

Decision Maker: EXECUTIVE
24 November 2021

**For Pre-Decision Scrutiny by the Adult Care & Health Policy
Development & Scrutiny Committee
23 November 2021**

Decision Type: Non-Urgent Executive Key

Title: PROCEED TO PROCUREMENT FOR AN INTEGRATED
SEXUAL HEALTH SERVICE

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Ward: All Wards

1. REASON FOR REPORT

- 1.1 The London Borough of Bromley has a statutory duty to improve the health of the population and to provide local public health services. The specific responsibilities are set out in the Health and Social Care Act 2012 and associated regulations and include a mandated requirement for local authorities to provide or make arrangements to secure the provision of comprehensive open access sexual health services.
- 1.2 Currently sexual health services in Bromley are provided by King's College Hospital NHS Foundation Trust (KCH), who deliver the Genitourinary Medicine (GUM) Service and Bromley Healthcare CIC (BHC) who deliver the Sexual Health Early Intervention Service.
- 1.3 While the current set up of co-location fully meets the Council's statutory duty, the renewed specification will draw on the experience and benefits achieved through the transformation programme and further enhance patient experience with improved efficiencies.
- 1.4 The current contract with BHC is directly commissioned by the Council. However, the KCH contract is held by the London Borough of Lambeth who is the Sexual Health Sub-Regional Lead in South East London.
- 1.5 The current Contract with KCH held by Lambeth also includes provision of an integrated service at Camberwell Clinic in Denmark Hill for Bromley residents. This element of the service is not included in this procurement and the Camberwell provision will continue to be part of the SEL contract held by Lambeth.

- 1.6 Both contracts are due to expire on 31 March 2023, it is proposed to create a more streamlined service by revising the current specification and by combining all elements of both contracts, except the Camberwell provision, into one single, integrated contract. The Camberwell provision for Bromley residents will remain as part of Lambeth Council's contract with KCH and is subject to the procurement decision made by the London borough of Lambeth.
- 1.7 This report seeks approval to procure an integrated sexual health service from 1st April 2023 for a period of 5 years plus the option to extend for a further 2 years at an estimated cost of £1,455k per annum, with an estimated whole life value of a total of £10,185k. This duration of the contract is designed to encourage interest from a wide range of organisations and to provide financial sustainability to the successful provider who will be expected to act as strategic lead for sexual health services in the borough.
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2 RECOMMENDATION(S)

- 2.1 The Adult Care and Health Policy Development and Scrutiny Committee is asked to note and comment on the proposal for commissioning sexual health services from 1st April 2023.
- 2.2 The Executive is asked to:
- Approve to proceed to procure a LBB held contract for an integrated sexual health service from 1 April 2023 for a period of 5 years plus the option to extend for a further 2 years at an estimated cost of £1,455k per annum, with an estimated whole life value of a total of £10,185k.
 - Approve the continuation of provision at Camberwell Clinic in Denmark Hill under the contract held by Lambeth from 1st April 2023, subject to the procurement decision made by Lambeth Council.

Impact on Vulnerable Adults and Children

1. Summary of Impact: Public Health Programmes protect and build resilience of Young People and Vulnerable Adults.

Corporate Policy

1. Policy Status: Existing Policy
2. BBBMaking Bromley Even Better Priorities: Healthy & Safe Lives, Living Well, Transforming our Services, Collaborating & Innovating Together

Financial

1. Cost of proposal: Estimated Cost: £10,185k (£7,275k for 5 years plus option of £2,910k for a further two years extension)
 2. Ongoing costs: Recurring Cost: £1,455k per annum
 3. Budget head/performance centre: Public Health Sexual Health
 4. Total current budget for this head: £3,067k per annum
 5. Source of funding: Public Health Grant
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Personnel

1. Number of staff (current and additional): N/A
 2. If from existing staff resources, number of staff hours: N/A
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Legal

1. Legal Requirement: Statutory Requirement
 2. Call-in: Applicable
 3. Summary of Procurement Implications:
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Customer Impact

1. Estimated number of users/beneficiaries (current and projected): Borough Wide
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Ward Councillor Views

1. Have Ward Councillors been asked for comments? Not Applicable
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

3.1 Sexual health is important as the consequences of poor sexual health can be serious not only in terms of the health and wellbeing of individuals but can also in terms of the cost to services.

