



NOTTINGHAM CITY COUNCIL
COMMISSIONING AND PROCUREMENT SUB-COMMITTEE

Date: Tuesday, 12 September 2017

Time: 10.00 am

Place: LH 0.06 - Loxley House, Station Street, Nottingham, NG2 3NG

Councillors are requested to attend the above meeting to transact the following business

Corporate Director for Strategy and Resources

Governance Officer: Kate Morris, Governance Officer **Direct Dial:** 01158764353

AGENDA

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|----------|--|------------------|
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Report |
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ALL ITEMS LISTED 'UNDER EXCLUSION OF THE PUBLIC' WILL BE HEARD IN PRIVATE. THEY HAVE BEEN INCLUDED ON THE AGENDA AS NO REPRESENTATIONS AGAINST HEARING THE ITEMS IN PRIVATE WERE RECEIVED

IF YOU NEED ANY ADVICE ON DECLARING AN INTEREST IN ANY ITEM ON THE AGENDA, PLEASE CONTACT THE GOVERNANCE OFFICER SHOWN ABOVE, IF POSSIBLE BEFORE THE DAY OF THE MEETING

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NOTTINGHAM CITY COUNCIL

COMMISSIONING AND PROCUREMENT SUB-COMMITTEE

MINUTES of the meeting held at LH 0.06 - Loxley House, Station Street, Nottingham, NG2 3NG on 11 July 2017 from 10.02 am - 10.38 am

Membership

Present

Councillor Graham Chapman (Chair)
Councillor David Mellen
Councillor Toby Neal
Councillor Dave Trimble

Absent

Councillor Jon Collins
Councillor Nick McDonald
Councillor Jane Urquhart

Colleagues, partners and others in attendance:

Katy Ball - Director of Commissioning and Procurement
Kaj Ghattaora - Provider Performance and Development Manager
Clare Gilbert - Commissioning Lead - Adults
Nicki Hastie - Nottingham CVS
Kate Morris - Governance Officer
Steve Oakley - Head of Contracting and Procurement
Christine Oliver - Head of Commissioning

Call-in

Unless stated otherwise, all decisions are subject to call-in and cannot be implemented until 20 July 2017

17 APOLOGIES

Councillor Jon Collins - Council business
Councillor Nick McDonald - Personal reasons
Councillor Jane Urquhart - Work commitments

18 DECLARATIONS OF INTERESTS

None.

19 MINUTES

Subject to the following amendment the minutes of the meeting held on 13 June 2017 were confirmed as a true record and signed by the chair.

Minute 11 Resolution 1 should read Early Help Service, not Early Health Service.

20 VOLUNTARY AND COMMUNITY SECTOR UPDATE

Nicki Hastie, Policy and Communications Manager at Nottingham CVS introduced an update report to the committee on the Voluntary Sector which is appended to these minutes. She highlighted the following information:

- (a) The findings from the NCVS research conducted during Summer 2016 were published in April 2017. Headline statistics show an increase in demand for services in 71% of respondents. 48% have been able to increase their delivers and 22% have needed to reduce volume of services due to cuts in funding. 34% of respondents reported that their funding was stable which is down from 43% in the previous survey;
- (b) A Policy Forum on Food Poverty took place on 3 May. This will become a quarterly event focusing on reducing food poverty and food waste;
- (c) At a Bank of England roundtable on 26 June attendees reported that there was no evidence of economic upturn or recovery for service users who are presenting with increasingly complex needs;
- (d) Children and Young People's Provider Network and Vulnerable Adult's Provider Network membership continues to grow and work is spread evenly between the Local Authority and Clinical Commissioning Group. The funding for the networks for this financial year is yet to be resolved;
- (e) NCVS will be running a practice development unit (PDU) for Opportunity Nottingham with the aim to share good practice when working with people with complex needs;
- (f) Dave Robinson has now finished in post as acting Chief Executive, Louise Craig will be the new Chief Executive and starts in post on 17 July 2017;

Following questions and discussion the following information was highlighted:

- (g) It is hoped that the PDU will expand in function in the future and aims to provide online learning, workshops and action learning sets. The impact of the unit will be researched independently.
- (h) Nottingham City Council always goes out to competitive tender for services, however more work could be done to ensure that the voluntary sector service providers are more prepared to bid competitively;

RESOLVED to thank Nicki Hastie for her attendance and to note the content her report.

21 NCC AND CCG JOINT COMMISSIONING PRIORITIES 2017/18

This item was withdrawn from the agenda and deferred to the Commissioning and Procurement Sub-Committee meeting on 12 September 2017.

22 SECTION 256 COMMISSIONING ARRANGEMENTS - KEY DECISION

Kaj Ghattora, Provider Performance and Development Manager, presented a report on the Section 256 Commissioning arrangements highlighting the following points:

- (a) Section 256 agreements allow local authorities to receive funds from the NHS for health, social service and housing related functions. This transfer of powers

help to enable health and local authority partners to work together more effectively;

- (b) Funds currently held under this Section 256 agreement will be used to support initiatives that aim to:
- improve lives and outcomes for Nottingham Citizens
 - improve service provision
 - focus on key objectives outlined in Nottingham City Council's Nottingham 2020 Plan;

RESOLVED to:

- (1) Delegate authority to the Director of Commissioning and Procurement to approve the spend of monies transferred to Nottingham City Council from Nottingham City Clinical Commissioning Group (CCG) to commission a range of co-commissioned activities (as listed in appendix 1 of the report) and award appropriate contracts.**

Reasons for decision

- (1) Resources will continue to be effectively allocated which supports a range of initiative shared with Nottingham City CCG and which aim to improve the health and wellbeing of Nottingham citizens. It also allows the Council to ensure that it is abiding by the authorities financial regulations.

