

<b>Recommissioning of Healthwatch Statutory Services</b>
Councillor Irene Walsh, Cabinet Member for Integrated Adult Social Care, Health and Public Health.
<b>March 2022</b>
<b>Deadline date: April 2022</b>

Cabinet portfolio holder: Responsible Director:	Councillor Irene Walsh, Cabinet Member for Integrated Adult Social Care, Health and Public Health.  Charlotte Black, Executive Director People and Communities
Is this a Key Decision?	YES  If yes has it been included on the Forward Plan: YES  Unique Key decision Reference from Forward Plan: KEY/22NOV21/02
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  Verto number:

## RECOMMENDATIONS

The Cabinet Member is recommended to:

1. Approve the approach for a 5-year grant agreement with Healthwatch Cambridgeshire and Peterborough to deliver the statutory function and Partnership Boards for a total value of £2,803,903. This equates to £1,017,500 for Peterborough City Council.
2. Approve the intention to jointly commission Healthwatch services through a grant agreement with Peterborough City Council as the Lead Authority and governed through a Delegation and Partnership Agreement.

### 1. PURPOSE OF THIS REPORT

- 1.1 This report is submitted to the Cabinet Member for Integrated Adult Social Care, Health and Public Health to consider exercising delegated authority under paragraph 3.4.3 of Part 3 of the constitution in accordance with the terms of their portfolio at paragraph (e).
- 1.2 The purpose of the report is to approve the recommissioning of Healthwatch Services as per the Local Authority's Statutory duty as outlined in the Health and Social Care Act 2012. This paper outlines the proposal to approve a 5-year grant agreement with Healthwatch Cambridgeshire and Peterborough to deliver the statutory functions and Partnership Boards for a total value of £2,803,908. This equates to £1,017,500 for Peterborough City Council. In addition, there is a further proposal to jointly commission this service through a grant agreement with Peterborough City Council as the Lead Authority and governed via a Delegation and Partnership Agreement.

### 2. TIMESCALES

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

#### 3.1 Background

- 3.1.1 The Health and Social Care Act 2012 established Healthwatch to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. The Act established Healthwatch England nationally and required each Local Authority area to have their own local Healthwatch or arrange for a corporate body that is a social enterprise to deliver an effective Healthwatch Service in their local area. Local Healthwatch are funded and accountable to Local Authorities who are responsible for protecting the independence of Healthwatch whilst monitoring its adherence to the above principles and statutory requirements. This balance should be carefully established within any contract or grant agreement between the Local Authority and Local Healthwatch.

3.1.2 Local Healthwatch perform statutory public functions with their core principle being that the views of the public should shape the health and care services provided by the Local Authority. To achieve this principle, Healthwatch state that they should be:

- Independent in purpose to ensure that the voices of service users are amplified, and their experiences of health and social care are heard.
- Independent in voice in order to speak for those who are marginalised, face disadvantage or discrimination.
- Independent in action in order to deliver services that suit those who need them.

More information in respect of Healthwatch's statutory duties can be found here: [20200405 Commissioning an effective local Healthwatch.pdf](#)

3.1.3 All local Healthwatch organisations working under the Healthwatch brand must comply with the guidelines set out by Healthwatch England which include constitutional and branding arrangements.

3.1.4 Locally, the Healthwatch function is delivered by Healthwatch Cambridgeshire and Peterborough, which is a Community Interest Company and there is no competition to deliver the statutory function. The contractual relationship is through a grant agreement which is held by Peterborough City Council (PCC) and works in partnership with Cambridgeshire County Council. The current arrangement ends on 31st March 2022.

3.1.5 Healthwatch Cambridgeshire and Peterborough develop an annual work plan which identifies the priorities for further review based on the feedback they receive in relation to local health and social care services. The most recent report can be found at Appendix 1. More recently regular meetings have been introduced between Healthwatch and the Head of Adults Commissioning and Senior Commissioners to ensure that the planned activity aligns with and can influence procurement plans. Examples of recent activity and reports from Healthwatch during the first six months of 2021/22 include:

- 1,051 people have given feedback and/or used the signposting service during April – September 2021
- Review of GP Websites and GP Winter Funds
- Campaigns include support for local vaccinations, Healthwatch England waiting times campaign and Care Home survey
- Delivery of local Health and Care Forums
- 41 volunteers as at the end of September 2021
- Representation on local Boards and forums including supporting the development of the Integrated Care System in Cambridgeshire and Peterborough.

