

Decision Pathway Report – Healthwatch



PURPOSE: Key decision

MEETING: Cabinet

DATE: 07 March 2023

TITLE	Recommissioning of services for Local Healthwatch		
Ward(s)	All Wards		
Author: Penny Germon	Job title: Head of Neighbourhoods & Communities		
Cabinet lead: Cllr Ellie King, Cabinet Member for Public Health and Communities	Executive Director lead: Hugh Evans, Executive Director Adults and Communities		
Proposal origin: BCC Staff			
Decision maker: Cabinet Member Decision forum: Cabinet			
Purpose of Report:			
<ol style="list-style-type: none"> To seek approval for the recommissioning of Healthwatch at a sustainable level which is the total level of income received by BCC in the Local Reform and Community Voices (LRCV grant) (Healthwatch component) for services commencing 1st October 2024 to 30st September 2027. This will include an option to extend for a further two years until 30th September 2029. To collaborate with South Gloucestershire and North Somerset Councils to recommission Healthwatch on a BNSSG footprint co-terminus with the NHS Integrated Care Board (ICB). This is in accord with the commissioning strategy developed in 2018 and the collaborative commissioning agreement currently in use. 			
Evidence Base:			
<ol style="list-style-type: none"> Healthwatch is the consumer champion for public and patient involvement in health and care in every English Local Authority. Collectively they form a network of 151 organisations reporting to Healthwatch England (formed by committee from the Care Quality Commission). The function of Healthwatch is to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. Local authorities have a duty under the Local Government and Public Involvement in Health Act 2007 (as amended by the Health and Social Care Act 2012) to ensure that an effective local Healthwatch is operating in their area, delivering the activities set out in the legislation. The Local Reform and Community Voices (LRCV) grant provides one element of the non-ring-fenced funding provided for local Healthwatch, with the larger proportion having been rolled into the local government settlement in 2011/12. The LRCV grant is announced “in year” and we use the previous year’s allocation to estimate income receivable. In 2018 Cabinet authorised the procurement of Healthwatch for services 2019-2024 at the total value of the LRCV Healthwatch grant component only. In 2021/22 the Healthwatch component of the LRCV grant for Bristol was £119,155. This created a BNSSG contract value of £228,374. per annum. The 2022/23 LRCV grant has been received and totals £290,662 and includes local Healthwatch funding of £119,525. A BNSSG Healthwatch service was jointly commissioned and procured through competitive tender and the contract was let by South Glos in October 2019. A collaborative commissioning agreement sets out each LA 			

role in contract management. A service delivered by one organisation over a larger footprint offers economies of scale while demonstrating that each LA service can still maintain its own identity and local priorities.

5. Healthwatch has been delivered within the income available to the Council on this model throughout the contract period. It is therefore recommended to continue with this approach for services from 2024-2029. This recommendation is shared by South Gloucestershire and North Somerset officers, and they are seeking similar authorisation at this time. We will repeat a collaborative commissioning and procurement process which includes rotating the lead commissioner role.
6. Bristol is required to contract with a social enterprise to provide Healthwatch and is committed to doing that on a BNSSG footprint. The only alternative option would be to re-establish a standalone service for Bristol. This is not recommended because of the proportion of funding that would be required for overheads and management costs leading to a significantly reduced support service to citizens.
7. We will continue to look at ways we can support the sustainability of BNSSG Healthwatch. Healthwatch England have indicated that we may assist the service but without compromising its independence. For example we may offer support with communicating Healthwatch volunteer opportunities and in accessing training, but we cannot conduct selection and recruitment or management of volunteers on their behalf. Information about Healthwatch and the services they offer can be found on their website:
www.healthwatchbristol.co.uk

Cabinet Member / Officer Recommendations:

That Cabinet:

1. Note that the 2022/23 LRCV grant has been received and totals £290,662 and includes local Healthwatch funding of £119,525.
2. Authorise the Executive Director Adults and Communities in consultation with the Cabinet Member Public Health and Communities and the Director of Communities & Public Health to take all steps required to accept and spend the allocated funding component of the Local Reform and Community Voices grant in accordance with the grant requirements (including procuring and awarding contracts) to deliver Healthwatch services from 1 October 2024 and 30 September 2027 with provision to extend the contract by a further two years until 30 September 2029 .
3. Note that the risk of either a reduction or loss of grant in future years will be reflected in the proposed contract.
4. Authorise the Executive Director Adults and Communities in consultation with the Cabinet Member Public Health and Communities and the Director of Communities & Public Health to invoke any subsequent extensions/variations specifically defined in the contract(s) being awarded.

