

Report to:	Cabinet	Date of Meeting:	Thursday 1 st November 2018
Subject:	Procurement of Sefton Community Infection Prevention and Control Service		
Report of:	Head of Health and Wellbeing	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Health and Wellbeing		
Is this a Key Decision:	Yes	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

The Sefton Community Infection Prevention and Control Service is currently provided by Mersey Care NHS Foundation Trust. The current contract is due to expire 30th June 2019.

The available options are:

1. To extend the current contract for an additional 2 months and re-procure the Service with a start date of 1st September 2019.
2. To re-procure the Service with a start date of 1st July 2019.

Recommendation(s):

(1) That the Chief Executive be authorised to conduct an OJEU Light Touch Regime tender exercise for the Community Infection Control Service to run for a period of three years from 1st September 2019 with the option of two further one-year extensions.

(2) The evaluation be based on MEAT (Most Economically Advantageous Tender) taking into consideration a balance between Quality and Cost.

(3) Approval is requested for Chief Executive delegated authority to award the contract, following the tender exercise, in consultation with the Cabinet Member for Health and Wellbeing.

Reasons for the Recommendation(s):

The Sefton Community Infection Prevention and Control Service supports hospices, care homes and schools across the Borough to prevent and manage communicable disease outbreaks.

The Service works closely with care homes across the Borough to support the management, control and prevention of influenza and norovirus (winter vomiting bug). This ensures that vulnerable care home residents are protected during community

outbreaks of norovirus and influenza. Consequently, there is a high level of critical activity for this Service when seasonal flu and norovirus are circulating within the community. This peak in activity typically occurs between early November and mid- April.

Extending the contract by an additional two months would ensure that activity related to procurement and mobilisation take place after this period. The submission of bids would take place toward the end of April 2019 and the mobilisation would take place from June to August 2019. This option would allow a period of two months following the new Service contract start date before we would expect a seasonal increase in activity.

It is proposed that the contract is awarded on the basis of a core contract period of three years with two further optional extension periods of one year each. The purpose of building contracts around core and extension periods is to ensure that the quality of the contract is maintained throughout the life of the contract and to ensure that the Council, particularly at times of financial uncertainty, has flexibility to bring contracts to a conclusion and/or is able to refine services and or goods received under the contract

Note: The Community Infection Prevention and Control Service is part of the mandated health protection function of Public Health in the Local Authority, this is set out in Part 2 of the Local Authorities (Public Health Functions and Entry to Premises by Local Healthwatch Representatives) Regulations 2013, Regulation 8.

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

Re-procuring the Service with a start date of 1 July 2019.

This option would involve submission of bids in January/February 2019 with mobilisation of the new Service commencing 1st April 2019, during the services anticipated peak in activity.

Therefore, this option could potentially impact on the services ability to respond to community outbreaks.

This option has been rejected due to risks associated with procurement and mobilisation of this Service during the anticipated seasonal peak in critical activities, which occurs between November and April.

What will it cost and how will it be financed?

(A) Revenue Costs

The service will be financed through budgets currently allocated to the community infection control service. The current annual cost and budget for this Service is £128,000.

As this service has previously been market tested at a lower financial envelope and did not receive any bids we do not propose any reductions in funding for this service. This level of provision is similar to neighbouring authority's provision and cost.

(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): The proposals aim to offer maximum value for money. The procurement process will require officer time.
Legal Implications: The proposed procurement must follow the procedures within the Public Contracts Regulations 2015, as amended.
Equality Implications: There are no equality implications.

Contribution to the Council's Core Purpose:

Protect the most vulnerable: The Sefton community infection control service works with care homes, and hospices to ensure infection prevention and control standards are maintained, and to ensure outbreaks are controlled, in order to protect the most vulnerable in Sefton's communities
Facilitate confident and resilient communities: Sefton community infection control service is a key element of the local health resilience partnership (LHRP) which can be mobilised to support management of any large scale or serious incidents or outbreaks.
Commission, broker and provide core services: Commissioning the community infection control service is a core responsibility of Public Health in the Local Authority.
Place – leadership and influencer: Not Applicable
Drivers of change and reform: The service initiates, and drives forward quality improvement in care homes and other locally commissioned providers across the Borough.
Facilitate sustainable economic prosperity: Not applicable.
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 Head of Corporate Resources (FD5327/18) and Head of Regulation and Compliance (LD4552/18) 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:

There are no background papers available for inspection.

