

Birmingham City Council

Report to Cabinet

21st March 2023



Subject: 0-19 COMMISSIONING AND PROCUREMENT PLAN

Report of: Dr Justin Varney, Director of Public Health
Sue Harrison, Director of Children and Families

Relevant Cabinet Member: Cllr Mariam Khan, Health and Social Care
Cllr Karen McCarthy, Children, Young People & Families
Cllr Yvonne Mosquito, Finance and Resources

Relevant O &S Chair(s): Cllr Mick Brown, Health and Social Care
Cllr Kerry Jenkins - Education & Children's Social Care
Cllr Akhlaq Ahmed, Resources

Report author: Andy Kimber, Interim Strategic Commissioning Manager
Andy.Kimber@birmingham.gov.uk

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: 011131/2023		
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: N/A		

1 Executive Summary

- 1.1 This report sets out Commissioning requirements for Public Health Nursing 0-19 Services. This commission will ensure that the Council's statutory duties in relation to the Public Health responsibilities under the Health and Social Care Act 2012 are continued, and a nationally mandated service the 'Healthy Child Programme' for all children and young people aged 0-19 (0-25 including SEND) is delivered in the City.
- 1.2 In addition, this commission will ensure that the Council's duties in relation to The Childcare Act 2006, whereby requirements that local authorities and their partners work to improve the wellbeing of young children in their area and reduce inequalities are met.

2 Recommendations

That Cabinet is recommended to:

- 2.1 Approve a re- procurement approach of going out to the market as has been undertaken previously, using the regulations set out in the Public Contracts Regulations (PCR) 2015. This will continue to follow the previously undertaken 'Light Touch Procurement with Provider discussion process' to establish a contract for Integrated Health Visiting with Family Hubs, School Nursing and School age Vision Screening Services. This approval will allow work to start on re- tendering preparation.
- 2.2 Approve the 0-19 Commissioning Plan timeline in section 11.6 of the report.
- 2.3 Delegate the approval of the Procurement Strategy to the Directors of Public Health and Children and Families in consultation with the Cabinet Members for Health and Social Care & Children and Families, to allow commencement of the procurement to market in September 2023. The delegated Procurement Strategy will determine whether a single contract or separate lots will be tendered for the services in scope.
- 2.4 Delegate the approval of contract award to the Directors of Public Health and Children and Families in consultation with the Cabinet Members for Health and Social Care & Children and Families once the procurement is completed
- 2.5 Delegate authority to the Director of Public Health in consultation with the Chief Financial Officer (or their delegate) and the City Solicitor (or their delegate) to appoint the successful provider(s) to the contract.
- 2.6 Delegate operation of the resultant contract(s) for these services to the Directorate of Children Young people and Families, the Assistant Director of Commissioning, Strategy and Partnerships, including the budget allocations in line with the Public Health Grant 2024 onwards and the Council's revenue budget and Medium-Term Financial Plan.

3. Background

3.1 Legal Requirement

The Healthy Child Programme (HCP) is a universal programme mandated under the Health and Social Care Act (2012) available to all children to lay the foundations of a healthy life. Universal and targeted public health services provided by health visiting and school nursing teams are crucial to improving the health and wellbeing of all children and young people. The HCP is subject to a National Specification with a large element of the delivery that includes 5 health reviews, beginning pre-birth, and the delivery of the National Child Measurement Programme (NCMP) all of which are mandated by law. This mandate has been extended for the foreseeable future.

3.2 Local Service Integration

The Healthy Child Programme (HCP) aims to bring together health, education and other key partners to deliver an effective programme for prevention and support. The HCP offers every family an evidence-based intervention programme consisting of screening tests, immunisations, developmental reviews and information and guidance to support parenting and healthy choices – all services that children and families need to receive if they are to achieve their best start in life. The contract includes Family Hubs in Children's Centre sites where elements of 0-19 service provision are delivered in combination with other community offers. Vision Screening is an associated developmental childhood service to be delivered in conjunction with the HCP. The HCP is universal in reach and is based on four levels of service – community, universal, targeted and specialist, depending on individual and family need. The use of community-based assets through an integrated approach is central to the universal offer, where health visitors and school nurses are well placed to identify and signpost to local community support.