Other options considered

Nottingham City Council could choose not to work Nottingham City CCG and not receive the Section 256 monies. This would lead to a range of services being decommissioned that would adversely impact on citizens. For this reason this option was rejected.

23 CONTRACT FOR THE SUPPLY AND DELIVERY OF STATIONARY AND COMPUTER CONSUMABLES - KEY DECISION

Steve Oakley, Head of Contracting and Procurement presented a report on the Contract for the supply and delivery of stationery and computer consumables highlighting the following points:

- (a) The current contract was establish some time ago and has since expired. It no longer represents best value for money for the Council;
- (b) Historically, individual teams have held their own budget for these items. Procurement colleagues are working hard with Finance colleagues to collate historic data and to establish centralised control of the budget;

RESOLVED to:

- (1) Approve the decision to undertake the procurement for a new 4 year contract for the supply of stationery and computer consumables;**

(2) Delegate authority to the Corporate Director for Commercial Operations to award the contract

(3) Hear a verbal update from the Provider Performance and Development Manager at the October meeting on progress, detailing previous years' costs, current year costs and expected savings;

Reasons for decision

(1) The current contract has expired and no longer represents best value for money. Undertaking procurement for a new contract and establishing centralised control will allow the Council to achieve better value for money and maintain day to day business.

Other options considered

The Council continues to require stationery and computer consumables in order to maintain day to day business, and so the option to do nothing was not considered viable.

24 PROCUREMENT OF CARE, SUPPORT AND ENABLEMENT SERVICES, (OUTREACH AND ACCOMMODATION BASED SERVICES) FOR VULNERABLE ADULTS - KEY DECISION

Christine Oliver, Head of Commissioning, presented a report on the Contract Extension for Care Support and Enablement Services Contract highlighting the following points:

- (a) The current framework provides specialist community outreach and accommodation based support to vulnerable adults with a range of needs and will expire on 30th September 2017;
- (b) There are a number of issues that need further exploration while a review of the service takes place. These include understanding the future needs of vulnerable adults and how to meet them in line with policy directives;
- (c) These issues require significant engagement with operational teams, providers, service users and business stakeholders. The ability to consider best practice from other local authorities and clinical commissioning groups will result in better care and better value;
- (d) The review has highlighted that there are an increasing number of packages being purchased from providers not within the current framework at a higher cost;

RESOLVED to:

(1) Approve the dispensation of Contract procedure Rule 5.1.2 in accordance with Financial Regulations (3.29) operational issues to allow

for a 6 months extension of the Care Support and Enablement framework and the Fairhaven contract from 1st October 2017 until 31st March 2018.

Reasons for decision

- (1) The current framework of providers is due to end on 30th September 2017 as is the Fairhaven provision. The current review of the service model has highlighted a number of issues that require further time to develop and the extension of the existing framework will allow the Council to continue to provide services to vulnerable adults who require the complex and flexible support whilst issues raised are explored;
- (2) The extension provides the opportunity to look at more suitable options for the future commissioning of Care Support and Enablement. This will work towards reducing the Spot contracts which have a higher cost and will help to deliver better value for money;

Other options considered

The Council could consider undertaking a procurement exercise at the end of the existing contract. However, there is not enough time to complete this work within the timeframe and the new Care Support and Enablement model is still being developed. Additional time is required to consider the finances, policy directives and social issues raised in consultation which will lead to better care and improved value for money. For this reason this option was not considered appropriate.

The other option considered is to do nothing. This option was dismissed as existing contracts have to continue in order to ensure continuity of service delivery to citizens. Allowing existing contracts to expire would not be a viable option.

25 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 as defined in paragraphs 5 of part 1, Schedule 12A of the Act.

26 PROCUREMENT OF CARE, SUPPORT AND ENABLEMENT SERVICES (OUTREACH AND ACCOMMODATION BASED SERVICES) FOR VULNERABLE ADULTS - KEY DECISION - EXEMPT APPENDIX

RESOLVED to note the content of the exempt appendix to the report on Procurement of Care, Support and Enablement Services (Outreach and Accommodation based Services) for Vulnerable Adults.

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Agenda Item 5

COMMISSIONING AND PROCUREMENT SUB-COMMITTEE
12 SEPTEMBER 2017

Subject:	Crime and Drugs Partnership Contract Approval		
Corporate Director(s)/ Director(s):	Katy Ball, Director of Commissioning and Procurement Alison Challenger, Director of Public Health Colin Monckton, Director of Strategy and Policy		
Portfolio Holder(s):	Councillor Graham Chapman, Deputy Leader/Portfolio Holder for Resources and Neighbourhood Regeneration Councillor Nick McDonald, Portfolio Holder for Adults and Health Councillor Toby Neal, Portfolio Holder for Community and Customer Services		
Report author and contact details:	Christine Oliver Head of Service Commissioning 01158 765725 Tim Spink, Head of Service Crime and Drugs Partnership 0115 8764506		
Key Decision	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Subject to call-in	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Reasons: ✓ Expenditure <input type="checkbox"/> Income <input type="checkbox"/> Savings of £1,000,000 or more taking account of the overall impact of the decision	<input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Capital		
Significant impact on communities living or working in two or more wards in the City	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Total value of the decision: Up to £1,407,410			
Wards affected: All	Date of consultation with Portfolio Holder(s): Councillor Chapman 23/08/2017 Councillor McDonald 30/08/2017		
Relevant Council Plan Key Theme:			
Strategic Regeneration and Development	<input type="checkbox"/>		
Schools	<input type="checkbox"/>		
Planning and Housing	<input type="checkbox"/>		
Community Services	<input checked="" type="checkbox"/>		
Energy, Sustainability and Customer	<input type="checkbox"/>		
Jobs, Growth and Transport	<input type="checkbox"/>		
Adults, Health and Community Sector	<input checked="" type="checkbox"/>		
Children, Early Intervention and Early Years	<input checked="" type="checkbox"/>		
Leisure and Culture	<input type="checkbox"/>		
Resources and Neighbourhood Regeneration	<input type="checkbox"/>		
Summary of issues (including benefits to citizens/service users):			
<p>The purpose of this report is to seek delegated authority to the Director of Commissioning and Procurement to directly award and extend contracts as set out in appendix 1.</p> <p>Also to seek delegated authority to transfer Police and Crime Commissioner (PCC) funding to Community Protection in line with the terms of the PCC allocation for 2017/18, as set out in appendix 2.</p> <p>The contracts included for approval within this report are part of the drug and alcohol treatment system. They include a drug and alcohol inpatient service providing inpatient detoxification for substance misusers who are unable to detox safely within a community setting; a criminal justice substance misuse treatment service for individuals whose offending is informed by substance misuse; and a supply contract for the provision of needle exchange equipment to pharmacies to reduce health harms.</p> <p>This report also covers Police and Crime Commissioner funding for Serious and Organised Crime (SOC) posts and initiatives which contribute to delivery against SOC Board priorities to pursue, prevent, protect and prepare deter against all areas of Serious and Organised Crime.</p>			
Exempt information:			
None			