3.2 There is strong evidence to suggest that sexual health outcomes can be improved by easy access to high quality information and good quality sexual health services that provide:

- Accurate, high quality and timely information which help people to make informed decisions about relationships, sex and sexual health
- Rapid access to confidential, open access, integrated sexual health services in a range of settings, available at convenient times
- Early, accurate and effective diagnosis and treatment of sexually transmitted diseases (STIs), including HIV, combined with the notification of partners who may be at risk
- Joined-up provision that enables a seamless journey for individuals across a range of sexual health and other services in primary, secondary and community settings.

3.3 The commissioning of sexual health services falls within the remit of Public Health in the Local Authority. However, some elements of the sexual health system are commissioned by the Clinical Commissioning Group and NHS England (NHSE). The responsibility of Local Authorities, in accordance with the mandated duties under the Health and Social Care Act, 2021 are set out below:

- Community contraception and Long Acting Reversible Contraception (LARC) in general practice and Emergency Hormonal Contraception (EHC) in pharmacies
- Community STI diagnosis and treatment, Chlamydia screening as part of the National Chlamydia Screening Programme (NCSP); HIV testing and partner notification for STIs and HIV
- Targeted Sexual Health Promotion and HIV prevention
- Free Condom Scheme (C-Card)
- Psychosexual services (sexual health element)

3.4 The integrated sexual health service model aims to improve current service by placing the majority of provisions of STI testing, treatment and contraception in one location. The integrated offer of a one stop shop will enable opportunistic detection of STIs and also present an opportunity to discuss contraception and promote the uptake of LARC (Long-Acting Reversible Contraception). An integrated service will further enhance access with the potential to optimise the use of each sexual health appointment i.e. one appointment versus two separate appointments of GUM and contraception, and the utilisation of clinical resources in this way has the potential to improve cost effectiveness.

3.5 Summary of Business Case

- i) It is proposed to revise the sexual health delivery model by bringing together the integrated clinic based services and community provision into one local sexual health service. This will further enhance not only patient experience but also service efficiencies and effectiveness making delivery as streamlined as possible. The proposed model will be shaped as follows:

Integrated Service Design

Clinic Activities:

- Sexual health (GUM) services
- Reproductive health services
- HIV community nurse specialist service

Community Activities:

- Outreach and Campaigns
- Prevention Programmes (Condom schemes and the National Chlamydia Screening Programme)

- ii) Harnessing provision in this way will strengthen further the delivery of the Council's strategic aims and priorities in relation to sexual health. The enhanced service specification, as proposed, will consolidate

the transformation achieved over the last few years and to sustain those new but effective practices and pathways adopted during the pandemic. It will also present fresh opportunities for further innovation in early identification and management of both existing and emerging STIs. It will strengthen existing pathways for tackling late diagnosis of HIV, offer the potential for increased access and expand provision of LARC to further reduce unplanned pregnancies and avoidable terminations. It will also provide fresh impetus in improving local access and user experience, supporting prevention and empowering self-care.

The community element of this procurement is essential for early detection, prevention, and support. With an increasing young population in Bromley and the continued rise in Gonorrhoea, Chlamydia and Syphilis; there is increased need to support the younger population. In 2019, young people (aged 15-24) in Bromley accounted for 44.3% of all new STI diagnoses. The community elements, including the National Chlamydia Screening Programme, ensure residents under 25 are receiving easy access to dual Chlamydia and Gonorrhoea testing. This screening programme accompanied with partner notification and the condom scheme will aim to minimise transmission of STIs. Additional outreach and campaign activities will aim to educate the younger population, provide the necessary support and referral pathways, and encourage health promotion.

Integrating the clinic and community service will ensure service users accessing care and treatment at the clinic are equally supported in the community. Community activity will be essential in targeting high risk and vulnerable individuals in specific areas of need. Early identification of vulnerable people and prevention programmes can help reduce the number of complex cases and reduce transmission of STIs. In Bromley STI incidence is highest in minority ethnic groups and in more deprived areas. Campaigns and outreach programmes will ensure that residents are aware of and accessing sexual health services.

