

**Meeting:** Policy Development and Decision Group (Joint Commissioning Team)

#### Wards Affected: All

**Report Title:** Sexual and Reproductive Health and Wellbeing Contract

Is the decision a key decision? No

When does the decision need to be implemented? 1 July 2018 (the contract go live date)

**Executive Lead Contact Details:** Councillor Derek Mills, Deputy Mayor and Executive Lead for Health and Wellbeing, derek.mills@torbay.gov.uk

**Supporting Officer Contact Details:** Caroline Dimond, Director of Public Health, 01803 207336, <u>Caroline.Dimond@torbay.gcsx.gov.uk /</u> Sarah Aston, Advanced Public Health Practitioner, 01803 208475, <u>sarah.aston@torbay.gov.uk</u>

### 1. **Proposal and Introduction**

- 1.1 On 24 July 2017, Policy Development Decision Group (Joint Commissioning Team) (PDDG) took a decision that allows Public Health commissioners to undertake a joint procurement exercise with Devon County Council to go to the open market and procure a sexual health service. Sexual health services are a mandated part of the Public Health ring-fenced grant.
- 1.2 Reports that PDDG received at that time described the scope of the service being procured as well as the economies of scale of procuring jointly with Devon County Council.
- 1.3 These mandated sexual health services are being procured in two lots; namely (1) sexual and reproductive health service provision, and (2) targeted prevention of poor sexual health.
- 1.4 This new report dated 16 October 2017 is being submitted to PDDG in order to request permission for the Director of Public Health for Torbay, to consider the outcome of all bids in the tender process together with Cllr Derek Mills, Elected Member for Torbay with portfolio responsibility for Public Health and to award the Torbay element of the contract to the successful bidder on completion of the procurement process, in a timely way.

# 2. Reason for Proposal

- 2.1 The Director of Public Health welcomes the opportunity to consider the outcome of the Sexual and Reproductive Health tender process, on a best value basis. Once a preferred bidder has been established through the rigour of the procurement process, a timely award of this contract is desirable. This will expedite the effective mobilisation of new provider(s), before they are expected to make a fully integrated start in service provision on 1 July 2018.
- 2.2 To this end, delegated authority to the Director of Public Health to award the contract, upon completion of the tender process, is sought.

# 3. Recommendation(s) / Proposed Decision

3.1 That the Mayor be recommended to authorise the Director of Public Health, in consultation with the Deputy Mayor and Executive Lead for Health and Wellbeing, to award the two lots of the Torbay Sexual and Reproductive Health contract to the successful bidder(s).

# Appendices

None

# **Background Documents**

None

Section 1: Background Information				
1.	What is the proposal / issue?			
	For the Director of Public Health to be granted delegated decision-making authority from the Mayor to the successful bidder(s) of the two lots in the Sexual and Reproductive Health procurement process.			
2.	What is the current situation?			
	The current situation is that following procurement, Public Health commissioners would need to come back to PDDG for Mayoral permission to award the contract to the successful bidder(s). This would prolong timeframes for the awarding of the contract that would cause disruption in eventual start date of new contract.			
3.	What options have been considered?			
	Public Health commissioners could wait until the outcome of the tender process before undergoing a secondary process to obtain permission of the Mayor to award the successful bidder(s). This would result in disruption of timeframes in the project of mobilising a provider(s). It would also cause uncertainty for all bidders, not least of which the smaller organisations, and/or collaborative bidders. This is not the preferred option, as it will introduce uncertainty and delay into an otherwise robust and well timed process.			
4.	How does this proposal support the ambitions, principles and delivery of the Corporate Plan 2015-19?			
	Ambitions: Prosperous and Healthy Torbay			
	Principles:			
	<ul> <li>Use reducing resources to best effect</li> <li>Reduce demand through prevention and innovation</li> </ul>			
	<ul> <li>Reduce demand through prevention and innovation</li> <li>Integrated and joined up approach</li> </ul>			
	<ul><li>Targeted actions:</li><li>Promoting healthy lifestyles across Torbay</li></ul>			
5.	How does this proposal contribute towards the Council's responsibilities as corporate parents?			
	This report relates solely to delegation of decision-making authority, following a full and proper procurement process.			
6.	How does this proposal tackle deprivation?			
	This report relates solely to delegation of decision-making authority, following a full and proper procurement process.			
7.	Who will be affected by this proposal and who do you need to consult with?			

	<ul> <li>Public Health commissioners</li> <li>Director of Public Health for Torbay</li> <li>Successful bidders in the tender process</li> <li>Unsuccessful bidders in the tender process.</li> <li>Partners in Devon County Council</li> </ul> No formal public consultation is necessary for this decision, public consultation regarding the service has already taken place.				
8.	How will you propose to consult? No formal consultation is felt to be necessary for this decision.				

Sectio	n 2: Implications and Impact Assessment
9.	What are the financial and legal implications?
	There are no or legal implications to this request. This contract is being let within existing budgets with relevant break clauses.
10.	What are the risks?
	<ul> <li>Risks:</li> <li>1. Not having delegated decision-making authority introduces uncertainty and prolongation of time frames into the process. There may be the loss of successful bidder(s) through untimely awarding of the contract.</li> <li>2. Not having delegated decision-making authority introduces slippage in the project plan and may mean that service user handovers/exit planning from existing providers (if new providers are different) becomes unsafe, chaotic and rushed and negatively impacts on local populations.</li> <li>3. Not having delegated decision-making authority minimises mobilisation time for new providers – these may be smaller and/or charitable organisations (i.e.) those without back-office infrastructure to rely on, or collaborative bids who will need to achieve legal and organisational objectives in very quick timeframes.</li> <li>4. Not having delegated decision-making authority infers that timeframes for proper TUPE transfer of staff in existing providers to new providers (if necessary) become rushed or compromised.</li> </ul>
11.	Public Services Value (Social Value) Act 2012
	This report does not relate to a procurement – that was the subject of the previous report requesting permission to hold and full and proper procurement process for a new provider.
	This report relates to delegation of decision-making authority to Director of Public Health (in conjunction with elected member with portfolio responsibility for public health matters). The award will be made on a 'best value' basis.
12.	What evidence / data / research have you gathered in relation to this proposal?
	Procurement timelines indicate the award must be made January – February 2018 in order to complete appropriate due diligence, checks and give an appropriate implementation time.
13.	What are key findings from the consultation you have carried out?
	Not relevant.
14.	Amendments to Proposal / Mitigating Actions
	None

Identify the potential positive and negative impacts on specific groups					
	Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact		
Older or younger people			No differential impact		
People with caring Responsibilities			No differential impact		
People with a disability			No differential impact		
Women or men			No differential impact		
People who are black or from a minority ethnic background (BME) ( <i>Please</i> note Gypsies / Roma are within this community)			No differential impact		
Religion or belief (including lack of belief)			No differential impact		
People who are in a marriage or civil partnership			No differential impact		
People who are lesbian, gay or bisexual			No differential impact		
People who are transgendered			No differential impact		
Women who are pregnant / on maternity leave			No differential impact		

	Socio-economic impacts (Including impact on child poverty issues and deprivation)		No differential impact
	Public Health impacts (How will your proposal impact on the general health of the population of Torbay)		No differential impact
14	Cumulative Impacts – Council wide (proposed changes elsewhere which might worsen the impacts identified above)	None	
15	Cumulative Impacts – Other public services (proposed changes elsewhere which might worsen the impacts identified above)	None	