

NOTTINGHAM CITY COUNCIL

COMMISSIONING AND PROCUREMENT SUB-COMMITTEE

MINUTES of the meeting held at LB31 - Loxley House, Station Street, Nottingham, NG2 3NG on 11 February 2015 from 14.04 - 14.23

Membership

Present

Councillor Alex Norris (Chair)
Councillor David Mellen (Vice Chair)
Councillor Dave Liversidge
Councillor Nick McDonald

Absent

Councillor Jon Collins
Councillor Dave Trimble

Colleagues, partners and others in attendance:

Candida Brudenell)
Rachel Doherty)
Colin Monckton) Nottingham City Council
Christine Oliver)
Sarah Quilty)

James Welbourn - Governance Officer, Nottingham City Council
Nancy Barnard - Governance Manager, Nottingham City Council

Call-in

Unless stated otherwise, all decisions are subject to call-in and cannot be implemented until **24 February 2015**.

12 APOLOGIES FOR ABSENCE

Cllr Jon Collins - other Council business
Cllr David Trimble - other Council business
Helen Kearsley-Cree - non-Council business

13 DECLARATIONS OF INTEREST

None

14 MINUTES

The minutes of the meeting held on 14 January 2015 were confirmed and signed by the Chair.

15 VOLUNTARY SECTOR UPDATE

Helen Kearsley-Cree submitted her apologies for the meeting. There was no substitute in attendance; therefore there was no Voluntary Sector update for this meeting;

16 WORK PROGRAMME

Antony Dixon, Strategic Commissioning Manager, submitted a work programme for the Sub-Committee, covering the period March 2015 to June 2015.

RESOLVED to note the provisional agenda items shown below:

- 11 March 2015:** **ICELS Commissioning Arrangements;
Early Intervention Directorate Commissioning
Intentions;**
- June 2015:** **Learning Disability Strategic Commissioning Review
Commissioning Intentions;
Procurement Strategy Update;
Children & Young Peoples Review Commissioning
Intentions;**

17 HEALTH VISITING AND FAMILY NURSE PARTNERSHIP TRANSFER - KEY DECISION

Rachel Doherty, Partnership Manager, presented the report on Health Visiting and Family Nurse Partnership, highlighting the following points:

- (a) The two services transferring from NHS England are Health Visiting, and Family Nurse Partnership;
- (b) The Government intends to mandate certain key universal elements of the 0-5 Healthy Child Programme, with likely regulations to include antenatal health promoting visits, new baby reviews, 6-8 week & 1 year assessments, and 2 to 2 and a half year reviews;
- (c) The Health Visiting and Family Nurse Partnership contracts will be reviewed a minimum of 18 months after the transition of commissioning responsibility;
- (d) The transfer of responsibilities and contractual arrangements has no implications for the workforce at Nottingham City Council. £30,000 per year has been included in the budget allocation transferring to NCC (£15,000 has been included in the half year allocation), as a contribution to commissioning and contract management costs incurred;
- (e) Options to ensure a seamless transition of services in October 2015 are being explored with Nottingham City Clinical Commissioning Group (CCG) and NHS England. To facilitate a smooth transfer the report also sought approval to delegate authority to sign contracts to the Strategic Director for Early Intervention;
- (f) The £5.319 million set out in the report is the six month budget allocation to be transferred to Nottingham City Council. This transfer amount is based on the assumption that a target number of Health Visitors has been met. The level of

Health Visitors in the City is currently below the target number required, but recruitment is continuing to fill the remaining posts;

- (g) The transfer of commissioning responsibilities in October 2015 will contribute to an integrated Children's services for the future;
- (h) A detailed service specification has been produced by NHS England. This is a core national specification, with a range of performance indicators. There is scope to shape this specification locally, and Nottingham City Council can look at how NHS England proportion resources in different areas.

Representatives of Nottingham City Council will be attending performance management meetings with NHS England, which will aid a seamless transition in October 2015;

- (i) The increase in the number of Health Visitors will allow more individuals to be reached. One such example would be teenage parents under the age of 19; given funding to reach 33-40 % of these individuals. The aim is to reach 100% of parents in this group;

RESOLVED to:

- (1) note the transfer of commissioning responsibilities for Children's Public Health Services 0-5 years with effect from 1st October 2015 and the roles & responsibilities & implications to Nottingham City Council for future service provision in accordance with the mandatory instructions, to be issued by the Department of Health;**
- (2) novate the existing contract for the Health Visiting and Family Nurse Partnership Services from NHS England to Nottingham City Council, subject to confirmation from the Chief Finance Officer that the total contract values of both services does not exceed the final value of the transferring budget allocation;**
- (3) delegate authority to sign the contracts for both the Health Visiting and Family Nurse Partnership services to the Strategic Director for Early Intervention, subject to consultation with Director of Legal and Democratic Services and the Chief Finance Officer;**

Reasons for Decision

- (1) To ensure that commissioning responsibilities and contractual arrangements for 0-5 Children's public health services are able to transfer from NHS England to the local authority in a safe and efficient manner. They will enable the City Council to work with both NHS England and the service provider, Nottingham CityCare Partnership, to secure continuity of service delivery during the transition;
- (2) To allow for relevant and necessary commissioning activity to commence, including the agreement of appropriate arrangements for the novation of contractual arrangements. No transfer arrangements will be finalised until the

final budget allocation has been confirmed and assurance can be provided regarding the sufficiency of this allocation to fund the commitments proposed in this report;

- (3) To ensure that approval is in place to progress the implementation of new contractual arrangements in a timely way, once final agreement has been reached with the relevant parties by delegating authority to the Strategic Director for Early Intervention, to sign contracts for both the Health Visiting and Family Nurse Partnership.

