

Report to:	Cabinet	Date of Meeting:	7 April 2022
Subject:	Activation of the Extensions to the Community Infection Prevention and Control Service Contract		
Report of:	Executive Director People	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Health and Wellbeing		
Is this a Key Decision:	Y	Included in Forward Plan:	Yes
Exempt / Confidential Report:	N		

Summary:

The Sefton Community Infection Prevention and Control Service is currently provided by Mersey Care NHS Foundation Trust. The core contract period ends on 31st August 2022.

The available options are:

1. To activate the 2 x 12month contact extension clauses within the contract
2. To re-procure the Service with a start date of 1st September 2022.

Recommendation(s):

(1) Approval is requested for the Director of Public Health to be granted delegated authority to activate both of the 2 x 12-month contract extension clauses in consultation with the Cabinet Member for Health and Wellbeing. The first contract extension would be activated on the 1st September 2022. The second contract extension clause to be activated on 1st September 2023 subject to continued satisfactory delivery of the Service against the service specification and annual work programme.

Reasons for the Recommendation(s):

Due to the COVID-19 pandemic and the subsequent increased requirement for the Community Infection Prevention and Control Services in Sefton. The Service was reviewed in 2020 and an expanded Service Specification was developed with a corresponding increase to funding for this Service.

Additional demands on the Service have continued with both responsive work due to outbreaks and additional expert infection prevention and control advice and support across the community health and care sector to support quality and safety for those receiving care in Sefton.

The Service continues to deliver against the additional priorities identified during the Service review in 2020:

- Management and prevention of outbreaks in complex community settings, cases,
- Clusters and outbreaks involving people in vulnerable groups,
- Increasing skills and knowledge in community settings around prevention in order to reduce the number of community outbreaks in Sefton

The Service has continued to perform well against the agreed annual work plan, supporting community providers to improve quality, through supportive visits, advice and guidance, audit, and training.

Alternative Options Considered and Rejected: (including any Risk Implications)

The alternative option is not to extend the current contract with the Service and move to procure a new Community Infection Prevention and Control Service with a contract start date of 1st September 2022.

Moving to a procurement exercise has the potential to destabilise current Service delivery and to stall progress against agreed workplan objectives.

Additionally, there would be an opportunity cost associated with the officer time required for a procurement which would reduce capacity to deliver against key priorities in Sefton. This would include an impact on health protection capacity within the Sefton Council Public Health team.

What will it cost and how will it be financed?

(A) Revenue Costs

The service will be financed through Public Health budgets currently allocated to the community infection control service. The current annual cost and budget for this Service is £271,000.

The cost and budget for this Service was increased following a review of the Service in 2020 in response to the COVID-19 pandemic and the development of an expanded service specification. The expanded Service offer began in 2021 when the new service specification was introduced through a contract variation with the current provider. There are no plans to reduce the budget for this Service as it is a key priority to support vulnerable and complex community settings to reduce the risks of outbreak associated with COVID-19 or other existing or emerging pathogens.

The costs of this service are in-line with the costs of other similar services commissioned in Cheshire and Merseyside.

(B) Capital Costs

There are no capital costs for the Council associated with this service.

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets):
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The activation of the contract extension aims to offer maximum value for money through
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supporting ongoing Service development aimed at preventing infections and outbreaks in community settings and improving quality and safety for those receiving community care provision in Sefton. Whilst there has been a recent increase in the costs of delivering this service in Sefton, it has been a key priority to ensure that complex and vulnerable community settings in Sefton are supported to reduce the risks of infections and outbreaks of COVID-19 and other existing or emerging pathogens.

Legal Implications:

The contract extension clauses are part of the existing contract with the Provider.

Equality Implications:

There are no equality implications.

Climate Emergency Implications:

The recommendations within this report will

Have a positive impact	N
Have a neutral impact	Y
Have a negative impact	N
The Author has undertaken the Climate Emergency training for report authors	Y

This Service has a neutral climate impact. The Service provides expert advice and support to community care providers and in doing aims to reduce the impact of communicable diseases within complex and vulnerable community settings.

Contribution to the Council’s Core Purpose:

Protect the most vulnerable:

The Community Infection Prevention and Control Service provides support to complex and/or vulnerable settings, supporting the quality of provision to the most vulnerable in Sefton.

