

APPENDIX 1: Table 1: Stop Smoking Services March 2017: Options for service delivery and procurement

Stop Smoking Services – Service Delivery Options			
		Benefits	Disadvantages
1.	Maintain the “status quo” – no change	<ol style="list-style-type: none"> 1. The core Stop Smoking Team has a close working relationship with the Public Health Team with the staff being committed public health objectives. 2. The core Stop Smoking Team is able to respond quickly to any service developments/changes without requiring any time consuming contract changes. 3. Past experience of contracting the core Stop Smoking Team out to another organisation led to poor performance, although this was not to a specialist lifestyle service. 	<ol style="list-style-type: none"> 1. The core Stop Smoking Service has a management structure and its own promotional programme. If the core Service is part of a wider Integrated Lifestyle Service it would have the potential to release savings through combining management and promotional overheads with the other lifestyle services. 2. The core Stop Smoking Service currently stands alone and although it works with the Integrated Lifestyle Service there are missed opportunities for client referrals from health trainers and other elements of the Lifestyle Service. The number of referrals to the Stop Smoking Services has fallen and this could be improved through greater integration with lifestyle services. 3. The current core Stop Smoking Service is small and coping with sickness, staff leaving etc. is challenging. As part of a larger lifestyle service such pressures may be mitigated through the use of staff with similar skills. 4. As Public Health commissions the Stop Smoking Services staff from the core service can be diverted into supporting commissioning and performance management of the other providers.
2.	Commission a “stand alone” Stop Smoking Service.	<ol style="list-style-type: none"> 1. This would ensure that the core Stop Smoking Service remained focused upon providing support for smokers and that staff skills would continue to develop. 	<ol style="list-style-type: none"> 1. A stand alone core Stop Smoking Service would be small. A proportion of its costs would require allocation to infrastructure/management leaving less resource for direct service delivery. 2. There are very few examples currently of stand alone core Stop Smoking Services and therefore

			<p>there could be limited market opportunities to commission this model of service delivery.</p> <p>3. Referrals to Stop Smoking Services have decreased in recent years. Good referral pathways to Stop Smoking Services are important for generating clients who want to stop smoking. A Stop Smoking Service that is part of a wider lifestyle service would have better access to direct referrals than a stand alone service that would have to rely on existing or developing new pathways.</p>
3.	Commission Stop Smoking Services as part of an integrated lifestyle service.	<p>1. There is the potential for management/overhead cost savings in the short term. In the longer term additional savings could be achieved through other integrated lifestyle service staff supporting smokers to quit as they will already be trained in lifestyle behavioural change techniques.</p> <p>2. Lifestyle services have a central focus of supporting lifestyle behavioural change. All staff are trained to deliver behaviour change interventions and are able to motivate smokers to quit and refer to services, but also have the potential to support a full quit attempt. The integration of the Stop Smoking Services with general lifestyle services would increase the capacity for initiating referrals and supporting quit attempts. Although it is recommended from other areas that this is more effective if it is part of phased approach to integration.</p> <p>3. Clients of lifestyle services often have multiple lifestyle issues. Most prefer to focus upon one issue but if successful they may be prepared to look more holistically at their lifestyle. Stop Smoking Services as part of an integrated Lifestyle Services could be embedded into a range of pathways and ensure easy appropriate access for their clients to a range of different lifestyle support options.</p>	<p>1. This could potentially dilute the evidence based Stop Smoking Services model.</p>

