



**DECISION TITLE: CONTRACT EXTENSION FOR THE INTEGRATED SEXUAL AND REPRODUCTIVE HEALTH SERVICE – PETERBOROUGH**

**COUNCILLOR WAYNE FITZGERALD, CABINET MEMBER FOR ADULT SOCIAL CARE, HEALTH AND PUBLIC HEALTH**

**June 2020**

**Deadline date: 01 September 2020**

Cabinet portfolio holder:	Councillor Wayne Fitzgerald, Cabinet Member for Adult Social Care, Health and Public Health
Responsible Director:	Dr Liz Robin, Director of Public Health
Is this a Key Decision?	YES If yes has it been included on the Forward Plan: YES Unique Key decision Reference from Forward Plan: <b>KEY/22JUN20/01</b>
Is this decision eligible for call-in?	YES
Does this Public report have any annex that contains exempt information?	NO
Is this a project and if so has it been registered on Verto?	NO

**RECOMMENDATIONS**

The Cabinet Member is recommended to approve the following:

1. The extension of the Peterborough City Council commissioned Integrated Sexual and Reproductive Health service contract for Peterborough for a further 6 months, for the period 01<sup>st</sup> October 2020 until 31<sup>st</sup> March 2021; for a value of £783,149.00

Due to the ongoing COVID-19 pandemic, the procurement set out in the original CMDN (MAR20/CMDN/88) has been delayed and the decision has been taken to extend the existing services to ensure stability during this time. The transformational recommissioning of sexual and reproductive health services collaboratively between Cambridgeshire and Peterborough local authorities, Cambridgeshire and Peterborough CCG and NHS England will take place later in the year.

**1. PURPOSE OF THIS REPORT**

1.1 This report is for the Cabinet Member for Adult Social Care, Health and Public Health to consider exercising delegated authority under paragraph 3.4.8(a) of Part 3 of the Constitution in accordance with the terms of their portfolio at paragraph (b) in support of the following.

- a) The contract extension for Integrated Sexual and Reproductive health service for a further six months commencing 1<sup>st</sup> October 2020 to 31<sup>st</sup> March 2021

**2. TIMESCALES**

Is this a Major Policy Item/Statutory Plan?	<b>NO</b>	If yes, date for Cabinet meeting	
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**3. BACKGROUND AND KEY ISSUES**

**BACKGROUND**

3.1 Since 1st April 2013, Local Authorities (LAs) have a statutory duty to commission a wide range of Sexual and Reproductive Health (SRH) services as part of their wider public health responsibilities.

3.2 In 2014 both Peterborough City Council (PCC) and Cambridgeshire County Council (CCC) awarded separate contracts to Cambridgeshire Community Services (CCS) to establish community based integrated SRH services that brought together contraception and sexual health into one service provided in one location, thereby improving accessibility to different but related services. (Known locally as the Integrated Contraception and Sexual Health Service (iCaSH).

3.3 This procurement will be a collaborative commissioning agreement between CCC, PCC, NHS England (NHSE) and the Cambridgeshire and CCG to commission an integrated SRH service for Cambridgeshire and Peterborough residents. PCC will delegate authority to CCC to commission the Service on its behalf as it will be the lead commissioner.

This work is sponsored by Public Health England and is one of two pilots nationally looking at collaborative commissioning for Sexual and Reproductive Health (SRH) services. The aim of the new SRH model is to improve outcomes and to provide a “no wrong door” access to SRH services. The model will expand choice for sexual health and provide a “one stop shop” approach for sexual and reproductive health with one front door.

The procurement will include the following services, the commissioning authorities are indicated.

- Sexual and Reproductive Health Services (CCC and PCC)
- Early Medical Abortion (CCG)
- No-Scalpel Vasectomy (CCG)
- Opportunistic Cervical Screening (NHSE)
- Human papillomavirus (HPV) Vaccination for Men who have Sex with Men (MSM)
- HIV Treatment and Care (NHSE Specialist Commissioning)
- Central Booking Service

- 3.4 In addition the new provider will have service development requirements that have a focus upon the provision of digital services to improve access to services.
- 3.5 These contracts were scheduled to end on 30th September 2020 however the procurement has now been delayed due to the impact of COVID-19. It is a very complex procurement and there is insufficient capacity in the NHS and amongst bidders to progress the procurement at this time.
- 3.6 In view of these factors it is proposed to extend the current PCC SRH contract by six months from October 1 2020 to March 31 2021 with the new contract commencing on April 1 2021 . (The same extension has been requested for the CCC SRH contract which will align the end dates of both contracts)

In view of the current procurement regulations this has been discussed with and is supported by both procurement and legal leads for the following reasons.