Facilitate confident and resilient communities:

The Community Infection Prevention and Control Service work-programme aims to increase knowledge and skills for those working in complex settings and with vulnerable groups in Sefton.

Commission, broker and provide core services:

Commissioning the Community Infection Prevention and Control Service is a core public health responsibility of the Local Authority

Place – leadership and influencer:

Not applicable.

Drivers of change and reform:

The Community Infection Prevention and Control Service offer will support quality improvements in relation to infection prevention and control in key community settings. This will be achieved through providing leadership to key provider and stakeholder sectors, increasing their capacity, skill and knowledge

Facilitate sustainable economic prosperity:

Effective management of cases and outbreaks of communicable disease in community settings is key to sustainable economic growth throughout the Borough.

Greater income for social investment:

Not applicable
Cleaner Greener Not applicable

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Executive Director of Corporate Resources and Customer Services (FD 6749/22) and the Chief Legal and Democratic Officer (LD 4949/22) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

The Service provides specialist input to Services in the community commissioned by the Local Authority, such as care homes, and some services, such as hospices, commissioned by South Sefton and Southport and Formby Clinical Commissioning Group. The Service also provides expert advice to the Local Authority and the two CCGs regarding infection prevention and control in the community.

Therefore, the two CCGs are key stakeholders for this Service, and consultation and engagement regarding this Service is ongoing.

Implementation Date for the Decision

Following the expiry of the “call-in” period for the Minutes of the Cabinet Meeting

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Appendices:

There are no appendices to this report

Background Papers:

The following background papers, from the Cabinet Meeting Agenda and Minutes 1st November 2018 and Cabinet Member for Health and Wellbeing decision paper 4th November 2020 can be accessed on the Council website www.sefton.gov.uk

1. Background

1.1. In accordance with Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013,

Regulation 8, the aim of the community infection prevention and control service is to promote infection prevention and control standards within primary and social care providers. In order to protect Sefton residents from communicable disease this service provides root cause analysis, education, advice and audit support. The service also responds to cases, clusters, and outbreaks of communicable disease within the community, in partnership where necessary and following agreed protocols.

- 1.2. The Community Infection Prevention and Control Service was procured in 2019 through an OJEU light touch open procedure. The contract started 1 September 2019 and has a three-year core contract ending on 31 August 2022 with two, one-year built in extension options (3+1+1). Following this procurement process the contract was awarded to Mersey Care NHS Foundation Trust.

2. Review and expansion of Service in 2020

- 2.1. Due to the COVID-19 pandemic and the subsequent increased requirement for the community infection prevention and control services in Sefton. The Service was reviewed in 2020 and an expanded service specification was developed with a corresponding increase to funding for this service.
- 2.2. The key elements to the new expanded Service are related to;
 - 2.2..1. Management and prevention of outbreaks in complex community settings,
 - 2.2..2. Responses to cases, clusters and outbreaks involving people in vulnerable groups
 - 2.2..3. Increasing skills and knowledge in community settings around prevention in order to reduce the number of community outbreaks in Sefton.
- 2.3. In November 2020 a decision paper to extend the scale and scope of the Community Infection Prevention and Control Service was approved by the Cabinet Member for Health and Wellbeing.
- 2.4. The cost of the Service increased from £128,000 per annum to £271,000 per annum, an increase of £143,000 per annum, in Quarter 2 of the 2021/22 financial year, following mobilisation of the new Service offer.

3. Key Elements of the Service

- 3.1. The aim of the community infection prevention and control service is to promote infection prevention and control standards within primary, community social care providers.
- 3.2. The Service provides root cause analysis, education, advice and audit support.
- 3.3. The Service also responds to cases, clusters, and outbreaks of communicable disease within the community, in partnership where necessary and following agreed protocols.
- 3.4. A key focus of the Service is around responding to cases, clusters, and outbreaks of COVID-19 in primary care, and in community health and social care settings. This response prioritises vulnerable people and complex settings, including care homes, supported living, hospices, settings that provide care for older or clinically vulnerable people, hostels and shelters for people experiencing homelessness, social care providers, general practice and schools and early years settings.
- 3.5. As well as providing the expertise required to respond to communicable diseases, the Service aims to provide strategic leadership, supporting community health and social care providers, and complex settings to improve infection prevention and control competence and compliance. This will be achieved through engagement, education and training and supporting sector led improvement. This preventative

and upstream input will support COVID-19 responses in Sefton and will help to mitigate future impacts of emerging pathogens, outbreaks, or pandemics.