Corporate Strategy alignment:

1. **Children and Young People** – Healthwatch is interested in the needs, experiences and concerns of children and young people as well as adults, in relation to their health and social care services. Healthwatch do not have the power to “Enter and View” premises where services relating to a local authority’s social services functions are being carried out for people under the age of 18.
2. **Environment and Sustainability** – The new service will continue with an online approach developed in the pandemic while hosting or attending in person at specific events and locations.
3. **Health Care and Wellbeing** – Healthwatch will speak out about the concerns they hear over health and care services and ensure people understand their rights to access services.

<p>City Benefits:</p> <ol style="list-style-type: none"> 1. Health: Promoting and supporting better access to services for Adults and Children 2. Social Value: Healthwatch recruits volunteers to promote community participation. 3. Equalities: Reducing inequalities in health by promoting physical and mental health and addressing access to health care for marginalised groups and deprived communities
<p>Consultation Details:</p> <ol style="list-style-type: none"> 1. Commissioners from all three authorities support this proposal and are seeking respective authorisation. 2. Healthwatch England have endorsed the BNSSG approach and given clear demarcation of where we can help assist the service without compromising independence. 3. The Council is currently consulting on its budget and no separate public consultation exercise has been carried out in respect of this proposal. Stakeholder and public consultation will be conducted when authorisation to procure is in place.
<p>Background Documents:</p> <ol style="list-style-type: none"> 1. How are we funded? Healthwatch details reductions in national funding for Healthwatch from £45M in 2013 and to £24.5M in 2021, without accounting for inflation. 2. The Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013 (legislation.gov.uk) Part 4 Regulation 11 details the Duty of services-providers to allow entry by Local Healthwatch organisations or contractors 3. “Local Authority Duty to Commission Local Healthwatch and the Health and Care Bill” a letter to Local Authority Chief Executives to advise of the enhanced role for Healthwatch in relation to integrated care systems and what this might mean for commissioners, March 2022.

Revenue Cost	£597,625 cost to Bristol between 2024 and 2029. BNSSG contract value over 5 years of c£1.145m	Source of Revenue Funding	Local Reform and Community Voice grant, (Healthwatch component)
Capital Cost	£0	Source of Capital Funding	N/A
One off cost <input type="checkbox"/>	Ongoing cost <input checked="" type="checkbox"/>	Saving Proposal <input type="checkbox"/>	Income generation proposal <input type="checkbox"/>

<p>Required information to be completed by Financial/Legal/ICT/ HR partners:</p> <p>1. Finance Advice: This report seeks authority to recommission the Healthwatch contract for a three-year period with the possibility of a further extension of two years. The cost of the Bristol Healthwatch contract is currently £119,525 per annum for 2022/23 and is fully funded from part of the Department of Health and Social Care (DHSC), Local Reform and Community Voices Grant. (This grant also funds other service areas including deprivation of liberty safeguards in hospitals and independent NHS complaints advisory services).</p> <p>Notification of grant funding is often received late in the financial year, to which it relates. The risk of either a reduction or loss of grant in future years, needs to be reflected in the proposed contract. In the event of a mandated grant increase (for the Healthwatch element) then this would become the upper spend limit for the BCC contribution to contract costs.</p>

Finance Business Partner: Denise Hunt 23 February 2023		
2. Legal Advice: The procurement process must be conducted in line with the 2015 Procurement Regulations and the Councils own procurement rules. Legal services will advise and assist officers with regard to the conduct of the procurement process and the resulting contractual arrangements.		
Legal Team Leader: Husinara Jones, Team Manager/Solicitor 16 January 2023		
3. Implications on IT I can see no implications on IT in regard to this activity.		
IT Team Leader: Gavin Arbuckle – Head of Service Improvement and Performance 31 January 2023		
4. HR Advice: The report is seeking approval for the recommissioning of Healthwatch, there are no significant HR issues arising from this request.		
HR Partner: Lorna Laing 16 January 2023		
EDM Sign-off	Hugh Evans	18 January 2023
Cabinet Member sign-off	Cllr Ellie King	25 January 2023
For Key Decisions - Mayor's Office sign-off	Mayor's Office	6 February 2023

Appendix A – Further essential background / detail on the proposal	NO
Appendix B – Details of consultation carried out - internal and external	NO
Appendix C – Summary of any engagement with scrutiny	NO
Appendix D – Risk assessment	NO
Appendix E – Equalities screening / impact assessment of proposal	YES
Appendix F – Eco-impact screening/ impact assessment of proposal	NO
Appendix G – Financial Advice	NO
Appendix H – Legal Advice	NO
Appendix I – Exempt Information	NO
Appendix J – HR advice	NO
Appendix K – ICT	NO
Appendix L – Procurement	NO