Bromley continues to show improvements in reducing HIV infections. This is evidenced by the HIV performance indicators (see table 1 in section 3.6 iii), especially when compared to London and England. Integrating HIV Community Nurse Specialist Service into the local clinic based provision will enhance the nursing team who can play a pivotal role in supporting Bromley to reduce all new HIV infection to zero by 2030 (London's 'Fast Track Cities' initiative). In addition to strengthening specialist advice and expertise around HIV care, the nursing team can help to improve early recognition of HIV among non-specialists in both primary and secondary care settings, remove any stigmas associated with HIV and barriers to testing, and facilitate prompt diagnosis and treatment. Condom schemes and the Prep (Pre-Exposure Prophylaxis) programme will also be essential to reducing the number of new individuals acquiring HIV in Bromley.

It is anticipated that the enhanced service model will continue to strike the right balance between providing the best service for our residents while delivering best value from the contract. A more streamlined service with improved service user experience will be of particular support to younger women, who favour accessing clinic services over access to both GP and sexual and reproductive services. Providing this integrated service and ease of access to contraception, in particular LARC, will contribute to maintaining a low number of teenage pregnancies in Bromley. Analysis of the social return on investment of reducing teenage pregnancy has been shown to increase educational attainment, reduce health inequalities and reduce costs to public services (housing, public health, social care¹). Analysis has shown that access to contraception in the UK has become harder during the COVID19 pandemic and as a result the proportion of unplanned pregnancies has almost doubled.² This further supports the need for an integrated service to provide easy access to contraception in Bromley.

- iii) Since 2017, there have been some changes in the landscape of sexual and reproductive health across London. There have been developments in service delivery particularly in terms of digital access. It is anticipated that digital access to sexual health services will give the opportunity to provide advice, sign posting and support outreach programmes. The COVID19 pandemic has also provided an opportunity to consider how sexual health services can be most effectively delivered. This learning will inform service developments in the sexual health arena both locally and nationally. We anticipate that service user triaging that came into effect during COVID19 will allow for a more streamlined service, where service

¹ Social Return on Investment, Leicester County Council, Joelle Brady, 2016

² [Impact of the SARS-CoV-2 pandemic on access to contraception and pregnancy intentions: a national prospective cohort study of the UK population | BMJ Sexual & Reproductive Health](#)

users are put onto the correct patient pathway earlier. This aims to reduce service user wait times, ensure complicated cases are prioritised and ultimately aim to improve the sexual health of Bromley residents.

- iv) In March 2021, the Executive authorised an extension of the contract with BHC for the provision of the Sexual Health Early Intervention Service to expire on 31st March 2023. This was undertaken to align with the expiry date of the KCH contract which is held by London Borough of Lambeth as the Lead Commissioner of South East London under the London Sexual Health Collaborative agreement. KCH's contract was extended for a one year period due to the impact of COVID19 on the provider market and procurement process (the capacity of partners to both deliver and participate in a procurement process was restricted by their involvement in and response to the Pandemic). It was therefore necessary to align both the BHC and KCH contracts in order to proceed with this procurement.
- v) The arrangement with the London Sexual Health Collaborative agreement will continue with KCH in relation to the services provided from their Camberwell Clinic. Lambeth Council is also in the process of re-procuring sexual health services and is currently determining next steps for service delivery from 1st April 2023.

3.6 Service Profile / Data Analysis

- i) The current sexual health services are well used in Bromley. Between 1st April 2017 – 5th July 2020 there were 47,248 attendances in total. The services are used predominantly by women (77% of service users are women and 23% are men). The predominant age group accessing services is the 16 – 24 age group followed by 25 – 34 year olds.
- ii) Bromley Healthcare provides contraception, HIV care and support, web based sexual health information, advice and signposting that supports prevention and self-care to the Bromley population. Specialist services aimed at young people include the opportunistic offer of Chlamydia and Gonorrhoea tests and a young people condom distribution service and integrated prevention programme available from community pharmacies in Bromley. The following table provides performance data. Data for 2020/21 has not been included due to the impact of COVID19 on service delivery.

ELEMENT	ACTIVITY	TOTAL FOR 2018/2019	TOTAL FOR 2019/2020
Health Promotion/ Outreach	C Card New Registrations	1,891	1,771
	Repeat C Card visits	1,484	934
	Condoms distribution (C-Card)	27,831	17,258
	Condoms distribution (excluding C-Card)	21,372	22,962
	Young people aged 15 – 24 screened for chlamydia in 2019	4,986	5,028
Pharmacy activity	EHC dispensed	928	823
HIV Community Nurse Specialist Service	Patients living with HIV in Bromley and seen for care (Calendar Year)	563 (2018)	534 (2019)
Community Contraception and Reproductive Health Service	Bromley residents attended the service	6,877	6,007

Kings provides sexual health services (GUM) including, STI and HIV testing, STI treatment, PrEP/PEP, vaccinations (from 2018/2019) and sexual health advice and counselling. The following table provides performance data. Data for 2020/21 has not been included due to the impact of COVID19 on service delivery.