3.3 Services in scope

The following BCC contracts are currently within scope of the Commissioning of 0-19 Services and are subject of this decision/report:

- a. Early Years Health and Well Being 0-5 Contract 8th January 2018 – 31st January 2023 (+2 year option to extend)
- b. Children's Centres 8th January 2018 -31st August 2024 (currently included in a. above)
- c. School Health Support Service 1st September 2019 – 30th June 2024
- d. National Child Measurement Programme (currently included in c. above)
- e. Vision Screening 1st October 2021 – 31st August 2024

3.4 The current contracts in scope (as per 3.3) have been proposed to the current providers for extension until 31.8.2024.

- 3.5 There are other 0-19 Public Health Services part commissioned and delivered by the Council, however these are not within scope of this decision/report as follows:

- Healthy Start Vitamins 2.11.2020 – 1.11.2023

3.6 The Role of Health Visitors and School Nurses

The role of the Healthy Child Programme (HCP) is pivotal to breaking cycles of poverty and improving health and wellbeing and is critical in delivering the aim to give all children from every background and community the best start in life, with clear pathways to achieve success and realise their full potential.

- 3.7 The HCP 0-19 plays a key role in tackling social inequalities that determine life chances and is fundamental to the Birmingham Prevention and Early Intervention offer for children and young people. The 0-19 Service will directly enable the achievement of the Birmingham Children's Partnership Plan aims to support children and young people to be 'healthy and nurtured throughout our life course'.

The Health Visiting Service performs a critical whole child population safeguarding function. Visits are face to face giving Health Visitors opportunity to ask key questions and make key observations about a child's environment and development. Social services will see a minority of children when specific care needs are identified; Primary Care (GP and A&E) services will see children on an elective basis if parents present with a need.

3.8 Scope of the Services

The 0-5 Early Years Health and Well Being Service interfaces with the whole health and care system. It aims to support every infant, child and their families to have statutory health checks. This in turn is evidenced to support to children having the best life chances and outcomes, for example to reach key education developmental milestones measured in Early Years Settings by the Local Authority Education department. Health Visiting Services are delivered jointly through the 25 BCC Children's Centres and satellite venues such as schools and other community Hubs across Birmingham, and sometimes in the home.

- 3.9 The School Health Support Service (SHSS) is a city-wide service which covers all children, young people and their families, where the child or young person is enrolled to attend a Birmingham mainstream school within the local authority boundary, which is publicly funded, or, is a resident of Birmingham but out of school (home educated, excluded or in alternative provision, missing, or in the Children's Youth Justice System). This includes academies, community schools, foundation schools, voluntary aided, voluntary controlled, free schools and pupil referral units. The offer is a Universal in Reach, Personalised in Response Delivery model, identifying and responding appropriately to children, young people and family needs. The current service contributes to key outcomes including:

- Reducing pupil absence

- Identification of health needs
 - Support schools and families in utilising Early Help
 - National Child Measurement Programme implementation
- 3.10 The new HCP programme requirements published in Best Start in Life and Beyond (April 2021) set out a revised Health Visiting and School Nursing model which replaces the previous model. This guidance includes two additional universal health visitor contacts at 3-4 and 6 months, an increased focus on maternal and parental wellbeing and an increased scope to use emotional health and wellbeing assessments.
- 3.11 The Best Start for Life (BSfL) programme and the Family Hub (DfE) programme reinforce the importance of locally placed multi-disciplinary teams including midwives, health visitors, early years education, parent-infant specialists and peri-natal wellbeing and mental health services, with these resources being commissioned and configured around the needs of parents and children and their families, to make up the Best Start for Life and 0-19 local offer.

