

## NOTICE OF MEETING

# CABINET MEMBER SIGNING

Thursday, 7th September, 2023, 12.30 pm - George Meehan House, 294 High Road, London, N22 8JZ (watch the live meeting [here](#), watch the recording [here](#))

**Members:** Councillors Lucia das Neves

### 1. FILMING AT MEETINGS

Please note that this meeting may be filmed or recorded by the Council for live or subsequent broadcast via the Council's internet site or by anyone attending the meeting using any communication method. Although we ask members of the public recording, filming or reporting on the meeting not to include the public seating areas, members of the public attending the meeting should be aware that we cannot guarantee that they will not be filmed or recorded by others attending the meeting. Members of the public participating in the meeting (e.g. making deputations, asking questions, making oral protests) should be aware that they are likely to be filmed, recorded or reported on. By entering the meeting room and using the public seating area, you are consenting to being filmed and to the possible use of those images and sound recordings.

The chair of the meeting has the discretion to terminate or suspend filming or recording, if in his or her opinion continuation of the filming, recording or reporting would disrupt or prejudice the proceedings, infringe the rights of any individual or may lead to the breach of a legal obligation by the Council.

### 2. APOLOGIES FOR ABSENCE

### 3. URGENT BUSINESS

The Chair will consider the admission of any late items of Urgent Business. (Late items of Urgent Business will be considered under the agenda item where they appear. New items of Urgent Business will be dealt with under agenda item 8).

### 4. DECLARATIONS OF INTEREST

A member with a disclosable pecuniary interest or a prejudicial interest in a matter who attends a meeting of the authority at which the matter is considered:

(i) must disclose the interest at the start of the meeting or when the interest becomes apparent, and

(ii) may not participate in any discussion or vote on the matter and must withdraw from the meeting room.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Register of Members' Interests or the subject of a pending notification must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal interests and prejudicial interests are defined at Paragraphs 5-7 and Appendix A of the Members' Code of Conduct

## **5. DEPUTATIONS / PETITIONS / PRESENTATIONS / QUESTIONS**

To consider any requests received in accordance with Part 4, Section B, paragraph 29 of the Council's constitution.

## **6. RECTIFICATION TO AN ADMINISTRATIVE ERROR TO THE REPORT (APPROVED BY THE CABINET MEMBER FOR HEALTH, SOCIAL CARE AND WELLBEING ON 15 SEPTEMBER 2022) IN RESPECT OF THE GRANT FUNDING FOR SUPPLEMENTAL FUNDING FOR SUBSTANCE MISUSE TREATMENT AND RECOVERY AND CONTRACT EXTENSION AND VARIATION OF THE CONTRACT TO HUMANKIND CHARITY (PAGES 1 - 22)**

## **7. VARIATION TO EXTEND THE CONTRACT FOR THE PROVISION OF A HEALTHWATCH HARINGEY SERVICE (PAGES 23 - 30)**

## **8. NEW ITEMS OF URGENT BUSINESS**

Felicity Foley, Committees Manager  
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Fiona Alderman  
Head of Legal & Governance (Monitoring Officer)  
George Meehan House, 294 High Road, Wood Green, N22 8JZ

Wednesday 30 August 2023

**Report for:** Cabinet Member Signing

**Title:** Request for: Rectification to an administrative error to the Cabinet Member Report for Approval of Acceptance of Grant Funding for Supplemental Funding for Substance Misuse Treatment and Recovery, and Contract Extension and Variation of Contract with Humankind, approved on 15th September 2022

**Report authorised by:** Will Maimaris – Director of Public Health

**Lead Officer:** Sarah Hart Public Health Senior Commissioner – Substance Misuse, Sexual Health, Health improvement  
Tel:020 8489 1480 E-mail: [sarah.hart@haringey.gov.uk](mailto:sarah.hart@haringey.gov.uk)

**Ward(s) affected:** All

**Report for Key/  
Non-Key Decision:** Key Decision

**1. Describe the issue under consideration.**

- 1.1. Rectification to an administrative error to the report (approved by the Cabinet Member for Health, Social Care and Wellbeing on 15 September 2022) in respect of the grant funding for supplemental funding for Substance Misuse Treatment and Recovery and Contract Extension and Variation of the Contract to Humankind Charity.

**2. Cabinet Member Introduction**

- 2.1. N/A

**3. Recommendations**

- 3.1. For the Cabinet Member for Health, Social Care and Wellbeing to approve the correction of an administrative error of the value of £20,000 to section 3.4 (contract extension to Humankind Charity) of the Cabinet Member Report from 15th September 2022 of the figure £1,779,814.56 rectified to £1,799,814.56. Figures in the earlier report were incorrect due to an administrative error.
- 3.2. To rectify section 3.2 and to note that the cost of variation is £918,332 in addition to the value of extension £1,799,814.56. Therefore, the overall total value of the contract including the extension is £2,718,146.56.

**4. Reasons for decision**

- 4.1. **Rectification** – to an administrative error to the Cabinet report from 15<sup>th</sup> September 2022, section 3.2 and 3.4.

**5. Alternative options considered.**

5.1. Not applicable

**6. Background**

6.1. The Cabinet Member for Health, Social Care and Wellbeing approved on the 15<sup>th</sup> of September 2022 the acceptance of the Grant funding for the Supplemental Funding for Substance Misuse Treatment and Recovery; and contract extension and variation of the contract to Humankind Charity for provision of Integrated adult substance misuse treatment and recovery services.

6.2. As contracts were created an administrative error of £20,000.0 has been identified and the value of the variations was not stated clearly. We sought legal and procurement advice and therefore they advised that we need to return to the cabinet members with a rectification report.

6.3. Also, has been identified that the cost of variation £918,332 was not stated in the overall total value of the contract including the extension which is £2,718,146.56.

6.4. This work is linked to the Combating Drugs Partnership Delivery plan and Haringey want to use this funding to provide additional drug treatment and harm reduction activity.

**7. Contribution to strategic outcomes**

7.1. Priority 1: Best Start in Life

7.2. Priority 2: Outstanding for All

**8. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)**

**8.1. Finance**

8.1. There are no amendments to the finance comments provided in the original cabinet member report.

**8.2. Procurement**

8.2.1. Strategic Procurement has been consulted in the preparation of this report. Procurement comments were provided in the original Cabinet Member report, and there are no further legal comments.