3.1.6 In addition to their statutory functions, Healthwatch Cambridgeshire and Peterborough also operate our standalone and completely independent Adult Social Care Partnership Boards. The remit of the Partnership Boards is to support and improve care and ensure the highest quality and best value health

and social care services are delivered for local people. The following Partnership Boards are in operation:

- Physical Disability Partnership Board
- Sensory Impairment Partnership Board
- Carers Partnership Board (an all-age Board reflecting all types of carers)
- Older People's Partnership Board (for those aged 65 and over)
- Learning Disability Partnership Board (which includes adults on the autistic spectrum).

3.1.7 The role of the Partnership Boards is to:

- Raise practice and commissioning issues and concerns with the council.
- Share examples of good practice.
- Identify common themes and problems.
- Discuss topics and ideas that are important to them.
- Help the council to co-produce services that meet people's needs. This includes supporting commissioning in the designing and procurement of services.

Work that has been undertaken by the Partnership Boards during the last year, including examples of actions on concerns raised by the Partnership Boards, and the added social value of the Partnership Boards work can be found here:

[7. Cambs and Pboro - Partnership Boards Annual report - AHSC - 130721.pdf \(peterborough.gov.uk\)](#)

Further information can be found here: [What we do | Healthwatch Peterborough](#).

3.1.8 Each Partnership Board agrees annual priorities for their work that are of importance to the client group that they represent and Healthwatch supports the Partnership Boards to take forward actions on these priorities. Membership for each Partnership Board includes service users and/or carer experts by experience.

3.1.9 The Partnership Boards link to the Adult Social Care Forum for Cambridgeshire and Peterborough, chaired by the Head of Adult Social Care Commissioning. The Adult Social Care Forum identifies and considers key themes arising from the Partnership Boards, experts by experience groups, and other participation groups/forums, and uses this information to support the continuous improvement of local health and social care services.

## **3.2 Key Issues**

3.2.1 This proposal supports the Local Authority's statutory obligation to commission a Healthwatch service to ensure that service users and communities are involved in decisions around the health and social care provisions.

3.2.2 It is proposed that the grant arrangement runs for a period of 3+2 years commencing from 1st April 2022. The delivery of the statutory function and the

Partnership Boards would be included under the same arrangement but would be able to be terminated separately if required.

3.2.3 It is recommended that a joint grant agreement is developed with Peterborough City Council as the lead Authority and a Delegation and Partnership Agreement to govern the arrangement between the two authorities. This will ensure that there is a clear contractual relationship which reflects the overlapping health and social care landscape between Cambridgeshire and Peterborough and protects both local authorities in terms of the requirement, deliverables and finances involved in the delivery of both the statutory functions and facilitation of the Partnership Boards.

3.2.4 There is considerable change and pressure facing health and social care now and financial stability for the Healthwatch function will ensure that the service is not only able to maintain its current level of engagement activities across the Cambridgeshire and Peterborough footprint but will be able to represent local communities within the emerging ICS structures.

#### **4. CONSULTATION**

4.1 Commissioners have carried out the following activities to ensure that the statutory Healthwatch function is compliant and will continue to deliver statutory requirements:

- Attended Healthwatch Commissioners Event
- Ensured compliance with Healthwatch England: Commissioning and Effective Local Healthwatch
- Engaged with the Regional Co-ordinator for Healthwatch England to ensure specification meets requirements
- Liaised with other Local Authorities to ensure best practice in procurement options and monitoring arrangements.

4.2 In addition, the following activities have been carried out to develop an updated service specification for the Adult Social Care Partnership Boards work:

- The current service specification for the Partnership Boards work has been reviewed by:
- Healthwatch Cambridgeshire and Peterborough.
- A working group made up of representatives from Adults and Safeguarding and Adults Commissioning.
- New service outcomes are being developed at a session with Healthwatch Cambridgeshire and Peterborough and Partnership Board members later in January 2022, which will include the use of 'I' and 'We' statements taken from the Making it Real themes, co-produced by Think Local Act Personal. Making it Real is a framework to support good, personalised care and support for providers, commissioners and people who access services. The six themes describe what good looks like from an individual's

perspective and what organisations should be doing to live up to those expectations.

