



# Committee Report

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**PURPOSE:** Final Decision Report

**KEY OR NON-KEY DECISION:** Key decision over £500k spend/save & impacts more than 2 wards

**COMMITTEE:** Public Health and Communities Committee

**DATE:** 21 June 2024

**TITLE:** NHS Health Checks in GP Practices

**Ward(s):** All wards in Bristol

**Officer presenting the report:** Carol Slater

**Job title:** Head of Service, Public Health

**Committee Chair:** Councillor Stephen Williams

**Executive Director lead:** Hugh Evans: Executive Director for Adult and Communities

**Proposal origin:** BCC Staff

## **Purpose of Report:**

To request approval to procure in accordance with the NHS Provider Selection Regime established by the Health Care Services (Provider Selection Regime) Regulations 2023, and recommission Bristol's NHS Health Checks contract from 1<sup>st</sup> April 2025 to 31<sup>st</sup> March 2030.

## **Evidence Base / Options to consider:**

1. The provision of Health Checks a statutory public health function as set out in [The Local Authorities \(Public Health Functions and Entry to Premises by Local Healthwatch Representatives\) Regulations 2013 \(legislation.gov.uk\)](#).
2. The Director of Public Health is responsible on behalf of the local authority for the commissioning and delivery of these services.
3. NHS Health Checks have a key role in providing prevention interventions and early detection of Cardio Vascular Disease (CVD) to help people live longer, healthier lives.
4. CVD includes conditions such as heart disease, stroke and diabetes and is one of the health conditions most associated with health inequalities. CVD is the largest contributor to the gap in life expectancy

between the most and least deprived, accounting for up to 25% of the difference.

5. The purpose of NHS Health Checks is to improve the health of our citizens and reduce inequality in health, by identifying individuals at higher risk of CVD conditions and helping them reduce their risk.
6. Risk factors for CVD such as smoking, physical inactivity and obesity are greater in lower socio-economic groups and the burden of morbidity and mortality disproportionately affects the most deprived. Premature death rates from CVD in the most deprived 10% of the population are almost twice as high as rates in the least deprived 10%.
7. [Bristol's JSNA](#) (Joint Strategic Needs Assessment) for CVD highlights that
  - In Bristol, the rate of early deaths from CVD is over 3 times higher among people living in the most deprived areas of the city compared to the most affluent areas
  - In 2020 there were 235 premature (aged under 75 years) deaths from CVD in Bristol. 69% of these were among men.
  - CVD premature mortality rates in the Inner-City locality have been consistently above the Bristol average and over 3 times as high as the rates in the North and West (inner) locality.
  - CVD is more common where a person is male, older, has a severe mental illness, or ethnicity is South Asian or African Caribbean.
  - Early death rates from CVD are no longer declining.
8. CVD is largely preventable, through lifestyle changes and a combination of public health and NHS action on smoking and tobacco addiction, obesity and tackling alcohol misuse.
9. The UK government published its action plan and commitments in the CVD Prevention Initiatives (<https://www.gov.uk/government/publications/cardiovascular-disease-prevention-action-plan>) and its National CVD prevention ambitions (<https://www.gov.uk/government/publications/health-matters-preventing-cardiovascular-disease>).
10. NHS England's Long-Term Plan confirmed its commitment to CVD prevention, and to working with local authorities through NHS Health Checks to offer preventative treatments to individuals with high risk factor and conditions <https://www.longtermplan.nhs.uk/online-version/chapter-3-further-progress-on-care-quality-and-outcomes/better-care-for-major-health-conditions/cardiovascular-disease/>.
11. NHS health Checks are underpinned by evidence-based recommendations <https://www.healthcheck.nhs.uk/commissioners-and-providers/evidence/>.

#### **Officer Recommendations:**

That the **Public Health and Communities Committee:**

1. **Authorises the Director of Communities and Public Health, with the Executive Director Adult and Communities to procure and enter into a contract for the provision of NHS Health Checks that assist with the reduction of cardiovascular disease for the period of 5 years (1<sup>st</sup> April 2025 to 31<sup>st</sup> March 2030) in accordance with the maximum budget envelopes outlined in this report.**

### Corporate Strategy alignment:

1. Theme 4: Health, Care and Wellbeing: Tackling health inequalities to help people stay healthier and happier throughout their lives.