**8.3. Head of Legal and Governance (Monitoring Officer)**

8.3.1. The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of this report. Legal comments were provided in the original Cabinet Member report, and there are no further legal comments.

**8.4. Equality**

- 8.4.1. The council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:
- 8.4.2. • Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- 8.4.3. • Advance equality of opportunity between people who share protected characteristics and people who do not
- 8.4.4. • Foster good relations between people who share those characteristics and people who do not
- 8.4.5. The three parts of the duty apply to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex, and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.
- 8.4.6. Although it is not enforced in legislation as a protected characteristic, Haringey Council treats socioeconomic status as a local protected characteristic. 8.4.4. This report relates to the receipt of a grant to residents who are homeless with substance misuse issues. The service provides support to vulnerable people, including those with protected characteristics.
- 8.4.7. Substance misuse is highly stigmatised and so it is to be expected that adults, with a history of homelessness with protective characteristics may face additional challenges in seeking help. This is explored within the needs assessments, equity audits and service design. Having people with lived experience co deliver services and monitor service will further expand equity. Data from these projects will include all protective characteristics.

## **9. Use of Appendices**

- 9.1.1. Appendix 1 - Cabinet Member Signing Report from 15th September 2022 Request for Approval of Acceptance of Grant Funding for the Supplemental Funding for Substance Misuse Treatment and Recovery and Contract Extension and Variation of the Contract to Humankind Charity
- 9.1.2. Appendix 2 – Minutes of the Cabinet Member Signing meeting held on 15<sup>th</sup> September 2022

## **10. Local Government (Access to Information) Act 1985**

- 10.1.1. Not Applicable

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**Report for:** Cabinet Member Signing – 15 September 2022

**Title:** Request for Approval of Acceptance of Grant Funding for the Supplemental Funding for Substance Misuse Treatment and Recovery and Contract Extension and Variation of the Contract to Humankind Charity

**Report authorised by:** Will Maimaris, Director of Public Health

**Lead Officer:** Sarah Hart, Senior Commissioner, Public Health, 0208 489 1480, [Sarah.Hart@haringey.gov.uk](mailto:Sarah.Hart@haringey.gov.uk)

**Ward(s) affected:** All

**Report for Key/  
Non-Key Decision:** Key Decision

## 1. Describe the issue under consideration

1.1. **Receipt of Supplemental grant** - The Council has been given indicative budgets for 2023/2024 and 2024/25 for Supplemental grant funding for Substance Misuse Treatment and Recovery. We wish the decision maker to accept the indicative grant now, as this will allow the Council to give some providers of Supplemental services provisional three-year contracts, subject to the availability of funding. Note, the Cabinet Member for Health, Social Care and Wellbeing has accepted the grant award for 2022/23.

1.2. **Variation of Contract** - Supplemental grant funding is to support improvements in existing substance misuse treatment and recovery services. Humankind is best placed to deliver new supplemental grant services as a variation of their main substance misuse contract - Integrated adult substance Misuse treatment and recovery services lot two.

1.3. **Extension of Contract** - The Humankind Integrated adult substance Misuse treatment and recovery services lot two contract was approved by Cabinet in 2019 for a period of four years with 2, two-year extension provisions and the initial term ends on 31<sup>st</sup> January 2023. Contract delivery is satisfactory and so it is most efficient to use the contract extension options to extend the contract at the same time as requesting a contract variation.

## 2. Cabinet Member Introduction

2.1. Not applicable.

## 3. Recommendations

The Cabinet Member for Health, Social Care, and Wellbeing is recommended:

- 3.1. To approve the receipt of the Office for Improvement and Disparities (OHID) grant 'Supplemental funding for substance misuse treatment and recovery' for the year 2023/24 and 2024/25 in accordance with Contract Standing Orders (CSO) 16.02 and 17.01 The value for the indicative grant will be £1,303,160 for 2023/24 and £2,515,389 in 2024/25.
- 3.2. In accordance with Contract Standing Orders 16.02 and 10.02 .1 (b), to agree the use some of the grant monies (as outlined in this report) to vary the existing contract with Humankind Charity for Integrated adult substance Misuse Treatment and Recovery services lot two from 1st April 2022 until 31st January 2025 a period of or 31 months) at a total value of £918,332.
- 3.3. To include the Supplemental grant, financial year 2022/23 £283,290 and subject to OHID agreement 2023/24 £346,387 and 2024/25 £288,655.
- 3.4. In accordance with CSO 16.02 and 10.02.1 (b), to agree contract extension of the Humankind contract for Integrated Adult Substance Misuse Treatment and Recovery services: lot two, for two years from 1st February 2023 until 31st January 2025, such extension to include the variation referred to in para 2.2 above. Total value of extension £1,779,814.56.
- 3.5. To delegate authority to the Director of Public Health to approve a further extension in the total value of £57,731 for a further period of 2 months from 1 February 2025 to 31 March 2025.

#### 4. Reasons for decision

- 4.1. **Accepting the grant** - Reducing the impact of drugs and alcohol misuse on adults, families and the community is a cross cutting Council priority. The Council therefore welcomes a significant uplift in funding for substance misuse treatment. The public health team along with providers and service users have designed the services that this grant will be used for.
- 4.2. **Preferred providers** - Humankind is an existing provider of Haringey substance misuse services, having successfully bid in an open tender process for the Alcohol service, Young People's service, Recovery services and as a sub-contractor of the criminal justice elements of the Drug service. It has partnered with the Council in several successful bids. It is strongly invested in building a better future for Haringey residents with substance misuse issues. Humankind is one of 4 providers receiving funding from this grant, others include two resident peer led organisation and our NHS substance misuse provider.
- 4.3. **Continuation elements within the Supplementary Contracts** – services within the 2022/23 Supplementary grant are not new, they were contracted within the one-year Universal grant 2021/22 and delivered by Humankind. Before awarding the Universal contract to Humankind, steps were taken to ensure that Humankind would deliver the universal services well. Humankind was a partner, with other agencies, commissioners, and services users in the successful bid for the universal grant. Humankind is still the right organisation to deliver these services well, for it has delivered the Universal contract in line with key performance indicators, overseen by Public Health commissioner's reporting into a steering group.