ELEMENT	ACTIVITY	TOTAL FOR 2018/2019	TOTAL FOR 2019/2020
STI testing	STI testing activity (T2:T7, TS, TT)	5,070	3,938
STI treatment	STI intervention A, B and C, and Warts	2,456	2,090
Vaccinations	Hep A/B vaccinations	NA	75

iii) When considering the sexual health profile of LBB, it is important to note that in terms of genitourinary medicine, rates of diagnoses of chlamydia, gonorrhoea and syphilis have increased between 2017 and 2019 with the number of new diagnoses for gonorrhoea increasing twofold (data for 2020 is not reliable due to the impact of COVID19 on services). In 2019, 58% of all new STI diagnoses were in men. Young people (aged 15-24) accounted for 44.3% of all new STI diagnoses in 2019. New STI diagnosis in gay, bisexual and men who have sex with men (MSM) in Bromley stands at 52.3%, versus the national average of 36.4%. STI incidence is also greatest in Black and Mixed ethnic groups and higher in more deprived areas.

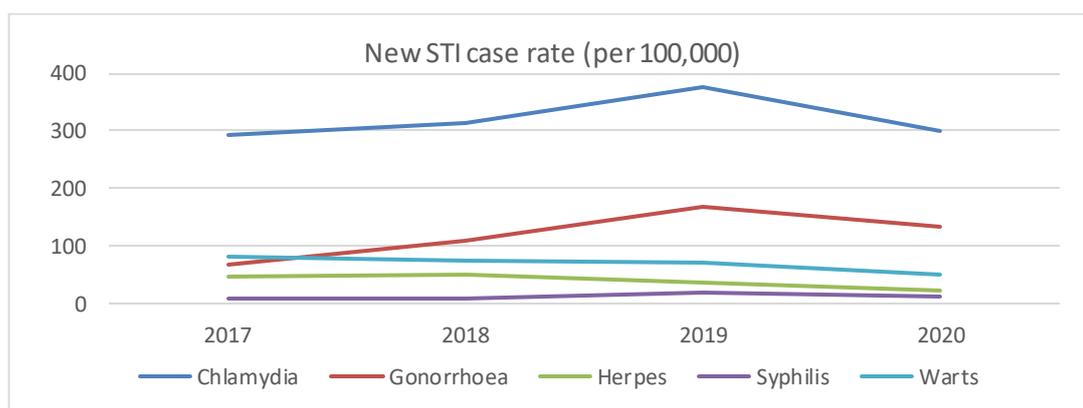


Figure 1 - Rate of new syphilis, gonorrhoea, chlamydia, genital warts, and genital herpes (per 100 000). *PLEASE NOTE: case rates decreased in 2020 due to reduced testing during early stages of the COVID19 pandemic*. Data source: GUMCAD

In 2019, there were 534 known people living with HIV in Bromley (aged 15 – 59), compared to 562 in 2015. In terms of prevalence, 2.69 people per 1000 were living with HIV in 2015, compared with 2.43 in 2019. This was 2.39 in England in 2019, and 5.60 in London. While this looks promising, in 2019/20 there were 11 new HIV diagnoses in Bromley, 5 of which were very late, 3 late and 1 seroconversion. Support and training in early identification and detection by primary and secondary care teams will remain a priority to reduce late to very late diagnosis.

Table 2 – HIV performance indicators. Data source: PHE Fingertips

	2017	2018	2019
HIV PLHIV per 100,000	2.62	2.6	2.43
HIV New Cases per 100,000	20	18	17
HIV testing coverage	70.8%	69.9%	69.8%
Late Diagnosis	43.5% (2015-17)	50% (2016-18)	33.3% (2017-19)

Since 1998, Bromley has achieved a reduction in teenage pregnancies of 57.3%. In 2019, Bromley had 65 teenage pregnancies recorded, equating to 11.9 per 1000 population aged 15-17 years which is lower than both London and England rates of 13.5 and 15.7 respectively. While Bromley continues to achieve reduction in teenage pregnancies, it is important to note that, of these 65 conceptions, 46 equating to 70.8% resulted in abortion. This is higher than both the London and England average, which sits at 64.8% and 54.7% respectively. Increasing the opportunities for promoting the benefits and advantages of contraception in particular the use of LARC and further ease of access to LARC provision is vital in addressing this particular issue.

