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Tender

Restrictive Intervention Training in Ambulance Services on behalf of NHS England/Improvement

SALISBURY NHS FOUNDATION TRUST

F02: Contract notice

Notice identifier: 2022/S 000-010830

Procurement identifier (OCID): ocds-h6vhtk-0330ec

Published 27 April 2022, 2:10pm

Section I: Contracting authority

I.1) Name and addresses

SALISBURY NHS FOUNDATION TRUST

ADDRESS

Salisbury

SP2 8BJ

Contact

Simon Dennis

Email

simon.dennis@nhs.net

Telephone

+44 1722336262

Country

United Kingdom

Region code

UK - United Kingdom

Internet address(es)

Main address

https://nhs.bravosolution.co.uk/nhs_collaborative/web/login.html

I.2) Information about joint procurement

The contract is awarded by a central purchasing body

I.3) Communication

Access to the procurement documents is restricted. Further information can be obtained at

https://nhs.bravosolution.co.uk/nhs_collaborative/web/login.html

Additional information can be obtained from the above-mentioned address

Tenders or requests to participate must be submitted electronically via

https://nhs.bravosolution.co.uk/nhs_collaborative/web/login.html

I.4) Type of the contracting authority

Body governed by public law

I.5) Main activity

Health

Section II: Object

II.1) Scope of the procurement

II.1.1) Title

Restrictive Intervention Training in Ambulance Services on behalf of NHS England/Improvement

Reference number

C1546.389

II.1.2) Main CPV code

- 80000000 - Education and training services

II.1.3) Type of contract

Services

II.1.4) Short description

To engage an experienced provider of conflict resolution, disengagement and physical intervention training and learning to provide a risk assessed comprehensive, accessible and innovative training and learning program. The programme must be, which is evidence based and adopts a human rights and restraint reduction approach whilst also meeting the unique needs of the national ambulance sector.

2.2 Objectives

- (i) Conduct a national training needs analysis to identify a suite of restrictive intervention skills which to increase and maintain the safety of staff and patients
- (ii) Review the current conflict resolution training (CRT) offer in each trust in order to develop an interoperable restrictive intervention learning programme which combines this existing CRT offer
- (iii) Understand current restrictions on abstractions with ambulance service staff for attendance at statutory and mandatory training and subsequently develop a package that can be delivered
- (iv) Produce an ambulance service bespoke learning programme which includes interactive,

multimedia methods of delivery and innovative solutions to ensure minimal disruption to service delivery and satisfy current (future) Covid restrictions

(v) The programme that is developed will need to meet national, legislative and organisational requirements and duties

(vi) Produce a learning programme which can be delivered by inhouse qualified learning and development specialists through a train-the-trainer model

(vii) Provide a method of on-going quality assurance

II.1.5) Estimated total value

Value excluding VAT: £250,000

II.1.6) Information about lots

This contract is divided into lots: No

II.2) Description

II.2.3) Place of performance

NUTS codes

- UK - United Kingdom

II.2.4) Description of the procurement

Invitation to Quote

SPECIFICATION

Restrictive Intervention Training in Ambulance Services

1. Background

Violence to NHS staff

1.1 The NHS Long Term Plan and NHS People Plan require action be taken, a "redoubling" of our efforts, to prevent and reduce incidents of violence and abuse in the workplace.

One of the NHS People Plan Promises is that all our people feel supported, safe and secure

at work.

"The health and safety of our people are paramount. Leaders across the NHS have a statutory duty of care to prevent and control violence and abuse in the workplace - in line with existing legislation - so that people never feel fearful or apprehensive about coming to work."

1.2 The NHS Staff Survey 2020 found:

- that 14.5% of all staff responding to the Survey said, they had experienced at least one incident of physical violence from patients, service users, their relatives, or other members of the public in the last 12 months. Staff within Ambulance Trusts continue to report far higher levels of violence - 33.4% more than double the national average.
- A similar picture is reported for staff experiencing bullying, harassment or abuse from patients, service users, their relatives, or other members of the public over the past 12 months. The national average is 26.7% but almost double for staff in ambulance trusts at 46.7%.