- 4.4. Projects within the new Supplementary grant are continuations of the Universal grant, there must not be a break in service. Humankind has already recruited into posts, established delivery, and successfully met outcomes. For these services Humankind is the only viable provider.
- 4.5. **New elements** – Humankind’s Haringey workforce are our major asset, for it is their relationship with clients that makes Haringey’s treatment system successful. In 2021, with agreement from the Council, Humankind conducted a pay review. All staff are paid London Living Wage, however for many years they have not had pay increases in line with inflation. Providers have needed to keep costs low to be competitive in tenders. Also, we want to keep our staff in Haringey, so agreed to benchmark our salaries with other competitor services in other local authorities. A pay award has been agreed between the Council and Humankind.
- 4.6. **Back dating** – We are asking for the decision maker to agree that the funding to Humankind Charity in respect of the contract variation to be backdated to April 2022. The reason for this is that Haringey’s bid for 2022/23 Supplemental grant included pay increases to staff from April 2022. This was accepted by OHID, but not in time for the funding to be applied from April 2022
- 4.7. **Variation** – Variation of the main contract for Adult Substance Misuse treatment and recovery services, is permitted by Contract Standing Orders.
- 4.8. **Extension of main contact** - After an open tender process in October 2018 Cabinet awarded a contract to CDP Blenheim (who became Humankind Charity), for Integrated Adult Substance Misuse treatment and recovery services. The award was for a period of four years with an option to extend for 2 years and a further period of 2 years total value £7,170,567.54 (for 8 years). This initial term of the contract expires on 31st January 2023. The contract is performing satisfactorily, and it would not be in the Council or residents’ interest to go out to the market at this stage for a new provider.

## 5. Alternative options considered

- 5.1. The Cabinet member could refuse to receive the grant. However, as there was a clear need for this work and strong support to tackle the impact of substance misuse on the community, this option has not been considered.
- 5.2. The Cabinet member could choose not to award the grant to Humankind and go to market for the Supplemental projects; however, it is agreed that Humankind is the only viable provider and as co-designers of the bid and existing providers, best placed to ensure services are delivered well.
- 5.3. The Cabinet member could choose not to vary the existing contract, however setting up a separate contract would create duplication and avoidable administration costs.
- 5.4. The Cabinet member could decide not to allow backdating of the contract, however the pay award has been agreed by OHID to be paid from 1st April, so it is included within the grant.

5.5. The Cabinet member could decide that the main Humankind contract should not be extended, as the existing service is delivering well, going through the disruption of a tender process is not in the interests of residents

## 6. Background

6.1. Haringey has higher rates of Opiate and Crack-Cocaine users than both the London and national rate (2016/17)

6.2. The Dame Carol Black Independent Review on Drugs published in 2019, stated that as Government has disinvested in tackling drugs, there has been a noticeable increase in drug supply and purity. This has fuelled drug related crime, particularly violent crime, and the use of vulnerable children in drug trafficking. It's also a factor in 2018 seeing the highest recorded levels of drug related death. The disinvestment in drug treatment means that long-term drug users are cycling in and out of our prisons, at great expense but very rarely achieving recovery or finding meaningful work. The review states that the total cost to society of illegal drugs is around £20 billion per year, but only £600 million is spent on treatment and prevention. So, the amount of un-met need is growing, some treatment services are disappearing, and the treatment workforce is declining in number and quality.

6.3. In 2020, to start the work of addressing the Dame Carol Black review, Haringey received £480,000 Universal grant payable over 15 months from the Office of Health Improvement and Disparities (OHID). Haringey was to use this funding to provide additional drug treatment crime and harm reduction activity.

6.4. The Council was asked to complete an application for the grant. Completion of the application was led by the public health team in close consultation with community safety, co producers and providers. The guidance was very specific that the funding was only for adult drug treatment, with a strong focus on outreach, harm reduction, criminal justice, new forms of treatment and recovery.

6.5. The grant had challenges in terms of a very fast turnaround. Plus, as stated in the Dame Carol Black Review, there was already a workforce deficit. However, Haringey made excellent progress, recognised in a visit from the Permanent Secretary of State and New Drugs unit, to meet the new teams.

6.6. The table below gives a flavour of the activities and success of the Universal Grant to date.

Table 1 Universal projects and their successes.

<b>Area of activity for the contract</b>	<b>Services</b>	<b>Achievements since July</b>
Harm reduction	Barnet Enfield and Haringey (BEH) Mental Health Trust have employed a harm reduction lead.	<ul style="list-style-type: none"> <li>• Covid vaccine information leaflet designed by service users</li> <li>• Review with service users of needle exchange pack.</li> </ul>

		<ul style="list-style-type: none"> <li>• Training of all hostel workers in preventing overdoses Naloxone pilot in 2 pharmacies</li> </ul>
Criminal reduction	Humankind – 5 new criminal justice workers, targeting males under 25 years, women, and prolific offenders, who keep revolving around systems. Offering case managers with a flexible way of working.	<ul style="list-style-type: none"> <li>• 5 graduates employed, inducted and training on the job as criminal justice workers Pathways for young male offenders designed.</li> <li>• Increase in referrals from courts and prison.</li> </ul>
Outreach	Bringing Unity Back into the Community – peer led night outreach. BUBIC is led	<ul style="list-style-type: none"> <li>• Night outreach begun.</li> <li>• Survey of these out at night to determine what night services they would like to keep them off the streets</li> <li>• Joint work in Turnpike Lane</li> <li>• Joint work in closing a crack house</li> </ul>
Peer support	Inspirit – creating a new workforce through offering residents who are ex substance misusers, who have been co-producing services or volunteering, a diploma in health and social care and substance misuse worker training.	<ul style="list-style-type: none"> <li>• 4 Haringey ex users taken onto a diploma, now reached stage of placements in services.</li> <li>• Pavilion recovery project, led by co producers begun.</li> </ul>
New treatment	BEH – brand new type of treatment that can be administered monthly	<ul style="list-style-type: none"> <li>• 12 people have commenced on Buvidal, 11 have been maintained on the medication.</li> </ul>

6.7. Humankind's main contribution to the service has been the establishment of a new criminal justice team. The team has been working in a new way, offering a total package of substance misuse care from custody into community treatment. The team are needed because currently only 23% of those leaving custody with a substance misuse issue engage in treatment, our ambition is 60%. The team also target offenders who we know drop out of treatment – young men, women. From Sept to March the team had 253 referrals and saw 105 clients. The team's successes include 13 offenders receiving a community order for alcohol treatment and 13 for drugs. 12 clients came from prison into community

treatment, 7 probation clients have voluntarily engaged. It's a great start but our ambition is to ensure every offender with a SM issue has a place in treatment.

