## BARNSLEY METROPOLITAN BOROUGH COUNCIL

## **REPORT OF:** Executive Director – Public Health & Communities

### TITLE: Reprocurement of local Healthwatch & Complaints Advocacy Services

REPORT TO:	CABINET
Date of Meeting	12 July 2023
Cabinet Member Portfolio	Public Health and Communities
Key Decision	Νο
Public or Private	Public

# Purpose of report

This report provides an overview of the business case for the provision of local Healthwatch and the Independent Health Complaints Advocacy (IHCA) service, both of which are statutory requirements. The contracts for both services are due to expire at the end of March 2024 and the business case provides recommendations for a recommission.

### **Council Plan priority**

Healthy Barnsley

### Recommendations

- Cabinet to approve the budget from Healthier Communities (BU8) for up to five years (3+1+1) for two statutory services.
- Cabinet to authorise officers within BMBC to approach the market to inform the procurement of local Healthwatch and the Health Complaints Advocacy Service from 1<sup>st</sup> April 2024.
- Cabinet to authorise the Executive Director of Public Health & Communities to have delegated authority to award the contract for the local Healthwatch and Complaints Advocacy provider following a competitive process.

## 1. INTRODUCTION

1.1 Healthwatch England is a committee of the Care Quality Commission that serves as an independent advocate for health and social care consumers. Local Healthwatch providers must be appointed by each local authority to

achieve the objectives of Healthwatch England in compliance with the Health & Social Care Act 2012. The primary goal of Healthwatch is to bring people's voices into the heart of commissioning and delivery, both nationally and locally, and to encourage health and social care services to listen to and engage people in decisions that affect them.

The Independent Health Complaints Advocacy (IHCA) is another statutory requirement of the Health & Social Care Act 2021, which is designed to provide information, advocacy, and support for people to pursue complaints about NHS and/or social care services.

The relationship between local Healthwatch and the Complaints Advocacy provider is critical, as the information they collect and share with each other contributes to the wider picture of people's experiences with Health and Social Care services.

1.2 Healthwatch Barnsley is the voice of the community and represents the local population. Its main objective is to engage with people and health and social care services, be independent, influence health and social care services, and provide information to help local people make choices about health and social care services. The service should also be easily accessible to everyone in the Barnsley borough and work closely with key decision-making boards to represent the community's interests.

The Independent Complaints Advocacy Service (known as ICAS) in Barnsley is designed to support people who wish to complain about the NHS or social care. The service empowers people by providing information and support, including an advocate where needed, to pursue complaints. ICAS supports the process of Local Resolution, where complaints are resolved as close as possible to the point of service that has caused dissatisfaction. Whilst Healthwatch does not provide advocacy or complaints specifically, the two services do refer clients to each other

### 2. PROPOSAL

2.1 The services are required to be in place as part of a statutory duty for the local authority, and the current contracts for both elements are due to come to an end on 31<sup>st</sup> March 2024.

Specifications for both services will be reviewed before going out to market to procure the two services from 1<sup>st</sup> April 2024 for a period of up to five years.

2.2. The proposal is based on the business case option 3;

To undertake a single tender process, that are released at the same time, but with separate specification defined in two 'lots' to ensure maximum cohesion between the two services but enabling different providers to bid if required.

This would be the preferred option moving forward, following advice from Strategic Procurement. It can ensure the highest quality submissions from

one or two preferred provider organisations, as well as maximising cohesion between the two services.

## 3. IMPLICATIONS OF THE DECISION

#### 3.1 Financial and Risk

Consultations have taken place with representatives of the Director of Finance (S151 Officer).

The proposal is to recommission for the provision of local Healthwatch and the Independent Health Complaints Advocacy (IHCA) service, both of which are statutory requirements. The contracts for both services are due to expire at the end of March 2024.

The current commissioned services are provided by Barnsley CVS for Healthwatch and The Complaints advocacy services (ICAS) is provided by DIAL Barnsley. Both combined is an annual cost of £195,000. The contracts are funded £91,000 base budget and £104,000 from the Department of Health (CAS).

The contract will undertake a single tender process, that will be released at the same time, but with separate specification defined to ensure maximum cohesion between the two services.

The contracts have synergies with other services across the Authority and Efforts have been made in the last 12 months to strengthen connections, particularly with Social Care, both in terms of engagement opportunities, extending the reach, and creating more opportunities to influence and improve services, as well as conversations to promote a co-productive approach in health and social care. This will continue to be a priory as an essential element of the South Yorkshire ICAS arrangements.

### <u>Risk</u>

The latest MTFS / Transformation Paper, which requires the Services of the Authority to undertake zero-based service reviews, covers a period to the financial year 2025/26 – the recommendation to re-commission this contract for an initial 5-year basis would extend beyond that period. As the contract is partly funded by external funding from the Department of Health, there is a risk that this funding could fall out over the duration of the contract, whilst this service is statutory, we may have to look at either reducing the level of service we provide or review non statutory services to fund the shortfall.

