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Contract

Social Prescribing Service - Horsham and Mid-Sussex

NHS SUSSEX INTEGRATED CARE BOARD

F03: Contract award notice

Notice identifier: 2025/S 000-063295

Procurement identifier (OCID): ocds-h6vhtk-05aa8b

Published 8 October 2025, 1:33pm

Section I: Contracting authority

I.1) Name and addresses

NHS SUSSEX INTEGRATED CARE BOARD

Sackville House, Brooks Close

Lewes

BN7 2FZ

Email

aelliott1@nhs.net

Country

United Kingdom

Region code

UKJ22 - East Sussex CC

NHS Organisation Data Service

QNX

Internet address(es)

Main address

https://www.sussex.ics.nhs.uk/

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

Social Prescribing Service - Horsham and Mid-Sussex

II.1.2) Main CPV code

• 85000000 - Health and social work services

II.1.3) Type of contract

Services

II.1.4) Short description

Social Prescribing Service within Horsham and Mid-Sussex.

This is a Provider Selection Regime (PSR) intention to contract 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 and Procurement Act Regulations 2023 do not apply to this award.

This contract has not yet been formally awarded, this notice serves as an intention to award under the PSR using Direct Award Process C.

Written representations should be sent to <u>aelliott1@nhs.net</u> and cc. <u>robert.kitt1@nhs.net</u> by midnight on Tues 21st October 2025.

The approximate lifetime value of the contract will be £174,714 over a two-year term, from 1st April 2026 until 31st March 2028.

II.1.6) Information about lots

This contract is divided into lots: No

II.1.7) Total value of the procurement (excluding VAT)

Value excluding VAT: £174,714

II.2) Description

II.2.3) Place of performance

NUTS codes

UKJ28 - West Sussex (North East)

Main site or place of performance

Horsham and Mid-Sussex

II.2.4) Description of the procurement

Social Prescribing Service within Horsham and Mid-Sussex.

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This contract has not yet been formally awarded, this notice serves as an intention to award under the PSR using Direct Award Process C.

Written representations should be sent to <u>aelliott1@nhs.net</u> and cc. <u>robert.kitt1@nhs.net</u> by midnight on Tues 21st October 2025.

The approximate lifetime value of the contract will be £174,714 over a two-year term, from 1st April 2026 until 31st March 2028.

II.2.5) Award criteria

Quality criterion - Name: The existing provider is satisfying the original contract and will likely satisfy the proposed contract to a sufficient standard / Weighting: 100

Price - Weighting: 0

II.2.11) Information about options

Options: No

II.2.14) Additional information

On 22 April 2025, NHS Sussex ICB commenced market engagement for a proposed new Sussex community based social prescribing service. Since beginning our preprocurement engagement, the government's 10 Year Health Plan for England: Fit for the Future has been published.

Whilst expected, the 10 Year Health Plan clearly sets the strategic direction for neighbourhood health; describing a new NHS operating model and provider landscape, to deliver a more diverse and devolved health service. It describes the roles of Integrated Health Organisations, and how strategic commissioners should work to support and develop this infrastructure within their systems. Further to this, we have recognised that we need to reflect further on our intentions for a new Sussex community-based social prescribing service, and how this should best be delivered for the future.

The ICB has therefore paused before the formal tender process is commenced while the ICB undertakes a strategic review of how best to move forward with the future procurement of social prescribing services in a way that is aligned with the 10 Year Health Plan.

This means we are unable to complete our procurement process by April 2026 as intended.

The decision to offer a two-year direct award has been chosen for several reasons. Firstly, it provides time for the new provider landscape to become clearer and allow the ICB to conduct the strategic review. This period is not only reasonable for current providers to commit to but also ensures that we can complete a full competitive procurement process efficiently, including market engagement, Invitation to Tender and then service mobilisation, if competitive procurement is the chosen route to commission the service following the strategic review, making this a comprehensive approach that supports all parties involved and ensures service stability for service users. It is currently estimated that a procurement process would re-commence in early 2026/27.