- 6.8. New funding - The Government responded to the Dame Carol Black Review in July 2021 and subsequently published the National Drug Strategy (Dec 2021). Now it has announced a supplemental Substance Misuse Treatment and Recovery Grant, which should be used by LAs to address the aims of the treatment and recovery section of the drug strategy.
- 6.9. This enhanced funding will enable Haringey to go above and beyond what the Universal projects have achieved. Our priority for 2022/23 is to ensure that the Universal providers and co producers continue the great work and build the evidence base for their services. Then we will complete a rapid needs assessment and equality audit with partners to agree priority areas for year two and three investment. Alongside this we will simultaneously create a three-year Treatment and Recovery Plan. Importantly the new funding goes beyond the Universal grant criteria, including services for young people, families and for alcohol misuse. As well as building the main workforce and reducing caseloads.
- 6.10. Humankind deliver the alcohol treatment service HAGA. The contract for the service was awarded in January 2019. During the first year of delivery the service underwent a number of changes which had been laid out in the tender method statement. The new service was taking shape when the CV19 pandemic and subsequent lock downs came. HAGA stayed open throughout the pandemic. Staff found ways to work both virtually and face to face with clients. New clients were seen, and existing clients supported. Prior to retendering there were 484 residents in treatment in HAGA, this fell to 381 during the re-tendering and stayed consistent through the pandemic. Numbers are starting to rise again with currently 411 in treatment. Similarly, completions took a reduction during the tendering process and remained steady during the pandemic. In October a new manager was recruited into the services who is working well with Commissioners to further improve services. Earlier in the year the group work program was redesigned by staff and service users and now has double the attendances. Work with service users around physical health care has resulted in a liver care clinic starting in July 2022. Consultation with service users has just been completed looking at how to prevent cycles of client engagement and dropping out. The service is always looking at what it can do better to safeguard and improve the lives of residents.

## **7. Contribution to strategic outcomes**

- 7.1. The service fulfils three crosscutting commitments of the Haringey Labour Manifesto:
1. Tackling inequalities and poverty - making services equitable and easily accessible for all Haringey residents.
  2. Living Well Approach - locally delivered services.
  3. Protecting our residents - Improved community safety for all ages.

## 8. Statutory Officer Comments

### 8.1. Finance

- 8.1.1. The annual costs of the proposed extension to the Humankind have been reviewed, and it confirmed that budgets are in place to cover the cost. The contract does contain a caveat for termination should funding no longer be available.
- 8.1.2. The annual costs of the proposed variation to the Humankind contract will be funded by allocations from the Supplemental Substance Abuse Fund in each year.
- 8.1.3. The detailed financial costs are exempt information and are set out in exempt Appendix 1.

### 8.2. Procurement

- 8.2.1. The grant award from the Office for Improvements and Disparities (OHID) may be accepted by the Council in concord with Contract Standing Orders 16.02 and 17.1.
- 8.2.2. The services, within substance misuse recovery and treatment fall within the remit of Schedule 3 of the Public Contracts Regulations 2015. The contract with Humankind was duly tendered and awarded in line with the regulations in 2018
- 8.2.3. Under Regulation 72. (1) (a) modification of contract is allowed if it was part of the original award. The contract with Humankind was let with provision for two, two- year extensions, one of which is currently requested in line with Contract Standing Orders 16.02 and 10.02.1b. The Contractor is providing a satisfactory service that meets contractual outcomes it would not be beneficial for the Council or service users to expend unnecessary resources going out to tender and disrupting service provision.
- 8.2.4. Further, Regulation 72 (1) (b) permits additional services without the need for a retender, if a change of contractor cannot be made for economic or technical reasons provided the cost is not more than 50% of the original award. Moreover, any such change, if permitted would have meant duplication of cost and administrative resources as well as significant service disruption. The request for this contract variation is also in line with CSOs 16.02 and 10.02.1b

### 8.3. Legal

- 8.3.1. The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of this report.
- 8.3.2. The services are categorised as Schedule 3 services (Social and other specific Services) under the Public Contracts Regulations 2015 (the Regulations).
- 8.3.3. The Regulations allow for modifications to be made to contracts without conducting a procurement in certain specified circumstances. Regulation 72 (1)

(a) allows for modification where the modifications have been provided for in the original procurement documents in clear precise and unequivocal review clauses. Legal Services has been advised that the provision for the two-year extension was included in the original tender documents and so this would be permitted under Regulation 72 (1) (a).

8.3.4. The Regulations also allow for modifications where additional services are necessary and a change of contractor cannot be made for economic or technical reasons and such a change would cause significant inconvenience or substantial duplication of costs, providing that any such increase is not more than 50% of the contract price (Regulation 72 (1) (b)). Legal Services is advised that this is the case in respect of the proposed variation to the contract to include the additional grant funding.

8.3.5. The approval of the grant would normally fall to Cabinet as the value is over £500,000 (CSO 17.1). However, in-between meetings of the Cabinet, the Leader may take any such decision or may allocate the decision to the Cabinet Member with the relevant portfolio (CSO 16.02).

8.3.6. Under CSO 16.02 the Cabinet Member for Health, Social Care and Wellbeing also has power to approve the variation and extension of contract.

8.3.7. The recommendations in this report are a Key Decision and therefore need to comply with the Council's governance processes in respect of Key Decisions.

8.3.8. The Head of Legal and Governance (Monitoring Officer) confirms that there are no legal reasons preventing the Cabinet Member for Health, Social Care and Wellbeing from approving the recommendations in this report.

#### **8.4. Equality**

8.4.1. The council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share protected characteristics and people who do not
- Foster good relations between people who share those characteristics and people who do not.

8.4.2. The three parts of the duty apply to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex, and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.

8.4.3. Although it is not enforced in legislation as a protected characteristic, Haringey Council treats socioeconomic status as a local protected characteristic.

8.4.4. This report relates to the receipt of a grant and award of contract for provision of services to residents with substance misuse issues. The service by its nature

provides support to vulnerable people, including those with protected characteristics.

8.4.5. Substance misuse is highly stigmatised and so it is to be expected that adults, young people, and parents with protective characteristics may face additional challenges in seeking help. This is explored within the needs assessments, equity audits and service design. Having people with lived experience co deliver services and monitor service will further expand equity. Data from these projects will include all protective characteristics.

8.4.6. The contract specifications related to these services clearly set out the supplier's responsibilities under equalities legislation, including a requirement to have in place up to date equalities policies and to ensure that the service is accessible to all sections of the community.

