
REPORT FOR: CABINET

Date of Meeting: 30th May 2019

Subject: CLA Health Assessment Contract

Key Decision: Yes - effects communities living or working in an area of two or more wards of the Borough

Responsible Officer: Paul Hewitt – Corporate Director, People Services

Portfolio Holder: Cllr Christine Robson
Portfolio Holder for Young People and Schools

Exempt: No

Decision subject to Call-in: Yes

Wards affected: ALL

Enclosures: None

Section 1 – Summary and Recommendations

This report sets out the proposal to integrate the Children Looked After (CLA) Health Assessment Service with the 0-19 Health Visiting and School Nursing Service.

Recommendations:

Cabinet is requested to:

1. Approve the integration of the current CLA Health Assessment Service into the 0-19 Health Visiting and School Nursing Service by way of contract variation.
2. Delegate authority to the Corporate Director for People Services in consultation with the Portfolio Holder for Young People and Schools and the Portfolio Holder for Finance and Major Contracts to approve the variation.

Reason:

Harrow Council along with Harrow Clinical Commissioning Group (CCG) have a statutory duty to assess and improve the health and wellbeing outcomes of looked after children and care leavers.

Section 2 – Report

Introductory paragraph

1. The local authority has a statutory duty with the CCG to commission health assessments for children being looked after.
2. The purpose of the service is to assess and improve the health and wellbeing outcomes of Harrow's Children Looked After and care leavers.
3. The current service is provided by Central North West London Trust (CNWL), and is jointly commissioned by both Harrow NHS Clinical Commissioning Group (the CCG) and Harrow Council. The contract comes to an end in June 2019, therefore there is a need to explore procurement options.

Options considered

4. Three options have been considered:
 - Do not commission a service. This is not a viable option for the local authority and CCG. The current service ends in June 2019 and the local authority would therefore not fulfil the statutory duty

with regards to promoting the health and well-being of children looked after.

- Integrate the current service into the recently commissioned 0-19 Health Visitor and School Nursing Service, provided by CNWL, as a contract variation. This is the recommended option.
- Extend the current contract through Gateway waiver approval process and enter into a procurement exercise jointly with the CCG. Through the recent commissioning of the 0-19 service, it was evident there are limited service providers.

Current situation

5. The current CLA Health Assessment contract expires in June 2019. The service was procured in 2015 and a contract was awarded to CNWL for a period of 2 years plus 2 years term.
6. The CLA Health Assessment service is jointly commissioned with the CCG and they are currently the lead commissioners. Harrow CCG has agreed their on-going contribution through a letter dated 17 December 2018. The CCG's Governing Body will formally meet to sign off the collaborative agreement to the integration with the 0-19 Service via a contract variation, on 14 May 2019.
7. The contract is managed jointly with the CCG, contract monitoring is chaired by the Divisional Director, Young People Services with clinical input from the named GP and the safeguarding lead within the CCG.
8. The current service was rated 'Good' and acknowledged by Ofsted in January 2017 as an effective and committed children looked after health service which contributed to improving health outcomes for children.
9. The service is now coming to an end and there is a need to re-procure the service. In considering the options, the local authority has the opportunity to integrate the service with the 0-19 Health Visiting and School Nursing service provided by CNWL.
10. The 0-19 Health Visiting and School Nursing service, provided by CNWL share a regional Director, HR personnel and office base with CLA Health Assessment service. There is an opportunity to build connectivity between these services, ensuring the children that need to be seen in school can do so.
11. By Integrating the two services there will be efficiencies with sharing resources, keeping consistency and maintaining good practice and quality of service.

Ward Councillors' comments

12. This service is for all children looked after and works across the borough

Performance Issues

13. The service provider produces an annual report that is presented at the Corporate Parenting Panel and the Children, Young People and Vulnerable Adults Commissioning Executive Board.
14. The service provider prepares monthly reports which are reviewed quarterly, the reports include demographic and equalities data, emerging health needs, outcomes from multi-agency partnership working and performance against the key performance indicators.
15. The most recent performance monitoring meeting showed continuous improvement with the targets and maintaining a good quality service.

