
Decision maker:	Officer: Director of Public Health
Decision date:	6 March 2017
Title of report:	Contract extension for Halo Leisure NHS Health Check lifestyle delivery
Report by:	Health Improvement Specialist

Classification

Open

Key decision

This is not a key decision.

Wards affected

Countywide

Purpose

To seek a twelve month waiver for the Halo Leisure contract for NHS Health Check lifestyle support delivery.

Recommendation(s)

THAT:

- (a) approval be given to extend the payment by results contract with Halo Leisure to deliver physical activity and weight management for people referred via an NHS Health Check as being at high risk for cardiovascular disease (CVD) for a year to 31 March 2018;**
- (b) by virtue of this decision report, an exemption to paragraph 4.6.13.2c of the council's contract procedure rules be granted for the reasons set out in paragraphs 5,6 and 7 of the report below.**

Alternative options

- 1 Re-tender the service. This is not an option as the service requires re-design as an evidence based tier 2 weight management programme that takes a wider range of referrals than for people identified via an NHS Health Check.
- 2 Not approve the contract extension. This would result in no lifestyle behaviour change support programme being offered to people identified at high risk of cardio vascular disease, resulting in less likelihood of them making the necessary healthy lifestyle choices to reduce excess weight and increase physical activity levels. The consequence of not offering this as a preventative measure is that CVD is more likely to develop and progress with subsequent costs to the individual and to health and social care services, so that the cost benefit of investment in NHS Health Checks will be reduced.

Reasons for recommendations

- 3 To ensure continuation of the service with the least disruption and cost.
- 4 NHS Health Check is a mandatory provision required of the local council under the Health and Social Care Act (2012). This delivery will contribute to achievement of public health outcomes associated with NHS Health Checks, obesity and sedentary behaviour.

Key considerations

- 5 Section 12 of the 2012 Health and Social Care Act introduced a new duty at Section 2B of the 2006 Act for local councils in England to take appropriate steps to improve the health of the people who live in their areas. Combined data for the years 2013 to 2015 indicate that in Herefordshire the proportion of overweight (including obese) adults was 64%, providing a clear case for provision of weight management to a wider targeted population than just referrals via NHS Health Checks. Definition of a Tier 2 service is aiming to reduce a person's energy intake and help them to be more physically active by changing their behaviour.
- 6 A business case for commissioning a wider multicomponent programme for weight management was due for completion during 2016/17 to enable re-commissioning. A decision was made for a waiver on 21 March 2016 to support this to happen. The work was not progressed because Herefordshire Clinical Commissioning Group (CCG) in partnership with the council, attracted additional national investment to implement the national diabetes prevention programme, Healthier You, targeting an adult at risk population group. It was a positive decision to not progress with the business case at this point to avoid potential duplication, to maximise use of external funds to meet local population need, to ensure better assessment, targeting and to re-redirect the available resource to achieve additional outcomes.
- 7 It is only at this stage of implementation of the Healthier You programme that it is possible to scope the non-eligible population with excess weight for cost benefit analysis. Excess weight is a health improvement measure in the public health outcomes framework due to its cost to the health and social care system and its risk and association for long term conditions. It remains necessary to maintain continuity of the commissioned NHS Health check weight management service, allowing twelve months to complete a business case and procure the new multicomponent service.

- 8 The re-commissioning will require consultation, consideration of options, the development of a service specification, decision and contract development and then implementation of the procurement process including tender evaluation, award and decision to award as well as ensuring sign up to contract. There are potential opportunities to align with other services and pathways across the system due to interest in prevention and in tackling prevalence of excess weight in adults. The period of one year for continuation of the existing services is therefore a realistic estimate of the time necessary to undertake this work.

