

Committee: Cabinet

Date: Wednesday 23rd May, 2018

Agenda item: Extension of Children's Community Services Contract

Wards: All

Subject: Extension of Children's Community Services Contract

Lead officer:

Dagmar Zeuner, Director of Public Health

Lead member:

Cabinet Member for Adult Social Care and Health

Forward Plan reference number:

Contact officers:

Julia Groom (Public Health Consultant)

Hilina Asrress (Public Health Principal)

Philip Williams (Public Health Commissioning Officer)

Recommendations:

- A. That Cabinet authorise the extension of the current Merton Children's Community Health Services contract with Central London Community Healthcare (CLCH) for a further period of 2 years from 1 April 2019 to 31 March 2021.
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1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. The purpose of this report is to seek Cabinet authorisation for the extension of the current Children's Community Health Services contract for a further two years to March 2021. This contract includes health visiting, school nursing and the Family Nurse Partnership, and is part of a wider Community Health Services Contract commissioned by Merton CCG (which includes adult community services and children's therapy services).
- 1.2. London Borough of Merton are required to notify the current provider (Central London Community Health Services NHS Trust) by the end of June 2018 if they wish to extend the contract.

2 DETAILS

- 2.1. LBM Public Health are recommending an extension of the current contract with Central London Community Health Services NHS Trust (CLCH) to deliver Children's Community Health Services in Merton for a further 2 years.
- 2.2. The contract commenced, following approval from Cabinet, on 1st April 2016 for a period of 3 years and allows for a single extension of up to 2 years. The contract sets out that London Borough of Merton must notify CLCH by the end of June 2018 if they wish to extend the contract (giving a minimum of 9 months notice).

- 2.3. The Children’s Community Health Services contract forms part of a wider Community Health Services contract jointly commissioned with Merton CCG (which includes adult community health services and children’s complex therapies services). Merton CCG have already agreed in March 2018 to extend the CCG-commissioned elements of the contract for 2 years.
- 2.4. Due to the fact that the original Cabinet decision to award the contract in September 2015 did not grant delegated authority to officers to grant an extension, a further decision by Cabinet is required to extend the contract.
- 2.5. Alternative options to extending the current contract were considered (detailed in Section 3 below) but rejected. Extending the current contract was considered the approach most likely to maintain the current and improving performance for the following reasons:

(i) Commissioners are satisfied with the performance of CLCH in delivery of the contract since April 2016. There have been substantial improvements in a number of key performance measures, particularly in the Health Visiting Service. Benchmarking conducted has shown these improvements to have been greater than those seen in national and London-wide trends.

Table 2.5.1 below shows the performance of key nationally mandated elements of the Health Visiting service, comparing Q1 data from 2015/16 under the previous provider with the current provider’s first 2 years delivering the contract. This shows substantial improvements. Table 2.5.2 below shows the average quarterly improvements for each of these measures over the life of the current contract, demonstrating that these improvements have been sustained

Table 2.5.1 – Comparison of CLCH performance in delivering the mandated elements of the Merton Health Visiting service (2015-16 to 2017-18)

National Health Visiting Metrics	Quarter 1 2015/16 (Previous provider)	Quarter 1 2016/17 (Current Provider)	Quarter 1 2017/18 (Current Provider)
New birth visits completed within 14 days	84.1%	90.7%	99.3%
New birth visits after 14 days (Note: these are late visits so a reduced figure is an improvement in performance)	14.5%	8.9%	0.4%
6 - 8 week reviews completed by 8 weeks of age	63.4%	63.3%	96.7%
12 month reviews completed by 12 months of age	62.6%	54.0%	81.6%
12 month reviews completed by 15 months of age	63.4%	66.1%	85.5%
2.5 year reviews completed by 2.5 years of age	46.5%	49.9%	70.8%
2.5 year reviews completed using ‘Ages and Stages questionnaire’ (ASQ 3) questionnaire (Note this is a new measure introduced in 2016)	-	10.3%	99.6%

Table 2.5.2 – Average quarterly change in performance for the mandated elements of the Merton Health Visiting Service (2016/17 to 2017/18)

National Health Visiting Metrics	Average Quarterly Change in Performance (from Quarter 1 2016/17 to Quarter 2 2017/18)
New birth visits completed within 14 days	+1.5%
New birth visits after 14 days <i>(Note: these are late visits so a reduced figure is an improvement in performance)</i>	-1.3%
6 - 8 week reviews completed by 8 weeks of age	+4.7%
12 month reviews completed by 12 months of age	+2.6%
12 month reviews completed by 15 months of age	+1.1%
2.5 year reviews completed by 2.5 years of age	+2.6%

(ii) CLCH have demonstrated a strong focus on safeguarding and innovative models of delivery which commissioners are keen to develop further.