Risk Management Implications

16. Risk included on Directorate risk register? Yes
17. Separate risk register in place? No
18. The key risks include: procurement, quality and implementation of service.
19. Procurement risk is considered to below risk for the Council due to the value. The 0-19 Health Visiting and School Nursing contract allows for a contract variation. The Contract Procedure Rules 2015 (the CPRs) allow for modifications to be made to contracts in certain circumstances.
20. Quality. The current service provider took over from the previous failing provider. The procurement of the 0-19 service had a robust selection assessment and appointed CNWL. To maintain the high quality service delivery, integration of the two contracts will mitigate the potential of a lower quality service provision.
21. Implementation of the service. The failure to merge the 0-19 service and CLA Health Assessment service will mean an interim arrangement with the current service provider while the Council and the CCG undergo a procurement process. Additional costs will be incurred by undertaking this activity. There would then be a further delay to accommodate the TUPE transfer and mobilisation period.

Procurement Implications

22. The Public Contract Regulations 2015 provides that modifications to existing contracts are permitted without commencing a new procurement where any increase in price does not exceed 50% of the value of the original contract.
23. Consequently the recommendations set out in this report are supported by Procurement as not breaching these conditions.

Legal Implications

24. The modification of the 0-19 Health Visiting and School Nursing contract by adding the CLA Health Assessment Service is permitted by way of the Public Contract Regulations 2015 (the "PCRs"). This is on the basis that a change of provider cannot be made for "*economic or technical reasons*" as it would result in "*significant inconvenience or substantial duplication of costs for the contracting authority*". This change is permissible because it will not result in an increase in the total overall contract value of more than 50% of the original 0-19 Services contract.
25. The changes to the 0-19 Health Visiting and School Nursing Contract will be reflected by way of a Deed of Variation drafted by HB Public Law.

Financial Implications

26. The total contract value is jointly funded by the CCG. There is sufficient budget to fund the Council's contribution of £112k per annum. The Contract term will be in line with the 0-19 service which has a remaining six years contract term. Harrow local authority's total contribution will be £672k over 6 years.

Equalities implications / Public Sector Equality Duty

27. An initial review Equalities Impact Assessment has been undertaken, the overall conclusion of this assessment is that the implications are either positive or neutral in that the integration of the current service will help to improve the health and wellbeing outcomes of Harrow Children Looked After and care leavers.

28. The assessments have not identified any potential for unlawful conduct or disproportionate impact and conclude that all opportunities to advance equality are being addressed.
29. The Children Looked After Health Assessment Annual Report includes data on the equalities profile on the protected characteristics, this is reviewed as part of the on-going contract monitoring process.

Council Priorities

30. The decision to integrate the service will support the Council's priorities of supporting those most in need by giving children and young people the opportunities to have the best start in life and providing healthcare services that meet the needs of Harrow residents.

Section 3 - Statutory Officer Clearance

Name: Jo Frost	<input checked="" type="checkbox"/>	on behalf of the * Chief Financial Officer
Date: 16 April 2019		

Name: Sarah Inverary	<input checked="" type="checkbox"/>	on behalf of the * Monitoring Officer
Date: 16 April 2019		

Name: Nimesh Mehta	<input checked="" type="checkbox"/>	
Date: 16 April 2019		

Name: Paul Hewitt	<input checked="" type="checkbox"/>	Corporate Director
Date: 11 April 2019		

Ward Councillors notified:	NO as it impacts on all Wards
EqIA carried out:	NO
EqIA cleared by:	There are no changes to the current service which would have any negative impact on service users, staff or the

wider community.

Section 4 - Contact Details and Background Papers

Contact:

Priya Ganatra, People Services Commissioner

020 84209237

Priya.ganatra@harrow.gov.uk

Background Papers: NONE

Call-In Waived by the Chair of Overview and Scrutiny Committee

*(for completion by Democratic
Services staff only)*

YES/ NO / NOT APPLICABLE*

** Delete as appropriate
If Yes, set out why the decision is
urgent with reference to 4b - Rule
47 of the Constitution.*