Recommendation(s):	
1	To approve the extension of the 'Drug and Alcohol Inpatient' contract identified in Appendix 1 to ensure continuity of specialist services.
2	To grant dispensation from Contract Procedure Rule 5.1.2, in accordance with Financial Regulation 3.29, to award a contract for the 'Criminal Justice Treatment Service' identified in Appendix 1 to ensure continuity of specialist services.
3	To grant dispensation from Contract Procedure Rule 5.1.2, in accordance with Financial Regulation 3.29, to award a contract for 'Pharmacy Needle Exchange Provisions' identified in Appendix 1 to ensure continuity of specialist services.
4	To approve the internal transfer of the specified element of the PCC budget to Community Protection as set out in Appendix 2.
6	To delegate authority to the Head of Procurement and Contracts to sign contracts arising from recommendations 1, 2 and 3 above.

1 REASONS FOR RECOMMENDATIONS

- 1.1 To allow for relevant and necessary commissioning activity to continue in order to maintain service provision for the citizens and meet identified local need.
- 1.2 To enable timely contract variations, extensions and allocations to be made to services in order to deliver continuation of services in 2017/18 and 2018/19.
- 1.3 To enable transfer of PCC funding to Community Protection to meet the terms of the PCC grant allocation to Crime and Drugs Partnership (CDP) for 2017/18.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 A report was presented and approved at the February 2017 Commissioning and Procurement Sub-Committee ('Crime & Drugs Partnership Contract Approval 2017/18'). The report requested approval for receipt and expenditure of budgets, for direct award of a range of contracts, and for tender of services.
- 2.2 Since February 2017, work has been undertaken to identify potential in year 2017/18 and recurring savings for 2018/19 onwards across substance misuse spend.
- 2.3 Review of services that were to be tendered has been continuing in order to identify the most appropriate commissioning and procurement response and to secure best value. This report requests approval for contract extension and contract modification as set out within Appendix 1.
- 2.4 The PCC allocation letter to the CDP for 2017/18 confirmed that specified funding was to be transferred via CDP to Community Protection for the provision of Serious and Organised Crime (SOC) Posts and SOC Initiatives. This report requests approval for the transfer of said funds to Community Protection.
- 2.5 Consultation with service users is being undertaken as part of the on-going review of the criminal justice treatment pathway. Consultation will be undertaken in 2018 as part of the on-going review of drug and alcohol inpatient provision. Consultation has been undertaken as part of the Ending Gang and Youth Violence Review, which has been presented to the SOC Board to inform decisions in relation to SOC Initiatives.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

- 3.1 Competitively tendering those services set out in Appendix 1 was rejected due to the specialist nature of the services provided, on-going review of pathways with local partners, fundamental changes to level of demand, and stability of provision.
- 3.2 Cancelling the provision of the services was rejected due to the impact on the CDP overall aims to reduce substance misuse and crime.

4 FINANCE COLLEAGUE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)

- 4.1 The funding for the services covered in this report has been identified in the 2017-18 budget. It is not anticipated that levels of funding from partner contributions will be significantly altered in financial year 2018-19, however the usual break clause will apply to the contracts and can be actioned in the case of funding changes.
- 4.2 The contract extensions detailed in Appendix 1 will allow additional time to identify further potential savings against the existing contracts, and ensure value for money is maintained and improved where possible.
- 4.3 The dispensations from Contract Procedure Rule 5.1.2, in accordance with Financial Regulation 3.29, are supported by the Chief Finance Officer.

(Dee Fretwell - Commercial Business Partner)

5 LEGAL AND PROCUREMENT COLLEAGUE COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND INCLUDING LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

Procurement Observations

- 5.1 This report requests dispensation from the provisions of the Contract Procedure Rules (5.1.2) in accordance with Financial Regulations (3.29) to make direct awards of contracts for Drug and Alcohol Inpatient, Criminal Justice Treatment Services and Pharmacy Needle Exchanges Provisions as detailed in Appendix 1.
- 5.2 The proposed contract extension of 12 months for the Drug and Alcohol Inpatient Service will enable a final decision to be made regarding the future pathway. The extension of the Criminal Justice Treatment service contract as proposed will allow for further work to fully explore the commissioning need. The proposal to directly award contacts for Pharmacy Needle Exchange provision for 1 year will enable the completion of a review of pharmacy needle exchange provision, with view to deciding future arrangements.
- 5.3 During the extension periods proposed a fully compliant procurement process should be undertaken for any future provision and new contractual arrangements implemented. On this basis the recommendations are supported from a procurement perspective, as they do not exceed the relevant thresholds under the EU Procurement Regulations.