- 3.6. The Service will continue its work to reduce and sustain reductions in healthcare-associated infections. In particular, the Service will support commissioners to achieve a reduction in the rate of Health Care Acquired Infections with a particular focus on gram negative blood stream infections (GNBSIs) and Clostridium difficile infection (CDI), in line with national objectives and support the Clinical Commissioning Groups (CCGs) to deliver on the requirement for zero tolerance of avoidable Methicillin-resistant Staphylococcus aureus (MRSA) bacteraemia.

4. Annual work-plan and performance

- 4.1. Performance of the Service is measured against the annual work programme, with quarterly review meetings held between the local authority public health team, the local clinical commissioning groups, and the service managers.
- 4.2. The annual work programme utilises a dynamic risk stratification matrix to support the prioritisation of service planning and activity. This allows for the management and prioritisation of both planned and responsive work.
- 4.3. The annual work programme includes the following key objectives:
- 4.4. **COVID-19 and emerging pathogens or pandemics**
 - 4.4..1. The Service will prioritise the response to cases and outbreaks of COVID-19 and other communicable diseases. Work will include preparation and planning for surges in cases and outbreaks and potential novel emerging pathogen which pose a risk to public health.
- 4.5. **Root Cause Analysis**
 - 4.5..1. The Service is responsible for supporting or undertaking, when necessary, a robust root-cause analysis (RCA) process for community-associated infections, such as Methicillin-resistant Staphylococcus aureus (MRSA), on behalf of the commissioners and in collaboration with partners.
 - 4.5..2. The Service supports implementation and management of the new MRSA Post Infection Review (PIR) process.
- 4.6. **Audit**
 - 4.6..1. The Service will undertake a targeted audit programme for primary care (excluding dental practices), care homes, and other providers, including service provider applicants under the NHS Any Qualified Provider (AQP) procurement arrangements, as agreed with commissioners, and based on an agreed risk-assessment process.
 - 4.6..2. Repeat audits will be carried out based on a risk assessment, and stratification, and identified within the annual work programme.
- 4.7. **Education and Training**
 - 4.7..1. The Service will provide infection control education and training to primary and social care providers in the community. The Service will support development of a competent group of infection control link workers and champions in primary care and social care providers, including care homes, general practice, and hospice settings, to assist in cascading information.
- 4.8. **Decontamination and Environmental Cleanliness**
 - 4.8..1. The Service will support general practices (GPs) and care homes to implement National Patient Safety Agency (NPSA) tools and related audit tools to support providers to demonstrate high standards of cleanliness and equipment decontamination in compliance with legislation.
- 4.9. **Incident and Outbreak Management and Contact-Tracing**

- 4.9..1. The Service will manage, document and report community outbreaks and incidents in relation to infection prevention and control and perform contact tracing – using national protocols - for specific infections/ infectious diseases as agreed between the DPH and UKHSA.
- 4.9..2. This will include responses to COVID-19 in community settings. An agreed minimum data set will be collected and shared as required and a record of cases, clusters, outbreaks that have been responded to will be produced and will be used to monitor service activity, and support prioritisation of key/critical settings.
- 4.10. Frequent communications between the local authority, the clinical commissioning groups and the Service have facilitated prioritisation of support to vulnerable and complex settings experiencing outbreak. As a consequence, the scheduling of planned work, such as audits, has been adjusted within the annual work plan.
- 4.11. The Service has performed well against targets agreed in the annual work programme.

5. Summary

- 5.1. The Sefton Community Infection Prevention and Control Service core contract expires on 31st August 2022.
- 5.2. Contract extension clauses provide 2 x 12-month optional contract extensions.
- 5.3. Approval is sought for the Director of Public Health to be granted delegated authority to activate the contract extension clauses within the current service contract in consultation with the Cabinet Member for Health and Wellbeing.
- 5.4. The first contract extension would be activated on the 1st September 2022.
- 5.5. The second contract extension clause to be activated on 1st September 2023 subject to continued satisfactory delivery of the Service against the service specification and annual work programme.