Other Options Considered

- (1) The changes in the commissioning responsibilities for children and young people's health services which have occurred through the implementation of the Health and Social Care Act (2012) are extensive and it is vitally important that all strategic partners are aware of these complexities. A focus on prevention and early intervention has a vital role to play in breaking the cycle of health inequalities within families. There are clear benefits to Nottingham's children and young people, who are the future adults of Nottingham City, through the commissioning of equitable, robust, evidence based, coordinated services across the city.
- (2) Options to ensure the smooth transfer of contractual arrangements are being explored with NHS England and the City CCG. The recommendation to delegate authority to sign contracts for both services to the Director of Public Health is intended to allow these discussions to be completed and implemented in a timely way, with the aim of minimising any potential disruption to the delivery of services.
- (3) In order to minimise risk, the transfer of services, including the signature of the relevant contract, is subject to both the completion of a satisfactory due diligence process and final confirmation that the contract values do not exceed the value of the transferring budget allocation.

18 APPROVAL OF CRIME AND DRUGS PARTNERSHIP FUNDING ALLOCATION SPEND 2015/16 - KEY DECISION

Christine Oliver, Head of Service at the Crime and Drugs Partnership (CDP), presented the report on the Approval of Crime and Drugs Partnership Funding Allocation Spend 2015/16, to the Sub-Committee:

RESOLVED to:

- (1) **approve the anticipated expenditure of Public Health, Police and Crime Commissioner, NHS England and Partner Contribution funds by the CDP in 2015/16 as set out in exempt Appendix 1;**
- (2) **delegate authority to the Strategic Director for Early Intervention to allocate funds for the above expenditure and to secure best value for Nottingham Citizens;**

- (3) delegate authority to the Strategic Director for Early Intervention to approve the outcome of tenders and award contracts to secure best value for Nottingham's citizens. (Appendix 2 tables 2A);**
- (4) delegate authority to the Strategic Director of Early Intervention to sign contracts arising from the tender process once the tender outcome is agreed (Appendix 2 tables 2A);**
- (5) approve dispensation from financial regulations 3.29 under corporate contract procurement rule 5.1.2 in respect of those contracts identified in exempt appendix 3 (Appendix 3 table 3A, 3B and 3C);**
- (6) approve dispensation and the extension of those contracts identified in exempt appendix 3 (Appendix 3 table 3C) to ensure service continuity while commissioning and tendering;**

Reasons for Decision

- (1) To ensure that the Public Health, Police and Crime Commissioner, NHS England and partner contributions funding allocations are utilised to commission and contract with services in an appropriate way and in accordance with the correct legislation;
- (2) To allow for relevant and necessary commissioning activity to continue in order to maintain service provision for citizens and meet identified local need, including meeting the recommendations from the Safe from Harm Review. Commissioning activity will also contribute to ensuring continued progress of the Health and Wellbeing Strategy, relevant Public Health Outcomes Framework targets, the Safer agenda and agreed 2020 targets;
- (3) To enable timely contract variations and allocations to be made to services in order to deliver continuation of services in 2015/16;
- (4) To allocate funding to deliver the required savings across the Public Health and Police and Crime Commissioner funding streams in 2015/16. To allow for commissioning and tendering activities to deliver efficiencies in subsequent years;
- (5) The Safe From Harm Review made recommendations for a joint commissioning approach for Domestic and Sexual Violence. It has been agreed that there will be a move to a lead commissioner approach with one commissioning organisation leading the commissioning of each specialist area on behalf of all other commissioners. This will reduce the number of contracts and repetitious performance monitoring for providers. To progress this approach it is proposed that all commissioners will hand over their DSV contracts to the CDP for 1st April 2015 for management. Authority will be sought at a later date once full scope had been clarified;

Other Options Considered

- (1) Do nothing – Not to allocate funding for 2015/16. This is not considered an option due to the significant potential risk of an increase in crime and health harms;
- (2) To allocate funds in a different way. This has been considered as part of the work to review provision in order to deliver savings in 2015/16. Risk assessments, review of existing provision, and work with providers and partners were used to consider how to allocate funds appropriately to remain within the available budget;
- (3) Not to deliver services within the available budget. Due to the significant pressures on the Local Authority budgets, including the Public Health budget, this option was rejected;

19 EXCLUSION OF THE PUBLIC

RESOLVED to exclude the public from the meeting during consideration of the remaining items in accordance with section 100a(4) of the Local Government Act 1972 on the basis that, having regard to all the circumstances, the public interest in maintaining the exemption outweighs the public interest in disclosing the information.

20 APPROVAL OF CRIME AND DRUGS PARTNERSHIP FUNDING ALLOCATION SPEND 2015/16 - EXEMPT APPENDIX

As per minute 18, above.

21 CANCELLATION OF MEETING - 15 APRIL 2015

RESOLVED to cancel the meeting scheduled for 15 April 2015. The next meeting is scheduled for 11 March 2015;