Re-commissioning

- 3.12 The contract for these services is due to end in 2024. The performance of the current provider, Birmingham Community Healthcare NHS Foundation Trust, has been mixed in recent years with a trend of improvement overall. Several factors have influenced this with the COVID-19 pandemic significantly impacting the delivery model. A national Health Visitor shortage and vacancies within School Health remain enduring contract delivery challenges. The trend in performance continues to show a continued and significant improvement since 2020/21, as measured by 26 key indicators.
- 3.13 From a Local Authority contracting perspective there have been significant changes made to the Central Government Commissioning Guidance provided to Local Authorities for these services. It is considered that the written specification for these services requires updating locally in combination with more robust performance indicators.
- 3.14 Market intelligence has been acquired through the publication of a Procurement Information Notice which received 5 credible submissions from potential providers. This demonstrates that the competitive market for the delivery of these services is likely to offer the Local Authority the best opportunity to fulfil it's obligations under Procurement Law and to deliver services with the best combination of Value and Quality.
- 3.15 A 0-19 Commissioning Project Board was established in July 2021 to support the 0-19 Healthy Child Programme recommission process in terms of clear ownership and governance and in order to determine what services could and should look like in the future. The Board consists of representation from Public Health, Early Years, Birmingham Children's Trust, BSoL Integrated Care Board,

Strategic Commissioning and Procurement and meets monthly to oversee and support the research, analysis, shaping and planning of the programme.

3.16 A body of work to both strategically review and to refresh and update the local Birmingham 0-19 offer across the city occurred during 2021/2022 and can be referred to the following items:

- Commissioner led contract KPI and outcomes improvement work through close monitoring and an agreed 'Development plans to close key performance gaps via subgroups e.g., Finance
- 0-19 Needs Analysis report
- 0-19 Creative Engagement Report
- Family Hubs delivery plan and Family Hub parent consultation reports
- Commissioner led 0-19 Options Appraisal
- Evidence based practice review with the Sector Led Improvement toolkit (Institute of Improving Practice and Institute of Health Visiting)
- BCHT and Birmingham Forward Steps workforce model development (July 2023)
- Data benchmarking and good practice for commissioning by interviews, webinars and peer support from neighbouring authorities and other LAs
- Snr Public Health and Commissioner led meetings with Providers and delivery partners, providing assurance and stability into a maturing yet challenged 0-19 system

3.17 The Birmingham 0-19 Analysis report (March 2022) recommended that the following commissioning principles would be underpin any future commission. The 0-19 Commissioning and Procurement plans will work to closely to these aims and to those set out in the Birmingham Children's Partnership Plan 2023-2027.

- Preventative – services prevent negative outcomes
- Co-produced – services are designed with and delivered by communities
- Integrated – services are integrated across multiple pathways and organisations
- Local – services are local and provided where people live
- Cost effective – services offer value for money

3.18 The future 0-19 Service will work to the principle of Co-design, whereby the 0-19 (25 SEND) offer, will fully engage with children and their families. This will ensure that the Children's Partnership plan and principles are able to be fully reflected in the 0-19 commissioning and procurement journey and in our ongoing relationships with the providers for these services.

- 3.19 The principle of integrating the 0-19 offer in local places is a central theme across the 0-19 Service commission. The existing commissioned offer for 0-5 Early Years Health and Well Being contract serves as a good example of the benefits of an integrated approach to delivery. The 'super diverse' character of the Birmingham, population, where children and family circumstances can frequently change, means that a one size fits all approach to delivery is not only inappropriate but may serve to worsen the barriers and inequalities faced by our children and families. The locality network model deployed through the Early Years Health and Well Being 0-5 contract, has provided a strong footprint for teams to wrap both universal and targeted support around families and concentrate on needs, at a geographical district level. The integration of the 5-19 offer in the development of Family Hubs will be key to localised delivery.
- 3.20 There are 10 distinct localities across Birmingham, and we will seek to continue to work through this framework, with our providers and partners to further integrate the 0-19 (25 for SEND) offer, in a way that facilitates ease of access and promotes health and wellbeing across the life course.