1.3 In support of this the increasing violence, NHS England and Improvement published the NHS Violence Prevention and Reduction (VPR) Standard . The Standard is a risk-based framework to establish a systematic approach to protecting staff. The new NHS standard contract requires that all trusts must now have due regard for the standard.

1.4 The NHS violence prevention and reduction standard requires providers to take a public health approach to prevention. In doing so, providers are required to ensure a training needs analysis on violence (informed by the VPR standard risk assessment) has been undertaken, and suitable and sufficient training and support are accessible and provided to all staff.

1.5 The Association of Ambulance Chief Executives (AACE) is increasing its commitment to preventing and reducing violence and abuse to ensure the safety and security of all staff in their work. This is being led by a newly established violence prevention and reduction hub.

1.6 Training needs are identified by the National Education Network for Ambulance Services with guidance and standards being given to each UK ambulance trust. Each trust is required to have a relevant and appropriate conflict resolution package on offer for all employees which may include disengagement, assault avoidance, breakaway techniques, however this will vary in content and delivery across each trust.

1.7 There is a gap in the training provision at present in the delivery of an evidence-based training package on restrictive interventions within an ambulance setting. Restrictive interventions/restraint have been discussed in the ambulance sector previously within various national forums but a specific training package has never been formally recognised or delivered. Anecdotally, ambulance service VPR teams are aware that restrictive

interventions are undertaken by operational colleagues but cannot confirm with any degree of certainty the legitimacy, safety or effectiveness to which this restrictive intervention is applied. This could prove problematic should an adverse event occur as a result of a restrictive interventions. Data on the number of incidents requiring restrictive interventions applied is inconsistent and currently unobtainable at a sector-wide level.

1.8 For the purpose of this tender, restrictive interventions are defined as actions taken by ambulance personnel which may restrict or subdue an individual's movement or freedom to move, in order to remove or reduce the risk of danger to individuals or to ensure management / control of a dangerous situation. We recognise other terminology used could include, but is not limited to, physical restraint, use of force, manual restraint and safe holding.

2. Aim and objectives of the project

2.1 Aim

To engage an experienced provider of conflict resolution, disengagement and physical intervention training and learning to provide a risk assessed comprehensive, accessible and innovative training and learning program. The programme must be, which is evidence based and adopts a human rights and restraint reduction approach whilst also meeting the unique needs of the national ambulance sector.

2.2 Objectives

- (i) Conduct a national training needs analysis to identify a suite of restrictive intervention skills which to increase and maintain the safety of staff and patients
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- (vi) Produce a learning programme which can be delivered by inhouse qualified learning and development specialists through a train-the-trainer model

(vii) Provide a method of on-going quality assurance

3. Project outcome

The project will establish develop and implement an evidence-based restrictive intervention training and learning package for the UK NHS ambulance service that engenders a human rights and restraint reduction approach, this will be achieved by:

- A review of the existing training provisions held and delivered by NENAS and other contracted ambulance service providers in the field of conflict resolution
- Identifying an evidence based, best practice approach to training restrictive intervention and restraint reduction in the ambulance sector
- Reviewing appropriate studies and legislation required in the use of restrictive interventions
- Providing monthly progress updates to the project steering group (terms of reference and membership to be agreed)

Developing an evidence based best practice training package that is bespoke to the UK ambulance sector

4. Approach

Oversight for the project will be through a project steering group that will work with the supplier to help shape the work and provide guidance where required. The steering group will provide updates to the AACE VPR hub.

It is anticipated that the supplier will undertake the review using a mixed methodology, drawing upon available data, survey findings, studies and literature.

Consultation and engagement with key stakeholders across the NHS including professional bodies will be necessary to gain additional insights to support the review.