8.4.7. The contractor's compliance with equalities legislation will continue to be quality assured through regular contract monitoring and service review.

## **9. Use of Appendices**

9.1. Appendix 1 – Exempt Financial Information.

## **10. Local Government (Access to Information) Act 1985**

10.1. Not Applicable.

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## **MINUTES OF CABINET MEMBER SIGNING MEETING HELD ON THURSDAY, 15TH SEPTEMBER, 2022, 4.30 - 5.10 PM**

**PRESENT:** Councillor Lucia das Neves, Cabinet Member for Health, Social Care, and Wellbeing.

**In attendance:** Felicity Foley, Business Manager; Bezuayehu Gubay, Strategist and Commissioner; Sarah Hart, Senior Commissioner; Will Maimaris, Director of Public Health; Vicky Murphy, Assistant Director for Adults; Gill Taylor, Assistant Director for Communities and Housing Support; and Fiona Rae, Acting Committees Manager.

### **1. APOLOGIES FOR ABSENCE**

There were no apologies for absence.

### **2. DECLARATIONS OF INTEREST**

There were no declarations of interest.

### **3. REQUEST FOR APPROVAL OF ACCEPTANCE OF THE GRANT AWARD FOR ROUGH SLEEPING DRUG AND ALCOHOL TREATMENT**

The Cabinet Member for Health, Social Care, and Wellbeing considered the report which sought approval to accept the Rough Sleeping Drug and Alcohol Grant and award 2022-25.

In response to a question from the Cabinet Member, it was noted that there would be a separate budget for in patient and residential provision within this grant. In relation to residential services, it was clarified that a person's pathway and post-residential options would be fully designed in advance. It was added that it would be possible to adapt and improve the pathway as more people used the services. It was explained that work in this area often took some time and it was often necessary to build trust and relationships. It was noted that the 2020-21 programme had significantly reduced the amount of drug related homeless deaths by 40% which was a key success.

#### **The Cabinet Member RESOLVED**

1. To approve the receipt of the Office of Health Improvement and Disparities (OHID) grant for Rough Sleeping Drug and Alcohol, for the year 2022/23 and 23/24 as permitted under Contract Standing Orders 16.02 and 17.1.
2. To note that the indicative total value of the grant will be £1,184,613.

#### **Reasons for decision**

Substance misuse is a prevalent issue for those with a history of rough sleeping and is often an impediment to their moving to settled accommodation, if left untreated.

In 2021/22 Haringey Council successfully bid for a grant from OHID to provide street-based substance misuse services to those with a history of sleeping rough. The bid was designed by staff and residents with lived experience. Having successfully delivered on the 2021/22 programme OHID has now released further funding for Haringey for the years 2022-24. Delivery has been so successful that our grant has now been increased to a value that requires Cabinet member agreement.

#### **Alternative options considered**

The Cabinet Member could refuse to receive the grant. However, as there was a clear need for this work and strong support to tackle the impact of substance misuse on the homeless community, this option has been considered and rejected.

#### **4. REQUEST FOR APPROVAL OF ACCEPTANCE OF GRANT FUNDING FOR THE SUPPLEMENTAL FUNDING FOR SUBSTANCE MISUSE TREATMENT AND RECOVERY AND CONTRACT EXTENSION AND VARIATION OF THE CONTRACT TO HUMANKIND CHARITY**

The Cabinet Member for Health, Social Care, and Wellbeing considered the report which sought approval for the receipt of supplemental grant funding for Substance Misuse Treatment and Recovery and sought variation and extension of the contract to Humankind as set out in the report.

It was noted that performance was built into the contract management processes and that specific steps could be taken in the case of any issues. It was also noted that financial reports were requested from providers at the end of the financial year.

Following consideration of the exempt information,

#### **The Cabinet Member RESOLVED**

1. To approve the receipt of the Office for Improvement and Disparities (OHID) grant 'Supplemental funding for substance misuse treatment and recovery' for the year 2023/24 and 2024/25 in accordance with Contract Standing Orders (CSO) 16.02 and 17.01 The value for the indicative grant will be £1,303,160 for 2023/24 and £2,515,389 in 2024/25.
2. In accordance with Contract Standing Orders 16.02 and 10.02 .1 (b), to agree the use some of the grant monies (as outlined in this report) to vary the existing contract with Humankind Charity for Integrated adult substance Misuse Treatment and Recovery services lot two from 1st April 2022 until 31st January 2025 a period of or 31 months) at a total value of £918,332.
3. To include the Supplemental grant, financial year 2022/23 £283,290 and subject to OHID agreement 2023/24 £346,387 and 2024/25 £288,655.

4. In accordance with CSO 16.02 and 10.02.1 (b), to agree contract extension of the Humankind contract for Integrated Adult Substance Misuse Treatment and Recovery services: lot two, for two years from 1st February 2023 until 31st January 2025, such extension to include the variation referred to in para 2.2 above. Total value of extension £1,779,814.56.
5. To delegate authority to the Director of Public Health to approve a further extension in the total value of £57,731 for a further period of 2 months from 1 February 2025 to 31 March 2025.

### **Reasons for decision**

**Accepting the grant** - Reducing the impact of drugs and alcohol misuse on adults, families and the community is a cross cutting Council priority. The Council therefore welcomes a significant uplift in funding for substance misuse treatment. The public health team along with providers and service users have designed the services that this grant will be used for.

**Preferred providers** - Humankind is an existing provider of Haringey substance misuse services, having successfully bid in an open tender process for the Alcohol service, Young People's service, Recovery services and as a sub-contractor of the criminal justice elements of the Drug service. It has partnered with the Council in several successful bids. It is strongly invested in building a better future for Haringey residents with substance misuse issues. Humankind is one of 4 providers receiving funding from this grant, others include two resident peer led organisation and our NHS substance misuse provider.

**Continuation elements within the Supplementary Contracts** – services within the 2022/23 Supplementary grant are not new, they were contracted within the one-year Universal grant 2021/22 and delivered by Humankind. Before awarding the Universal contract to Humankind, steps were taken to ensure that Humankind would deliver the universal services well. Humankind was a partner, with other agencies, commissioners, and services users in the successful bid for the universal grant. Humankind is still the right organisation to deliver these services well, for it has delivered the Universal contract in line with key performance indicators, overseen by Public Health commissioner's reporting into a steering group.