Strategic Alignment

- 3.21 The Birmingham Children's Partnership Change for Children and Young People's Plan 2023-2028 sets out a new vision and set of outcomes that underpin the 0-19 commission. The plan has been developed in partnership and engagement with local children and their families and is due for approval alongside this report at Cabinet in March 2023.
- 3.22 The development of the Family Hub model and implementation of the Best Start for Life programme (BSfL) in Birmingham is key and is hardwired into the future model and delivery of the HCP. By building on the core offer through 25 Birmingham Children's Centres and through the Birmingham Family Hubs as they evolve, the offer will be extended to include more holistic support for parents and all children, regardless of age. All services in scope, including Children's Centres, may be tendered as one 0-19 contract or as separate lots.
- 3.23 The 0-19 offer will work to enhance and evolve partnerships with Early Years Settings to bring consistency and join up for 2 –3-year-old development reviews which take place in both Education and Health at a similar age.

The 0-19 service will promote the Birmingham Youth Services offer so that where a School Nurse or Health Visitor may identify a need young people can be signposted to Youth Centres in order to gain easier access to services and activities in their community. An example of this may be Sexual Health Services provided at youth centres which a School Nurse may identify as a need in school age young adults; or where a Health Visitor may identify a need for younger parents who also fit within the Youth Services demographic themselves.

4. Options considered and Recommended Proposal

- 4.1 In August 2022 an options appraisal exercise sought to gather views from key commissioning partners on the 0-19 Project Board, on a range of options which were felt to represent 2 principal key categories of action. in securing 0-19 provision

Option 1 – to develop a Section 75 style Partnership arrangement to continue the existing Service Model with the current Service Provider. This option has been discounted. There is high risk involved due to the existence of a growing domestic market of private sector providers in this space. Advice from BCC legal services suggests that a Section 75 Partnership is primarily a mechanism for delegating functions and pooling budgets, not an arrangement for the provision of services. Arguably, a Section 75 is out of scope for PCR 2015 because it is a partnership arrangement and does not fit within the definition of a "public contract" under the PCR 2015, which envisages the supply of services (or works or supplies). A direct award to progress a Partnership agreement would be deemed to proceed at significant risk of legal challenge and therefore in light of the Council's Finance, Procurement and Contract Governance Rules, this option was discounted.

Option 2 – Competitive Tendering with the Light Touch Regime. The LTR is a form of procurement that was introduced in 2015 and affords some flexibilities that differ from a standard procurement process, where certain steps must be followed in order to comply with PSR procurement rules. In light of the desire to co-design the services with children and families, this option was felt to be most appropriate option for this commission. This option will enable to the Council to appoint a provider based on the best tender offer of quality and price in a competitive process. Whichever provider is successful, even if it is the current provider, this option gives the best scope for a new contract to be put in place with a new specification and terms updated to account for new government guidance in this field of work and learning from commissioning outcomes for this service in recent years.

- 4.2 Market Engagement work to understand the appetite and experience of the market has highlighted the potential opportunity of a future tender for these Services.
- 4.3 A Provider Information Notice (PIN) was issued to the market in December 2022. Providers were asked to respond to the following criteria and a set of questions outlining their experience in line with:
- Experience and capability to deliver public health and education-based outcome services for children. In particular, the expertise to lead and manage both clinical and non-clinical workforce within community settings
 - Experience in developing a capable workforce, capacity building and cultural competence to meet local population need, including recruitment and retention of skilled and experienced staff
 - Experience of mobilising both universal and targeted services across a large population with super diversity.

- Experience of providing clinical assessment services within a community setting (e.g., Schools).
- A prevention and data driven approach to decision making, that focuses on continuous improvement in the lives of children and families
- An approach that builds positive relationships and works in an integrated way with key system partners, including local communities, the local Integrated Care System, Social Care, Voluntary Sector Organisations, and Schools.
- Experience of bringing innovative solutions and practice into service delivery, that is focussed on improved outcomes for children and families.

