

15 June 2015		ITEM: 6
Health and Wellbeing Board		
Children and Young people Emotional Wellbeing and Mental Health Service Commissioning update		
Wards and communities affected: All	Key Decision: n/a for information	
Report of: Paula McCullough, Commissioning Officer, Emotional Wellbeing and Mental Health		
Accountable Head of Service: Andrew Carter, Head of Children's Social Care		
Accountable Director: Carmel Littleton, Director of Children's Services		
This report is Public		

Executive Summary

The Seven CCGs, Essex County Council, Southend Council and Thurrock Council have been working closely to jointly re-commission integrated targeted and specialist emotional wellbeing and mental health services for children and young people.

A redesigned and comprehensive service model that integrates Tier 2 and Tier 3 services has been produced, based on the findings from needs assessment and consultation with young people, clinicians and stakeholders. We believe an integrated approach will improve resilience and life chances and better support vulnerable young people.

All partnership organisations approved the business cases/cabinet reports during May and June 2014 and this enabled a procurement process to start on the 7th July 2014.

Procurement

Three bidders responded to the first stage of the procurement (the Pre-Qualification Questionnaire (PQQ)) and all three passed and were put through to the next stage. The three bidders are;

- SEPT (in partnership with NEPT and Barnardo's)
- Tavistock and Portman
- NELFT (North East London Foundation Trust)

The second stage of procurement (Invitation to Submit Outline Solutions (ISOS)) saw all three bidders being issued detailed feedback from the PQQ that enabled them to start work

on their outline solutions. During November and December 2014 the outline solutions were received from all three bidders and reviewed by the evaluation team.

Dialogue commenced on the 5th January 2015. This process allowed bidders the opportunity to discuss their proposal and any areas of concerns raised from the review of their outline solution. Dialogue closed on the 20th March 2015 and final tender documentation was issued to the bidders.

Final tenders were received from all three bidders on the 10th April 2015. The evaluation team reviewed and scored the final tenders and participated in a moderation session on the 28th April 2015.

The CYP EWMH Partnership Project Board approved the outcome of the evaluation on the 30th April 2015.

- Preferred Bidder - North East London Foundation Trust (NELFT)
- Reserve Bidder – Tavistock & Portman NHS Foundation Trust

We adopted a voluntary minimum ten calendar day standstill period. The standstill period expired on 12th May 2015 and was successfully completed without any challenge being received.

New services are planned to commence from 1st November 2015 with an Initial Contract Term of 3 years and options to extend for two further 12 month periods.

Summary of preferred provider offer

NELFT have offered a balanced, comprehensive model rooted in the child and young person at the centre, with robust and deliverable systems to ensure this can be delivered systematically, safely and effectively across the partnership. This model is clearly tailored to each locality and based on a strong analysis of local needs and demand in each area. The service model clearly outlines how this demand will be met in each area.

The model proposed is evidence based and outcomes focused, with tried and tested ways to deliver across our partnership, using CYP-IAPT principles and tools that the trust has evidenced have been successfully implemented elsewhere.

The bid had strong levels of innovation and added value clearly demonstrated in the range of therapeutic interventions, programmes and workforce development offered.

Reassurance was given within the bid that each of the key elements of service requested by commissioners will be delivered to a high standard.

Commissioners were reassured that this provider was willing to work collaboratively with commissioners, children and young people and stakeholders to achieve a high level of service delivery.

The activity provided in the proposal suggests that over the three years of the initial contract period NELFT will achieve a 14% increase in activity over current levels. This increase is based on proposals for all client contacts, covering targeted, specialist and crisis provision. However, please note that there are some caveats over quality of existing amalgamated service data and caution should therefore be used with regard to the baseline activity numbers. More detailed activity planning will be developed with the provider once the contract is awarded.

Mobilisation

A mobilisation team with members from across the partnership will work with NELFT to finalise and implement transition plans.

The partnership will establish a Collaborative Forum to oversee the new contract, with WE CCG fulfilling the role as Lead Commissioner; this will be established once the Contract has been awarded. The forum will be used as the focus for discussion of matters relating to the Commissioning Contract and the pursuit of the objectives and performance of the function of the Collaborative. It will also oversee the transition arrangements and Contract negotiations

The vision of the C&YP EWMH partnership is to improve the Emotional Wellbeing & Mental Health of children and young people, aged 0-25, with EWMH needs. The aim being to improve their educational and social life chances by ensuring ease of access and the provision of high quality services that use evidence-based effective interventions.