Projects within the new Supplementary grant are continuations of the Universal grant, there must not be a break in service. Humankind has already recruited into posts, established delivery, and successfully met outcomes. For these services Humankind is the only viable provider.

**New elements** – Humankind's Haringey workforce are our major asset, for it is their relationship with clients that makes Haringey's treatment system successful. In 2021, with agreement from the Council, Humankind conducted a pay review. All staff are paid London Living Wage, however for many years they have not had pay increases in line with inflation. Providers have needed to keep costs low to be competitive in tenders. Also, we want to keep our staff in Haringey, so agreed to benchmark our salaries with other competitor services in other local authorities. A pay award has been agreed between the Council and Humankind.

**Back dating** – We are asking for the decision maker to agree that the funding to Humankind Charity in respect of the contract variation to be backdated to April 2022. The reason for this is that Haringey's bid for 2022/23 Supplemental grant included pay increases to staff from April 2022. This was accepted by OHID, but not in time for the funding to be applied from April 2022.

**Variation** – Variation of the main contract for Adult Substance Misuse treatment and recovery services, is permitted by Contract Standing Orders.

**Extension of main contact** - After an open tender process in October 2018 Cabinet awarded a contract to CDP Blenheim (who became Humankind Charity), for Integrated Adult Substance Misuse treatment and recovery services. The award was for a period of four years with an option to extend for 2 years and a further period of 2 years total value £7,170,567.54 (for 8 years). This initial term of the contract expires on 31st January 2023. The contract is performing satisfactorily, and it would not be in the Council or residents' interest to go out to the market at this stage for a new provider.

#### **Alternative options considered**

The Cabinet member could refuse to receive the grant. However, as there was a clear need for this work and strong support to tackle the impact of substance misuse on the community, this option has not been considered.

The Cabinet member could choose not to award the grant to Humankind and go to market for the Supplemental projects; however, it is agreed that Humankind is the only viable provider and as co-designers of the bid and existing providers, best placed to ensure services are delivered well.

The Cabinet member could choose not to vary the existing contract, however setting up a separate contract would create duplication and avoidable administration costs.

The Cabinet member could decide not to allow backdating of the contract, however the pay award has been agreed by OHID to be paid from 1st April, so it is included within the grant.

The Cabinet member could decide that the main Humankind contract should not be extended, as the existing service is delivering well, going through the disruption of a tender process is not in the interests of residents.

## **5. PUBLIC HEALTH COMMISSIONED GENERAL PRACTICE PREVENTION SERVICES**

The Cabinet Member for Health, Social Care, and Wellbeing considered the report which detailed the outcome of an open tender process and sought approval to award contracts to the successful tenderers for the Provision of Public Health commissioned General Practitioners Prevention Services in accordance with Contract Standing Order (CSO) 9.07.1 (d).

Subject to approval, the contracts would be awarded for a period of four (4) years, commencing from 1 October 2022 to 30 September 2026 with an option to extend for a further period, or periods, of up to a total of four (4) years.

It was noted that, for NHS health checks, practices would be set a maximum cap which would be allocated annually based on population, level of deprivation, and performance. It was stated that there were also community based health checks that were targeted in the east of the borough.

In relation to the number of tenders received across all Lots, it was explained that further procurement would be undertaken. It was commented that a different model might need to be considered for future delivery.

Following consideration of the exempt information,

### **The Cabinet Member RESOLVED**

1. To approve the award of contracts for the Provision of Public Health commissioned General Practitioners Prevention Services to the successful tenderers (identified in exempt Appendix 1), for a period of four (4) years, commencing from 1 October 2022 to 30 September 2026 with an option to extend for a further period, or periods, of up to a total of four (4) years, in accordance with CSO 9.07.1(d).
2. To note the contract prices: Unit costs for each activity within individual lot has been fixed by the Council based on benchmarking with other Local Authorities. The rate for each activity is agreed with Local Medical Committees (LMC) and GP federations prior to publishing the tender and subject to review every 2 years.
3. To note that, currently, the maximum available budget for these contracts is £1,078,052 for 4 years and £2,156,104 for 8 years (if extended). GP practices will claim based on activity. For NHS health checks, practices will be set a maximum cap. This will be allocated annually linked to eligible population, level of deprivation and performance.
4. To note that insufficient tenders were received across all Lots, therefore a further procurement process will be undertaken as a matter of priority to commission the remaining services. This would not increase the maximum available budget allocated to these services.

### **Reasons for decision**

There is a clearly identified need within Haringey for these services to improve health outcomes for local people, including tackling health inequalities that exist for particular groups and local areas.

The decision to award contracts to the successful tenderer is based on the conclusion of a competitive procurement process. The proposed recommendation to award the contracts is made according to the outcome of the Most Economically Advantageous Tender, as detailed in section 6 of this report.

The recommended providers submitted a tender bid and have demonstrated that they have necessary accreditation, expertise and qualification to provide the services required.

### **Alternative options considered**

**Do Nothing** - The Council could choose to no longer commission this service. However, National Health Service (NHS) Health Checks are a mandated service, so an alternative way of delivering would need to be found. It has been concluded that not providing these prevention services would be damaging to residents, especially those from economically disadvantaged groups. This is an extensive, specialist programme of services reaching residents living in the most deprived areas of the borough, whose lifestyle behaviour's is an important factor in their increased risk of developing a range of long-term conditions, many of which go undiagnosed. Local delivery of these services is valued, many women prefer to have their Long Acting Reversible Contraception (LARC) appointment at a local GP. GP opiate substitute prescribing is recommended by the National Institute of Health and Care Excellence (NICE) as an effective way to deliver drug treatment.

**Extend existing contracts** – Extension periods available within the existing contracts have been exhausted.

## **6. EXCLUSION OF THE PRESS AND PUBLIC**

### **RESOLVED**

That the press and public be excluded from the remainder of the meeting as items 7-8 contained exempt information, as defined in Section 100a of the Local Government Act 1972 (as amended by Section 12A of the Local Government Act 1985); paras 3 and 5, namely information relating to the financial or business affairs of any particular person (including the authority holding that information) and information in respect of which a claim to legal professional privilege could be maintained in legal proceedings.

## **7. EXEMPT - REQUEST FOR APPROVAL OF ACCEPTANCE OF GRANT FUNDING FOR THE SUPPLEMENTAL FUNDING FOR SUBSTANCE MISUSE TREATMENT AND RECOVERY AND CONTRACT EXTENSION AND VARIATION OF THE CONTRACT TO HUMANKIND CHARITY**

The Cabinet Member considered the exempt information.

