


<b>Cabinet</b>  25 January 2023	 <b>TOWER HAMLETS</b>
<b>Report of:</b> Somen Banerjee, Director of Public Health	<b>Classification:</b> Unrestricted
Baby Feeding and Wellbeing Service	

<b>Lead Member</b>	<b>Councillor Gulam Kibria Choudhury, Cabinet Member for Health, Wellbeing and Social Care</b>
<b>Originating Officer(s)</b>	Katie Cole, Associate Director of Public Health
<b>Wards affected</b>	All wards
<b>Key Decision?</b>	Yes
<b>Reason for Key Decision</b>	Impact on wards
<b>Forward Plan Notice Published</b>	23 December 2022
<b>Exempt information</b>	N/A
<b>Strategic Plan Priority / Outcome</b>	5. Investing in public services

### Executive Summary

The purpose of the report is to seek approval to insource the Baby Feeding and Wellbeing Service into the council.

This contract was approved for an open competitive tender in 2021/22 quarter 4 Cabinet Contracts forward plan. Since this period, a national policy development of Family Hubs has been introduced. This has provided funding and strategic focus to better integrate the community services working with children and families. As a result, the contracting approach for the Baby Feeding and Wellbeing Service has been re-assessed and it is proposed to insource this service instead of open competitive tendering.

Approval for the change in contracting approach is sought accordingly.

## **Recommendations:**

The Mayor in Cabinet is recommended to:

1. Approve the insourcing of the Baby Feeding and Wellbeing Service into the Council. This service would sit within the Early Help and Children & Family Service, in the Children and Culture Directorate. A smaller element of the existing service (specialist training and volunteer peer support network) would continue to be subcontracted to a specialist external organisation identified through an RFQ procurement process.

### **1 REASONS FOR THE DECISIONS**

- 1.1 The proposed insourcing model was chosen following a service evaluation and evidence review. An options appraisal was conducted to assess how best to integrate the service with other community services for young families.
- 1.2 Insourcing the baby feeding specialist team was identified as the best model to achieve the service aims of closer community delivery and integration in Family Hubs. Option 4 (insourcing plus a specialist subcontract) was identified as the best model to allow for the service to benefit from specialist expertise not available in the Council. This subcontract would deliver training to all staff as well as recruiting, training and managing a volunteer peer-led support network, who work alongside infant feeding specialists.

### **2 ALTERNATIVE OPTIONS**

- 2.1 The three leading alternative options are:
  - 1) Open competitive tender process for the whole service.
  - 2) Partnership agreement with the NHS
  - 3) Bringing the service in-house with an in-reach function to RLH maternity services.

### **3 DETAILS OF THE REPORT**

**Please see attached report.**

### **4 EQUALITIES IMPLICATIONS**

- 4.1 The service seeks to reduce inequalities by providing support to all women and babies in Tower Hamlets. National guidance highlights the importance of support being offered proactively and universally in order to reduce the inequalities associated with mothers needing to proactively seek out support.
- 4.2 An evaluation of the current service found staff are conscious of cultural differences and seek ways to reduce inequalities, for example delivering

antenatal workshops in Bengali. The Family Hubs model has been co-produced with parents from different communities in Tower Hamlets and the reduction of inequalities is a key objective of the Family Hub approach.

- 4.3 Regardless of the option pursued, further work is required to robustly measure protected characteristics of services used and use them to influence service design and delivery. The health recommendations in the Tackling Race Inequality action plan have not been fully implemented yet within the current service so there is a good opportunity to do this as part of any procurement or insourcing process.

## **5 OTHER STATUTORY IMPLICATIONS**

- 5.1 This section of the report is used to highlight further specific statutory implications that are either not covered in the main body of the report or are required to be highlighted to ensure decision makers give them proper consideration. Examples of other implications may be:
- 5.2 Best Value Implications: The service has been evaluated and found to be good value for money, and delivers a range of social benefits to families, babies and volunteer staff. The contract includes a volunteer peer support element enabling local mothers to undertake an accredited training in providing breastfeeding peer support, which has demonstrable impact of offering a route to future employment.
- 5.3 Consultations. There is no statutory obligation to consult on service procurement approaches.
- 5.4 Environmental (including air quality): Promoting breastfeeding has significant environmental benefits. Breastfeeding for six months saves an estimated 95-153 kg CO2 equivalent per baby compared with formula feeding, produced from cow's milk. Breastmilk benefits our environment as it requires no advertising, packaging, or transport and results in no wastage or depletion of natural resources through heating milk and sterilising.
- 5.5 Risk Management: As an insourced, standard Council risk management procedures will apply. Risks associated with each procurement option are outlined in the main report.
- 5.6 Safeguarding: The Council's safeguarding policies will apply. Safeguarding will be a standing agenda item at every contract meeting.
- 5.7 Data Protection / Privacy Impact Assessment: A data agreement will need to be in place to access data relating to pregnant women and new mums and babies. Further detail is provided in the report.

## **6 COMMENTS OF THE CHIEF FINANCE OFFICER**

- 6.1 £380,000 pa is budgeted from Public Health grant for the current outsourced service. The current outsourced contract has operated within this budget since the original contract award. The precise cost of an insourced service would need to be assessed as part of a TUPE process. The total cost would be met within the Public Health grant allocation.
- 6.2 Financial implications to be prepared by Directorate Finance Manager and agreed with Corporate Finance.

## **7 COMMENTS OF LEGAL SERVICES**

- 7.1 The Council is legally obligated to achieve Best Value in terms of economy efficiency and effectiveness when delivering its legal functions. The Council is entitled to determine that inhouse delivery of this function represents Best Value following consideration of the contents of this report.
- 7.2 The service under consideration represents only a part of this legal function and therefore the duty to consult is not triggered and therefore the Council is not legally obligated to consult prior to making this decision.
- 7.3 It is likely that the existing contractors who provide this service have appointed staff members whose employment is substantially to work on this service. Therefore, it is likely that the Transfer Of Undertakings (Protection Of Employment) Regulations 2006 will apply and those staff will have the right to transfer into the employment of the Council. Therefore, the Council will be required to make an employment package available to those staff which is broadly comparable with the contract of employment the currently have.
- 7.4 The Council may also be required to purchase other goods and services to support the provision of the service in house (for example, uniforms, equipment etc). These will be subject to separate procurements.

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## **Linked Reports, Appendices and Background Documents**

### **Linked Report**

- NONE.

### **Appendices**

- Appendix 1 - Options appraisal.

### **Background Documents – Local Authorities (Executive Arrangements) (Access to Information) (England) Regulations 2012**

- NONE.

### **Officer contact details for documents:**

N/A