

**TITLE OF REPORT:**           **Re-procurement of the Gateshead Integrated Sexual Health Service**

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### **Purpose of the Report**

1. To seek the views of the Health & Wellbeing Board on progress to date with the re-procurement of the Gateshead Integrated Sexual Health Service.

### **Background**

2. The Integrated Sexual Health Service is being retendered August 2018. As of April 2018, South Tyneside Foundation Trust (STFT) are in the final year of the Integrated Sexual Health Service (ISHS) contract. Re-procurement is being undertaken with the new service going live from 1<sup>st</sup> April 2019.

### **Proposal**

3. It is proposed that the contract will be published as a competitive tender on 15<sup>th</sup> August 2018. The current ISHS was commissioned in April 2015 at a contract value of £1,518,463 pa. A review of the existing service identified a number of opportunities for efficiency and as a consequence a budget of £1,125,000 pa. has been identified for 2019/20.

In addition to the ISHS the LA also commission other provision to improve sexual health, including:

- Out of area Genitourinary Medicine (GUM) is £250k (£200k of which goes to Newcastle GUM services)
- GP contracts £160k
- Pharmacies £35k
- Rape Crisis £9.6k
- Changing Lives sexual exploitation of sex workers 1yr project £39k

4. Length of contract:

It is recognised that other procurement processes undertaken recently, across the country, have failed due to a lack of market interest. In response, commissioners are keen to consider an extended contract to prospective bidders to help stimulate greater market interest. However, there is uncertainty of the public health budget post April 2020 which provides a potential risk. Despite this, commissioners are keen to explore the potential to extend this to a 4 +1 +1 to mitigate the risk of lack of interest and creating some certainty for future providers. A decision on this will be made once the results of an online (NEPO) market engagement questionnaire are available.

5. Procurement Process

Commissioners are working with colleagues from procurement and legal teams seeking technical guidance to ensure procurement rules of transparency and equality of opportunity for all potential provider bidders are adhered to. Equally, commissioners are keen to plan how this service realises inter-dependencies with the wider Gateshead health system, particularly as this local integrated approach evolves.

6. Actions to date to inform the new specification

- **Critical friend review** – A national sexual health expert undertook a series of ‘critical friend’ interviews with staff and managers from the current sexual health service to help identify opportunities to improve outcomes and undertake a SWOT of current provision.
- **Public and service user survey** – A survey approach was employed to ascertain views of the public. This approach had limited response (24 returns) though this is not atypical when using the Council Portal for survey projects. The open response question notably generated similar themes, such as, improving access and expanding the reproductive health offer (i.e. cervical screening, for which commissioners are already collaborating with NHS England on co-commissioning arrangements for the new specification).
- **Mystery shopping exercise** – Feedback from this clearly indicated the skill and professionalism of staff when handling interactions with respect to making patients feel at ease. There were minor process issues identified, such as promotion of confidentiality statements and suggestions to improve access and functionality of online, telephone and clinic onsite navigation.
- **Updated Sexual Health Needs Assessment completed and Equality impact assessment** (completed by Provider) to inform the specification.
- **NEPO Market Engagement Questionnaire** – results tbc

7. Key Risks (RAG rated) for discussion and proposed actions to mitigate:

**Please refer to Appendix 1 for further details**

- Market – is there a market? Limited pool of providers.
- TUPE costs exceed contract value. Budget for ISHS @ £1.125m (-26%). Current activity based on ‘old’ GUM tariff is close to this value and known staffing costs are also similar to this figure.
- Contract Length – attractive to providers, but sustainable for the Council.
- Designing or describing a new innovative commissioning model considering the above opportunities and limitations
- Costs of current locations; lease at Trinity considered expensive and some concern costs of current spoke clinics may also increase.
- The deadlines earmarked on the procurement timeline with consideration to council meetings. Currently only 3 months allowed from award to contract start.
- Understand true demand for services in hub and spokes and the mix of contraceptive and STI attenders (new and follow ups).

