

Report to CABINET

Procurement of Social Prescribing Service Part A

Portfolio Holder:

Councillor Barbara Brownridge, Cabinet Member Health & Social Care

Officer Contact: Rebecca Fletcher, Director of Public Health (Interim)

Report Author: Rachel Dyson, Thriving Communities Lead

18th March 2024

Reason for Decision

To approve the procurement of an all age social prescribing service.

Recommendations

Cabinet is asked to consider and agree:

- a) the procurement of an all age social prescribing service for a period of 5 years, with the option to extend for 2x +2 year periods
- b) to delegate authority to the Director of Public Health, in consultation with the relevant Cabinet Member, to award the contract following use of the NHS Provider Selection Regime (PSR) to select a provider
- c) to delegate authority to the Director of Public Health, in consultation with the relevant Cabinet Member, to approve any extensions to the contract as provided for within the original contract terms and where there is budget available

Procurement of Social Prescribing Service

1 Background

- 1.1 Oldham's Social Prescribing model was initially developed in 2019 as an Innovation Partnership through Oldham's Thriving Communities strand of the Greater Manchester (GM) Health & Social Care Transformation Programme. The initial contract was for 3 years, with the potential to extend 3x 12. This was joint funded by the GM Health & Social Care Transformation Fund and earmarked Council reserves. Action Together were appointed as the lead provider, with a consortium of Voluntary, Community, Faith & Social Enterprise (VCFSE) organisations working together to deliver the service. All the available extensions to the existing contract have now been used, and the current contract is due to end on 31st October 2024.
- 1.2 The intention of the Innovation Partnership was that the flexible approach could respond to need and the developing service/system context, and this learning would inform future commissioning and delivery approaches. The offer includes both social prescribing, through link workers, alongside capacity building within the VCFSE sector to grow the available 'social prescriptions' within the community.
- 1.3 In the NHS Long Term Plan (2019), NHS England committed to building the infrastructure for social prescribing in primary care and embedding social prescribing and community-based approaches across the NHS. This included introducing social prescribing link workers into Primary Care Networks, and in 2022 introducing a requirement for primary care networks to provide a proactive social prescribing service as part of the contract. As a result, in Oldham, the Social Prescribing model has expanded since 2019 to incorporate PCN Social Prescribing Link Workers in every PCN as part of the wider network model, by agreement between the contracted provider and each PCN.
- 1.4 The ambition to deliver community-led prevention approaches is also well embedded in wider strategies across the Oldham system. The broad nature of wellbeing and the support offer mean that outcomes achieved through a strong Social Prescribing offer are critical to reducing demands and costs in other areas of the system such as Adult Social Care, Children's Services, and Housing. An independent evaluation of the service was undertaken during 2021 and demonstrated the positive impact of the service on participants' wellbeing, as well as reduced demand and cost to wider system services over the longer-term.

2 Current Position

- 2.1 All the available extensions to the existing contract have now been utilised, and the current contract is due to end on 31st October 2024.
- 2.2 The current Social Prescribing offer is considered a key contributor within the Adults Target Operating Model, Children's Early Help Strategy and Housing prevention offer, acting as step-down and improving flow through the system. This has involved the development of a number of specialised elements to the service; children and young people's link workers,

and during 23-24 piloting of a dedicated link worker role in Adults Referral Contact Centre (ARCC). Alongside this a volunteer model has been developed to help support clients with lower-level needs.

- 2.3 NHS England have yet to release the plans for post March 2024 for the Primary Care Network Directed Enhanced Service, however, during 2023/24 NHS England will undertake a review of the additional workforce role as outlined in the Additional Roles Reimbursement Scheme (ARRS) to ensure that it is tailored to deliver future ambitions for general practice.
- 2.4 Demand for the service has increased over the lifetime of the contract, with the service receiving 2,096 unique referrals in 21-22, 2,509 in 22-23 and 2,293 up to the end of Q3 23-24. The majority of referrals into the service are made by professionals in Primary Care, Mental Health Services, Acute Health Services and Social Care, although more than 1 in 10 are self-referrals. People are primarily referred into the service due to loneliness and isolation or mental health and wellbeing, however reasons for referral also include issues with welfare and money management, long-term conditions and housing. The children and young people's element of the service began in early 2023 and has now received over 200 referrals.
- 2.5 Continued high levels of demand on statutory and specialist services within the health and social care system, and the demand from those services into the current Social Prescribing service suggests there remains a need for this kind of earlier intervention service within Oldham. The current service has achieved demonstrable outcomes to improve the wellbeing of residents using the service, and to reduce demand on statutory services, as evidence by the Thriving Communities Evaluation (2021).
- 2.6 It is proposed that the Council recommission a Social Prescribing service, building on the learning from the existing model. The service should continue to be focused on earlier intervention to support residents struggling with their health and wellbeing through a strengths-based approach, connecting people to activities and support within their community as well as coordinating support from public services. It will be important to ensure that the service is integrated at neighbourhood level with Place-based Integration, Family Hubs and Primary Care MDTs. Pathways between the social prescribing service and other key early intervention and wellbeing services such as Early Help, Health Improvement and Focussed Care, will need to be defined and operational, as will step-down from Social Care services.
- 2.7 The Social Prescribing service will form a key part of the prevention offer in Oldham, and it will be important to ensure the offer is aligned with the Prevention Framework, in particular supporting residents at the 'Staying Well' and 'Problems and Challenges' levels of the framework.
- 2.8 The Council also currently hold the license for cloud based software system Elemental (from Access Ltd.) which is used by the Social Prescribing service. This system, or other suitable system would be required to support the service so it is proposed that this should be considered within the scope of the procurement.