(Julie Herrod – Lead Procurement Officer)

Legal Observations

- 5.4 The procurement observations are supported and the report raises no further significant legal issues. The commissioning team has confirmed the Drug and Alcohol contract has an option to extend for a further 1 year. The proposed contract extension to the criminal justice treatment contract and to the pharmacy needle exchange contract is a direct award as there is no further option to extend but the monetary value is below the relevant EU procurement financial threshold.

(Andrew James – Team Leader Legal Services)

6 STRATEGIC ASSETS & PROPERTY COLLEAGUE COMMENTS (FOR DECISIONS RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE)

- 6.1 Not applicable.

7 SOCIAL VALUE CONSIDERATIONS

- 7.1 Recommendations have been considered in line with the Public Services (Social Value) act 2012. All services within this report aim to improve the social wellbeing of the client groups they target.

8 REGARD TO THE NHS CONSTITUTION

- 8.1 Local Authorities have a statutory duty to have regard to the NHS Constitution when exercising their public health functions under the NHS Act 2006. In making the decisions relating to public health functions we consider the NHS Constitution where appropriate and take into account how it can be applied in order to commission services to improve health and wellbeing.

9 EQUALITY IMPACT ASSESSMENT (EIA)

- 9.1 Has the equality impact of the proposals in this report been assessed?

No



An EIA is not required either because this decision applies to the extension of services for which there is an existing EIA, or because an EIA will be undertaken separately for each service area.

10 LIST OF BACKGROUND PAPERS RELIED UPON IN WRITING THIS REPORT (NOT INCLUDING PUBLISHED DOCUMENTS OR CONFIDENTIAL OR EXEMPT INFORMATION)

- 10.1 None

11 PUBLISHED DOCUMENTS REFERRED TO IN THIS REPORT

- 11.1 Commissioning and Procurement Sub Committee report, Crime and Drugs Partnership Contract Approval 2017/18, 15th February 2017.

12 OTHER COLLEAGUES WHO HAVE PROVIDED INPUT

Lucy Putland, Commissioning Manager CDP

Ian Bentley, Commissioning Manager CDP

Tim Clark, Financial Analyst CDP

Julie Herrod, Lead Procurement Officer

Andrew James, Team Leader Legal Services

Dee Fretwell, Commercial Business Partner

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Appendix 1

This table highlights the services requiring dispensation as they are to be either extended or directly awarded subject to confirmation and receipt of funding.

Current service	Value of proposed contract	Proposal	Rationale
Drug & Alcohol Inpatient (The Woodlands)	Value of proposed 12 month extension: <u>£403,466</u> Current contract value 17/18: £403,466	<u>Extension to existing contract</u> To extend the existing contract for a further 12 month period (1/04/2018 – 31/03/2019). Extension to be made through the terms of the existing Nottingham City Clinical Commissioning Group (CCG) and Nottinghamshire Healthcare Foundation Trust (NHFT) block contract.	NCC is currently an associate commissioner under the CCG & NHFT Block Contract for this service; this is a two year contract 2017/18 – 2018/19. C&PSC (December 2016) granted approval to extend this contract to 31/03/18. C&PSC (February 2017) granted approval to tender this service to commence April 2018, with acknowledgement that partnership discussions regarding potential to expand provision to include rapid access to detox from acute settings may impact on anticipated timescales. Discussions have continued regarding the expanded pathway, including with the STP Clinical Group Workshop. The local Hospital Alcohol Pathway Group has determined that the pathway is worthy of further consideration. A further extension of 12 months should allow for a final decision to be made. We now request approval to exercise our rights within the existing contract to extend for a further 12 months to 31/03/2019. Negotiation is taking place with the current provider with a view to identifying potential savings in 2018/19.
Criminal Justice Treatment Service (Clean Slate)	Value of proposed 5 month contract extension: <u>£507,729</u>	<u>Direct Award</u> To extend, through a direct award, the Criminal Justice	This contract was awarded on a 1 + 1 + 1 year basis from 1/04/2015 – 31/03/2018. The first stage of the commissioning review of this service has concluded that the current partnership criminal justice pathway,

	<p>Criminal Justice Treatment Service current contract value 17/18: £296,513 PCC (current) £922,038 PH TOTAL: £1,218,551</p>	<p>Treatment Service for the period 01/04/2018 – 31/08/2018.</p>	<p>including the focus of the police, offender management and courts, has changed and is resulting in a reduced level of referrals into the service. The most recent figures indicate that the service is running at 89% of the original number of individuals in structured treatment from when the service was commissioned. The pathway is not identifying and referring the expected number of substance users in the criminal justice system as a result of:</p> <ul style="list-style-type: none"> • The focus moving away from high volume acquisitive crime to high risk crime resulting in less individuals being arrested and presented at the custody suite. • A reduction of individuals tested for trigger offences, reducing the number of initial assessments. • A movement away from written pre-sentence reports to the courts in favour of oral reports resulting in fewer or inappropriate referrals for community treatment orders. • Fewer individuals given custodial sentences for acquisitive crime which equates to fewer prison referrals and “through the gate” sentence planning not referring offenders into treatment services. <p>Due to this unexpected change in the pathway, the Criminal Justice Treatment Service may no longer be viable in its current format.</p> <p>A new national Drug Strategy was launched in July 2017 and includes a clear criminal justice focus.</p> <p>As a result of the changes identified in the first stage of the review and the launch of the new Drug Strategy, further partnership work is required to understand the level of need and demand for this service and also the appropriate model required. An extension of 5 months (through a direct award) will ensure the commissioned service is able to respond to the changing need of partner agencies.</p> <p>The Criminal Justice Treatment Service was reduced by £450,000 through the previous tender exercise. The on-going</p>
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			commissioning review will look to establish whether further savings can be made as a result of reduced demand or other efficiencies.
Pharmacy Needle Exchange Provisions (Frontier)	Value of proposed 12 month contract extension: <u>£81,251</u> Current contract value 17/18: £81,251	<u>Direct Award</u> To extend, through a direct award, the Pharmacy Needle Exchange Provisions contract for a period of 12 months from 01/11/2017.	<p>This supply contract was awarded on a 1 + 1 + 1 + 1 year basis from 1/11/2014 – 31/10/2017.</p> <p>This is a low value contract with Frontier Medical Supplies for the provision of needle exchange equipment to pharmacy needle exchange providers. This contract was awarded following competitive tender.</p> <p>A review of pharmacy needle exchange provision is currently underway, including consideration of appropriate equipment. This review is due to be completed and recommendations implemented by April 2018. To change the supplier of pharmacy equipment as an interim measure would cause disruption to pharmacy needle exchange providers and service users (service user feedback was negative due to equipment being changed at the last change in supplier).</p> <p>Frontier has agreed to engage with this review and provide equipment which will deliver on its recommendations. Frontier are engaging with commissioners in proactively managing spend against this transactional budget.</p> <p>Following completion of the pharmacy needle exchange review the Pharmacy Needle Exchange Provisions contract will be tendered.</p>