Section IV. Procedure

IV.1) Description

IV.1.1) Type of procedure

Award of a contract without prior publication of a call for competition in the cases listed below

• The procurement falls outside the scope of application of the regulations

Explanation:

This is a Provider Selection Regime (PSR) intention to award notice (Direct Award C). 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 midnight on Tues 21st October 2025. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

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

The procurement is covered by the Government Procurement Agreement: No

Section V. Award of contract

A contract/lot is awarded: Yes

V.2) Award of contract

V.2.1) Date of conclusion of the contract

23 September 2025

V.2.2) Information about tenders

Number of tenders received: 1

Number of tenders received from SMEs: 1

The contract has been awarded to a group of economic operators: No

V.2.3) Name and address of the contractor

Age UK West Sussex, Brighton and Hove

Ground Floor, 95 Queens Road

Brighton

BN1 3XE

Country

United Kingdom

NUTS code

• UKJ21 - Brighton and Hove

Companies House

04146487

The contractor is an SME

Yes

V.2.4) Information on value of contract/lot (excluding VAT)

Initial estimated total value of the contract/lot: £174,714

Total value of the contract/lot: £174,714

Section VI. Complementary information

VI.3) Additional information

The provider selection process was based on five key criteria, each weighted to reflect its importance in service delivery, value, and sustainability:

o Quality & Innovation - 22% is allocated to quality and innovation to ensure the service is performing to the standards expected and to demonstrate the provider is able to innovate with the commissioner as per the ICB's expectations. For Social Prescribing, quality is essential to ensuring people receive safe, person-centred, and effective support. This includes staff competence, safeguarding, governance, outcomes monitoring, and user

experience. The weighting recognises that access and integration are not sufficient on their own; the service must consistently deliver to a high standard.

o Value - 15% is allocated to value to ensure our population is getting value for money from the service provided, and to ensure we are spending taxpayers' money efficiently. For Social Prescribing, while cost effectiveness is important, the service is not commissioned on a "lowest cost" basis. The lower weighting compared to the other domains reflects the commissioning intent to prioritise value and impact over absolute cost, while still ensuring bidders demonstrate affordability, financial robustness, and efficiency.

o Integration & Sustainability - 23% is allocated to integration, collaboration, and service sustainability as integration is key to upcoming ICB plans, and along with collaboration as system wide engagement is required to ensure improvements are made to care and experience. For Social Prescribing, the success of the community social prescribing services relies on being a member of the Integrated Community Team MDTs as well as collaborating with other services, voluntary/community/faith sector organisations, and local authorities. This weighting reflects the importance of embedding the service within existing health and care, preventing duplication, and ensuring long-term viability. It incentivises bidders to demonstrate robust collaborative models and sustainability planning.

o Improving Access & Health Inequalities - 30% is allocated to improving access, reducing inequalities and facilitating choice as these are important factors that must be considered for all services ICBs commission. For Social Prescribing, this has the highest weighting because the primary purpose of community social prescribing service is to widen access to non-clinical support, targeting those with greatest need. Placing strong emphasis here ensures the service actively reduces health inequalities, enables individuals to make informed choices about their care, and aligns with NHS priorities on prevention and population health management.

o Social Value - 10% is allocated to social value as services should be able to provide additional benefits to the wider population, not just those who access the service, and local social, environmental, and economic benefits, e.g. reducing CO2 emissions. For Social Prescribing, this weighting ensures alignment with the Public Services (Social Value) Act 2012, encouraging providers to generate additional community benefits such as local employment, volunteering opportunities, and environmental sustainability. While important, it is given a smaller weighting to balance against the service's core objectives.

The decision to award the contract to Age UK West Sussex, Brighton and Hove was made through review of the above structured evaluation of key criteria, selection standards, and PSR compliance, which demonstrated that the Organisation continues to provide a high quality service for our population whilst ensuring the best value and service continuity for NHS Sussex.

