

**16 October 2023****Agenda Item: 1****REPORT OF THE DIRECTOR OF PUBLIC HEALTH****INTEGRATED SEXUAL HEALTH SERVICE CONTRACT EXTENSION (PUBLIC HEALTH)****Purpose of the Report**

1. To seek approval from the Cabinet Member for Adult Social Care and Public Health to extend current Nottinghamshire Integrated Sexual Health Service (ISHS) contracts for six months from 01 April 2024 to 30 September 2024. This extension will allow appropriate time for the completion of procurement of the new Nottingham and Nottinghamshire Integrated Sexual Health Service (NNISHS).
2. To seek approval from the Cabinet Member for Adult Social Care and Public Health to extend the current online sexual health testing service via the Office for Health Improvement and Disparities (OHID) national framework for e-sexual and reproductive healthcare for six months from 01 April 2024 to 30 September 2024, to complement the proposed extension of current ISHS contracts.
3. This is a key decision for the Cabinet Member for Adult Social Care and Public Health as the total cost of a six-month contract extension exceeds £1 million and the extension relates to a service that is open to residents across all electoral divisions.

**Information**

4. The main goal of sexual health services is to support residents to make informed, positive choices about their reproductive and sexual health at every stage of their lives, and to prevent the harms to health that are associated with unplanned pregnancy and sexually transmitted infections (STIs). In addition to supporting individuals, sexual health services also play a vital role in protecting the health of the wider population, by preventing spread of infections through early diagnosis and treatment.
5. Nottinghamshire residents currently have access to high quality sexual health services across the County that provide contraception, testing and treatment for STIs and access to accurate, trusted information and advice. These services are primarily provided through the Integrated Sexual Health Service (ISHS) and are available at times and in places that best meet the needs of residents. Services also aim to address known health inequalities through targeted outreach into the community, to support those at greater risk of poor sexual health outcomes.

6. Under the Health and Social Care Act 2012, the Authority is mandated to commission comprehensive sexual health services. In Nottinghamshire, ISHS services are currently provided by Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust in Bassetlaw and Sherwood Forest Hospitals NHS Foundation Trust in Mid Nottinghamshire. Services for South Nottinghamshire are jointly commissioned with Nottingham City Council and are provided by Nottingham University Hospitals NHS Trust. To increase access to STI testing, the Authority also commissions an online STI testing service provided by Preventx.
7. As current ISHS contracts are due to end on 31 March 2024, a procurement is now underway for a Nottingham and Nottinghamshire Integrated Sexual Health Service (NNISHS). Approval was granted in April 2023 to procure and then award this contract. The Authority is undertaking this procurement on behalf of both Nottinghamshire County Council and Nottingham City Council, with the aim of delivering a high-quality modern service aligned to the objectives and outcomes set out within the agreed service model.

### **Current Situation**

8. The procurement procedure the Authority has chosen is Competitive Procedure with Negotiation. This approach is most likely to ensure the service procured maximises sexual health outcomes and provides best value for residents. However this procedure requires a flexible timescale, to allow for the option to negotiate with one or more bidders, in order to challenge and refine their solutions.
9. The time required for a rigorous and robust procurement process to be completed under this model is uncertain, as it is dependent on market response and the extent of negotiation required with bidders. However, a review of estimated timescales suggest that it is unlikely the contract can be awarded in sufficient time to allow a full and effective mobilisation of the new service by 01 April 2024, as is currently planned.
10. It is estimated that there will be between two months at least and five months at most available following contract award, for the successful bidder to fully mobilise the new service. The standard minimum mobilisation period for a clinical service of this complexity and scale is six months. Therefore, there is a significant risk that the new service cannot be safely and effectively mobilised within the available time. This would result in a gap in delivery of a statutory service.

### **Contract Extension Proposal**

11. To ensure sufficient time to conclude a rigorous and robust procurement process, award a contract and subsequently mobilise the NNISHS, a six-month extension of existing sexual health service contracts is proposed. Agreements in principle to the proposed extension have been secured from the three current ISHS providers and the online sexual health testing provider. The current service in the South of the County is jointly commissioned by Nottingham City and Nottinghamshire County Councils. City Council commissioners agree that a six-month contract extension is necessary and have secured approval for this within their Authority.
12. The six-month proposed ISHS contract extension will be based on terms and conditions of the current contracts but on a block contract rather than tariff based by activity. This will give

current providers financial certainty and a reasonable period of delivery to commit to. Conversations have been undertaken with current providers to ensure the extension would mirror current contracts as closely as possible, ensuring best value for money whilst taking in to account additional costs providers may reasonably incur because of a short-term extension.