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Appendix 2

This table highlights the Police & Crime Commissioner (PCC) funding to be transferred from the Crime & Drugs Partnership (CDP) to Community Protection for the provision of managing risk from serious and organised crime (SOC).

Service	Value	Proposal	Rationale
Serious and Organised Crime (SOC) funding 2017/18	SOC Posts: £227,199.67 SOC Initiatives: £187,763.82 <u>TOTAL:</u> <u>£414,963.49</u>	To transfer £414,963.49 funding from the CDP to Community Protection for the provision of SOC Posts and SOC Initiatives	The PCC funding allocation letter for the CDP 2017/18 included a specified £414,963.49 to be transferred to Community Protection for the provision of posts and initiatives to reduce the risk of all forms of organised crime.

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Agenda Item 6

COMMISSIONING AND PROCUREMENT SUB-COMMITTEE
12/09/17

Subject:	NCC and CCG Joint Commissioning Priorities 2017-18		
Corporate Director(s)/ Director(s):	Candida Brudenell: Director of Strategy and Resources Katy Ball: Director of Commissioning and Procurement		
Portfolio Holder(s):	Councillor Nick McDonald: Portfolio Holder for Adult Services Councillor David Mellen: Portfolio Holder for Early Intervention and Early Years Councillor Graham Chapman, Portfolio Holder for Resources, Commissioning and Procurement.		
Report author and contact details:	Chris Wallbanks, Strategic Commissioning Manager. chris.wallbanks@nottinghamcity.gov.uk Tel: 0115 8764801		
Key Decision	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Subject to call-in
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Reasons:	<input type="checkbox"/> Expenditure <input type="checkbox"/> Income <input type="checkbox"/> Savings of £1,000,000 or more taking account of the overall impact of the decision		<input type="checkbox"/> Revenue <input type="checkbox"/> Capital
Significant impact on communities living or working in two or more wards in the City			<input type="checkbox"/> Yes <input type="checkbox"/> No
Total value of the decision: N/A			
Wards affected: N/A		Date of consultation with Portfolio Holders	
		Councillor McDonald: 25.07.17 Councillor Mellen: 17.05.17 Councillor Chapman: 21.06.17	
Relevant Council Plan Key Theme:			
Strategic Regeneration and Development			<input type="checkbox"/>
Schools			<input type="checkbox"/>
Planning and Housing			<input type="checkbox"/>
Community Services			<input checked="" type="checkbox"/>
Energy, Sustainability and Customer			<input type="checkbox"/>
Jobs, Growth and Transport			<input type="checkbox"/>
Adults, Health and Community Sector			<input checked="" type="checkbox"/>
Children, Early Intervention and Early Years			<input checked="" type="checkbox"/>
Leisure and Culture			<input type="checkbox"/>
Resources and Neighbourhood Regeneration			<input type="checkbox"/>
Summary of issues (including benefits to citizens/service users):			
This report sets out the commissioning priorities for Nottingham City Council and the joint Commissioning Priorities for Nottingham City Council (NCC) and Nottingham City Clinical Commissioning Group (CCG) for 2017-2018 which will form the basis of the work programme for both organisations and will inform the prioritisation of resources.			
The commissioning priorities will provide an important catalyst for:			
<ul style="list-style-type: none"> • Improving outcomes and choice for adults, families and children • Reducing cost where appropriate • Improving service provision and • Increasing the focus on prevention and early intervention 			
Exempt information:			
None			

Recommendation(s):

1. To approve the main areas of activity identified within the NCC Commissioning Priorities Plan (Enclosure 1) and the NCC and CCG Joint Commissioning Plan (Enclosure 2)

1 REASONS FOR RECOMMENDATIONS

1.1 Agreement of the commissioning priorities for 2017/18 will establish the work programme for the City Council and the CCG and enable resources to be allocated effectively.

2 BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

2.1 Discussions have taken place with relevant partners in relation to the commissioning priorities for 2017/18. These were based on consideration of citizen outcomes, policy and legislative requirements, contractual issues, budgetary issues, time since last review, partnership priorities and deliverability. The plans will form the basis for the allocation and prioritisation of resources for the forthcoming year in order to deliver improved outcomes for Nottingham citizens, transformational change and systemic efficiencies.

2.2 This plan identifies NCC priorities and our combined priorities across health and social care provision and will underpin the work of the Commissioning Executive Group and the Health and Wellbeing Board.

2.3 As a result of this engagement and prioritisation process, commissioning activity for the coming year has been aligned as far as possible with the outcomes and priority areas identified within the Health and Wellbeing Strategy.