The assessment of the current service is as follows:

Basic Selection Criteria:

Basic Criteria 1: The provider's suitability to pursue a particular activity Pass

Basic Criteria 2: Economic and financial standing Pass

Basic Criteria 3 Technical and professional ability Pass

Key Criteria:

Quality and innovation: Score 3 (Weighted 13.2%)

The provider has developed a communications plan with local GP practices which in Q1 resulted in the service receiving referrals from every GP practice in Horsham and Mid Sussex. The provider has also raised awareness of the service amongst local Age UK services including local social groups, community agents and home help team to ensure that referrals are not restricted to those referred through traditional 'health' pathways.

The team has strengthened links with the Sussex VCSE mental health network and is developing relationship with support groups such as Sage Counselling and Blind Veterans UK to increase awareness of the social prescribing offer and increased appropriate and timely referrals from a broad range of voluntary organisations.

Value: Score 3 (Weighted 9%)

NHSE guidance recommends a full time Social Prescriber have an annual caseload of up to a maximum of 200 - 250 and that clients are supported for an average of 6 -12 contacts over a three-month period.

In Q1 the service received 126 referrals with 90% remaining on the caseload for 3 months (meeting that guidance). The service uses a bespoke outcomes framework. For clients discharged in Q1, 100% of respondents (response rate of 46%) reported an increase in their overall score indicating positive impact on mental wellbeing, which can lead to better life satisfaction, happiness and overall quality of life.

Integration, collaboration and service sustainability: Score 3 (Weighted 13.8%)

The service sits within the Proactive Care Teams in Horsham and Mid Sussex and is a core member of that multi-disciplinary team. The team is developing links with the newly emerging Primary Care Network MDTs. In addition the service can receive referrals directly from Primary Care. to strengthen referral pathways and with older people's groups to target the service in key areas and target cohorts.

Referral pathways from local Age UK services have been established and the service is working closely with Community Agents and other locally commissioned services for older people in key areas and with under represented cohorts.

In Q1 86 onward referrals were made to 22 different local organisations.

Improving access, reducing health inequalities, and facilitating choice: Score 3 (Weighted 18%)

The provider offers different models and levels of support. Face to face in clinical, community or home settings, telephone or email. The interventions are tailored to meet the service user needs and choice and can range from low level signposting to intensive longer term support for complex situations.

The service is a core component of the Proactive Care Teams and the majority of referrals come from clinicians and targeted opportunities to reach to specific areas or groups is limited.

The service works predominantly with older people, people with frailty and those with disabilities. The provider has been working to increase the number of referrals from men and has a regular presence at the Age UK Silver Bullets group and has established links with the Tackling Social Isolation service, to reach more vulnerable individuals.

Social Value: Score 3 (Weighted 6%)

As a service Social Prescribing provides social value as it connects individuals with local services and organisations, promotes volunteering and sustainable activities. Age UK WSBH is local employer which supports volunteering.

Total Weighted Score: 60%

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A risk of a potential conflict of interest (perceived and/or actual) was identified whereby the PSR assessment was conducted solely by the Local Commissioner. As the commissioning subject matter expert of the service, they had the ability to control the outcome of the assessment, which might lead to either the perception of, or an actual conflict of interest. This risk was mitigated through management oversight of the scoring assessment.

The decision maker is the Deputy Chief Integration & Primary Care Officer and Director of Joint Commissioning, NHS Sussex ICB.

Written representations should be sent to <u>aelliott1@nhs.net</u> and cc. <u>robert.kitt1@nhs.net</u> by midnight on Tues 21st October 2025.

VI.4) Procedures for review

VI.4.1) Review body

NHS Sussex Integrated Care Board

Sackville House, Brooks Close

Lewes

BN7 2FZ

Country

United Kingdom

VI.4.2) Body responsible for mediation procedures

NHSE

Skipton House, 80 London Road

London

SE1 6LH

Country

United Kingdom