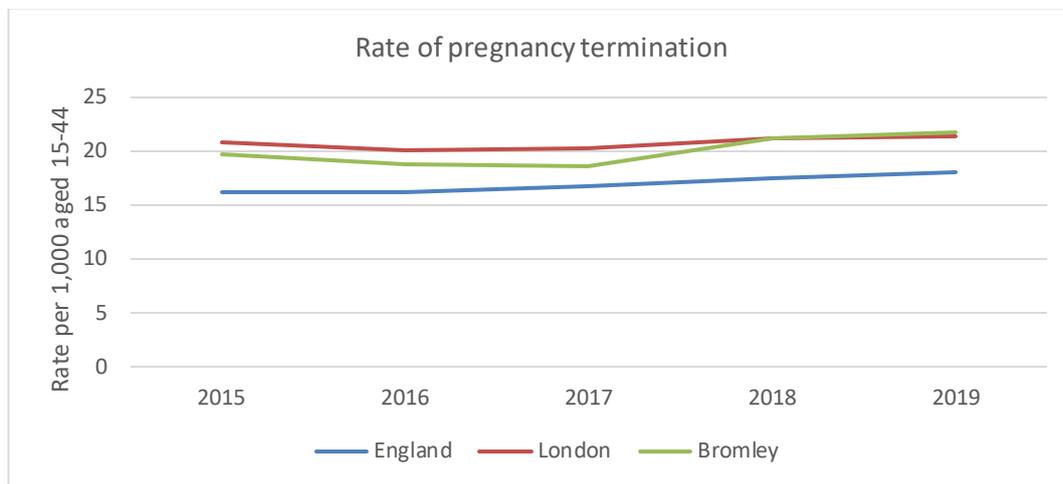


Figure 2 - Number of pregnancy terminations in 1000 people aged 15-44 in England, London and Bromley, 2015-2019

- iv) A review of the sexual health strategy in Bromley will be required in the future to reflect the impact of COVID19 and potential increased future service demands. Understanding the consequences of reduced sexual health and reproductive service activity during early stages of the COVID19 pandemic in relation to STI diagnostic rate such as late HIV diagnosis, delayed treatments leading to increased unplanned pregnancies and reduced access to prevention programmes will assist recovery post COVID19 and future planning. The outreach and community elements of the proposed contract will be essential in COVID19 recovery through signposting, promotion of services in Bromley and early identification and prevention. The integrated service will allow for a more streamlined service, reducing the number of unnecessary appointments and providing the chance for opportunistic screening. This should contribute to preventing the increasing rise in STIs and reduce pressures placed on this service.

3.7 Options Appraisal

- i) **Option 1:** Do Nothing and allow the contract to end on the expiry date.

This is not an option as the Council has a statutory responsibility to ensure this service is provided under the provisions of the Health and Social Care Act 2012. Without this service, Bromley residents would be disadvantaged.

- ii) **Option 2:** Extend the current contract

This is not an option as the current contracts have already been extended for the maximum duration permitted.

- iii) **Option 3:** Approve the procurement of an integrated sexual health service and enable the Council to continue to fulfil its statutory responsibilities with the proposed new model.

3.8 Preferred Option

- i) Option 3 is recommended in order to enhance the integrated sexual health service that is based on local need and evidence of effectiveness, also ensuring best value for Bromley.
- ii) Local authorities have the duty to reduce health inequalities and improve the health of their local population. The provision of open access sexual health services is mandated under the provision of the Health and Social Care Act 2021.
- iii) The new integrated sexual health service is a local service and will promote better control of STIs through the provision of a range of evidence based early identification and prevention interventions focusing on:

- Improving provision for 15 – 24 year olds, especially young men
- Understanding the sexual health needs of and improving access to vulnerable young people and adults including people with learning difficulties and/or mental ill-health
- Targeting those populations most at risk of gonorrhoea and syphilis
- Opportunistic testing for at risk women during clinic visits for contraception

The HIV Community Nurse Specialist Service will be integrated into clinic-based provision and will support reducing late diagnosis rates by improving access to services for targeted groups and providing education to clinicians and others to improve HIV diagnosis rates.

