



**EXECUTIVE
3 MAY 2023**

PRESENT: COUNCILLOR M J HILL OBE (LEADER OF THE COUNCIL)

Councillors Mrs P A Bradwell OBE (Executive Councillor for Children's Services, Community Safety, Procurement and Migration) (Deputy Leader), Mrs W Bowkett (Executive Councillor for Adult Care and Public Health), R D Butroid (Executive Councillor for People Management, Legal and Corporate Property), L A Cawrey (Executive Councillor for Fire & Rescue and Cultural Services), C J Davie (Executive Councillor for Economic Development, Environment and Planning), R G Davies (Executive Councillor for Highways, Transport and IT), D McNally (Executive Councillor for Waste and Trading Standards) and Mrs S Woolley (Executive Councillor for NHS Liaison, Community Engagement, Registration and Coroners)

Councillors: C E H Marfleet (Chairman of the Adults and Community Wellbeing Scrutiny Committee) and R B Parker (Chairman of the Overview and Scrutiny Management Board attended the meeting as observers

Officers in attendance:-

Debbie Barnes OBE (Chief Executive), Andrew Crookham (Executive Director Resources), Glen Garrod (Executive Director - Adult Care and Community Wellbeing), Lucy Gavens (Consultant - Public Health), Carl Miller (Commercial and Procurement Manager - People Services), Heather Sandy (Executive Director of Children's Services), Professor Derek Ward (Director of Public Health), Nigel West (Head of Democratic Services and Statutory Scrutiny Officer) and Rachel Wilson (Democratic Services Officer)

67 APOLOGIES FOR ABSENCE

An apology for absence was received from Andy Gutherson, Executive Director – Place.

68 DECLARATIONS OF COUNCILLORS' INTERESTS

There were no declarations of interest at this point in the meeting.

69 ANNOUNCEMENTS BY THE LEADER, EXECUTIVE COUNCILLORS AND EXECUTIVE DIRECTORS

Councillor C J Davie, Executive Councillor for Economic Development, Environment and Planning, confirmed the announcements in the media over the previous weekend, that the Government had announced that as part of the Coronation arrangements, there would be a series of national nature reserves. He was pleased to confirm that that the first would be the Lincolnshire Coronation Coast, with two designations for areas already in existence. A formal announcement and dedication was expected in the summer.

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The national public path would be renamed in the Kings honour and would be fully open by the end of 2024.

This was an important announcement for the natural environment, and Lincolnshire had a lot to offer, and this would be a great opportunity for tourism.

70 MINUTES OF THE MEETING OF THE EXECUTIVE HELD ON 7 MARCH 2023

RESOLVED

That the minutes of the meeting of the Executive held on 7 March 2023 be signed by the Chairman as a correct record.

71 PROCUREMENT OF INTEGRATED SEXUAL HEALTH SERVICE

The Executive Councillor for Adult Care and Public Health introduced a report which invited the Executive to consider the case for re-commissioning Sexual Health Services in Lincolnshire and sought approval to procure new contracts commencing 1 April 2024. It was noted that the intention was to procure a five-year contract with a two-year extension.

The Director of Public Health summarised the report and advised that the provision of open access sexual health services was a mandatory responsibility of upper tier local authorities under the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013. It was commented that the model in Lincolnshire was complicated and was fully described in the report. It was noted that the current service, as described in the report, did perform well, and it would be ensured that the new service included all elements of the new national specification. There would also be an increased focus on the digital offer.

The Consultant in Public Health guided the Executive through some of the specific elements of the Service and advised that the current service was made up of four separate components, the main integrated sexual health service (LISH); sexual health outreach, HIV prevention and support service (SHOHPS); long-acting reversible contraception (LARC); and emergency hormonal contraception (EHC). Pre-procurement work including stakeholder engagement, service reviews and benchmarking had shown that the current service was performing well, and this intelligence had been used to develop the future delivery model. It was noted that the proposed future delivery model aligned well to the national service specification. The proposed model also included a number of enhancements including an enhanced digital offer and a broader self-care platform, but there would not be any significant changes to service delivery.

The proposed budget for the new services was £4.89m for 2024/25, which was a slight reduction on the current budget, but it was expected that any shortfall would be met by partners. Demand modelling did suggest that the budget was viable, but it would be monitored over the life of the contract in case demand exceeded expectations.