(iii) In instances where there have been performance issues with the current service, commissioners have been assured by CLCH's robust response to improving performance.

(iv) By extending the contract, the work of Public Health, CSF and Merton CCG to explore further models of integration locally across children's services can be progressed, to better inform a future re-commissioning process.

(v) Commissioners have agreed with CLCH a flexible approach to developing the service over the remaining life of the contract. This will enable the current contract to respond to future pressures and opportunities over the life of the extension without requiring a re-tendering process. This is built into the contract which allows commissioners to make reasonable requests for service variations.

3 ALTERNATIVE OPTIONS

3.1. The decision to not extend the current contract and competitively re-tender Children's Community Services at this stage was considered and rejected due to the following:-

(i) Re-tendering the service at this time presents the risk of disrupting the current good and improving service performance demonstrated by CLCH to date.

(ii) Re-tendering the service at this time would not allow for the new contract to take advantage of future work to develop discussions around local integration, innovative service models and wider partnerships. This work is

planned to be progressed from September 2018 to inform a future recommissioning.

(iii) As Merton CCG have confirmed in March 2018 to extend their elements of the Community Services Contract, re-tendering the Children's elements of the contract would also rule out the option of jointly commissioning with the CCG once more. This model has worked well for the current contract and maintained a strong focus on Merton children and families.

4 CONSULTATION UNDERTAKEN OR PROPOSED

- 4.1. Commissioners have held internal discussions through the Merton Children's Community Services Operational Group which monitors the current contract to review the available options (this includes membership from Public Health, Children Schools and Families, Early Years and Merton CCG).
- 4.2. Dagmar Zeuner (Director of Public Health) and Hannah Doody (Director of Communities and Housing) and Yvette Stanley, former Director of Children, Schools and Families, have been consulted and support the proposed extension.

5 TIMETABLE

- 5.1. London Borough of Merton is contractually obliged to notify the current providers by June 30th 2018 if they wish to exercise a contract extension.
- 5.2. If approved by Cabinet, and the decision is not called in, commissioners will be able to notify the providers following the end of the call-in period (30th May).

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 6.1. The annual contract value for the Children's Community Services contract is £3,824,695 with a total value for the proposed two year extension of £7,649,390. There will be no additional cost incurred as a result of the extension.

7 LEGAL AND STATUTORY IMPLICATIONS

- 7.1. The current contract to deliver Children's Community Services is held under a standard NHS contract. As the contract provides for the extension being requested there is nothing barring the Council requesting the extension of up to two years. However, in order to request the extension the Council must follow the prescribed process and time frames contained in the contract and described in the main body of the report.
- 7.2. The time that the extension provides will enable the service to plan for future procurement once the contract has come to an end. As the contract provides for reasonable variations to service delivery the Council will be able to respond to future changes during the 2 year extension.

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 8.1. The current services includes a focus on ensuring equalities are a key concern, with regular reporting and reviews of the protected characteristics to ensure equity.

8.2. The current contract includes a targeted approach that provides the greatest support to the most vulnerable families to contribute to a reduction in health inequalities.

9 CRIME AND DISORDER IMPLICATIONS

9.1 Not applicable.

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1. Risk management and health and safety implications of the contract are monitored through commissioners' performance management arrangements.

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- N/A.

12 BACKGROUND PAPERS

12.1. None

13 LINKED DOCUMENT

13.1 Community health services procurement cabinet report – 14th September 2015 (previous cabinet reporting authorising the award of the current contract)

<https://democracy.merton.gov.uk/ieListDocuments.aspx?CId=146&MId=2276&Ver=4>

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