The service will address reducing unplanned teenage pregnancy rates in wards with the highest rates (Penge, Mottingham, Plaistow & Sundridge, The Crays, Darwin) by improving and expanding access to a range of primary, community and clinic-based services offering the full range of contraceptive services including Long Acting and Reversible Contraception (LARC) methods. The integrated sexual health service will also work closely with the wider sexual health system e.g. primary care and One Bromley. There will be clear referral pathways into the service and digital access for specific elements. The service will be widely promoted to ensure equity of access for Bromley residents.

- iv) The long lead-in time of 18 months between procurement and contract go live date has presented commissioners with significant challenges in predicting accurately the volume of activities and associated costs at a time when the impacts of COVID19 are still being assessed. Changes are expected in the coming year when the alterations made to care pathways during the pandemic are embedded and this will affect the case mix and therefore prices. This coupled with the anticipated increase in the London Integrated Sexual Health Tariffs as a response to new treatments, makes the determination of the contract price particularly problematic. Despite these challenges, commissioners are working to accommodate the expected changes to ensure growth and costs are contained within existing budget.
- v) Transformative system change requires time and investment from the provider. Consolidating the learning and innovation from the COVID19 experience and responding to the dynamic arena of sexual health by addressing emerging needs and developing new care pathways and treatments requires Provider commitment. This contract term of five years, will provide both the timescales and resources to secure the best Provider and achieve improved sexual health outcomes for Bromley.
- vi) The Executive is asked to approve the use of the current annual budget of £1,455k per annum as an estimated contract value and proceed to procure a local Integrated Sexual Health Service for a period of 5 years plus the option to extend for a further 2 years at an estimated cost of £1,455k per annum, with an estimated whole life value of a total of £10,185k.
- vii) The Executive is also asked to approve the continuation of provision at Camberwell Clinic in Denmark Hill under the contract held by Lambeth, subject to the procurement decision made by Lambeth.

4. MARKET CONSIDERATIONS

- 4.1 A supplier engagement event was undertaken in September 2021 to understand the current market and the potential range of providers. The virtual event was attended by nine different providers (20 attendees). Attendees included a mix of NHS Trusts and community providers. This demonstrated a buoyant market that has recovered sufficiently from COVID19 to render this tendering process viable. Those present endorsed the proposed model and expressed interest in delivering the integrated sexual health service.

5. SOCIAL VALUE AND LOCAL / NATIONAL PRIORITIES

- 5.1 To adhere to the LBB Sustainable Procurement Policy, the implications of the Social Value Act 2012 will be included in the specifications and the tender process. The Council expects its Service Providers to support the Bromley's Net Zero Action Plan with the ambition to be a carbon neutral council by 2029. The expectations indicated in 5.3, avoid unnecessary travel and potential time off work. The development

of improved and increased digital access to services (particularly STI services) and the channel shift to these services in recent years has helped to improve access to services, reduce wait times and ultimately improve the health profile of Bromley.

5.2 The Provider will be required to be conversant with the key principles of the Social Value Act and consider the environmental, social and economic implications of delivering this service. The Provider will also be expected to comply with all relevant legislation and regulatory requirements.

5.3 The following social value outcomes and indicators are included in the service specification:

Economic outcomes:

REF	OUTCOME	EXPECTATION
EC1	Create and sustain jobs for local people	The Provider will seek to recruit local residents will work in the service where possible and practicable
EC3	Promotion of opportunities to work with social enterprise partnerships, voluntary and community sector organisations and small and medium sized enterprises	The incumbent provider of the contraception services is a community interest company established locally. Collaborative bids are welcomed from consortia comprising CICs, voluntary sector organisations as well as NHS Trusts

Social outcomes:

REF	OUTCOME	EXPECTATION
S1	Consider equality and diversity in the provision and operation of services including a workforce that is representative of the communities we serve where relevant and proportionate	Equal access to services is essential, especially to address health inequalities and diverse communities across LBB. Services must be available across the borough and operated by staff that reflect LBB's community. The provider is expected to maximise its digital capital to achieve greater reach without disadvantaging or excluding marginalised communities.
S3	Promote the safeguarding and welfare of children, young people and vulnerable adults	The Provider must have a robust safeguarding policy and procedure for children, young people and vulnerable adults
S4	Improving the health and wellbeing of local residents including employees	The service will improve the sexual health of local residents