13. There are risks associated with extending the current contracts. The six-month contract extension period creates an additional period of uncertainty for current providers and hinders their ability to make long term strategic decisions and investments to fill staffing vacancies and alter their service provision to better meet changing sexual health demand. However, the intention is to manage these risks through close support within contract management meetings and effective early engagement regarding mobilisation.
14. The risk of not extending contracts is greater because there is unlikely to be sufficient time to mobilise the service, resulting in a potential gap in delivery of a statutory service.
15. Based on our best assessment of likely progress of the current procurement, we consider that the risk of further delay is very low. The procurement of the new service is in the final stages of evaluation and the contract extension will enable robust evaluation to ensure a high quality sexual health service is procured.

### **Contract extension budget**

16. At current contract value, the six-month budget required for these services would be £2.8 million. Taking into consideration an estimate of reasonable additional costs identified through negotiation with current providers, a required budget allocation of up to £2.9 million is necessary to extend current Nottinghamshire ISHS contracts for six months from 01 April 2024 to 30 September 2024. Commissioners are working to ensure that costs are contained and ISHS continue to represent value for money for residents.
17. Additional costs associated with the delivery of these services are routinely planned for within the overall sexual health budget, relating to possible Agenda for Change pay uplifts to staff, and additional service delivery for residents from parts of Nottinghamshire outside of the geography covered by each service. Including estimates based on previous years costs this increases the overall estimated budget envelope to £3 Million. This budget is affordable within the Public Health Grant. The budget will be set out for approval in the annual budget proposal at Full Council in February 2024, after being recommended in January 2024 at Cabinet.

### **Other Options Considered**

18. An assessment of feasible options to mitigate the risk of being unable to mobilise the NNISHS by 01 April 2024 was completed by commissioners from both Nottinghamshire County and Nottingham City Council, with advice from County legal and procurement teams. Several different routes were considered by commissioners.
19. The option to do nothing, continue with the current procurement timeline and not seek an extension of current ISHS contracts was not preferred. If negotiation is required, it is likely that mobilisation of the new service would not be able to begin until January 2024. This would require a new and complex service to mobilise in under three months. A standard minimum mobilisation period for a clinical service of this complexity would be six months and therefore there would be a significant risk of a gap in delivery of a statutory service.

20. The option to change the current competitive procedure with negotiation model to an open tender was explored. Whilst an open tender would negate the need to negotiate with bidders on their proposals, procurement and legal teams advised commissioners that changing the model would not be viable, as it would require the current tender to be abandoned and a new process started. The current model was selected as commissioners consider it to be the optimum procurement route, with the option to negotiate providing an opportunity to secure the best service offer for residents.
21. The option to shorten the timeline of the procurement process was not a preferred option. Whilst shortening the amount of time bidders have to complete tender documentation is possible, this option was ruled out as bidders require sufficient time to create detailed and comprehensive solutions to meet the complex requirements of the service specification. It was also determined that commissioners require adequate time to diligently and robustly evaluate bids to ensure a fair process. This will ensure the Authority selects the bid that offers value for money and the best outcomes for residents and mitigates against potential legal challenge from the market.
22. The option to delay seeking a contract extension until there is greater certainty around time required to complete the procurement process was considered. This option would require commissioners to wait until initial tender bids were received from bidders to assess whether negotiation is likely to be needed. This was not a preferred option as commissioners would not be able to effectively determine whether negotiation was necessary until mid-October 2023. As a result, if negotiation were required, there would be insufficient time to provide reasonable notice to current providers of a contract extension, agree extension terms and seek necessary approvals.