The market engagement demonstrated that there was a fairly limited market of specialist providers that would be able to deliver the integrated service and this exercise had informed the proposal. In order to maximise interest in the procurement exercise, a seven-year contract was proposed (this was a five-year duration with the option of a two-year extension) as being most attractive to the market. It was noted that the cost of clinical estate could present a barrier to some providers who did not already have an established infrastructure within the county, the availability of a mobilisation fund was proposed to increase the attractiveness of the integrated service contract.

The Chairman of the Adults and Community Wellbeing Scrutiny Committee was in attendance and presented the comments of the Committee held on 5 April 2023. The Committee had considered the report in detail and commented that it was a very good service with a good offer which had been further improved. The Committee was supportive of the cross-working across authorities with North and North East Lincolnshire. The Committee considered that improving accessibility was paramount and there was a need for people to connect better with the digital offer. It was commented that there was a need for schools to better promote the service and raise awareness of the services available. The Committee fully supported the recommendations.

During discussion by the Executive, the following was noted:

- In terms of the lack of competitiveness in the marketplace, it was queried whether the lack of property was a barrier. Officers advised that the service was currently delivered by LCHS who utilised their existing estate infrastructure around the county. The market for these types of services was relatively small, and for new providers to enter the market in Lincolnshire they would need to have estate access. The proposed mobilisation fund would assist potential providers to access property.
- It was confirmed that LCHS were not obliged to open their premises to other providers.
- Clarification was sought with regard to what the mobilisation fund could be used for, and officers advised that it would be to ensure that clinical spaces were brought up to standard. Full transparency would be required from providers in relation to how the funding had been used.
- Members were satisfied with the quality of the service but it was queried whether the authority was confident that it was getting the best value for money. In terms of benchmarking, Lincolnshire was in the middle of the peer group in terms of costs. However, it was also highlighted that the provision of integrated sexual health services was also a cost saving intervention.
- There were ongoing conversations with the ICB around how the County Council could work more closely together.
- In terms of timelines of access to services, it was queried what providers were expected to deliver. Officer advised that there was an expectation for quick access to services, with either directly access services, or requesting services such as testing kits online for delivery to a home address. Work was ongoing with GPs to improve access to these services.

- Paragraph 3.3 of the report outlined the Key Performance Indicator (KPI) measures for these services.
- It was commented that bringing private health care providers into the equation would be very beneficial.
- Lincolnshire being a large rural county could be a barrier to some providers and the county council needed to try and support the service as much as possible.
- Paragraph 2.3.5 set out that LCC had contracts with 64 GP practices for provision of Long-Acting Reversible Contraception (LARC), and it was queried whether there was an obligation for all practices to provide this service. It was noted that this was a specialised service, and the GP practices were spread across the county. The coverage of LARC services would be examined as part of the service.
- In terms of the development of the digital offer, it was queried how this would be branded. It was noted there would be an ongoing challenge around how services were branded to make them accessible to all, but in particular young people. The LISH branding would continue.
- It was confirmed that advice and guidance around lifestyle was a core part of the specification and there was a need to work more closely to ensure that more wraparound care and support was provided.

RESOLVED

1. That a procurement be undertaken to deliver an Integrated Sexual Health Service contract, commencing on 1 April 2024 for a period of five years, with the possibility of a further two-year extension.
2. That the use of up to £500,000 from the public health reserve as a fund available to the successful tenderer for the Integrated Sexual Health Service contract to assist in the mobilising of an appropriate suite of delivery locations be approved.
3. That a procurement be undertaken to deliver a Sexual Health Outreach, HIV Prevention and Support Services contract commencing on 1 April 2024 for a period of five years, with the possibility of a further two-year extension.
4. That a procurement be undertaken to deliver contracts for the provision of Long-acting Reversible Contraception, delivered by GP practices in Lincolnshire, commencing on 1 April 2024 for a period of five years, with the possibility of a further two-year extension.
5. That the inclusion in the procurement of separate lots leading to separate contracts for Sexual Health Services for North Lincolnshire Council and North-East Lincolnshire Council be approved.
6. That the entering into of an agreement under Section 75 of the National Health Service Act 2006 between the County Council and National Health Service Commissioning Board (NHSE) for pooling of budgets and exercise of NHSE functions

for the commissioning of NHS treatment and care alongside County Council sexual health services provision be approved.

7. That authority be delegated to the Executive Director of Adult Care and Community Wellbeing, in consultation with the Executive Councillor for Adult Care and Public Health and the Executive Councillor for NHS Liaison, Community Engagement, Registration and Coroners, to determine the final form of the contracts and to approve the award of the contracts and the entering into of the contracts and other legal documentation necessary to give effect to the above decisions.

The meeting closed at 11.06 am

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