Environmental outcomes:

REF	OUTCOME	EXPECTATION
EN2	Efficient use of resources by minimising waste	The Provider will provide evidence of minimising waste including recycling polies and their use of digital records and paper free offices where possible
EN3	Reduce energy and fuel consumption in the provision of the service	The Provider will be expected to encourage staff to reduce fuel consumption and to promote sustainable and active travel. Services provided must be accessible by public transport for services The Provider will be committed to improving energy efficiencies in their estates and settings used to deliver the service

5.4 Social Value will be monitored for the life of the contract period. The impact will be tracked through quality indicators and reviewed at quarterly monitoring meetings.

6. STAKEHOLDER ENGAGEMENT

6.1 An Assessment of Sexual and Reproductive Health Needs was conducted by Public Health in 2019 to examine the sexual and reproductive health needs of the LBB population and to identify population level sexual health outcomes. This report provided an understanding of the needs and gaps in service provision of sexual health services commissioned by Public Health in Bromley. The COVID19 Needs Assessment (currently in draft form) undertaken in 2021 has provided additional information on the challenges for sexual health services and how recovery can be shaped. These findings have been incorporated into service redesign. This report has also affirmed the gaps and needs identified in 2019.

6.2 Consultation with service users in Bromley has been conducted through a survey that focused on access to sexual health services. The service specification will be modified to include these perspectives. LBB has also been included in the South East London consultation programme (Future Insights Partnership Project). This is a three phase consultation project that includes an online survey, focus group and mystery shopping exercises. The initial findings have been useful for shaping the integrated sexual health service in Bromley.

6.3 Clinical perspectives have been sought through interviews with stakeholders. Clinicians and key informants interviewed are those with experience in the field and are individuals currently delivering sexual health services in LBB. Their reflections will be invaluable in shaping the new service.

7. PROCUREMENT AND PROJECT TIMESCALES AND GOVERNANCE ARRANGEMENTS

7.1 **Estimated Value of Proposed Action:** £1,455k per year of contract with an estimated whole life contract value of £10,185k for 5 years plus extension option of 2 further years

7.2 **Other Associated Costs:** None

7.3 **Proposed Contract Period:** 1st April 2023 – 31st March 2028 plus the option to extend for a further 2 years to 31st March 2030

7.4 The specification is being developed in line with the national specification³ The procurement will be guided by a detailed phased plan. A brief outline of plan is set out below:

Phase 1	November 2020 – January 2021	Initiating project team, scoping, data analysis
Phase 2	January 2021 – March 2021	Scoping and development
Phase 3	April 2021 – June 2021	Engagement
Phase 4	July 2021 – September 2021	Service development, market engagement
Phase 5	September 2021 – February 2022	Pre – tender period
Phase 6	February 2022 – March 2022	Main procurement activity Instruction to Tender
Phase 7	April 2022	Evaluation of bids/selection of provider
Phase 8	July 2022 – August 2022	Award Decision and Approval to Award Contract let
Phase 9	September 2022 – March 2023	Service transition Contract mobilisation period
Phase 10	1 st April 2023	Contract Start

A Sexual Health Procurement Project Team has been established. Team members have been assigned specific tasks and roles according to the project plan. The service specification is being developed in line with national guidance and according to local service planning and modelling. Local consultation and

³ Integrated Sexual Health Services – A suggested national service specification, August 2018, Public Health England, and Department for Health & Social Care
Gateway Report Member Decision
November 2021

market engagement has informed the development of the specification. Learning from the COVID19 pandemic has informed service development and delivery specifically in relation to the digital offer and access to services.

In line with the Authority's Procurement Guidance, an open, two stage procurement process with a 60%:40% Finance: Quality weighting is being administered.

8. IMPACT ASSESSMENTS

8.1 It is expected to conduct an impact assessment as an integral part of the procurement process.

9. POLICY CONSIDERATIONS

9.1 This Service will meet the Council's objectives within 'Making Bromley Even Better' by supporting the vision of making Bromley, ' a fantastic place to live and work where everyone can lead healthy, safe and independent lives'.

9.2 The Council's Contact Procedure Rules (CPR 5.3) requires that 'Where the value of the intended arrangement is £1,000,000 or more, the Executive will be formally consulted on the intended action and contracting arrangements.

