

OFFICER DECISION RECORD

For staff restructures, please also complete an RA1 form to update the HR Portal. This is attached at Annex 2.

Decision Ref. No:

2016/12/T3WeightManagement

Box 1

DIRECTORATE : Public Health

DATE: 9th December 2016

Contact Name: Louise Robson

Tel. No.: (01302) 734015

Subject Matter: Tier 3 Weight Management Contract Extension March 2017/18

Box 2

DECISION TAKEN:

Following review of the current Tier 3 Weight Management service it has been agreed to extend the current Tier 3 weight management service for another year with no changes to the initial contract and with a view to a further review at the end of the contract in March 2018.

To continue to commission the current Tier 3 adults weight management contract as a more specific pre-bariatric service. Contract value for 2017/18 of £170, 353

Box 3

REASON FOR THE DECISION:

Give relevant background information

The Tier 3 Weight Management contract was originally implemented in 2014 for a 3 year contract period with a 2x year possible extension option in March 2017. The original contract also contained a Childrens weight management service which has since been tapered and closed as per the contract variation and key Decision record approved in March 2016. As the service was redesigned in March 2016 the current contract will not change in any way and will continue for a further 12 months to allow further performance monitoring of the weight management service over the next 12 months. In view of the gaps already in weight management services following the closing down of the Tier 2 service it would be detrimental at this stage to close down another service when the pathway has only been re-designed in March this year and a contract variation in place around 6 months ago.

The current contract value has now decreased from £310k to £170k as a result of a tapering down of the children's service in September 2016. The revised contract value for a further 12 months would be in the region of £170,353 with a view to review performance again in 2018.

***See attached key Decision record for previous background**

Box 4

OPTIONS CONSIDERED & REASONS FOR RECOMMENDED OPTION:

If other options were considered, please specify and give reasons for recommended option

The options would be:

- a. To terminate the current Tier 3 weight management contract in March 2017
- b. To procure the service in March 2017.
- c. To extend the current service with a view to further review in 2017 and a possible further extension for a 1 year period or move to another organisation.

The *recommended option* is *option c* to extend the current service with a view to further review in 2017 as it is too early in the pathway to ascertain real impact and there would be huge risks to the obese population (and an impact on health and social care services) if the service were removed completely.

Box 5

LEGAL IMPLICATIONS:

Section 1 Localism Act 2011 gives the Council a general power of competence to do anything that individuals may generally do.

Section 2B of the National Health Service Act 2006 (as amended by Section 12 of the Health and Social Care Act 2012) introduced a new duty on Councils in England to take appropriate steps to improve the health of the people who live in their area.

The Weight Management Contract was procured in accordance with the public Contracts Regulations 2006, and contract provides for the extension.

Legal will prepare the letter of extension which must be signed by the provider prior to the extension.

**Name: Nicky Dobson Signature: _____ Date: _16th December 2016_
Signature of Assistant Director of Legal and Democratic Services (or representative)**

Box 6

FINANCIAL IMPLICATIONS:

The Public Health function transferred to the council with effect from the 1st April 2013. The council has approved a budget of £25m in respect of Public Health services for 2016/17. Within this £25m, £310k has been approved for the tier 3 weight management contract.

This ODR is a contract extension for a further 12 months. The £310k contract value has been tapered down and this proposal is for a 12 month extension at £170k. This represents a saving that will be used to reduce the pressure on the Public health Budget for 2017/18 following a reduction in the grant award.

The overall commissioning / contract budget will need to be managed by the Public Health service to ensure that expenditure remains within the funding available.

Name: N Cameron Signature: Date: 09/12/2016
Signature of Assistant Director of Finance & Performance
(or representative)

Box 7

HUMAN RESOURCE IMPLICATIONS:

There are no apparent HR implications within this particular ODR as it has no effect on internal staffing levels.