2.4 All reviews contribute to meeting the outcomes identified within the Health and Wellbeing Strategy and have therefore been allocated to the most relevant outcome in the appendices.

2.5 The attached plans identify activity undertaken by NCC Commissioners only (Enclosure 1) and activity that is being undertaken jointly by NCC and CCG Commissioners (Enclosure 2)

2.6 In addition to the activity identified in the plans, it is recognised that all partners will have additional priorities and 'business as usual' that will also require resource allocation.

3 OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 Other options for commissioning priorities may have been considered as part of early discussions with partners. Where these have been rejected it would be on the basis of application of the following considerations:

- Outcomes for children, adults and families
- Financial factors
- Policy Framework
- Contractual issues
- Time since last review
- Partnership priorities
- Deliverability

4 FINANCE COMMENTS (INCLUDING IMPLICATIONS AND VALUE FOR MONEY/VAT)

- 4.1 The finances associated with each area of work have not been identified within the overall plans as an in-depth analysis of spend and potential efficiencies will be undertaken for each area of activity and brought to the Commissioning and Procurement Sub Committee when appropriate.

5 LEGAL AND PROCUREMENT COMMENTS (INCLUDING RISK MANAGEMENT ISSUES, AND INCLUDING LEGAL, CRIME AND DISORDER ACT AND PROCUREMENT IMPLICATIONS)

- 5.1 This report does not raise any significant legal issues and any Crime and Disorder Act implications arising from the recommendations in this report are positive

6 STRATEGIC ASSETS & PROPERTY COMMENTS (FOR DECISIONS RELATING TO ALL PROPERTY ASSETS AND ASSOCIATED INFRASTRUCTURE (STRATEGIC REGENERATION COMMITTEE REPORTS ONLY)

- 6.1 This report has no implications in relation to property assets or associated infrastructure at this stage.

7 SOCIAL VALUE CONSIDERATIONS

- 7.1 As part of the co-productive engagement process integral to each commissioning review, consideration will be given to how the services being commissioned could improve the economic, social and environmental wellbeing in Nottingham. By virtue of the type of services being commissioned, social improvements are expected to be delivered, particularly for those receiving services, but also economic improvements are expected with regard to the terms under which service providers employ their staff. Such considerations will support compliance with Public Services (Social Value) Act 2012 and this will be embedded in any procurement process

8 REGARD TO THE NHS CONSTITUTION

- 8.1 Local authorities have a statutory duty to have regard to the NHS Constitution when exercising their public health functions under the NHS Act 2006. In making commissioning decisions relating to public health functions, we have properly considered the NHS Constitution where applicable and have taken into account how it can be applied in order to commission services to improve the health of the local community

9 EQUALITY IMPACT ASSESSMENT (EIA)

- 9.1 Has the equality impact of the proposals in this report been assessed?

No



An EIA is not required because: this report does not relate to any new service provision.

10 LIST OF BACKGROUND PAPERS RELIED UPON IN WRITING THIS REPORT (NOT INCLUDING PUBLISHED DOCUMENTS OR CONFIDENTIAL OR EXEMPT INFORMATION)

10.1 None

11 PUBLISHED DOCUMENTS REFERRED TO IN THIS REPORT

11.1 Public Services (Social Value) Act 2012

12 OTHER COLLEAGUES WHO HAVE PROVIDED INPUT

12.1 Christine Oliver: Head of Commissioning, Nottingham City Council
Tel: 0115 8765731

Jo Williams: Assistant Director of Health and Care Integration, Nottingham City Clinical Commissioning Group (since left the CCG).

NCC Commissioning Intentions 2017/18 v2

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget holder/s
1. People in Nottingham adopt and maintain Healthy Lifestyles							
<i>Continuing</i>							
1a. Drug and Alcohol Inpatient Review	Inpatient provision was out of scope for the current commissioning of substance misuse services. A review of level of need is required based on 16/17 activity	Timescales to be confirmed. All of the following to be completed by end of 17/18 <ul style="list-style-type: none"> Approval to extend contracts to 31.3.18 Partnership discussions on-going regarding RADAR. Consultation, market development and assessment against other areas to be undertaken in Q1 17/18 Review level and profile of need Review current provision Identify unmet need Options appraisal Commissioning intentions determined Current provider notified <i>Should decision be to tender, procurement plan developed and market development undertaken</i> 	IB	KB CO	Review completed. Commissioning intentions determined. Plan for any procurement in place (any procurement to begin Q1 17/18). Current providers notified.	PH PCC CCG	Alison Challenger Candida Brudenell
2. People in Nottingham will have positive Mental Wellbeing and those with Serious mental illness will have good physical health							
All activity in joint plan							

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget holder/s
3. There will be a Healthy Culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill-health							
New							
3a Care, Support and Enablement (CSE)	CSE provides supported living for citizens in their own tenancies as well as outreach support to enable participation within the community. There is a strong policy drive for citizens to be placed in 'settled tenancies' rather than residential care.	<ul style="list-style-type: none"> Analysis April 17 Plan May-June ITT September Award contract December New Service in place February 18 	CG	HJ	New CSE model in place	Adult Social Care	Helen Jones
Continuing							
3b. Social Inclusion/ Homelessness	Review of current contracts providing supported housing projects and related Independent Living Support Services for citizens at risk of social exclusion	<ul style="list-style-type: none"> Initiation Jan/Feb 17 Analysis Feb-April 17 Plan April-May 17 Recommendations to CPSC in June/July New arrangements from Q4 17/17 or Q1 18/19 	BL	KB CO	New services in place		
3c.Domestic and Sexual Violence Review	New services for Domestic Violence, Sexual Violence and prevention tendered and awarded and new services commenced April 2016. These contracts plus all other DSV services have an end date of March 2019. JCG to discuss forward plan for this in their March 17 meeting	Review to begin in January 2018 and a timeline to be agreed	IB	CM TS	New services in place		
In scope: Domestic Violence Refuges. Stronger Families & Rise Children's Workers Implementation of domestic & sexual violence contracts							