5 Consultation

- 5.1 Following the Cabinet Decision, co-production undertakings will ensure that all professional and community stakeholders are fully and appropriately involved in developing the specification for the new service, as set out in the timeline in section 11.6

6 Risk Management

- 6.1 The most significant risk to this Commission is the unknown element with the Council's budgetary and finance position, pending the Public Health Grant allocation and its conditions for 2024/25. This will be addressed through the 2024/25 MTFP process. Further benchmarking, affordability and assurance work will be required prior to any formal market Notice to Tender.
- 6.2 A national shortage of skilled Specialist Community Public Health Nurses (SCPHN qualified) Health Visitors and School Nurses remains a significant ongoing risk to quality of delivery and solutions will need to be found in seeking to develop a skill mixing approach, using strength-based models that future proof ways of working with high intensity, complex and vulnerable families.

7 Compliance Issues:

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

Birmingham City Council has a clear vision for Birmingham, which is to create 'a city of growth where every child, citizen and place matters.' This vision, along with the Council's strategic outcomes and priorities, is described in its latest Council Plan 2018 – 2022 and are:

- Birmingham is an entrepreneurial city to learn, work and invest in
- Birmingham is an aspirational city to grow up in
- Birmingham is a great city to live
- Birmingham is a fulfilling city to age well in
- Birmingham residents gain the maximum benefit from hosting the

Commonwealth Games

The Council's vision has been translated into the 0-19 Commissioning process and addresses potential barriers and obstacles to delivering the above outcomes. It also provides a framework for the actions required to continue to mature these Services for Children and Families in Birmingham and to guide decisions regarding how the resources are used. The Vision and Strategy comprises eight key elements:

- Information, advice and guidance - People need access to high quality information, advice and guidance. The range of services that people can access directly will be increased and it will be easier for carers to have their needs assessed.
- Personalised support - Social work and care management services will be re-organised. They will move from assessing people for services to assessing them for the outcomes they want and the assets they have to achieve them.
- Community assets - Resources need to be made available for local groups to provide the wide range of support that enables people to remain in the community.
- Prevention and early intervention - People need to be able to access prevention and early intervention services quickly and at any time in their lives to help maximise their independence.
- Partnership working - Services need to be integrated and built on partnership working using multi-disciplinary teams and, where feasible, single points of access. The Council and its partners need to work as a whole system and to embrace locality working.
- Making safeguarding personal - We must 'make safeguarding personal' and understand what outcomes people want from safeguarding enquiries and actions. Safeguarding must be seen as everybody's business and kept in the public eye.
- Co-production - All services should be co-produced with users and carers. Ongoing engagement needs to be at the heart of commissioning and service delivery.
- Social Justice - Services should seek to improve social justice by tackling the reasons for discrimination and creating opportunities for all citizens.

8 Legal Implications

- 8.1 The Council is enabled, by Section 111 of the Local Government Act 1972, to do anything which is calculated to facilitate, or is conducive or incidental to, the discharge of any of its functions. The Council therefore has a general power to enter into contracts for the discharge of any of its functions.

- 8.2 The Childcare Act 2006 places a requirement on local authorities and their partners work to improve the wellbeing of young children in their area and reduce inequalities.

9 Financial Implications

- 9.1 A key challenge in managing the existing Contracts for 0-19 has been to the absence of critical core (Health Visiting and School Nursing) and sub-contracted (Children's Centres) finance data from the lead provider.
- 9.2 A requirement of the future 0-19 Commission will be to include an Open Book accounting process that will allow BCC and any commissioning partner, to openly evaluate cost pressures on services and share decisions inside future contractual agreements.
- 9.3 The following table shows the BCC financial allocations for current committed spend against these services.

	23/24	24/25	25/6
Budget	£ m	£ m	£ m
0-5 Early Years Health and Well Being	£33,503,964	£33,503,964	£33,503,964
School Health	£2,689,115	£2,689,115	£2,689,115
Vision Screening	£290,856	£290,856	£290,856

- 9.4 Any pressures arising and further implications for pricing changes for these services will be contained within the Public Health ring-fenced Grant.