10. IT AND GDPR CONSIDERATIONS

10.1 The Provider must have processes in place to collect service and service user information and upload/share anonymised individual level data to specified national data collection systems.

10.2 Personal data must be protected in accordance with requirements of the UK General Data Protection Regulation (GDPR) and the Data protection Act 2018. A data protection impact assessment (DPIA) will be completed as part of the procurement process.

10.3 The Council, as part of its on-going commitment and sustaining a progressive approach to data protection and information management, requires the following be considered and evidenced:

- Privacy By design – the Council shall undertake a Data Protection Impact Assessment and manage all residual risk
- The Council must ensure that the contract and any information sharing agreements have robust clauses relating to data management
- The Council must ensure that there is an appropriate exit strategy in relation to information retention requirements and transfer with the incumbent provider where necessary

11. STRATEGIC PROPERTY

11.1 N/A

12. PROCUREMENT RULES

12.1 This report seeks Approval to proceed to procurement for an Integrated Sexual Health Service for a period of five years with the option to extend for a further period of two years from 1st April 2023. The estimated whole life value of the Contract will be £10,185k (£1,455k per annum)

12.2 This is an above threshold contract, covered by Schedule 3 of the Public Contracts Regulations 2015. A Restricted process will be used and a timetable is included at Section 7.4 above.

12.3 The Council's specific requirements for authorising proceeding to procurement are covered in Rules 1 and 5 of the Contract Procedure Rules with the need to obtain the Approval of Executive following agreement of the Assistant Director Governance & Contracts, the Director of Finance, the Director of Corporate Services and Director of Public Health for a procurement of this value.

- 12.4 In accordance with Contract Procedure Rule 2.1.2, Officers must take all necessary professional advice.
- 12.5 In compliance with the Council's Contract Procedure Rules (Rule 3.6.1), this procurement must be carried out using the Council's e-procurement system.
- 12.6 The actions identified in this report are provided for within the Council's Contract Procedure Rules, and the proposed actions can be completed in compliance with their content.

13. FINANCIAL CONSIDERATIONS

- 13.1 The estimated value of the proposed integrated service is £1,455k per annum with a whole life value of £10,185k over the maximum 7 year term.
- 13.2 This value is based on the combined values of the current Bromley Healthcare and King's contracts (less estimated costs of activities at Camberwell clinics). Although there may be efficiencies/economies of scale achieved by combining these contracts, it should be noted that the cost of the Bromley Healthcare contract has remained the same since 2017.
- 13.3 Any variation from this estimated value following the tender process and recommended contract award will be dealt with as part of future Public Health budget considerations.

14. PERSONNEL CONSIDERATIONS

- 14.1 There are no personnel implications for the London Borough of Bromley. When incorporating elements of their contracts, TUPE may apply to both the LBB contract and the King's contract. However, the Providers will be expected to address all staffing implications including TUPE arrangements and engage in appropriate staff engagement.

15. LEGAL CONSIDERATIONS

- 15.1 The Council has a statutory duty to improve the health of the population and to provide local public health services as set out in the Health and Social Care Act 2012 and associated regulations, this includes a mandated requirement for local authorities to provide or make arrangements to secure the provision of comprehensive open access sexual health services. The Council has the powers under the Health and Social Care Act 2012 and associated regulations to conduct the procurement exercise described in this report.
- 15.2 The Contract in respect of which Approval is being sought by way of this Report is a public contract for services under the light touch category within the meaning Public Contracts Regulation 2015 (the Regulations). As the value falls above the relevant threshold (£663,540) the Regulations would require the Council to carry out a full light touch procurement exercise in accordance with the Regulations.
- 15.3 Under the Council's Contract Procedure Rules (CPR) the decision to commence procurement is by way of Executive authorisation and due to the contract value (£10,185k over the extended contract period) which is over £1,000,000 must be approved by the Executive with the agreement of the Assistant Director Governance & Contracts, the Director of Finance, the Director of Corporate Services and Director of Public Health by way of this Gateway Report in accordance with Rule 1 and Rule 5 of the CPR.
- 15.4 The Council would have to comply with the Regulations and the CPR in relation to the procurement of this Contract.
- 15.5 Officers may (if they wish) consult Legal Services on any legal issues in connection with the procurement and in relation to the contract documentation

Non-Applicable Sections:	None
Background Documents: (Access via Contact Officer)	Sexual Health Needs Assessment for Bromley 2019