### City Benefits:

1. NHS Health Checks have a key role in providing prevention interventions and early detection of Cardio Vascular Disease (CVD) to help people live longer, healthier lives.
2. By conducting NHS Health Checks in Bristol, we aim to improve the health of our citizens and reduce inequality in health, by identifying individuals at higher risk of CVD conditions and helping them reduce their risk.

### Consultation Details:

1. The next commissioning cycle will include the required stakeholder engagement.
2. We are currently awaiting advice from procurement re what level of stakeholder engagement is required for a Direct award under the new NHS Provider Selection Regime. This information will be updated as more information is provided throughout the process.

### Background Documents:

1. [The Local Authorities \(Public Health Functions and Entry to Premises by Local Healthwatch Representatives\) Regulations 2013 \(legislation.gov.uk\)](#).
2. [Bristol's JSNA](#)
3. <https://www.gov.uk/government/publications/cardiovascular-disease-prevention-action-plan>
4. <https://www.gov.uk/government/publications/health-matters-preventing-cardiovascular-disease>
5. <https://www.longtermplan.nhs.uk/online-version/chapter-3-further-progress-on-care-quality-and-outcomes/better-care-for-major-health-conditions/cardiovascular-disease/>
6. <https://www.healthcheck.nhs.uk/commissioners-and-providers/evidence/>

The costs below are based on the current contract values and expectations based on current information available.

<b>Revenue Cost</b>	<b>£1,290,000 for 5-year contract (1<sup>st</sup> April 2025 to 31<sup>st</sup> March 2030)</b>	<b>Source of Revenue Funding</b>	<b>Public Health Grant</b>
<b>Capital Cost</b>	n/a	<b>Source of Capital Funding</b>	n/a
<b>One off cost</b> <input type="checkbox"/>	<b>Ongoing cost</b> <input checked="" type="checkbox"/>	<b>Saving Proposal</b> <input type="checkbox"/> <b>If yes - existing or new saving?</b> Choose an item. <b>OR Income generation proposal</b> <input type="checkbox"/>	

## Professional comments section:

**1. Finance Advice:** This report seeks approval to directly award Bristol's NHS Health Check contracts, for the period 1<sup>st</sup> April 2025 – 31 March 2030. This is estimated to cost c£1.29m over the five-year period. This cost will be fully funded from the Public Health Grant and there will be no additional costs to the general fund.

**Finance Business Partner:** Denise Hunt 7 May 2024

**2. Legal Advice:** Whenever the council procures goods, works or services over a certain value, it will need to comply with the Public Contracts Regulations 2015 (PCRs) or any successor legislation (including the Procurement Act 2024 due to come into force October 2024) unless any exemptions are available.

One exemption that may be available is pursuant to section 12A of the PCRs, certain sections of the PCRs do not apply to contracts or framework agreements to which the Health Care Services (Provider Selection Regime) Regulations 2023 apply.

The relevant officers will need to seek legal advice to ensure the services being procured pursuant to this report are excluded from the scope of the PCRs by regulation 12A (and if applicable that the same exemption is available under any successor legislation) and that the procurement route to be used is permitted under the Health Care Services (Provider Selection Regime) Regulations 2023.

Such officers should also ensure the council's procurement rules are also complied with.

**Legal Team Leader:** Sinead Willis, Commercial and Governance Team Manager, comments provided on full report 7 May 2024

**3. Implications on IT:** I can see no implications on IT in regard to this activity.

**IT Team Leader:** Alex Simpson – Lead Enterprise Architect. 7 May 2024.

**4. HR Advice:** The report is seeking approval to recommission Bristol's NHS Health Checks contract (1 April 2025 to 31 March 2030). There are no significant HR implications arising for BCC employees.

**HR Partner:** Debbie Hunt, 10 May 2024.

## APPENDICES

Appendix A – Further essential background / detail on the proposal	NO
Appendix B – Equality Impact Assessment (EqIA)	YES
Appendix C – Environmental Impact Assessment	YES
Appendix D – Risk assessment	NO
Appendix E – Exempt Information	NO
Appendix F – Details of consultation carried out - internal and external	NO
Appendix G – Options appraisal matrix	NO
Appendix H – Business case / financial analysis	NO