Monthly progress updates to the project steering group (terms of reference and membership to be agreed).

Presentation of findings to senior executive groups within both AACE and the NHS England and Improvement Violence Prevention and Reduction Team (details to be confirmed in discussion with the project steering group and supplier).

5. Timeframe

Work to commence in year 2021-22, with project timeline to be agreed between the supplier and the project steering group but to be completed no later than mid- November 2022.

6. Supplier requirements

- Knowledge of ambulance services
- Knowledge and understanding of ambulance services' training provisions and restrictions
- Knowledge of restrictive interventions, restraint and use of force in a clinical setting
- Working knowledge of the restraint reduction network and their associated training standards

(viii) Experience in designing, developing, and facilitating multimedia learning programmes for large organisations which can follow a train-the-trainer model

(ix) Experience of developing bespoke learning packages which provide innovative solutions to sector / organisational restrictions such as release of staff, lone workers, demand pressures, limited resources and current (future) Covid restrictions

(x) Project management experience within a large/national healthcare organisation

(xi) Experience in providing innovative solutions and bespoke packages which meet national, legislative and organisational requirements

(xii) Project design and delivery, working to an agreed brief and outcomes

II.2.5) Award criteria

Price is not the only award criterion and all criteria are stated only in the procurement documents

II.2.7) Duration of the contract, framework agreement or dynamic purchasing system

Duration in months

12

This contract is subject to renewal

No

II.2.10) Information about variants

Variants will be accepted: No

II.2.11) Information about options

Options: No

Section III. Legal, economic, financial and technical information

III.2) Conditions related to the contract

III.2.3) Information about staff responsible for the performance of the contract

Obligation to indicate the names and professional qualifications of the staff assigned to performing the contract

Section IV. Procedure

IV.1) Description

IV.1.1) Type of procedure

Open procedure

IV.1.8) Information about the Government Procurement Agreement (GPA)

The procurement is covered by the Government Procurement Agreement: Yes

IV.2) Administrative information

IV.2.2) Time limit for receipt of tenders or requests to participate

Date

23 May 2022

Local time

12:00pm

IV.2.4) Languages in which tenders or requests to participate may be submitted

English

IV.2.6) Minimum time frame during which the tenderer must maintain the tender

Duration in months: 12 (from the date stated for receipt of tender)

IV.2.7) Conditions for opening of tenders

Date

24 May 2022

Local time

8:00am

Section VI. Complementary information

VI.1) Information about recurrence

This is a recurrent procurement: No

VI.2) Information about electronic workflows

Electronic ordering will be used

Electronic invoicing will be accepted

Electronic payment will be used

VI.3) Additional information

The following Contracting Authorities are entitled to place Orders:

Salisbury NHS Foundation Trust and all bodies listed below :

Central Government Departments, Local Government and Public Corporations :

<https://www.gov.uk/government/organisations>

Please note Central Government departments may be subject to Government Digital Service approval before using the Framework Agreement.

Local Authorities (England and Wales)

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/791684/List_of_councils_in_England_2019.pdf

National Parks Authorities

<https://www.nationalparks.uk/about-us>

Educational Establishments in England and Wales, maintained by the Department for Education including Schools, Universities and Colleges listed :

<https://www.compare-school-performance.service.gov.uk/schools-by-type?step=default&table=schools®ion=all-england&for=secondary>

Police Forces listed by the College of Policing, plus Police Scotland and Police Service of

Northern Ireland

https://www.college.police.uk/About/Copyright_Licensing/Pages/Home-Office-police-forces.aspx

Police Forces and Special Police Forces in the United Kingdom, and/or Police and Crime Commissioners (as defined by the Police Reform and Social Responsibility Act 2011) and/or the Police Authorities (as defined in the Police Act 1964, Police Act 1996, Serious Organised Crime and Police Act 2005, Police and Justice Act 2006, Police, Public Order and Criminal Justice (Scotland) Act 2006), and other relevant legislation for the constituent parts of the United Kingdom, for their respective rights and interests