- 4.3 Through discussions with Healthwatch England and Peterborough City Council Legal and Cambridgeshire County Council procurement representatives, Commissioners are recommending that the Healthwatch statutory function and delivery of Partnership Boards is re-commissioned under a grant arrangement. This has been the current mode of contractual arrangement and due to the lack of competition and specific requirements of a Healthwatch organisation it is recommended that the grant agreement is renewed for the next period. As the Lead Authority, Peterborough have also confirmed that in addition the grant arrangement can be ended at any time whereas under a contractual arrangement the Council would be obliged to make payment unless there is a default under the terms of the contract.

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

- 5.1 The Recommissioning of Healthwatch Peterborough and Cambridgeshire will enable the Local Authority to adhere to its statutory requirement to have a local operational Healthwatch. Additionally, the feedback gleaned from Healthwatch helps to shape the commissioning, scrutiny and management of health and social care services. This means that services will be reflective of the needs and wants of the service users who require them.

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

- 6.1 The reason for this recommendation is that this is a statutory requirement as set out in the Health and Social Care Act 2012.

## **7. ALTERNATIVE OPTIONS CONSIDERED**

- 7.1 The following option was considered and rejected:
- 7.2 To do nothing. This option is rejected as the Council is obliged to commission Healthwatch in order to carry out its statutory duty as outlined in the Health and Social Care Act 2012. By doing nothing, Peterborough City Council would be in breach of its legal obligation.
- 7.3 A contract could have been considered rather than a Grant Agreement. However, given that a Grant Agreement had been used previously, commissioners reviewed the Grants to External Organisations Policy and determined that it still met the criteria, and this was also confirmed by the legal department. It has also been established that there are no suitable alternative bodies or providers within Peterborough who could carry out the required statutory functions.

7.4 Have separate grant agreements for Peterborough City Council and Cambridgeshire County Council. However, it was felt that this was not necessary as it would lead to duplication of resources, and it was better value for money to commission the services jointly.

## 8. IMPLICATIONS

### 8.1 Financial Implications

The budgets identified for the Healthwatch statutory function and Partnership Boards are outlined below. There will be no variation in the financial commitment for Peterborough City Council as a result of re-commissioning the statutory Healthwatch service.

Local Authority	Statutory Function (Annual Budget)	Partnership Boards (Annual Budget)	Total for length of grant agreement (5 years)
Peterborough City Council	£187,500	£16,000	<b>£1,017,500</b>

### 8.2 Legal Implications

The Legal Implication for the recommissioning of Healthwatch Peterborough and Cambridgeshire are clear, by recommissioning this service, Peterborough City Council will be adhering to its statutory duty as derived in the Health and Social Care Act 2012. By not recommissioning this service, Peterborough City Council will be omitting its statutory duty.

### 8.3 Equalities Implications

The recommissioning of Healthwatch will allow their statutory activities to provide a voice to those with protected characteristics, largely by way of attendance at Partnership Boards but also via Healthwatch's varied statutory activities.

Further implications in relation to Equality and Diversity can be found in the Equality Impact Assessment document found attached with this document at Appendix A.

### 8.4 Carbon Implications:

There are no Carbon Implications, as set out in the attached Carbon Impact Assessment at Appendix B.

### 8.5 Procurement Implications

As this proposal is for a grant agreement, the usual contract procurement rules do not apply. When awarding Grant Agreements, it is policy to advertise the grant to the public. However, given that it is a statutory requirement for Healthwatch to carry out these functions, advertisement of the grant is not needed.

## **9.0 DECLARATIONS / CONFLICTS OF INTEREST & DISPENSATIONS GRANTED**

9.1 None.

## **10.0 BACKGROUND DOCUMENTS**

10.1 The following documents were used to prepare this report:

- Joint Commissioning Board Report – December 2021 – Sarah Bye
- Healthwatch Quality Framework – September 2019 – Healthwatch England
- “Commissioning an Effective Local Healthwatch” – May 2020 – Healthwatch England

## **11.0 APPENDICES**

11.1 The following appendices are attached:

- Appendix A – Equality Impact Assessment
- Appendix B – Carbon Impact Assessment
- Appendix C – Business Case