

HEALTH COMMITTEE: MINUTES

Date: Thursday, 14 November 2019

Time: 1.30p.m. – 14.19 p.m.

Present: Councillors C Boden (Vice-Chairman), D Connor, L Dupre, L Harford, P Hudson (Chairman), L Jones, K Reynolds, T Sanderson and S van de Ven

District Councillors D Ambrose-Smith, and S Wilson

Apologies: District Councillors A Bristow, G Harvey and J Taverner (S Wilson substituting)

262. DECLARATIONS OF INTEREST

None.

263. CO-OPTION OF DISTRICT MEMBERS

The Chairman exercised his discretion with the agreement of the Committee to allow this additional item to be heard in order for Huntingdonshire District Council to be represented at the meeting.

It was resolved to co-opt Councillor S Wilson to the Committee as substitute member for Huntingdonshire District Council

264. MINUTES – 17TH OCTOBER 2019

The minutes of the meeting held on 17th October 2019 were agreed as a correct record and signed by the Chairman.

265. HEALTH COMMITTEE – ACTION LOG

The Action Log was noted including the following update:

Minute 244 – Members were informed that a report would be presented at the December meeting of the Committee.

Minute 256 – information that had been requested had been collated and would be circulated to Members.

Minute 259 – arrangements to establish a Liaison Group with the new Papworth Hospital were being made.

266. PETITIONS

There were no petitions.

269. DELEGATED AUTHORITY TO AWARD THE CONTRACT FOR THE PREVENTION OF SEXUAL ILL HEALTH SERVICE

The Committee received a report that sought the necessary delegated authorities to establish the appropriate agreements and to award the contract following the competitive tender.

During discussion Members:

- Questioned in relation to paragraph 2.3 of the report how much Peterborough City Council (PCC) would contribute to the overall contract value. Officers confirmed that PCC would contribute £72k based on approximate head of population.
- Sought clarity regarding the safeguards and protections written into the contract in the event that PCC could not meet its funding responsibilities. Officers explained that both Local Authorities sought to be protected in such an eventuality. There were notice periods and clauses contained within the contract that would maintain service provision in the event of a partner wishing to withdraw from the agreement.
- Requested that future reports set out the liabilities and protections contained within the contract for the Council when entering partnership agreements.
- Drew attention to the Council's Climate Change Strategy that would be implemented during the lifetime of the contract. It was essential that the Council was at the forefront of mitigating climate change and consideration needed to be given to how it could be achieved through contracts.

It was resolved unanimously to support and approve:

- a) The establishment of a legal agreement between Cambridgeshire County Council (CCC) and Peterborough City Council (PCC) that assigns Cambridgeshire County Council as the lead commissioner;
- b) Delegate sign off for the agreement to the Director of Public Health in consultation with the Chair and Vice Chair of the Committee.
- c) Authorise the Director of Public Health, in consultation with the Chairman and Vice-Chairman of the Health Committee to formally award the new shared contract, effective from April 2020, subject to compliance with all the required legal processes; and
- d) Authorise the Consultant in Public Health, Health Improvement, in consultation with the Executive Director of LGSS Law to approve and complete the necessary contract documentation.

270. RECOMMISSIONING SEXUAL HEALTH SERVICES

Members received a report that sought to secure the appropriate delegated authorities to establish the appropriate agreements and to award the contract following a competitive tender for the recommissioning of Sexual Health Services.

In presenting the report, attention was drawn to recommendation b) of the report that sought establishment of a Section 75 agreement between Cambridgeshire County Council, NHS England and the Clinical Commissioning Group.

Members noted the extension of the current contract would provide the opportunity for a robust competitive tender to take place. The alteration of the contract length and break points had received positive feedback from the market as it made bidding more attractive.

During debate Members:

- Noted that Cambridgeshire County Council would enter into the Section 75 agreement as the lead commissioner. Peterborough would therefore not enter into its own Section 75 agreement.
- Welcomed the flexibility relating to contract framing and commented that it would evident by year three of the contract whether the performance of the provider was satisfactory.
- Highlighted the length of the contract in relation to the Council's Climate Change Strategy that would likely be implemented during the lifetime of the contract.
- Noted that paragraph 2.8 of the report was incorrect and should reflect the contract duration set out in recommendation g) of the report.
- Drew attention to the length of the contract and the degree of continuity it provided as a result. However, consideration needed to be given to the likely policy changes in Public Health that would occur during the duration of the contract. .
- Noted that there was no remuneration to the Council for acting as lead commissioner as the number of contracts where Peterborough City Council were the lead commissioner was broadly even with the number that Cambridgeshire County Council acted as lead for.

It was resolved unanimously to:

- a) The establishment of a legal agreement between Cambridgeshire County Council (CCC) and Peterborough City Council (PCC) that assigns Cambridgeshire County Council as the lead commissioner;
- b) The establishment of a Section 75 Agreement between CCC, NHS England and the Clinical Commissioning Group.
- c) Delegate sign-off for the for the agreements to the Director of Public Health in consultation with the Chair and Vice Chair of the Health Committee
- d) Authorise the Director of Public Health, in consultation with the Chairman and Vice-Chairman of the Health Committee to formally award the new shared contract, subject to compliance with all the required legal processes;
- e) Authorise the Consultant in Public Health, Health Improvement, in consultation with the Executive Director of LGSS Law to approve and complete the necessary contract documentation;
- f) Approve the extension of the current interim contract for six months to enable a more robust competitive tender; and

- g) Change the initial proposed contract length from three years plus one, plus one to a three year plus two, plus two contract giving a maximum contract length of seven years.

271. FINANCE MONITORING REPORT – SEPTEMBER 2019

Members were presented the September 2019 iteration of the Finance Monitoring report for the Public Health Directorate. In presenting the report attention was drawn to a forecast underspend for Directorate which totaled £86k. Negative actuals continued to reside in the report where partner agencies had not yet issued invoices and were being pursued by officers.

Members noted the savings tracker contained at Appendix 4 of the report which would be presented three times a year and showed that savings were in line with what was agreed as part of the Business Plan.

In response to a Member question officers explained that the August Finance Monitoring report contained an error relating to Integrated Lifestyle Services that had been corrected.

It was resolved to:

Review and comment on the report and to note the finance position as at end of September 2019

272. HEALTH COMMITTEE TRAINING PLAN

The Committee received its Training Plan.

It was resolved to note the training plan.

273. HEALTH COMMITTEE AGENDA PLAN,

The Committee examined its revised agenda plan tabled at the meeting and attached as Appendix A to these minutes.

Members requested that the new Papworth Hospital be invited to the March meeting of the Committee for scrutiny. **ACTION**

It was resolved to review the agenda plan