



HEALTH & WELLBEING BOARD ADDENDUM

4.00PM, TUESDAY, 12 JULY 2016

AUDITORIUM - THE BRIGHTHELM CENTRE



ADDENDUM

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Health and Wellbeing Board
12th July 2016
Public Questions

1. Question from Valerie Mainstone

At the June Health and Wellbeing Meeting you stated, in answer to a question, that the Healthy Child Programme (HCP) was being put out to tender because of legal requirements.

Given the fact that other areas, such as our near neighbours in West Sussex, are not putting their services out to tender and that you also stated that a service provided by the current provider has a number of benefits, why do you not stop the tendering now? You will also have seen the results of the first Citizens' Health Services Survey - 90% of people want these (HCP) services to stay with the NHS.

Response

Thank you for your question.

The report on the Public Health Community Nursing Commissioning strategy presented to the Health and Wellbeing Board on 15th March 2016, explains that Brighton and Hove City Council is subject to the Public Contracts Regulations 2015 and must comply with the overriding principles of transparency, non-discrimination and equality in the process of procuring and awarding all contracts including Public Health contracts.

The value of the services for the Public Health Community Nursing services exceeds the threshold of £589,148.00 and were therefore advertised in the Official Journal of the European Union (OJEU) by way of the placement of a Prior Information Notice (PIN) as per the regulations. The regulations state that if providers come forward as a response to the PIN then a tender process should be undertaken.

Failure to advertise the contract would have been a breach of the Public Contracts Regulations 2015 and the Council's Contract Standing Orders. Such a breach could result in any contract awarded directly being declared ineffective and a fine being imposed, or the Council being open to a claim for damages

The Health and Wellbeing Board delegated authority to the Director of Public Health to place a PIN pursuant to the requirements of the Public Contracts Regulations 2015 and to carry out to a competitive procurement process if alternative providers come forward.

We cannot comment on the commissioning process of neighbouring local authorities, however for the record West Sussex County Council has indicated that there is no decision as to their intentions to re procure the Healthy Child Programme services or otherwise.

2. Question from Mr Kapp

Will the HWB and CCG follow the lead of Swindon CCG who have the shortest referral to treatment (RTT) waiting time in the England for talking therapies?

Notes to this question

1 In August 2013 Channel 4 News covered award-winning Swindon, who have provided the best mental health service in England by providing free courses since 1993 to teach patients how to look after themselves better. I attended a study day with them, and wrote it up in paper 9.63 of www.reginaldkapp.org dated 9.9.13, titled 'Report on LIFT psychology. Creating a patient-centred mental health service Swindon fashion.'

2 Last Tues, 5.7.16, I attended a conference in London 'Psychological therapies for severe mental illness' at which the following people presented papers on how they provide the most cost effective service in the country. Thomas Kearney, Associate Director of Commissioning, Urgent Care Lead, Swindon CCG, thomas.kearney@swindonccg.nhs.uk, and Dr Sarah Hunt, clinical psychologist, LIFT, sarah.hunt10@nhs.net

Response

Thank you for your question

When we re-commission services we will ensure that the new service design reflects national best practice.

3. Deputation – Carl Walker

A deputation has been received from Carl Walker and signed by the appropriate number of supporters.

Deposition- Findings from the first Brighton Citizens Health Services Research

- First of all I would like to thank the board for the opportunity to feedback the findings of this project. I would like to start with providing a very brief academic background to this project.
- In key guidance documents issued to CCGs on governance, it is recommended that CCG's have a responsibility to ensure that patients and the public are actively involved in commissioning arrangements. However CCGs are also accountable to multiple other agencies (Checkland, 2013).
- Recent reports from clinicians across England, documented in the British Medical Journal, describe dysfunctional commissioning processes in areas undergoing competitive tendering, with compromised patient pathways and where cost-efficiency seems to be the overriding quality (BMJ 2015; 350:h149).
- Very recent research suggests that, for a second year in a row, health care professionals, including commissioners, do not feel CCG policies reflect their own

views and that they have very little chance to impact CCG's policy decisions (Murphy, 2015).

- There is however strong evidence that patient participation is linked to better treatment results, higher patient satisfaction and more responsive services. It is suggested that there is a need to look for additional ways through which to engage with the public, beyond the traditional set-piece consultations (Hudson, 2015).
- With this in mind, the first Brighton Citizen's Health Services Survey (BCHSS) was conceived by academics at the University of Brighton to explore some of the broader questions about healthcare commissioning that often get missed during traditional consultation. Such questions are important and can relate directly to the quality of services that people experience.
- The project has been developed using a distinctive approach to survey design that is aligned to public engagement, participation and critique rather than toward the more typical production of a validated instrument and knowledge form. Hence to ask people questions about things they 'may not know'.
- These consultations are not about patients' experience of their local services directly but rather seek to capture rich data representing the voices of the people of Brighton and Hove on important topical health issues like funding cuts, NHS privatisation and the broader link between local commissioning and national funding policy directives.
- 1,300 residents of Brighton and Hove were asked to take a survey of 8 questions based on key current and upcoming commissioning issues. These focussed on core values on health commissioning, current commissioning issues and future commissioning plans.

The key findings were as follows-

- When asked who they would prefer to be treated by, almost **88%** of the respondents said the NHS. This compared with **9.1%** who had a preference for a private healthcare company.
- When asked whether people believed that "health companies should not make financial profit from people's health problems", **92%** strongly agreed or agreed with this statement.
- Participants were asked whether, in light of Optum's international legal difficulties, there should have been a full public consultation on Optum. **93%** said that there should have been.
- Over **93%** of people said that they were concerned or very concerned about the award of the Optum contract locally.
- The council recently revealed an intention to cut £21.9 million over the next 4 years from the Adult Social Care budget. Over **97%** of people were either very concerned or concerned about these cuts.
- **97%** of people either strongly agreed or agreed with the following statement, 'The council should be actively resisting these latest cuts by evidencing their impact and sending the messages back to central government'.
- In 2016 and 2017 the Brighton and Hove Clinical Commissioning Group (who buy in local health services) are considering inviting health providers to bid to

- run a primary care mental health service. **93%** of people would be very concerned or concerned if this contract was given to a private provider.
- Similarly, regarding the potential contract for NHS 111 service for non-emergencies, **85%** of people would be very concerned or concerned if this contract was given to a private provider.
- The Public Health contract for Health Visiting, School Nursing and other children's community health services is due for renewal by the end of March 2017. **90%** of people said that they would prefer that this stayed with the NHS.

There were four key conclusions-

1. This report shows that the public in Brighton and Hove hold clear and compelling values on the way that they want their health services to be commissioned. There is a need for space where these can be explored and reflected on.
 2. In the city of Brighton & Hove, a vast majority of the public are against the use of private companies in the local health economy and very concerned about some recent decisions that have been made to commission private companies to undertake certain services.
 3. We hope that in future Brighton CCG will reflect these public needs and values in their commissioning decisions.
- So is it intended that this deposition, and the project on which it is based, constitutes an attack on Brighton & Hove CCG and Healthwatch? Most certainly not. It is simply to use the University's public education remit to provide a space to ask questions that the current national commissioning infrastructure makes it difficult for other organisations to ask. It is intended that the Brighton Citizens' Health Services Survey will continue as the beginning of a broader project where the CCG and local council can hopefully benefit from a University platform which hosts innovative ways to reflect on the disparity that has arisen between the CCG commissioning infrastructure and public values.

Bibliography

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