## **8. EXEMPT - PUBLIC HEALTH COMMISSIONED GENERAL PRACTICE PREVENTION SERVICES**

The Cabinet Member considered the exempt information.

CABINET MEMBER: Cllr das Neves

Signed by Cabinet Member .....

Date ...16 September 2022.....

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**Report for:** Cabinet Member Signing

**Title:** Variation to extend the contract for the provision of a Healthwatch Haringey service

**Report authorised by:** Rebecca Cribb, Service Manager - Adult Social Care Commissioning, Brokerage and Quality Assurance

**Lead Officer:** Sujesh Sundarraj - Interim Commissioning Manager  
[sujesh.sundarraj@haringey.gov.uk](mailto:sujesh.sundarraj@haringey.gov.uk) 020 8489 3253

**Ward(s) affected:** All

**Report for Key/  
Non Key Decision:** Key Decision

**1. Describe the issue under consideration**

- 1.1. This report seeks approval to vary the term of the existing contract for the provision of a Healthwatch Haringey delivered by Public Voice CIC to extend for a further period of eleven (11) months, commencing from 1<sup>st</sup> July 2023 to the 31<sup>st</sup> of May 2024 at a cost of £139,333.33, in accordance with Contract Standing Order (CSO) 16.02.
- 1.2. The aggregated total value of the contract will be £595,333.33 including the above proposed variation and extension.

**2. Cabinet Member Introduction**

- 2.1. Not applicable.

**3. Recommendations**

- 3.1. For the Cabinet Member for Health, Social Care, and Wellbeing to retrospectively approve the variation of the contract for the provision of a Healthwatch Haringey delivered by Public Voice CIC and extend for a further period of eleven (11) months, commencing from 1<sup>st</sup> July 2023 to 31<sup>st</sup> May 2024 at the cost of £139,333.33 in accordance with Contract Standing Order (CSO)16.02.The aggregated total value of the contract will be £595,333.33 including the above proposed variation and extension.

**4. Reasons for decision**

- 4.1. A local Healthwatch service is a statutory requirement that must be provided by an organisation which is a social enterprise as defined by the legislation. Regionally, there is a very limited market for local Healthwatch providers, with Haringey's neighbouring boroughs also experiencing low engagement from the market. This is based on feedback from Healthwatch commissioners within NCL region e.g. only one provider met Islington's tender minimum requirement. The proposed contract variation will enable the Council to continue with a

provision of local Healthwatch Service in Haringey that forges strong links with local residents, volunteers and organisations and the Council is highly unlikely to find a better provider.

- 4.2. The failure to re-tender this contract was inadvertent. There is no further provision for extension within this contract. Public Voice CIC have continued to provide their services as set out in the contract and at their own risk.
- 4.3. There is insufficient time to carry out a meaningful options appraisal. A gap in service would lead to service disruption for service users and residents. Such action would damage the reputation of the Council for not fulfilling its statutory requirement.
- 4.4. The extension will enable a thorough commissioning review which will explore the Council's options alongside guidance and support offered by Healthwatch England to commission a local Healthwatch service and examine whether the market has grown to become more competitive.
- 4.5. The performance of the service provider has been evaluated as good throughout the contract period.

## 5. **Alternative options considered**

- 5.1. **Do nothing:** this would leave the Council without a local Healthwatch service and in breach of its statutory duty under The Local Government and Public Involvement in Health Act 2007.
- 5.2. **In-house provision** - Local Healthwatch must be provided by an organisation which is a social enterprise as defined by the legislation. The Local Government and Public Involvement in Health Act 2007, which was amended by the Health and Social Care Act 2012, outlines the main legal requirements of Healthwatch. This is underpinned by many other regulations which give more detail about how activities should be undertaken.

The law refers to the roles of:

- Local authorities - who are required to make provision for Healthwatch
- Providers of Healthwatch services (referred to as Healthwatch in this guide)
- Healthwatch England - whose main role is to provide advice and support to every Healthwatch

As recognised in law, Healthwatch have specific requirements under the Freedom of Information Act 2000 as well as Healthwatch legislation with a core purpose of making sure the views of the public shape the health and care services they need, requires them to be:

**Independent in purpose** - amplifying the voice and experiences of the most pressing and difficult issues in health and social care.

**Independent in voice** - speaking up on behalf of sometimes unpopular causes

or groups who are marginalised and/or face disadvantage or discrimination.

**Independent in action** - designing and delivering activities that best meet the needs of the people they serve.

Hence, in-house provision of this service is not an option.

- 5.3. **Go out to tender:** It would be possible to tender the current contract and seek a new or refreshed contract, however, regionally, there is a very limited market for local Healthwatch providers. Neighbouring boroughs have also experienced low engagement from the market. It is therefore not considered an effective use of resources to procure a new service at this time. There is also insufficient time at this stage to go out for tender without a short extension to the existing contract.

## 6. **Background information**

- 6.1. Every local authority in England must arrange for a social enterprise to deliver an effective Healthwatch in their area. The aim of local Healthwatch is to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within their locality.
- 6.2. Healthwatch Haringey seeks the views of local residents to find out their thoughts on local health and social care services. This information is shared with providers and commissioners to help improve local health and social care services.
- 6.3. The contract for the provision of a Healthwatch Haringey was awarded to Public Voice CIC for initial period of 2 years, commencing from 1<sup>st</sup> July 2020 to the 30<sup>th</sup> of June 2022 with an option to extend for further period of 12 months from 1<sup>st</sup> July 2022 to 30<sup>th</sup> of June 2023 at the total cost of £456,000 (£152,000 per annum).
- 6.4. The current service provided by Public Voice CIC has evidenced the generation of social capital through: the volunteering opportunities; established roots in the community and ability to engage locally; access to wider networks and partnerships to benefit wider priorities; leveraging funding from external sources; providing unique opportunities for community-led design and co-production; employing locally based staff.
- 6.5. The performance of the service provider has been evaluated as good throughout the contract period. Haringey Healthwatch is recognised and known to residents and perceived as a credible organisation with demonstrable evidence of adopting systemic approach to community engagement and outreach work. The need for improving governance and accountability to Health and Wellbeing Partnership board is recognised and is one of the key areas managed within the contract.