		<p>4. A larger lifestyle services brings advantages in terms of the management staff sickness, retirement etc. (see 1.3 above).</p> <p>5. In addition a larger lifestyle workforce facilitates service development overall. For example the current Integrated Lifestyle Service in Cambridgeshire provided by Everyone Health now has “specialist health trainers” that focus upon falls and mental health. All health trainers are able to give advice and support on these areas but the “specialists” address more complex problems or provide training.</p>	
	Commissioning Approaches: Due to the value of the Services there are procurement considerations.		
4.	<p>Under the Voluntary Transparency Notice (see note below) procurement process transfer the Stop Smoking Services to Everyone Health, the current provider of integrated Lifestyle Services. This contract runs to May 2018 with a potential extension for another two years.</p>	<p>Supportive procurement rules</p> <p><i>“Contracts and framework agreements may be modified without a new procurement procedure in accordance with this Part in any of the following cases:—</i></p> <p><i>b) for additional works, services or supplies by the original contractor that have become necessary and were not included in the initial procurement, where a change of contractor—</i></p> <p><i>(i) cannot be made for economic or technical reasons such as requirements of interchangeability or interoperability with existing equipment, services or installations procured under the initial procurement, or</i></p> <p><i>(ii) would cause significant inconvenience or substantial duplication of costs for the contracting authority, provided that any increase in price does not exceed 50% of the value of the original contract”</i></p> <p>(i) This applies in this instance as a change of provider would need to meet the requirement of being part of an integrated service. This would not be possible in Cambridgeshire due to the current contract with Everyone Health. There is no other commissioned integrated lifestyle service.</p>	<p>1. Due to the current contractual arrangements with Everyone Health the core Stop Smoking Service would not benefit from any of the advantages of being fully integrated into the local Lifestyle Services until these services are re-tendered. Any successful bidder would have to demonstrate how it would integrate the core Stop Smoking Service into other lifestyle services to ensure that the benefits of referral pathways are maximised.</p> <p>2. Most areas have commissioned their Stop Smoking Services as part of an integrated lifestyle service. Therefore there is uncertainty as to whether there is a robust market for the provision of stand alone stop smoking services in an area</p> <p>3. If the voluntary transparency notice approach was challenged then this would necessitate a full procurement process. This would delay the process although a Voluntary Transparency Notice would be published for 10 calendar days.</p>

		<p>(ii) By integrating the core Stop Smoking Service into a wider Lifestyle Service this would avoid duplication of management costs. The identified savings reflects the removal of one of the management posts. The functions of the post would be picked up by the Everyone Health management structure.</p> <p>In addition the total value of the Everyone Health contract over five years is £8m. The value of the Stop Smoking Services if the Everyone Health contract was extended to the full five years would be £1,137,500, less than 50% of the contract value.</p> <p>There are other considerations however these do not influence any procurement rules.</p> <ol style="list-style-type: none"> 1. It would secure savings in the next financial year. 2. The core Stop Smoking Service staff have experienced a number of recent management changes. In addition when services transfer to a different organisation there is usually a fall in performance. The Stop Smoking Services are familiar with Everyone Health and previous members of the Public Health provider team were transferred to Everyone Health following the Lifestyle Service tender. 	
5.	Undertake a full tender	<ol style="list-style-type: none"> 1. This would ensure that there is a full competitive process and the potential for identifying a service that offers high quality, value for money services. 	<ol style="list-style-type: none"> 1. This is time-consuming and any savings would be delayed. 2. Also the risk of undermining staff morale.

A Voluntary Transparency Notice may be published by a contracting authority where a contract has been awarded without prior publication of a contract notice in accordance with the Public Contracts Regulations 2015, SI 2015/102, Pt 2 (i.e. a direct award). A contracting authority may opt to publish a voluntary transparency notice in these circumstances in order to resist challenge on grounds of ineffectiveness under the Public Contracts Regulations 2015, SI 2015/102, reg. 99(2). The Public Contracts Regulations 2015, SI 2015/102, reg. 99(3) provides that the above ground for ineffectiveness will not apply if the contracting authority:

- considers the contract award (without prior publication of a contract notice) to be permitted by the Public Contracts Regulations 2015, SI 2015/102, Pt 2
- publishes a voluntary transparency notice in the OJEU indicating its intention to enter into the contract, and observes a standstill period of at least ten days beginning with the day after the date the voluntary transparency notice was published in the OJEU.