10 Human Resource implications

- 10.1 There are no human resource implications associated with the options in this report that impact on Birmingham City Council staff.

11 Procurement Implications

- 11.1 The services in scope of this report will be tendered using a competitive style tender procurement route with provider discussion, under the Light Touch Regime of the Public Contracts Regulations 2015.
- 11.2 A Procurement Strategy will be issued via the delegated procurement process setting out the procurement approach and relevant procurement considerations for each.
- 11.3 An indicative timetable has been developed in conjunction with Corporate Procurement Services to ensure a contractual arrangement is embedded by

1st September 2024. Communication activity will take place with providers and children and families as part of the procurement and implementation.

- 11.4 It is imperative that a tender exercise is carried out for these services. There has been a great deal of interest from the market in the commissioning of these services and this has been shown with the number of providers who have viewed the PIN information. There is also known legal case history between one of the larger private providers and local authorities in the past. Where Local Authorities have attempted not to run a tender process and in effect direct award, the courts have ruled in favour of the provider. By following a tender process, we will be minimising our legal risk of challenge.
- 11.5 Competitive Tendering through a light touch process is considered to be the most appropriate procurement solution as it allows the development of a solution through co-design, negotiation of a final solution with the winning bidder, and is fair, open and transparent to the market. It also allows us to develop our own process, providing we remain within the guidelines of the public contract regulations. From a procurement perspective, providing we set out very clearly to the market what process we will follow, and we then follow the process, we will be at very minimal risk of challenge.
- 11.6 The proposed timeline is set out in Table 3 below:

Table 3: Procurement and Implementation timeline

Activity		Date
Stage 1	Inform current provider. Discussion required with incumbent provider to make them aware of our intentions re: PIN, market engagement and tendering process	December 2022
Stage 2	Supplier Engagement PIN and analysis	February 2023
Stage 3	Prepare and Submit Cabinet Report to Approval to Tender	March 21 st 2023
Stage 4	Co-production action plan and leads assigned Preparation of Tender Documents	April – August 2023

Stage 5	Advertise ITT	September – October 45 days
Stage 6	Assessment of bids and Supplier 'Discussion'	22 nd October – 22 nd November. 30 Days.
Stage 7	Final Agreement Winning Provider Prepare and Submit Award Report to DPR	November / December 2023
Stage 8	DPR Approval to Award	January 2024
Stage 9	Contract Award	January / February 2024
Stage 10	Supplier Mobilisation	March / September 2024

11.7 Public Contract Regulations (2015) - where appropriate via contract variations.

Social Value requirements will be included within the Council's ongoing contract and quality management arrangements. Providers will be required to submit a Social Value action plan as part of their annual Provider Quality Assurance Statement and will receive support from Commissioners in developing and reviewing these. This will include Environmental and Sustainability commitments and actions.

12. Public Sector Equality Duty

An Equality Impact Assessment has been carried out to identify the impact of the proposed changes. Details of the Equality Assessment can be found in **Appendix 1**. As the proposals will impact on all users of commissioned public health services, the assessment has not identified any groups that will be adversely affected. The proposals are designed to improve the outcomes, quality of services and continuity of service for all children and families, regardless of their protected characteristics.

13 Environmental and Sustainability Implications

- 13.1 All successful providers are required to be familiar with the Council's aims for a Sustainable Birmingham and ensure that in its performance of the Service, it uses working methods, equipment, materials and consumables which minimise environmental impact.
- 13.2 Providers will also be required to tell the Council about the steps they are taking in relation to Environmental and Sustainability implications of their services through their Social Value action plans – as summarised in 11.7 above.

13.3. An Environment and Sustainability Assessment has been completed (attached as **Appendix 2**)

14. Appendices

14.1 Appendix 1 - Equality Assessment

14.2 Appendix 2 - Environment and Sustainability Assessment

15. Background Documents

15.1 N/A