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Not applicable

Medway Young Persons' Substance Misuse Support and Recovery Service

Medway Council

F14: Notice for changes or additional information

Notice identifier: 2024/S 000-026946

Procurement identifier (OCID): ocds-h6vhtk-048ac9

Published 22 August 2024, 8:24pm

Section I: Contracting authority/entity

I.1) Name and addresses

Medway Council

Medway Council, Gun Wharf, Dock Road

Chatham

ME4 4TR

Contact

Mr James Welch

Email

james.welch@medway.gov.uk

Country

United Kingdom

Region code

UKJ41 - Medway

Internet address(es)

Main address

http://www.medway.gov.uk/

Buyer's address

http://www.medway.gov.uk/

Section II: Object

II.1) Scope of the procurement

II.1.1) Title

Medway Young Persons' Substance Misuse Support and Recovery Service

Reference number

DN731847

II.1.2) Main CPV code

• 85100000 - Health services

II.1.3) Type of contract

Services

II.1.4) Short description

Medway Council require an effective and equitable service that supports young people who use substances to access a range of support services (such as harm reduction interventions, one-to-one support, group support, recovery, and education) to meet their needs effectively, preventing further substance-related harms.

Medway Council carried out a health assessment at the start of this year which identified gaps in service provision between CYP and adult's services. This has informed Medway Council's long-term aim to create an all-age system for substance misuse services and improve transitions between the CYP service and the adult's service. At present the Young People's service and the adults treatment service are delivered by two separate

providers, commissioned by different organisations. While both commissioners and providers work collaboratively, the current arrangement has different contract end dates and contract management routines. This award is the first step in aligning the contracts, their management, and personnel while a new all age, but age appropriate, model and service specification are developed. The benefits are as follows:

- Commissioner can focus on service development and stakeholder engagement rather than performance managing two contracts
- Pooling of resources will increase the amount available to use on service delivery
- Co-design of the new all age service will be more effective and a wider pool of service users available for consultation

To enable this, the proposal is for the CYP service to run alongside the existing adults' service and provided by the current adults' service provider. Therefore, the contract term will be brought in-line with the adult's contract, with an initial contract period of 19 months (1 Sept 2024 – 31 March 2026), followed by one optional 12-month extension.

This is a Provider Selection Regime (PSR) intended approach notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award.

The award decision makers are Public Health commissioning officers.

The intention is to award the CYP Substance Misuse Service using the Most Suitable Provider process.

Section VI. Complementary information

VI.6) Original notice reference

Notice number: 2024/S 000-025789

Section VII. Changes

VII.1.2) Text to be corrected in the original notice

Section number

IV.1.1

Instead of

Text

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award. The standstill period begins on the day after the publication of this notice. Representations by providers must be made to decision makers by 26 August 2024. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

Read

Text

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award. The standstill period begins on the day after the publication of this notice. Representations by providers must be made to decision makers by 27 August 2024. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

Section number

VI.3

Instead of

Text

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award. The standstill period begins on the day after the publication of this notice. Representations by providers must be made to the relevant authority by 26 August 2024. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

Written representations should be sent to <u>james.welch@medway.gov.uk</u> and <u>claire.hurcum@medway.gov.uk</u>

The award decision makers are Public Health commissioning officers.

No conflicts of interest were flagged as part of this process.

Key criteria, weightings and rationale:

Criterion 1: Improving access, reducing health inequalities, and facilitating choice – 30%

Making services accessible is key to achieving the aims of the Harm to Hope Drug Strategy, early intervention and secondary prevention will reduce the likelihood of young people becoming adults who use drugs and go on to face additional health inequalities. It has been identified that the transition point between young people's and adult services is a point at which people can face additional health inequalities. An all-age service will mitigate against this. Choice of attending an adult or young people centred approach will be key in the successful treatment for people with different social or developmental needs. The weighting reflects the need to place service users at the centre of the service, it should be an evidence-based service that is co-designed with people who are likely to benefit from it.

Criterion 2: Integration, collaboration and service sustainability – 25%

Medway Public Health has a strong reputation for collaborative working. There is a desire to improve treatment pathways for service users, especially where this can be achieved by simple changes to the way services are commissioned and managed. Through the integration of services it will be possible to remove the negative impacts of thresholds and service barriers. This means people can access holistic care, it will improve overall care and provide better value for money across the system. The weighting reflects the importance of the values we expect the provider to hold, they should place collaboration and integration with the system before competition.

Criterion 3: Quality and Innovation – 20%

The provider will be expected to support the design and development of the all age model during the life of the contract and maintain the current levels of support available. The provider will work to provide a single data set that will enable commissioners to monitor the impact of the services. This data will be used to progress innovation and ensure quality across the system. The weighting reflects the importance of maintaining quality provision during times of structural change.

Criterion 4: Social value - 5%

Weighting relative to the importance of the other key criteria..

Criterion 5: Value- 20%

The budget to deliver the young people's service is limited, while acknowledging this and while working towards a fully integrated all age service with a single budget, the provider must commit to delivering the service within budget for the duration of the contract. The weighting reflects the need and ability to meet this commitment.

The provider assessed as the most suitable demonstrated extensive experience against the key criterion and gave strong answers that reflect the transition to an all age service we are looking to implement in Medway. The provider is the incumbent provider for adults substance misuse services, and gave a strong description of how they are currently collaborating with young person treatment services. This gave commissioners assurance that the service delivery will be seamless for service users and sub-contractors will operate within a safe system (criterion 2). They also placed a strong emphasis on YP being at the centre of the treatment journey with individualised care plans that are written through co-production (criterion 1 and 2). The provider referred to taking the service to where CYP are, the use of co-location, and assertive outreach in order to improve access, reduce health inequalities and facilitate choice (criterion 2). The provider gave examples of how they have implemented an all age system in other areas and delivered services in an age appropriate way, and involved young people as part of service improvement (criterion 3). The provider demonstrated how the service promotes local skills and employment as all employed staff in the young persons service live locally and the service provide support to local schools and colleges. The provider also sources local organisations for contracts in order to support the growth of local businesses and have committed to reduce carbon emissions by ensuring premises are energy efficient, and staff use local transport for work (criterion 4). They are able to provide the service within the budget (criterion 5).

Read

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The provider will be expected to support the design and development of the all age model during the life of the contract and maintain the current levels of support available. The provider will work to provide a single data set that will enable commissioners to monitor the impact of the services. This data will be used to progress innovation and ensure quality across the system. The weighting reflects the importance of maintaining quality provision during times of structural change.

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