

# EXECUTIVE MEMBER DECISION



<b>REPORT OF:</b>	Executive Member for Public Health and Wellbeing
<b>LEAD OFFICERS:</b>	Director of Public Health and Wellbeing
<b>DATE:</b>	27 <sup>th</sup> February 2024

<b>PORTFOLIO/S AFFECTED:</b>	Public Health and Wellbeing
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<b>WARD/S AFFECTED:</b>	All
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<b>SUBJECT: Local Improvement Services (LIS) agreements</b>
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## 1. EXECUTIVE SUMMARY

Local Improvement Services (LIS) have been delivered via GPs and Pharmacies in Blackburn with Darwen since 2013. In 2021 the Council submitted a contract waiver to continue the delivery of these services and the following paper details how we propose to renew those arrangements moving forward.

Blackburn with Darwen will use Direct Award Process B to procure delivery of these services over the next 3 to 5 years, and will comply with the transparency and record keeping requirements as set out in the new Health Care Services (Provider Selection Regime) Regulations 2023 (PSR) and in the accompanying statutory guidance.

LIS agreements in the Blackburn with Darwen area cover the following delivery of public health interventions:

- The delivery of the Stop Smoking Service and Nicotine Replacement Therapy (NRT) Dispensing Service;
- The provision of an Emergency Hormonal Contraception (EHC) service involving the supply of Levonorgestrel where appropriate
- The provision of a service for Intrauterine Contraceptive Device (IUCD)
- The provision of the service for the Long Acting Reversible Contraception (LARC)

## 2. RECOMMENDATIONS

That the Executive Member agrees to:

- The re-procurement of Local Improvement Services via the Direct Award process B route under the new Provider Selection Regime (PSR) Regulations 2023.

### 3.BACKGROUND

The Local Improvement Services (LIS) were initially commissioned as Locally Enhanced Services (LES) in 2013 following the Public Health function's move to the local authority. The LES and subsequent LIS have operated in the same way across other areas nationally since 2013 and the model of delivery through GPs and Pharmacies is fundamentally the same and has not changed.

In order to ensure equity is maintained and consistency in practice is kept in line with other local authorities nationally, the continuation of the current model under the LIS is essential. The potential option of putting these services out to procurement could potentially provide risk to providing an equitable and open service to the residents of Blackburn with Darwen. This may be due to the primary care providers not submitting successful tenders due to capacity challenges and business development capacity to interact with the local authority procurement systems. The risk of a challenge to direct award is very low or unlikely as these services can only be delivered by specialist professionals within a GP and pharmacy setting.

The LIS services will be offered via all GP practices and pharmacy settings in the Blackburn with Darwen area who can comply with the service specifications for the relevant services.

Providers (GPs & Pharmacies) who are able to deliver Local Improvement Services (LIS) will be reviewed, monitored and the overall accessible providers will be updated on an ongoing basis by the Public Health commissioners along with the Contracts team of Blackburn with Darwen Borough Council. Providers (GPs and pharmacies) have the opportunity to enter the 'provider list' to provide LIS throughout the contract term.

Therefore the Provider Selection Regime (PSR) Direct award option B is proposed.

### 4.KEY ISSUES & RISKS

Timescales of current provision are on an annual basis. The PSR process and route as an option would also allow continuity of service offer from the 1<sup>st</sup> April 2024.

The risk of a challenge to direct award is considered to be very low or unlikely as these services can only be delivered by specialist professionals within a GP and pharmacy setting.

### 5. POLICY IMPLICATIONS

Local authorities have a duty to take necessary steps to reduce inequalities and improve the health of their local populations. To ensure we reach the priority populations within Blackburn with Darwen and deliver effective community services we have taken into account the following strategies and key documents:

- Health and Wellbeing Strategy 2023-28
- Joint Strategic Needs Assessment.
- Council Corporate Plan 2023-27.
- Early Help Strategy.
- Health Equity Audit findings
- Core 20 Plus 5 Priorities [NHS England » Core20PLUS5 \(adults\) – an approach to reducing healthcare inequalities](#)
- Recommendations from the Healthwatch Blackburn with Darwen Smoking Cessation Report 2023
- Priorities of the Tobacco Free Lancashire & South Cumbria Strategy
- Priorities of the Blackburn with Darwen Sexual Health Strategy

- NHS Long Term Plan - Treating Tobacco Dependency Programme [NHS England » Guide for NHS trust tobacco dependence teams and NHS trust pharmacy teams](#)

## 6. FINANCIAL IMPLICATIONS

The estimated value for the Local Improvement Services (LIS) in 2023/24 is £284,400 analysed as follows:

Nicotine Replacement Therapy - £118,000  
Stop Smoking Service - £41,400  
Emergency Hormonal Contraception - £55,000  
Intrauterine Contraceptive Device - £35,000  
Contraception - £35,000

The LIS service is fully funded from the annual Public Health grant allocations. There are no additional financial implications for the Council as a result of the proposals contained in this report. The value of the contract varies based on activity delivered on a tariff- based payment method, however, the activity levels are expected to remain within the grant funded budgets detailed above. The contract is being offered on a 3 year +1+1 option starting from 1st April 2024 until March 2027 with potential to extend to March 2029 as detailed in the template attached in the background paper section.

## 7. LEGAL IMPLICATIONS

PSR will require us to publish the template attached and service specifications on the CHEST system for procurement in order to comply with the new regulations.

Relevant grant conditions (spending, reporting, financial management) must be complied with as set out in Public Health Ring-fenced grant determination 2024 to 2025: No 31/7057 (see circular linked in section 8 below) or there is a risk of reduction of grant and/or clawback.

## 8. RESOURCE IMPLICATIONS

There are no changes to the existing arrangements and resource capacity needed.

The funding for the Local Improvement Services (LIS) are from the Public Health grant allocation to local authorities - [Public health ring-fenced grant financial year 2024 to 2025: local authority circular - GOV.UK \(www.gov.uk\)](#).

## 9. EQUALITY AND HEALTH IMPLICATIONS

**Please select one of the options below. Where appropriate please include the hyperlink to the EIA.**

Option 1  Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2  In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. *(insert EIA link here)*

Option 3  In determining this matter the Executive Board Members need to consider the EIA associated with this item in advance of making the decision. *(insert EIA attachment)*

## 10. CONSULTATIONS

No consultations are required for the Direct award B Provider Selection Regime (PSR) process.

## 11. STATEMENT OF COMPLIANCE

The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

## 12. DECLARATION OF INTEREST

All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded and published if applicable.

<b>VERSION:</b>	<b>1</b>
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<b>CONTACT OFFICER:</b>	<b>Lee Girvan/Hira Miah</b>
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<b>DATE:</b>	<b>6/2/2024</b>
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<b>BACKGROUND PAPER:</b>	Provider Selection Regime (PSR) template for direct award  LIS_PSR_Direct Award B Process_v3_3
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