Community impact

- 9 To contribute to the Health and Wellbeing Strategy to improve the health and wellbeing of the Herefordshire population and the priority of preventing ill health and promoting wellbeing.
- 10 There is a positive impact on communities by maintaining continuity of delivery whilst redesigning an improved offer of provision building on lessons learnt from that delivery. Since April 2013 a total of 2,683 people in Herefordshire have been identified as being at high risk of cardiovascular disease through NHS Health Check. The ambition is that the majority of these people make lifestyle changes to reduce their risk through being better informed, being aware of their risks and the benefits of change. About a third of these people indicate an interest in attending weight management or physical activity programmes. In 2016/17 by Q3 there were 116 referrals to the HALO service and 53 had attended. This is less than expected but an improvement plan is in place to change the software used by NHS Health Check providers to ensure consent for more information to be included for HALO to follow up people who have not made appointments. The provision itself is of the expected quality and performance level. Continuing with this provision will inform rather than detract from the work of redesign and recommissioning.
- 11 The waiver for service continuation allows people identified at high risk of cardiovascular disease via NHS Health Checks to access free behaviour change programmes to increase physical activity levels and reduce weight that meets the preventative agenda to reduce onset of life long conditions that have an impact on employment, families and public services. There is a strong evidence base that being a healthy weight and meeting the chief medical officer's guidelines for physical activity has a considerable impact on reducing risks of ill health.

Equality duty

- 12 Section 149 of the Equality Act 2010 imposes a duty on the council to have due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic (disability being one such characteristic) and persons who do not share it. If implemented, the recommendations will advance equality of opportunity as many of the clients that benefit from this service would be recognised as disabled under the act, so by providing this service these clients will:
- –be enabled to live healthier lives
 - -be provided with opportunities to learn new skills, both practical and social.

Financial implications

- 13 This 'payment by results' contract assumes a target level of activity of 600 people

which equates to £34k for a 12 month period. This extension to the contract will be funded from non-recurring Public Health reserves.

Legal implications

- 14 Local authorities' statutory responsibilities for public health services are set out in the Health and Social Care Act 2012. The Act conferred new duties on local authorities to improve public health and transferred much of the responsibility for public health to local authorities from 1 April 2013. From this date, local authorities have had a duty to take such steps as they consider appropriate for improving the health of the people in their areas, including health check assessments to be offered to eligible persons in its area.
- 15 Halo commenced delivering the weight management and physical activity programmes for people at high risk of CVD in 2012 (i.e. prior to the responsibility for public health transferring to local authorities). The contract with Halo to deliver these programmes which was due to end on 31 March 2016 and then extended for a further 12 months to end on the 31 March 2017.
- 16 The current contract with Halo does not contain any provisions permitting it to be extended beyond the current expiry date. Therefore, to award the contract to Halo as a continuation of the services already provided for a period beyond the 1 April 2017, is currently without a competitive exercise being undertaken.
- 17 The value of the 12 month contract to be awarded to Halo is in the region of £34,000.
- 18 This is the estimated cost of this payment-by-results contract. Under the Council's Contract Procedure Rules (CPRs), a contract with a value of £34,000 should be let in accordance with paragraph 4.6.13.2c of the CPRs which requires at least three formal quotations to be obtained following the procedure set out in paragraphs 4.6.13.7 to 4.6.13.11 of the CPRs.
- 19 Paragraph 4.6.18.1 provides that exemptions from the CPRs are only allowed in exceptional circumstances such as there being insufficient suppliers for the services being procured. Given the short term nature of the contract to be awarded – i.e. 12 months – it is likely that no provider (unless they were already delivering similar services in the area), would be interested in delivering these services for such a short period as the investment needed in respect of set up, training and ensuring the security of information etc., to enable that could not be justified.
- 20 Given that a business case for a redesigned service is to be produced and appropriate sourcing undertaken over the next few months, this would mitigate against any risk of challenge to the direct award of a further contract to Halo without undertaking any form of competition.

Risk management

- 21 Risk of current provider not wanting to extend. Contract review meetings show continuing interest in delivery of the service and in continuous improvement. Failure to extend can be partly mitigated through re-enforcing the information only provision.
- 22 Procurement challenge to the extension. This can be mitigated by assurance that a business case for a re-designed service will be produced within twelve months and

the knowledge that investment of any new provider in delivery of the current specification would not be cost effective due to the training and set up costs involved.

- 23 The providers not delivering within the available financial envelope. This can be mitigated against as this is a payment by results (PbR) contract that has a financial ceiling and by a robust system of contract monitoring.
- 24 Risks to the council of the proposals in the report are not agreed can be mitigated through developing a communication plan as the issues addressed in this report are high in the public domain. .

Consultees

- 25 Halo Leisure.

Appendices

None.

Background papers

None identified.