The Weight Management Contract is something I believe is co-ordinated within DMBC by the Public Health – Working Age Healthy Lives team within the Adults, Health & Wellbeing Directorate

Name: Bill Thompson Senior HR&OD Officer _____ **Signature:** Bill Thompson _____ **Date:** _19/12/2016_____
Signature of Assistant Director of Human Resources, Communications & Executive Office (or representative)

Box 8

PROCUREMENT IMPLICATIONS:

The ability to extend is included under the terms of the revised contract therefore no procurement implications in utilising the extension

Name: Dan Charlesworth Signature: Date: 13th December 2016

**Signature of Assistant Director of Finance & Performance
(or representative)**

Box 9

ICT IMPLICATIONS:

There are no ICT implications in relation to the proposed extension of this contract.

Name: Peter Ward (ICT Strategy Programme Manager)

Signature **Date:** 08/12/16

**Signature of Assistant Director of Customers, Digital & ICT
(or representative)**

Box 10

ASSET IMPLICATIONS:

There are no asset implications associated with this Officer Decision Record.

Name: Gillian Fairbrother (Assets Manager, Project Co-ordinator)

Signature: By email **Date:** 8th December, 2016

**Signature of Assistant Director of Trading Services and Assets
(or representative)**

Box 11

RISK IMPLICATIONS:

To be completed by the report author

The risk of not extending this contract would be both a health and economic impact on current primary and secondary care services at a time of austerity when services in this area have already been reduced and are having an impact on patient health outcomes. With the absence of a Tier 2 service there are already pressures on the Dietetics services so if this service were to be removed this would add further pressures. There would also be huge implications for our health and social care providers in dealing with further adaptations to services and equipment for the more severe obese patients and those with complex needs.

(Explain the impact of not taking this decision and in the case of capital schemes, any risks associated with the delivery of the project)

Box 12**EQUALITY IMPLICATIONS:****To be completed by the report author**

There are no immediate equality implications for this service as the contract will continue to deliver and provide a service to all those eligible in the population who meet the suitability criteria regardless of their protected characteristics.

Name: Louise Robson Signature: Date: 7th December 2016
(Report author)

Box 13**CONSULTATION****Officers**

(In addition to Finance, Legal and Human Resource implications and Procurement implications where necessary, please list below any other teams consulted on this decision, together with their comments)

Members

Under the Scheme of delegation, officers are responsible for day to day operational matters as well as implementing decisions that have been taken by Council, Cabinet, Committee or individual Cabinet members. Further consultation with Members is not ordinarily required. However, where an ODR relates to a matter which has significant policy, service or operational implications or is known to be politically sensitive, the officer shall first consult with the appropriate Cabinet Member before exercising the delegated powers. In appropriate cases, officers will also need to consult with the Chair of Council, Committee Chairs or the Chair of an Overview and Scrutiny Panel as required. Officers shall also ensure that local Members are kept informed of matters affecting their Wards.

Please list any comments from Members below:

There have been no formal consultations with members/officers other than a joint meeting with the Head of Primary Care (DCCG) and the Director of Public Health in view of the proposed contract extension and the links to the Tier 4 Bariatric surgery policy. As there are no changes to the contract the service will continue in its current form.

Box 14
INFORMATION NOT FOR PUBLICATION:

None identified

Name: __ Claire Hewitt Signature: _____ Date: 21/12/2016
Signature of FOI Lead Officer for service area where ODR originates

Box 15

Signed: _____ Dr Rupert Suckling _____ Date: 21st December 2016
Director/Assistant Director

Signed: _____ Date: _____
Additional Signature of Chief Financial Officer or nominated representative for Capital decisions.

Signed: _____ Date: _____
Signature of Mayor or relevant Cabinet Member consulted on the above decision (if required).

- This decision can be implemented immediately unless it relates to a Capital Scheme that requires the approval of Cabinet. All Cabinet decisions are subject to call in.
- A record of this decision should be kept by the relevant Director's PA for accountability and published on the Council's website.
- A copy of this decision should be sent to the originating Directorate's FOI Lead Officer to consider 'information not for publication' prior to being published on the Council's website.
- A PDF copy of the signed decision record should be e-mailed to the LA Democratic Services mailbox