### **Reason/s for Recommendation/s**

23. The extension of existing ISHS and online testing service contracts for six months is considered by commissioners to provide the lowest risk option of ensuring good quality accessible sexual health services are available to residents in the short term and a high-quality service meeting the expectations of the new NNISHS model is available in the long-term.
24. The extension will mirror current ISHS contracts as closely as possible, which state that any extension period shall not be shorter than six months. Although the recommended contract extension is outside the current contract terms, commissioners believe that six months is the most feasible extension period for current providers to commit to, whilst also providing a reasonable mobilisation timeframe for the new service.
25. Although there will be a delay in the start of the new enhanced NNISHS, the proposed extension of current contracts will ensure that local residents experience no break in service and that commissioners are able to negotiate the best future service possible to improve sexual health outcomes.

### **Statutory and Policy Implications**

26. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty,

safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## **Financial Implications**

27. Public health services are funded by the public health ring-fenced grant, which is transferred annually to Nottinghamshire County Council from the Department of Health and Social Care and is reserved for the delivery of specific public health functions. The financial implications of the proposed approach outlined in this paper can be contained within the public health grant.
28. As described in paragraphs 15 and 16, the budget allocation to extend current Nottinghamshire ISHS contracts for six months from 01 April 2024 to 30 September 2024 will be up to £3 million.
29. The net financial impact of the proposed contract extension would be that a reduced budget would be required overall for sexual health in the financial year 2024/25. This would result from the delay in launch of the new enhanced NNISHS, which has a larger annual budget than the current services.

## **Consultation**

30. This report solely deals with extending the current contracts whilst the separate procurement is being undertaken. A comprehensive consultation was undertaken as part of the procurement of the new contract.

## **Data Protection and Information Governance**

31. Full Data Protection Impact Assessments (DPIAs) currently cover the existing provision of integrated sexual health services and online sexual health testing services. The contract extension recommendations make no changes to how services are currently being delivered. Relevant DPIAs will be updated at the start of April 2024 to document extensions if approved.

## **Public Sector Equality Duty implications**

32. This report solely deals with extending the current contracts whilst the separate procurement is being undertaken. Comprehensive Public Sector Equality Duty implications were fully considered as part of the procurement of the new contract.

## **Implications for Residents**

33. The overall impact of the six-month contract extension will be that local residents will have continued access to good quality sexual health services across Nottinghamshire. Although local residents will not be able to start using the new enhanced NNISHS until October 2024, the proposed extension of current contracts will ensure that local residents experience no break in service and that commissioners are able to negotiate the best service possible to improve sexual health outcomes.

## **Care Experienced People**

34. The Council has resolved to treat care experience as if it were a Protected Characteristic so that future services and policies made and adopted by the Council should be assessed through Equality Impact Assessments to determine the impact of changes on people with care experience, alongside those who formally share a Protected Characteristic. The decision proposed is not considered likely to have a disproportionate negative impact. However, care experienced young people may be at higher risk of poor sexual health outcomes, and the current ISHS providers will continue to demonstrate they have the appropriate skills and knowledge to support the specific needs of individuals with care experience, to have a positive impact on sexual health outcomes.

## **RECOMMENDATIONS**

- 1) That the Cabinet Member for Adult Social Care and Public Health:
  - a) Approves the extension of current Nottinghamshire Integrated Sexual Health Service (ISHS) contracts for six months from 01 April 2024 to 30 September 2024 to allow appropriate time for the completion of procurement of the new Nottingham and Nottinghamshire Integrated Sexual Health Service (NNISHS).
  - b) Subject to recommendation 1 (a), approves the extension of the current online sexual health testing service via the Office for Health Improvement and Disparities (OHID) national framework for e-sexual and reproductive healthcare for six months from 01 April 2024 to 30 September 2024, to complement the proposed extension of current ISHS contracts.

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### **Constitutional Comments (CD 27.09.2023)**

35. The recommendations proposed fall within the remit of Cabinet Member for Adult Social Care and Public Health by virtue of the Cabinet Member's Terms of Reference set out in the Constitution

### **Financial Comments (DG 19.09.2023)**

36. The extension of the ISHS contract for 6 months to 30 September 2024, totalling up to £3m will be met from the Public Health Grant as part of the full sexual health contract and will be included in the Public Health budget for 24/25.

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- Integrated sexual health services from 2024 (Public Health) (24 April 2023): [Decision Details: Integrated Sexual Health Services from 2024 \(Public Health\) \(nottinghamshire.gov.uk\)](#)

**Electoral Division(s) and Member(s) Affected**

- All