A Risk Assessment will also be undertaken as part of the development of the new service specification to identify any issues.

### 3.2 Legal

Advice and consultation will be undertaken with legal team.

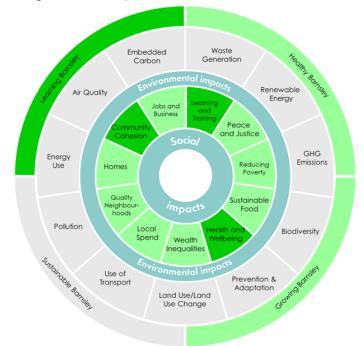
## 3.3 Equality

Full Equality Impact Assessment has been completed for previous procurement exercise. As the services will essentially both remain the same, the EIA will be updated, but the previous findings will still apply;

Healthwatch is required to be the voice of the whole community, including groups with protected characteristics. ICAS is also expected to represent the whole communities for Complaints Advocacy. There are some groups of people united by protected characteristics who often experience a differential impact in relation to health and social care services for a number of reasons; lack of knowledge/understanding, barriers to access, ability to have their voice heard.

Healthwatch should promote engagement with the whole community in relation to the health and social care services operating in Barnsley. Both Healthwatch and ICAS should also improve the experience and accessibility of all health and social care services, particularly those with protected characteristics. ICAS should also ensure that these groups are support to challenge and complain about services they have experienced, but with which they are not satisfied.

## 3.4 Sustainability



Decision-making wheel completed

Healthwatch and Complaints Advocacy services both focus primarily on engaging and involving local people, and they will provide valuable insights and experiences of local health and social care services. Health inequalities affect people and communities in different ways, and some of these can be addressed through effective involvement and engagement within communities, which can also improve community cohesion and understanding. Insights can also be used to influence and improve service planning and development, as well as really understanding the needs of different communities.

The sustainability wheel also demonstrates the positive impact in relation to 'Learning Barnsley' priority. Although the focus of both services is primarily around health and wellbeing, it was important to show that a key part of the involvement work includes providing information, support and advice. 'Education' and 'access to services' are two examples of wider factors that we know can have a positive impact on health and wellbeing

## 3.5 Employees

Healthwatch is hosted by Barnsley CVS and there are 4 paid staff (approx. 3.6 w.t.e.) as part of the core contract who would be subject to TUPE. They are employed in various roles relating to engagement, communications and management.

The Complaints Advocacy Service is delivered by DIAL Barnsley and there is 1 member of staff (0.8 w.t.e.) that would be subject to TUPE

All staff detailed are funded through their respective annual budgets.

## 3.6 Communications

Communications have been part of discussions regarding the delivery and function of both services over the last 12-18 months, and these have supported the development of the business case.

The Communications and Marketing team will support the team regarding the outcomes of the cabinet papers and any announcements arising from procurement results. Their primary objective is to ensure effective communication and dissemination of information to the public. By closely collaborating with partner communications teams, they ensure clear messaging and direct the public towards relevant services. Through strategic planning, they enhance public awareness, engagement, and understanding. By using various communication channels, such as social media, press releases, and website updates, the team ensures that the community is well-informed and able to access the necessary information about cabinet decisions and services.

## 4. CONSULTATION

Further engagement work is planned with the public to help shape the redevelopment of both specifications, but this will primarily be related to how both services engage and reach out to local groups. The statutory requirements remain the same, so only limited changes can be implemented.

## 5. ALTERNATIVE OPTIONS CONSIDERED

5.1 Three options were identified within the business case for the two services. The analysis provides the Council with two other alternatives. Option 1 to 'do nothing' was ruled out due to statutory requirements for the two services to be in place.

Option 2 was to undertake a joint commission for the two elements, which created some potential risks in ensuring the appropriate expertise and quality for one provider to deliver the two services, and was also ruled out on this basis.

## 6. REASONS FOR RECOMMENDATIONS

6.1 The services are required to be in place as part of a statutory duty for the local authority, and the current contracts for both elements are due to come to an end on 31<sup>st</sup> March 2024.

It is five years since the services were last procured and although the market is still considered to be limited, a competitive tender process is preferred in line with procurement regulations

### 7. GLOSSARY

IHCA – Independent Health Complaints Advocacy

ICAS – Independent Complaints Advocacy Service

### 8. LIST OF APPENDICES

Appendix 1: Business Case

### 9. BACKGROUND PAPERS

If you would like to inspect background papers for this report, please email <u>governance@barnsley.gov.uk</u> so that appropriate arrangements can be made

#### 10. REPORT SIGN OFF

Financial consultation & sign off	Finance Business Partner consulted and date on 1 <sup>st</sup> June 2023 <i>Vanessa Hunter</i>
Legal consultation & sign off	Legal Services officer consulted and date – on 2 <sup>nd</sup> June 2023 <i>Peter Wilson</i>

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