The report is being presented to provide information regarding the Council's award of a new Integrated Healthy Lifestyles Service contract in partnership with the Cambridgeshire and Peterborough Clinical Commissioning Group. The contract will enable a range of public health interventions of high quality to be delivered across various settings in Peterborough. The report provides the rationale for the service, details of the procurement and outlines activity being undertaken to ensure implementation of the new contract on 01 April 2017.

2. RECOMMENDATIONS

- 2.1 The Committee is asked to consider the information provided within the report, noting the rationale for establishing an Integrated Healthy Lifestyles Service and the progress towards service implementation on 01 April 2017.
- 2.2 The Committee is asked to consider how they would wish to review progress made by the service and associated health outcomes achieved for Peterborough post-implementation of the service.

3. LINKS TO THE CORPORATE PRIORITIES AND RELEVANT CABINET PORTFOLIO

- 3.1 The Integrated Healthy Lifestyle Service will support the corporate priority to '*Achieve the best health and wellbeing for the city*' and the portfolio of the Cabinet Member for Public Health. Maximising the health of local people of working age also supports the corporate priority '*Growth, regeneration and economic development*'.

4. BACKGROUND

Health in Peterborough

- 4.1 The health of local people is worse than the England average on a number of indicators. A review of the overarching indicators within the Public Health Outcome Framework demonstrates that life expectancy for both men and women is significantly below the national average. Furthermore, life expectancy is not uniform across the City with variations of up to nine years in life expectancy evident between wards that are geographically close.
- 4.2 Years of life spent in poor health are also significant within Peterborough. A woman in Peterborough can expect to live to over 82 but will spend around 22 years in declining health, while a man can expect to live to over 78 having spent 20 years in poor health. This results in reduced quality of life for individuals and their families and also places an unsustainable burden on health and social care services.

Rationale for providing Integrated Lifestyle Services

- 4.3 Historically, much poor health was the result of infectious disease. More recently the main causes of poor health and reduced life expectancy are diseases or 'long term conditions' such as heart disease, stroke, diabetes, cancer, dementia, and chronic obstructive pulmonary (lung) disease. These diseases often develop gradually over the course of a lifetime, and the speed and severity of their development is strongly influenced by lifestyle behaviours: smoking, diet, physical activity and alcohol consumption. The scale of these effects are demonstrated by estimates of the annual cost of lifestyle behaviours to the NHS nationally, including smoking: £2.7 billion (2006) Obesity £4.2 billion (2007) and alcohol £3.5 billion (2009).
- 4.4 The aim of interventions which support people to change these behaviours, is to reduce their risk of developing long term conditions. At a population level, reducing the numbers of people with long term conditions increases average life expectancy and 'healthy life expectancy' and reduces treatment costs for the NHS.
- 4.5 The National Institute of Clinical Excellence has assessed the cost effectiveness of 'lifestyle' interventions in the same way that they would assess the cost effectiveness of drug treatments. In general, smoking cessation treatments are cost saving to the NHS (i.e. the cost of delivering smoking cessation interventions is less than the NHS costs saved through reducing the burden of illness) and some alcohol treatments are also cost saving to the NHS. These calculations only consider NHS finances and don't include the significant economic benefits from a healthier workforce.
- 4.6 A number of factors can influence people's lifestyle behaviours. These include:
- Environmental factors – for example what food is available in local shops and what it costs; whether it is easier to walk and use public transport to get to work than it would be to drive; availability of low cost alcohol.
 - Information – mass media campaigns have been shown to influence behaviours in some circumstances, particularly if they provide consistent messages over time.
 - Social norms – children and adults will be influenced by 'usual' behaviours of their family and friends, and by behaviours at school and in the workplace. They may also be influenced by 'brief advice' from a trusted source e.g. health professionals.
 - Individual support to change behaviour - through motivation, help with goal setting, advice on techniques to change behaviour and maintain the change, and regular contact to provide support
- 4.7 'Integrated Lifestyle Services' provide individual support to change behaviour, and are most often used when someone has been identified as having a lifestyle which puts them at particular risk of developing a long term condition, or of that long term condition getting worse. The main source of referral is from a GP or other health professional, who has identified that a client needs additional support with their lifestyle using established techniques, rather than just brief advice.
- 4.8 The specification for the Peterborough Integrated Healthy Lifestyles Service includes provision of the following activities to support individual behaviour change. These are carried out by trained staff, using the national research evidence base for effective interventions as well as local knowledge:
- Smoking cessation support
 - Health trainer support
 - Weight Management support for children and families
 - Weight management support for adults (Tier 1, 2 and 3)
 - Physical activity support for adults
 - Delivery of Health Checks in community and workplace settings
 - Health promotion
- 4.9 The Peterborough Integrated Healthy Lifestyles Service includes Tier 3 weight management services – specialist weight management services for people with severe obesity and associated

health problems, which are normally commissioned by NHS Clinical Commissioning Groups (CCGs). The Cambridgeshire and Peterborough CCG have contributed funding to cover the Tier 3 weight management element of the Integrated Lifestyles Service through a section 256..