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget holder/s
3d. Criminal Justice Treatment Service Review	Contract due to end April 2018. Lease on current Adult Offender Building December 2017. The review will focus on how the service has been impacted by changes in the criminal justice system such as the split in the probation service and the re-alignment of IOM	<ul style="list-style-type: none"> Review to begin January 2017 	IB	KB CO	New services in place		
4. Nottingham's environment will be sustainable; supporting and enabling its citizens to have good health and wellbeing							
Consideration is being given to this areas of work for the forthcoming year							

Key- Initials:

Nottingham City Council

KB – Katy Ball
HJ – Helen Jones
CM – Colin Monckton
CG – Clare Gilbert
TS – Tim Spink
IB – Ian Bentley
BL – Bobby Lowen
CO – Christine Oliver

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NCC and CCG Joint Commissioning Intentions 2017/18 v5

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget Holder/s
1. People in Nottingham adopt and maintain Healthy Lifestyles							
<i>Continuing</i>							
1a. Healthy Lifestyles	To determine the most effective use of resource available from the Public health Grant in supporting citizens to increase physical activity, improve diet and nutrition, reduce obesity and reduce smoking	<ul style="list-style-type: none"> New services begin in April 17 	JW LP GM(CCG)	RS	Effective implementation of services demonstrated through monitoring	PH	Alison Challenger
2. People in Nottingham will have positive Mental Wellbeing and those with Serious mental illness will have good physical health							
<i>Continuing</i>							
2a. Integrated Mental Health Accommodation Pathways	Overall performance of MH provision is not well understood. Commissioning activity to date has not looked across areas of provision or produced joined-up plans. This is an opportunity to explore integration, particularly integration of physical and mental health in care delivery. Increase in MH presentations in general needs homelessness services. Initial 3 year contract term for supported accommodation due to expire at the end of 16/17.	Subject to initial scoping and further development of model. <ul style="list-style-type: none"> Scope – July 2016 Contracts to be extended to March 18 Initial findings of analysis Feb 17 Risk plan in place Feb 17 Phase 2 Analysis completed April 17 CEG and HWB sign off June 17 Tender process commences Oct 17 	RG RJ(CCG)	JW	Cross system plan for provision of MH services aligned to priorities in the Wellness in Mind Strategy. Further outcomes (i.e. design of services and award of contracts) subject to plan.	HRS budget Adult Social Care Budget NHS CCG Client Contributions	Candida Brudenell Helen Jones
2b.Future in Mind Transformation Plan (including CAMHS work)	Future in Mind is Government Guidance on promoting, protecting and improving children and young people's mental health and wellbeing. All areas have been asked to baseline their provision and submit an action plan.	<ul style="list-style-type: none"> Strengthen the perinatal mental health pathway across Nottinghamshire and Nottingham City March 18 Transition of young people requiring ongoing 	CAW SQ LP CR(CCG)	KB HD LA (CCG)	Delivered Yr 2 objectives.	National funding received by CCG	CCG

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget Holder/s
<p>Care for the most vulnerable children Accountability and transparency Developing the workforce</p> <p>Development of a Section 75 Agreement between NCC and CCG to formalise the joint funding arrangements</p>	<p>Supportive funding has been made available nationally.</p>	<p>mental health support upon reaching adulthood 17/18</p> <ul style="list-style-type: none"> • Further embed a system without tiers, including the development and implementation of care bundles by March 2017 • Further strengthen access arrangements for children and young people in need of emotional and mental health support by March 18 • Scope out commissioning arrangements for LAC CAMHS by March 18 • Deliver improvements to the pathway for children and young people with potential ASD or ADHD by July 2017. • Promote whole school approaches to MHWB by embedding and evaluating the Healthy Schools Health Improvement Model March 18 • Increase capacity in the system to support more CYP by March 18 • Develop a website for CYP by June 17 • S75 in place for April 17 				<p>Section 75= NCC and CCG</p>	<p>Shared and monitored through CEG Sub Committee</p>

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget Holder/s
3. There will be a Healthy Culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill-health							
<i>New</i>							
3a. Greater Notts. Self-Care STP Work stream (Preventative Services)	Self-care is a key work strand within the STP. Helen Jones is the lead for Greater Notts Self-care/edge of care services have been recognised as a key mechanism for effectively managing demand ASC are re-shaping provision to Care Delivery Groups aligned to community based care. This also supports the Looking After Each Other work (LAEO)	<ul style="list-style-type: none"> Scoping current services March –May 17 Establishing City/County Project Group Determining scope of review Evaluating vulnerable people's preventative Service 	CG JW(CCG)	HJ	Common evaluation methodology for 'edge of care' services. Development of STP self-care PID	Adult Social Care	Helen Jones
3b. Home and Nursing Care Provision including Pricing Structures	Procurement are undertaking a review of Fair Price for Care to look at standard packages for the frail elderly and at high cost packages of care. Value of residential provision is approximately £37 million. Nottingham has been identified as using residential services at a higher rate than other authorities. The Commissioning Team are now undertaking a review of the impact of 'top-ups' that was scoped last year, but not undertaken. The CCG are reviewing their offer to nursing homes and are looking at this becoming a 'pillar' within the Multi-speciality Community Provider Process	<ul style="list-style-type: none"> Tender for consultant to undertake Fair Price for Care Review April 17 Report completed Sept 17 Recommendations on older people's provision November 17 Recommendations on higher packages of care - TBC 	CG	HJ	New pricing structure for care homes. New health offer for care homes	Adult Social Care	Helen Jones
3c. Information, Advice and Support Services (including	Statutory function in line with SEND reforms	<ul style="list-style-type: none"> PID – Dec 2016 Analysis Plan – Jan 2017 	CG CR(CCG)	JW	New service/s in place, ready	Educatio n	Janine Walker