Fire and Rescue Services in the United Kingdom

<http://www.fireservice.co.uk/information/ukfrs>

<http://www.nifrs.org/areas-districts/>

<http://www.firescotland.gov.uk/your-area.aspx>

NHS Bodies England

<http://www.nhs.uk/ServiceDirectories/Pages/AcuteTrustListing.aspx>

<http://www.nhs.uk/ServiceDirectories/Pages/CCGListing.aspx>

<http://www.nhs.uk/ServiceDirectories/Pages/MentalHealthTrustListing.aspx>

<http://www.nhs.uk/ServiceDirectories/Pages/CareTrustListing.aspx>

<http://www.nhs.uk/ServiceDirectories/Pages/AreaTeamListing.aspx>

<http://www.nhs.uk/ServiceDirectories/Pages/SpecialHealthAuthorityListing.aspx>

<http://www.nhs.uk/ServiceDirectories/Pages/OtherListing.aspx>

Hospices in the UK

<https://www.hospiceuk.org/about-hospice-care/find-a-hospice?qclid=CPLU3cD7zdECFdaRGwodNeoDyw>

Registered Social Landlords (Housing Associations)

<https://www.gov.uk/government/publications/current-registered-providers-of-social->

housing

Third Sector and Charities in the United Kingdom

<http://www.charitycommission.gov.uk/find-charities/>

<http://www.oscr.org.uk/search-charity-register/>

<http://www.charitycommissionni.org.uk/charity-search/>

Citizens Advice in the United Kingdom

<http://www.citizensadvice.org.uk/index/getadvice.htm>

www.cas.org.uk

<http://www.citizensadvice.co.uk/>

Any corporation established, or a group of individuals appointed to act together, for the specific purpose of meeting needs in the general interest, not having an industrial or commercial character, and (i) financed wholly or mainly by another contracting authority listed above in this section of this Framework Agreement;

(ii) subject to management supervision by another contracting authority listed above in this section of this Framework Agreement; or

(iii) more than half of the board of directors or members of which, or, in the case of a group of individuals, more than half of those individuals, are appointed by another contracting authority listed above in this section of this Framework Agreement

(iv) an association of or formed by one or more of the Contracting Authorities listed above in this section of this Framework Agreement

Entities which are not public sector bodies may also use the Framework Agreement if the Authority is satisfied that:

- such entity is calling-off goods and/or services directly, solely and exclusively in order to satisfy contractual obligations to one or more public sector bodies, all of which are entitled to use the Framework Agreement on their own account;
- all goods to be called-off by it are to be used directly, solely and exclusively to provide goods and/or services at sites occupied by such public sector body(ies); and
- it will pass the benefit of the call-off contract to such public sector body(ies) directly, in full

and on a purely "pass-through" basis. Accordingly there must be no mark-up, management fee, service charge or any similar cost solely in relation to the supply of goods and/or services imposed on the relevant public sector body(ies), who must be able to benefit from the terms of the Framework Agreement in a like manner and to the same extent as if using the Framework Agreement on its/their own account.

Any 'bodies governed by public law' which under the Public Contracts Regulations 2015 means bodies that have all of the following characteristics

(a) they are established for the specific purpose of meeting needs in the general interest, not having an industrial or commercial character;

(b) they have legal personality; and

(c) they have any of the following characteristics:-

(i) they are financed, for the most part, by the State, regional or local authorities, or by other bodies governed by public law;

(ii) they are subject to management supervision by those authorities or bodies; or

(iii) they have an administrative, managerial or supervisory board, more than half of whose members are appointed by the State, regional or local authorities, or by other bodies governed by public law.

VI.4) Procedures for review

VI.4.1) Review body

The High Court, England & Wales

London

Country

United Kingdom