- The contract extension is a response to the ongoing COVID-19 developments which has the potential to impact both current service delivery and success of the complex procurement exercise.
- That there would be a risk of not securing the full benefits of the collaborative commissioning initiative
- The contract extension has been discussed with and is supported by the current provider of SRH services, CCS.
- There is support for this proposal from the CCG and NHSE.
- There are not any financial implications as the current contract price will be maintained and there were no planned savings against the new Service.

#### **4. CONSULTATION**

- 4.1 There has been a full consultation with service users and other stakeholders in relation to the new procurement. The proposal to extend the existing contract has not been through a specific consultation but has been discussed with the current provider. There will be no change to the delivery of the existing clinical services.
- 4.2 CCS as the current provider of the Services has been consulted about this proposed contract extension. CCS will be able to continue to provide a high quality sexual and reproductive health service for Peterborough residents until the conclusion of the contract.

#### **5. ANTICIPATED OUTCOMES OR IMPACT**

- 5.1 The contract extension will support a more robust competitive process and enable the new provider to undertake a more effective mobilisation that will ensure that all the proposed services will be delivered in line with the service specification.

#### **6. REASON FOR THE RECOMMENDATION**

- 6.1 The extension of the current Peterborough SRH contract for an additional six months ending 31<sup>st</sup> March 2021 is recommended as it will facilitate
- 6.2 - A more robust and successful collaborative procurement of SRH services.

- The establishment of high quality, cost effective services that improve the patient experience through easy access to related services in the same and most appropriate location.

## **7. ALTERNATIVE OPTIONS CONSIDERED**

### **7.1 Do not extend the iCaSH Peterborough contract beyond 30<sup>th</sup> September 2020:**

There is a mandatory requirement for the Local Authority to ensure sexual and reproductive health services are provided for the resident population. Market feedback has indicated that providers, because of the complexities, involved in the commission would need a longer lead time to establish services. This would create the risk of a gap in service provision which would have a negative effect upon sexual health amongst PCC residents. The unplanned development of COVID-19 has created a delay in the original procurement timetable.

## **8. IMPLICATIONS**

### **8.1 Financial Implications**

The contract value exceeds £500,000 and therefore the award of the contract extension is a key decision.

The current funding allocated to the PCC iCaSH contract is:

- o PCC annual contract value: £1,566,298
- o PCC six month contract value : £783,149

The proposed contract extension will have a maximum length of six months from 1<sup>st</sup> October 2020 with an end date of 31<sup>st</sup> March 2021.

### **Legal Implications**

#### **8.2** The value of the interim contract via direct award requested is £783,149.00 for the period 1 October 2020 until 31 March 2021.

The procurement of this service is currently underway in compliance with Public Contracts Regulations 2015, however in the interim the Council cannot cease delivery of these statutory services. The re-commissioning involves complex arrangements, planning and developing across the whole system of provision.

In line with the Cabinet Office's Procurement Policy Note – PPN 01/20 – Responding to Covid-19, the Council are limiting any extension to what is absolutely necessary to address the unforeseeable circumstance. The decision to extend the contract is related to the COVID-19 outbreak with reference to the impact of the pandemic on the procurement exercise.

### **Equalities Implications**

#### **8.3** The service will continue be universal but will include targeted actions to address any inequalities and improve the outcomes for the most vulnerable and at risk populations.

**9. DECLARATIONS / CONFLICTS OF INTEREST & DISPENSATIONS GRANTED**

9.1 None

**10. BACKGROUND DOCUMENTS**

Used to prepare this report, in accordance with the Local Government (Access to Information) Act 1985) and The Local Authorities (Executive Arrangements) (Meetings and Access to Information) (England) Regulations 2012.

10.1 Public Health England: Making it work: A guide to whole system commissioning sexual health, reproductive health and HIV 2015

Public Health England: Sexual Health, Reproductive Health and HIV: A Review of Commissioning 2017

**11. APPENDICES**

11.1 None