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget Holder/s
Keyworker Service, SEND Engagement and links with the LiON Directory)	Maximise the potential of commissioned services; Ask Us, Ask Iris, Keyworker Service, SEND Engagement, Dispute Resolution Service Joint work with County Council and Health. Ensure support for the Education and Health Care Plan process is sustainable (Key Workers funding is non-recurrent) Remove confusion and duplication between current range of support (commissioned and otherwise) Drive whole system use of LiON Directory Current contracts/SLAs end 31 st March 2018	<ul style="list-style-type: none"> • Report to CEG – direction of travel – March 2017 • Options Generation April 2017 • Analysis complete April 2017 • Model developed May 2017 • Spec/s developed June/July 2017 • Procurement Aug-Dec. 2017 • New service/s in place from April 2018 			to commence		Marie Halford
Continuing							
3d. Joint Health and Social Care-Development of a Savings Plan (QIPP) Work with the CCG to develop a joint savings plan	Supports integrated care. More effective and efficient cross agency commissioning	TBC	CG TBC (CCG)	HJ CW MP JW LB (CCG)		Adult Social Care and BCF	Helen Jones Maria Principe
3e. Integrated Commissioning of Health and Social Care Adult Provision -Better Care Fund (BCF)	The BCF supports integrated provision between Health and Social Care	<ul style="list-style-type: none"> • To determine the services that sit within the BCF April 17 • To develop the BCF narrative to align more closely with the STP – April 17 • To oversee and monitor the BCF throughout the year • To use the metrics to inform and promote change 	CG IS(CCG)	HJ CM DS MP JW LB (CCG)	BCF Plan will be in place	Better Care Fund	Cllr McDonald Dr M Bicknell

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget Holder/s
<p>3f. Child Development Review Phase 1 (Integrated 0-5 Children’s Services)</p> <p>In scope: Health Visitors, Family Nurse Partnership, 5-19 Public Health Nurses, Breast Feeding Peer Supporters, Children’s Nutrition Team, Early Help Team,</p> <p>Review all services and identify duplication and gaps in provision Consider evidence-based approaches and where these can be used instead of non-evidence based activity Develop a new pathway of services Develop a shared outcomes framework Consider and procure an effective integrated model</p>	<p>Maximise the potential of commissioned services; Health Visitors, FNP, Breast Feeding Peer Supporters, Children’s Nutrition Team and internal Early Help Service to work in an integrated way with a shared outcomes framework and indicator set.</p>	<ul style="list-style-type: none"> • Service model finalised by April 17 • Service Specification finalised July17 • Tender for a delivery partner to work with internal services published Autumn 2017 • Contract awarded Spring 2018 • New integrated model implemented April 2018 	<p>CAW SQ CR(CCG)</p>	<p>KB AC HB SS LA (CCG)</p>	<p>Contract awarded to a Children’s Public Health Services Provider</p>	<p>Public Health</p>	<p>Alison Challenger</p>
<p>3g. Home Care</p> <p>Review of Homecare system including Framework provision and role of internal provision. Consideration of Standard Homecare and re-design of Urgent Homecare. Aim to align with Notts County provision where practical and incorporate health related homecare</p>	<p>Current System does not have enough capacity and is under increasing pressure. Current Framework expires Dec 2017.</p>	<ul style="list-style-type: none"> • Proposed model to be signed off May 31st • Report to CPSC July • ITT to be issued August • New contracts to be issued Nov 17 • New services to be in place April 18 	<p>CG CK JW(CCG)</p>	<p>CM HJ</p>	<p>Model agreed and service contracted</p>	<p>Adult Social Care</p>	<p>Helen Jones</p>
<p>3h. Assistive Technology expansion</p> <p>Integrate existing assistive technology (AT) services (Telecare</p>	<p>Remove duplication and confusion. Build on positive findings of external evaluation. Support self-care for citizens</p>	<p>Integrated Service established by October 2016</p>	<p>DM</p>	<p>CM JW</p>	<p>New services in place</p>	<p>BCF</p>	<p>Cllr McDonald Dr M Bicknell</p>

Commissioning Activity and Scope	Rationale	Key Milestones	Lead/s	Director /Sponsor	Year End Outcome – where will we be?	Funding Source/s	Budget Holder/s
and Telehealth) into a single service. Develop an AT commercial service. Provide clinical hub video conferencing support for care home residents. Develop new AT initiatives.	Reduce admissions from care homes Harness new technologies.	<ul style="list-style-type: none"> Commercial service established by April 2017 Clinical hub operational by October 2016 					
4 Nottingham's environment will be sustainable; supporting and enabling its citizens to have good health and wellbeing							
Consideration is being given to this outcome in relation to work planned for the coming year							

Key- Initials:

Nottingham City Council

CB – Candida Brudenell
 KB – Katy Ball
 HJ – Helen Jones
 HB – Helen Blackman
 CM – Colin Monckton
 HD – Helene Denness
 CG – Clare Gilbert
 RG – Rasool Gore
 SQ – Sarah Quilty
 DM – Dave Miles
 CAW – Chris Wallbanks
 CW – Ceri Walters
 RS – Rachel Sokal

Nottingham City Clinical Commissioning Group

DM – Dawn Smith
 SS – Sally Seeley
 LA – Lucy Anderson (mat leave being covered by Jane Godden)
 JG – Jane Godden
 MP – Maria Principe
 JW – Jo Williams (since left CCG)
 CR – Charlotte Reading

 RJ – Rachel Jenkins
 LP – Lucy Peel
 CK – Claire Kent
 GM – Gemma Markham