Fit with Health and Well Being Plan - CYP EWMH Service Outcomes

The new service will deliver these outcomes

- Improved emotional wellbeing, emotional intelligence, resilience and self-esteem for children, young people, their families and carers
- Practitioners have improved access to Services and receive improved consultation, advice, support, training and guidance from the service.
- Children, young people, their families and carers;
 - receive easier access to services with a timely response to their needs
 - are appropriately signposted to universal services.
 - participate in and influence service provision and development.
 - experience integrated service provision with Emotional Wellbeing and Mental Health (EWMH) provision coordinated with other services without discriminatory, professional, organisation or location barriers getting in the way.
- Reduced inappropriate use of A&E to access CYP EWMH services
- Vulnerable groups such as Children Looked After Children, Fostered/Adopted, leaving Care, on the edge of Care, with a Disability and/or Statement of Educational Need and their families and carers receive appropriate evidence based interventions from EWMH services
- Young people aged 14-25 and their families and carers receive appropriate mental health support and experience a smooth transition to adult mental health services.

The Children and young people's mental health and well-being taskforce have published their report 'Improving mental health services for young people in March 14. Our joint re-procurement will deliver an integrated model that is outcomes focused and will improve access and resilience. This is the direction that the report recommends.

The taskforce co-chaired by Jon Rouse Director General, Social Care, Local Government and Care Partnerships at Department of Health and Martin McShane NHS England's director for people with long term conditions. It brings together experts on children and young people's mental health services and people who know about wider system transformation from education, social care and health. It commissions external advice from experts and others with experience in children and young people's mental health.

Our joint re-procurement supports the recommendations within the report and shows that our partnership has been ahead of national trends in developing integrated, outcomes focused services.

Risks identified

See table at end of report

Resource Implications

Employees from current providers will transfer over to the preferred provider at the start of the contract. Their current terms and conditions of employment will be protected by the Transfer of Undertakings (Protection of Employment) Regulations 2006 (as amended).

View of the Patients Carers or the Public and the extent of their involvement

Engagement

A Young People Engagement Group was established to gain insight from young people who have or currently are using the service. This group has been engaged on the Service Model and Specification; they also developed their own questions which were included in the tender and evaluated these as part of the final tender.

A Clinical Reference Group has been formally established. Membership includes GP Clinical leads from the Clinical Commissioning Groups. This group has been engaged on the Service Model and Specification, providing clinical advice and support. They also provided clinical advice during the procurement exercise and evaluation of the solutions provided by the bidders.

Implications

Financial

Implications verified by: **Kay Goodacre**
Finance Manager – Corporate finance

Procurement was carried out in accordance with all legislative requirements. The preferred bidder was recommended as it presented the most economically advantageous tender. The financial submission is within the financial envelope with activity levels increased by 14% . The service will deliver additional savings and social value as children and young people will receive an earlier and timelier response preventing escalation to more expensive specialist services with an improved focus on maintenance of their future well-being. The bidder presented a high quality, safe and affordable solution.

Legal

Implications verified by: **Courage Emovon**
Contracts Lawyer

Section 17 of the Children's Act 1989 provides that local authorities have a duty to safeguard and promote the welfare of children within their area who are in need and so far as is consistent with that duty to promote the upbringing of such children by their families by providing a range of services appropriate to those children's need.

The proposals to come together to plan, design and deliver a single equal, integrated, emotional wellbeing and mental health service for children and young people conforms with the duty placed on local authorities and their partners to work together to ensure all children and young people are able to stay safe, healthy, enjoy and achieve economic wellbeing and make a positive contribution.

The Children's Act 2004 sets out the responsibilities of local authorities and their partners to co-operate and promote the wellbeing of children and this specifically includes their mental health and emotional wellbeing. The Mental Health Act 1983 as amended by the Mental Health Act 2007 provides for the treatment and care of people with mental disorder including children and young people.

Thurrock Council under the Health and Social Care Act 2012 as a local authority must take such steps as it considers appropriate for improving the health of the people in its area and this includes the mental health of people in its area.

Diversity and Equality

Implications verified by: **Natalie Warren**

Community Development and Equalities Manager

The implementation of a high quality Emotional Well Being and Mental Health (EWMH) service is key to ensuring equality of opportunity for the children and young people of Thurrock and the Diversity Team would want to ensure that access to EWMH services is available to those who require that support. This new service offers improved "swift and Ease" for a wider group of children and young people than previously.

Risks

Risk	Impact	Mitigation
Incumbent providers do not engage with the preferred provider during the Mobilisation period should they not win the contract.	This would cause delays in the mobilisation of the new service, if staff and critical information is not be made available during the mobilisation period.	Effective contract management of incumbent providers. Clear communication to all parties and an agreed Exit Strategy in place. Mobilisation Plan, Risk register, Communication plan produced.
The Preferred provider does not implement the new service model and specification effectively.	Services will not meet expectations. Quality and activity could suffer and the provider could cherry pick easier cases. There may be gaps in the service and this could lead to outcomes not being achieved.	Dialogue with providers on KPIs and the expectations around the service model and specification. After Dialogue finalise Specification, Service Model and KPIs and issue to Bidders to ensure they are clear on their exceptions. Clear Contract Management Plan in place with Lead Commissioner and Preferred Provider.

Appendices to the report

- Appendix 1 - Key performance indicators- final tender

Report Author:

Paula McCullough
Commissioning Officer,
Emotional Wellbeing and Mental Health
Children's Services