## 7. **Contribution to strategic outcomes**

- 7.1. This service will contribute to the Corporate Delivery Plan 2023/24, Theme 1: Resident experience, collaboration and participation: These five outcome areas, and aligned activity, put resident experience at the centre, embed the full diversity of all age resident participation, and enable collaboration

between communities.

- Positive Resident Experience:
- Inclusive Public Participation
- Enabling Community Collaboration
- Developing Young Voice
- Insourcing (*As explained in 5.2, Local Healthwatch must be provided by an organisation which is a social enterprise as defined by the legislation hence insourcing is not an option in this instance*)

7.2. It should be noted that the Health and Social Care Act 2012, enables Healthwatch Haringey to have a seat on Haringey's Health and Wellbeing Board.

## 8. Statutory Officers comments

### 8.1. Finance

8.1.1. This report is seeking to award a contract with a period of 11 months, starting on 1st July 2023. The value of the extension is £139,333. The value of the contract over three years to 30<sup>th</sup> June 2023 was £456,000. The value of the three-year contract plus the proposed eleven-month extension is £595,333 in total.

8.1.2. This will be met from existing resources within Adult Social Services, which is fully funded from the Local Reform and Community Voices Grant of £164,536. There is sufficient funding to cover the full cost of this contract award.

### 8.2. Procurement

8.2.1. The report relates to services which would be subject to the Light Touch Regime under the Public Contract Regulations 2015 (PCR), if valued at or above a threshold of £663,540. Furthermore, the Cabinet Office published a Procurement Policy Note (PPN) no. 10/21 in December 2021, which came into effect from 1<sup>st</sup> January 2022, which requires public sector contracting authorities to include VAT (where applicable), when calculating the estimated value of the contract to determine whether the regulations apply.

The table below provides the breakdown of contract price:

<b>Contract Period</b>	<b>Values without VAT</b>	<b>Values with VAT (where applicable)</b>
Initial contract period – 1 <sup>st</sup> July 2020 to 30 <sup>th</sup> June 2022	£304,000	Contract started prior to publication PNN 10/21
Extension allowed within term of the contract – 1 <sup>st</sup> July 2022 to June 2023	£152,000	£182,400

Proposed variation to extend the contract for 11 months – 1 <sup>st</sup> July 2023 to 31 <sup>st</sup> May 2024	£139,333.33	£167,200
<b>Total aggregated value of the contract</b>	<b>595,333.33</b>	<b>653,600</b>

The total aggregated value of the contract would be £653,600 (inclusive of VAT for contract period of 1<sup>st</sup> July 2022 to 30<sup>th</sup> June 2023 and proposed extension - see paragraph 6.2 for breakdown of contract price) which is below the threshold of £663,500 and therefore the PCR Light Touch Regime requirements will not apply.

- 8.2.2. Under the CSO 10.02.1, a contract extension and variation may be approved subject to satisfactory outcomes of contract monitoring. The service provider has demonstrated that contract targets and outcomes have been met which meet the CSO 10.02.1 criteria to permit the request.
- 8.2.3. The request for contract variation is permitted under Contract Standing Orders (CSO) 16.02 and 10.02.1(b), the reasons for which are set out at paragraphs 4 above.
- 8.2.4. Strategic Procurement notes, this report seeks retrospective approval and recommends Commissioning to ensure they are endeavouring to seek contract variation/extension approvals in a timely fashion to ensure uninterrupted service delivery and mitigation of the risk of late payment and the negative effect on supplier relations.
- 8.2.5. Strategic Procurement notes, this service has not been market tested since 2020 and therefore, it is difficult to ascertain whether this contract delivers best value.

### 8.3. Legal

- 8.3.1. The Head of Legal and Governance (Monitoring Officer) has been consulted in the preparation of this report.
- 8.3.2. The services are Schedule 3 services under the Public Contracts Regulations 2015 (PCR 2015) which are subject to the 'Light Touch' regime. The value of these services is below the threshold where the modification rules set out in Reg 72 of the PCR 2015 apply. The proposed variation is therefore subject to the Council's Contract Standing Orders (CSOs).
- 8.3.3. Because the combined value of the contract and the extension is over £500,000 and the original approval for the award was by director, the extension would normally be approved by the Cabinet in accordance with CSO 10.02.1 (b) (contracts valued at £500,000 or more). However, in between meetings of the Cabinet, the Leader may take any such decision or may allocate to the Cabinet Member with the relevant portfolio (CSO 16.02).
- 8.3.4. The decision will be a Key Decision therefore the Council needs to comply with its constitutional requirements regarding Key Decisions including publication in

the Forward Plan.

8.3.5. The Head of Legal and Governance (Monitoring Officer) confirms that there are no legal reasons preventing the Cabinet Member for Health, Social Care and Wellbeing from approving the recommendations in this report.

#### **8.4. Equality**

8.4.1. The Council has a Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share those protected characteristics and people who do not
- Foster good relations between people who share those characteristics and people who do not.

8.4.2. The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.

8.4.3. Healthwatch design their programmes of work to meet the diverse needs of the population it represents, challenging inequality and forging good relationships between people who share those characteristics and people who do not by:

- Conducting appropriate and proportionate equality impact assessments
- Involving and consulting with individuals and groups with specific experience of issues relating to equalities, diversity, and inclusion as necessary.
- Working to ensure the evidence base more accurately represents the diversity of the communities locally served to promote understanding.

8.4.4. The communities and groups Healthwatch engage with are often harder to reach or seldom heard and Healthwatch assist in influencing the reduction of inequalities for these groups in health and social care. The seldom heard groups include black and ethnic minority individuals, informal carers, disabled people, LGBTQ+ individuals, refugees / asylum seekers, people who are homeless, and people with language barriers. Co-production with these groups, through Healthwatch, gives them the opportunity to decide what is important to them and what they want to explore. Additionally, individuals in these groups learn skills which they can take on to other work, as a result enhancing the social value of the work carried out.

8.4.5. This decision to award the extension for 11 months will have a positive impact and ensure that the Council continues to address known inequalities that affect individuals with protected characteristics. Accordingly, the decision represents progress to eliminate discrimination and advance equality of opportunity. This will be carried out by actively listening to the experiences of those facing inequality, understanding the steps that could improve people's lives, and by acting on what has been learned.

8.4.6. The equalities impact will be monitored over the life of the contract.

**9. Use of Appendices**

9.1. None

**10. Local Government (Access to Information) Act 1985**

10.1. Not Applicable

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