3 Options/Alternatives

- 3.1 **Option 1** – Do not reprocore a Social Prescribing service.
- 3.2 **Option 2** – Procure an all age Social Prescribing service, with a contract length of 5 years, with the option to extend for 2x +2 year periods.

4 Preferred Option

- 4.1 Option 2 is the preferred option. There will be continuity of service to support residents who are struggling, through an offer of earlier intervention with the aim of improving wellbeing outcomes and continuing to prevent demand and pressure on statutory services.

This will require the Council to follow the NHS Provider Selection Regime to identify a provider.

5 Consultation

- 5.1 The need to continue to invest in preventative services, and community-led prevention approaches has been identified through a number of pieces of work over the last few years, including the Thriving Communities programme evaluation (2021) and the development of the Prevention Framework.
- 5.2 A consultation process will be undertaken with service users as part of the procurement process for the new Social Prescribing service.
- 5.3 Engagement has taken place during the development of this proposal with the Director of Adult Social Care, Director of Public Health and Assistant Director Early Help as well as with the Place Lead for the Integrated Care Partnership.

6 Financial Implications

Revenue

- 6.1 The purpose of this report is to seek the following approvals.
- The procurement of an all-age social prescribing service for a period of 5 years, with the option to extend for 2x +2-year periods.
 - To delegate authority to the Director of Public Health, in consultation with the relevant Cabinet Member, to award the contract.
 - To delegate authority to the Director of Public Health, in consultation with the relevant Cabinet Member, to approve any extensions to the contract as provided for within the original contract terms and where there is budget available.
- 6.2 There are no financial implications directly associated with approving the recommendations in this report. However, once the process has been finalised and a contract price is agreed, a further report will be submitted identifying available budgetary provision.
- 6.3 With regards to future proofing the financing of the 'Social Prescribing contract' the Council is undertaking a review of all internal services currently in receipt of Public Health funding.
- This is to ascertain whether those services are delivering on the required Public Health outcomes, in addition to identifying a potential reallocation of budgets to support the delivery of 'Social Prescribing'.

A working group has been created to support its implementation and the expectation is the review will be completed before the cessation of the current contract on 31st October 2024.

(Matthew Kearns – Finance Manager)

Capital

6.4 There are no capitals implications.

(James Postle – Senior Finance Manager)

7 Legal Implications

7.1 The preferred option has the best benefit to the residents of the Borough and will have a positive impact on over 2,000 residents.

It is important that the correct route is taken in relation to the award of the contract and that the newly introduced, Provider Selection Regime process is correctly followed in conjunction with all other legislative requirements. The Commissioner will work closely with procurement colleagues to ensure that compliance of the process is adhered to and the best provider and best value for the Council is ensured.

Any competitive tendering process that might have to be done under the PSR must also comply with the Contract Procedure Rules and the Public Contracts Regulations 2015.

(Alex Bougatef-Interim Director of Legal Services)

8. Co-operative Implications

8.1 The proposed extension of social prescribing will support residents' health and wellbeing, enabling early intervention and prevention. By continuing to build upon the learning and capacity developed within the VCSE sector, the proposal aligns with the Council's co-operative aims to strengthen and support thriving communities.

(Amanda Richardson, Policy Manager)

9 Human Resource Implications

9.1 None

10 Risk Assessments

10.1 The legal, financial and procurement are highlighted separately in this report. This report details the opportunity that the social prescribing provides to Oldham and details that should a procurement exercise not be undertaken this useful service will cease in October 2024. The procurement should be developed to ensure it fulfils the Council's requirements for quality and price. Insurance and information risks will need to be reviewed in light of the procurement and access to systems to ensure they are robust and in line with the Contract Procedure Rules and Data Protection requirements.

Vicki Gallacher (Head of Insurance and Information Governance)

11 IT Implications

11.1 The document mentions the use of a cloud-based software system Elemental (from Access Ltd.) to support the Social Prescribing service. It would be important to ensure that the system is properly integrated with other relevant systems and that data security and privacy measures are in place.

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- 11.2 We ask that IT be included in the full assessment of possible solutions for the All Age Social Prescribing Service. The IT service will be instrumental in ensuring technical adoption and connectivity within the existing environment and to evaluate each solutions security controls.

(Mark Edgar, Head of IT Operations and Cyber Security)

12 **Property Implications**

- 12.1 None – if the preferred option is approved.

13 **Procurement Implications**

- 13.1 Commercial Procurement Unit will be using NHS Provider Selection Regime (PSR) to procure the services, The Health and Care Act 2022 introduced a new procurement regime for selecting providers of healthcare services, Commercial Procurement Unit will work with commissioners to see which route to take to the Market.

(Mohammad Sharif, 07/03/2024)

14 **Environmental and Health & Safety Implications**

- 14.1 None – if the preferred option is approved.

15 **Community cohesion, including crime and disorder implications in accordance with Section 17 of the Crime and Disorder Act 1998**

- 15.1 None – if the preferred option is approved.

16 **Oldham Equality Impact Assessment, including implications for Children and Young People**

- 16.1 Yes

The impact assessment represents the impact of the recommended option (Option 2), in comparison to the alternative option (Option 1). The Impact Assessment is attached as Appendix 1.

17 **Key Decision**

- 17.1 Yes

18 **Key Decision Reference**

- 18.1 HSC-01-24

19 **Background Papers**

- 19.1 None

20 **Appendices**

- 20.1 Appendix 1 – Impact Assessment