- 4.10 As in other Local Authorities, the majority of funding for the Peterborough Integrated Healthy Lifestyles Service is from the local authority Public Health grant. This funding was previously allocated to budgets held by the in-house Public Health Delivery Team, and to a contract with Cambridgeshire Community Services for Dietician led weight management services. In addition a contribution of £200k per annum has been made from the Better Care Fund, following modelling by the CCG which demonstrated the growing impact of obesity on local NHS costs, as well as the £88k core CCG funding through the Section 256 referred to under para 4.9. The bringing together of these funding streams has enabled commissioning of an Integrated Lifestyle Service with sufficient critical mass to be provided across the Peterborough area, while also targeting areas or population groups within Peterborough which have the highest level of need.

	Average Annual Allocation	5 year allocation
Public Health Grant	£553,785	£2,768,925
Better Care Fund	£200,000	£1,000,000
Clinical Commissioning Group	£88,000	£440,000
Total	£841, 785	£4,208,925

5. KEY ISSUES

- 5.1 The new provider of the Integrated Healthy Lifestyle Service is Solutions4Health, a private limited company incorporated in 2008 and registered in Berkshire. Solutions4Health provide public health services in a number of locations across England. The company has over 350 healthcare professionals supporting over 100,000 people annually across these locations.
- 5.2 The award of contract to Solutions 4 Health Ltd to deliver an Integrated Healthy Lifestyle Service in Peterborough is for the sum of £4,208,925 over 5 years from 1 April 2017 to 31 March 2022 with the option to extend for a further 2 years, following the completion of a competitive tender process. The award of the contract to Solutions4Health was undertaken in compliance with the Public Contract Regulations 2015 and the Council's Contract Rules.
- 5.3 The mobilisation plan for the new service is still being implemented and as such final locations and delivery times for all services are yet to be confirmed, but will be agreed before 01 April 2017. A verbal update will be given to the Scrutiny Committee.
- 5.4 It is intended that as well as delivering services within the community the service office will be located within a community facility. The location is yet to be confirmed, but will be agreed before 01 April 2017 and again, a verbal update will be given to the Scrutiny Committee.

6. IMPLICATIONS

Financial

- 6.1 The Integrated Healthy Lifestyle Service has been funded through bringing together existing PCC public health budgets, together with contributions from the Better Care Fund and NHS funding from C&PCCG as outlined in para 4.10.

Legal

- 6.2 Section 256 of the NHS Act 2006 allows the CCG to financially support the Council to undertake activities with health benefits. As the CCG has funded part of the Integrated Healthy Lifestyle Service the Council and the CCG will enter into a Section 256 agreement to govern the arrangement to show efficient use of the CCG's funding.

Human resources

- 6.3 A total of 16 Peterborough City Council staff from the existing Public Health Delivery Team will transfer to Solutions4Health under the Transfer of Undertakings (Protection of Employment) regulations (TUPE) arrangements. The employee's existing terms and conditions of employment will be maintained and protected under TUPE regulations.

Procurement

- 6.4 The award of the contract to Solutions4Health was undertaken in compliance with the Public Contract Regulations 2015 and the Council's Contract Rules.

Geography

- 6.5 Service delivery will be proportionate to need to address existing health inequalities and ensure resources are targeted effectively. However, the Integrated Healthy Lifestyle Service will be universally accessible across Peterborough, with services delivered in community centres, children's centres, schools, workplaces and GP practices.

7. CONSULTATION

- 7.1 Consultation for the Integrated Healthy Lifestyle Service has been undertaken with partners, stakeholders, unions, and members of the public and service users since May 2016. The following partnerships are among those that have been consulted since this time:

- Greater Peterborough Executive Partnership
- Children and Families Board
- GP Practice Manager Group
- Greater Peterborough Local Commissioning Group Board
- Patient Representative Group

- 7.2 Members of the public and service users were consulted between June 2016 and July 2016. Posters were displayed in GP practices, children centres and community centres advertising the proposed procurement and an associated survey to gather people's views about the proposal and the service was undertaken. Members of the public and service users completed approximately 250 surveys. The results of the survey were used to inform the Invitation to Tender documentation and the full results of the survey were included as an annex to the Invitation to Tender and are included here as Annex B.

- 7.3 Union representatives were consulted at the start of the procurement process in May 2016 and in advance of the formal consultation with staff in February 2017.

- 7.4 Public Health Healthy Lifestyles Service staff were initially briefed in June 2016, while on-going face-to-face and written briefing have been provided to staff throughout the process. A staff panel was also established to contribute to the procurement process, receiving and scoring presentations from short-listed providers. A formal consultation with staff regarding their transfer to new provider began on 07 February 2017 and will conclude on 07 March 2017.

8. NEXT STEPS

- 8.1 A Cabinet Member Key Decision Notice was approved in December 2016 and the service shall begin delivery on 01 April 2017. As a key service that is intended to contribute to a reduction in health inequalities and address lifestyle-driven health problems, the Committee may also wish

to review service outcomes after a period of implementation.

9. BACKGROUND DOCUMENTS

9.1 Cabinet Member Key Decision Notice - Integrated Healthy Lifestyle Service Contract Award (November 2016)

10. APPENDICES

10.1 Appendix A - Specification for the Integrated Healthy Lifestyle Service

10.2 Appendix B - Result of public consultation

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