

Birmingham City Council

Report to Cabinet

23rd April 2024



Subject:	ADDITIONAL PROCUREMENT OF NHS HEALTH CHECKS AND SMOKING CESSATION ENHANCED SERVICE CONTRACTS
Report of:	Jo Tonkin, Interim Director of Public Health
Relevant Cabinet Member:	Councillor Rob Pocock - Health & Social Care (Interim)
Relevant O &S Chair(s):	Councillor Mick Brown - Health & Adult Social Care
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Are specific wards affected?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No – All wards affected
If yes, name(s) of ward(s):		
Is this a key decision?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, add Forward Plan Reference: 012713/2024		
Is the decision eligible for call-in?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, state which appendix is exempt, and provide exempt information paragraph number or reason if confidential:		

1 Executive Summary

- 1.1 This report sets out the proposal to undergo an additional procurement of NHS health checks and smoking cessation enhanced service contracts. Previously, these services have been procured through a flexible contracting agreement but there are remaining gaps in service provision across the city. Approval is therefore being sought to increase service provision through the Public Health Division's planned additional procurement for both NHS Health Checks and Smoking Cessation services in adherence to the recently introduced Provider Selection Regime with a Direct Award Process being followed. The purpose of this report is to seek approval for forward plan initiation/ appropriate executive decision.

2 Recommendations

- 2.1 That Cabinet:

- 2.1.1 Approve the contents of this report in order to implement the strategy and the commencement of procurement activity for NHS health checks and smoking cessation enhanced service contracts in accordance with the requirement and approach set out in paragraph 3.3.
- 2.1.2 Note that the recommendations for the award of contracts for NHS health checks and smoking cessation enhanced service contracts be approved by the Director of Public Health in consultation with the Assistant Director – Procurement, Director of Finance (& Section 151 Officer) (or their delegate) and the City Solicitor & Monitoring Officer

3 Background

- 3.1 The Council has a statutory duty to provide NHS Health Checks under the Public Health grant conditions. These services are provided by GPs only. NHS Health Checks targets are part of the Corporate Plan deliverables. Smoking Cessation services are not mandated; however, smoking is still the biggest cause of premature mortality in England, with the adult smoking prevalence in the city at 13.6%, higher than the England average of 12.7%. These services are currently provided by GPs and Pharmacies.
- 3.2 Cabinet approval for delegated authority to procure the NHS Health Check and smoking cessation services from 1 June 2023 for 4 years was gained 26 July 2022. The Flexible Contracting Agreement (FCA) allowed for providers of NHS Health Checks and Smoking Cessation services to be onboarded during the life of the 4-year contract. The outcome of round one and round two is that a smaller number of providers have registered to deliver the services. As a result, residents will experience reduced access to a key CVD screening programme and support to quit smoking.
- 3.3 From 1st January 2024, all Health-related procurements are governed by the new NHS England Provider Selection Regime (PSR) and not the Public Contract Regulations 2015. NHS health checks and smoking cessation enhanced services

fall under the scope the PSR. Under the PSR, Birmingham City Council can follow a direct award process for the next stage of the procurement – specifically Direct Award process ‘B’ under the new PSR. This will increase the number of providers contracted to deliver the services and help to improve equity of provision across the City by July 2024.

4 Options considered and Recommended Proposal

4.1 **Option 1** – Do nothing –This is not an option as these are national mandatory services the council is required to provide and further service provision is needed to ensure we meet our corporate plan targets.

4.2 **Option 2** – Engage with additional GPs and Pharmacies to provide NHS health checks and smoking cessation enhanced service The most likely outcome of this approach is increased service provision and geographical coverage in terms of NHS Health Checks and smoking cessation for Birmingham residents. This will contribute to Birmingham City Council Public Health Division’s efforts to tackle health inequalities. A procurement process compliant with the new PSR is therefore the recommended option.

5 Consultation

5.1 This report to Cabinet is copied to Cabinet Support Officers and to Resources Overview & Scrutiny Committee and therefore is the process for consulting with relevant Cabinet and Scrutiny members. At the point of submitting this report Cabinet Members/ Resources Overview & Scrutiny Committee Chair have not indicated that any of the planned procurement activity needs to be brought back to Cabinet for executive decision.

6 Risk Management

6.1 Details of Risk Management, Community Cohesion and Equality Act requirements will be set out in the individual reports.

7 Compliance Issues:

7.1 How are the recommended decisions consistent with the City Council’s priorities, plans and strategies?

7.1.1 Details of how the contracts listed in **Appendix 1** and **Appendix 2** support relevant Council policies, plans or strategies, will be set out in the individual reports.

7.2 Legal Implications

7.2.1 The responsibility for commissioning NHS Health Checks transferred to the Local Authority on the 1st April 2013. The provision of NHS Health Checks is a condition of the Public Health Grant that is received into the Council and is a statutory function whereby the council are mandated to commission the checks The Health and Social Care Act 2012 and associated regulations

transferred the responsibility to public health from the NHS to local authorities from April 2013. Section 12 of the Health and Social Care Act 2012 introduced a new duty at Section 2B of the NHS Act 2006 Act for all upper-tier and unitary local authorities in England to take appropriate steps to improve the health of the people who live in their areas.

7.3 Financial Implications

7.3.1 There are no implications for the General Fund. Funding will be met through the Public Health Ringfenced Grant.

7.4 Procurement Implications (if required)

7.4.1 The recently introduced Provider Selection Regime and Direct Award process 'B' specifically will be followed. Further details in respect of the new Regime are given in **Appendix 4**.

7.5 Human Resources Implications (if required)

7.5.1 None.

7.6 Public Sector Equality Duty

7.6.1 Details of Risk Management, Community Cohesion and Equality Act requirements will be set out in the individual reports.

7.7 Environmental and Sustainability Implications

7.7.1 Please see **Appendix 1** for the Environmental and Sustainability Assessment.

8 Appendices

Appendix 1 - Environment and Sustainability Assessment

Appendix 2 - Equality Impact Assessment Forms

Appendix 3 - DPH Decision- Spend Request

Appendix 4 - Cabinet Member Briefing

9 Background Documents

9.1 Cabinet Decision 26 July 2022 – Planned Procurement Activities (August 2022 – October 2022)