- Encouraging greater GP Practice participation in future models
- Encouraging new provider to take greater system leadership, (not just for education and training) and ensure Gateshead has a 'full time' service.
- Developing future outcome focussed specification.
- Ensure engagement with all key partners with early thinking including CCG, LMC, LPC, HealthWatch, Community and Voluntary Sectors (prevention and social care).

### **Next Steps**

8. Key milestones from procurement timeline are:

- 18<sup>th</sup> July Corporate Management Team – final decision on length of contract
- 23<sup>rd</sup> July – Specification finalised
- 15<sup>th</sup> August – Issue tender
- 19<sup>th</sup> September – Tender deadline
- Cabinet Approval 20<sup>th</sup> November
- December – Contract Award
- 1<sup>st</sup> April 2019 – Start date for new Provider

### **Recommendations**

9. The Health and Wellbeing Board is asked to consider the content of this report.

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## Appendix 1

No.	Risk Description	RAG	Mitigation Actions
1	Market – Is there a market?	Red	Market engagement questionnaire to be published on NEPO through July all suppliers given equal opportunity to respond to proposed model. Check that others we know of in VCSE sector are also signed up to NEPO, e.g. Rape Crisis
2	TUPE costs exceed contract value. Budget for ISHS @ £1.125m (-26%). Current activity based on 'old' GUM tariff is close to this value and known staffing costs also similar to this figure.	Red	Encourage discussion with Providers to look more innovatively at service model, delivery and skill mix. Part of 'Critical Friend Review' through May 2018 and market test questionnaire (above).
3	Contract Length	Red	Consider a longer contract to prospective bidders to stimulate greater market interest. The commissioners note the uncertainty of the public health budget post April 2020 but advise a longer contract length (e.g. 4 +1 +1) to mitigate the risk of lack of interest by creating some certainty for future providers.
4	Designing or describing a new innovative commissioning model considering the above opportunities and limitations	Red	Encourage move to digital on-line information, advice and sampling services to encourage self-care. Clear branding and marketing of Gateshead services. May reduce Out of Area costs.
5	Costs of current locations; lease at Trinity considered expensive and some concern costs of current spoke clinics may also increase.	Red	Critical friend review staff feedback indicated Trinity as being in prime location (geographically) but acknowledged waiting area space limitations alongside capacity / demand issues for some spoke clinics suggesting locations could be rationalised. The specification will invite potential suppliers to propose solutions proportionate to known clinic use, STI rates, teen age pregnancy rates etc.
6	The deadlines earmarked on the procurement timeline with consideration to council	Red	Commissioners will be mindful of timelines, ensuring attendance at the appropriate council meetings.

	meetings. Currently only 3 months allowed from award to contract start.		
7	Understand true demand for services in hub and spokes and the mix of contraceptive and STI attenders (new and follow ups).	Amber	Good SHNA identifying key issues and priorities. To complement this a public survey and 'mystery shopper' results included in analysis. Critical Friend Review discussed mix of drop-ins and appointments, u25 sessions, sites and DNAs & discussed contraceptive/STI mix.
8	Encouraging greater GP Practice participation in future models	Amber	Current contracts and payment systems operate well. We will review with the CCG opportunities to expand some Practices' offers (Level 2) but at this stage commissioners do not see this being part of the current ISHS procurement process.
9	Encouraging new provider to take greater system leadership, (not just for education and training) and ensure Gateshead has a 'full time' service.	Amber	Build into future specification expectation of system leadership role of the new Provider and the wish for the establishment of Partnership and Innovation Forum to include all sexual health partners across statutory, third and voluntary sectors to maximise resources in the area. The current provider has independently of this recommendation set up a first meeting in July to kick start
10	Developing future outcome focussed specification.	Amber	New specification needs to reduce KPIs through promoting service consistently meeting quality standards e.g. You're Welcome.
11	Ensure engagement with all key partners with early thinking including CCG, LMC, LPC, HealthWatch, Community and Voluntary Sectors (prevention and social care).	Amber	Build into communications and engagement plan to ensure we maximise all resources in the area.