1. Introduction/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 current Service is provided by Mersey Care NHS Foundation Trust, and was novated from Liverpool Community Health NHS Trust (LCHT) in 2017 with a contract extension agreed until 30th June 2019. This arrangement was made as part of the LCHT Transition Board to secure the continuation of the service through a transfer to a new provider organisation, as part of the bundle of South Sefton CCG services transitioning to new providers, and was agreed by the Cabinet Member for Health and Wellbeing June 2017.
- 1.3 This was following an attempt by Sefton Council to procure an alternative Community Infection Prevention and Control Service in 2016, which failed to attract any bidders. Following the failed procurement, the notice to terminate the Contract was revoked and the Service reverted to the original termination date of

30th June 2017, with the option of two further one year extensions. Two extension options have subsequently been activated, resulting in a contract end date of 30th June 2019.

2.0 Key Elements of the Service

2.1 The current key aims and objectives of the Service are set out below:

2.2 Support zero tolerance approach to MRSA and learn lessons from Post Infection Review (PIR)

- Develop robust PIR processes to ensure lessons are learnt in collaboration with key stakeholders/services
- Feedback to the system on trend analysis and lead improvements in analytical capability and the use of infection prevention and control intelligence
- Use PIR analysis to plan and implement infection prevention and control actions.

2.2 Support national target for 50% reduction of gram negative blood stream infections (BSI) by 2021

- Support commissioners to reduce E.coli BSI by 10% in 2017/18
- Collaborate with CCG, NHS improvement and PHE to implement reduction strategies.
- Develop robust root cause analysis (RCA) processes with an emphasis on quality improvement in collaboration with key stakeholders/services
- Feedback to the system on trend analysis and use RCA analysis to plan and implement infection prevention and control actions

2.3 Audit including decontamination and environmental cleanliness education and training

- Targeted audit programme for primary care, care homes and other providers.
- Support providers to implement national tools around environmental cleanliness and equipment decontamination.
- Provide infection control education and training to primary and social care providers in the community.
- Develop a competent group of infection control links and champions in primary care and social care providers.
- Monitor attendance and uptake of training against plan through monthly reports.

2.4 Outbreak, Incident and contact tracing

- Manage, document and report community outbreaks and incidents in relation to infection prevention and control and perform contact tracing.
- Support incident and outbreak management and contact-tracing, in close collaboration with Public health England.
- Ensure outbreaks (including two or more cases in the same place at the same time or one case of particular infections e.g. scabies) receive priority.

2.5 Expert advice and support. Reduce and sustain reductions in community care acquired infections

- Actively promote the Service with providers so that they know how and when to access it.
- Provide expert advice and support to primary health and social care providers and members of the public where appropriate.

- Facilitate access of primary and social care providers to infection control tools and best practice guidance.

3. Tender Method

- 3.1. The tender exercise will follow an OJEU Light-Touch Regime Open Procedure. Approval is requested for Chief Executive delegated authority to award the contract at the end of the tender process, in consultation with the Cabinet Member for Health and Wellbeing.
- 3.2. The evaluation will be based on MEAT (Most Economically Advantageous Tender) taking into consideration a balance between Quality and Cost.
- 3.3. The new contract will run for a period of three years from 1st September 2019 with the option of two further one year extensions (3+1+1). The contract will however include clauses that can be activated in the event the council needs to vary the contract or terminate the contract early.

4. Summary

- 4.1 The Sefton Community Infection Prevention and Control Service contract expires on 1 July 2019.
- 4.2 Approval is sought to:
 - Extend the current contract by an additional two months so that procurement and mobilisation of the new Service will not destabilise the Service during the seasonal peak in activity (November-April).
 - Re-procure the Service using the procedures set out above with a start date of 1st September 2019 with a 3+1+1 contract.
- 4.3 Approval is requested for Chief Executive delegated authority to award the contract at the end of the tender process, in consultation with the Cabinet Member for Health and Wellbeing.