**Provision of a Digital Mental Health Support Service for Young People in Berkshire West for: Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board and Wokingham, Reading and West Berkshire Local Authorities**

**Market Engagement Insights Questionnaire**

Thank you for registering your interest in the above project and sharing information which will enable us to provide an excellent service to the Young People in Berkshire West, herein referred to as the Authority.

**PURPOSE OF THIS DOCUMENT**

This Market Engagement Insights Questionnaire is an information gathering exercise being undertaken by NHS South, Central and West on behalf of the Authorities to inform the development of its approach in the provision of a Digital Mental Health Support Service for Young People aged 11 to 17 years of age.

The Authorities reserves the right to amend or change all and any aspects discussed in this exercise if a decision to move to formal procurement is made. This early engagement exercise **does not** guarantee the tendering of any services taking place.

All responses should be entered into the question submission boxes in this document and saved as a document that can be viewed in Microsoft Word. Other formats are not required.

**Please submit your responses and feedback by 30 December 2022 via email to** [**stevie.crawford2@nhs.net**](mailto:stevie.crawford2@nhs.net) **(and copy in mstanbrook@nhs.net).**

**BACKGROUND INFORMATION**

In 2021 NHS England concluded the second Wave of the Children and Young People’s survey exploring the mental health of children and young people in February/March 2021, during the Coronavirus (COVID-19) pandemic and changes since 2017. Experiences of family life, education, and services during the COVID-19 pandemic are also examined.

Berkshire West – Needs Analysis

* Demand on Berkshire Healthcare CAMHS increased significantly through 2021/22 with the total number of referrals, inclusive of referrals for neurodiversity services, up by 45% from last year and continuing an upward trajectory (60% increase in referrals to CAMHs in the last 12 months). The trend is the same across the county.
* Referrals through Common Point of Entry (CPE) at Berkshire Healthcare Foundation Trust remain high, up by 63% compared to last year, which is in line with the increase seen across the SE Region. We continue to see elevated numbers of referrals coded urgent which indicates the increase in complexity and risk in referrals.
* Acuity, complexity and risk of CAMHs referrals has increased with 30% of referral now being marked as urgent at the point of referral, compared to 13% in the previous year.
* There was a dramatic rise in demand on both CAMHS and Adult eating disorder services nationally and locally through the pandemic (more detail on this can be seen in the activity section). This levelled off earlier in the year but has increased again over the past few months such that the average month referral rate is now 18, compared to 19 last year and 13 before the pandemic.
* Waiting time to first contact is increasing in line with the increase in referrals.
* Referrals to the crisis team were up by 7% this year with the additional challenge of pressure related to improving flow through the acute system and the ongoing increase in acuity and complexity of cases.
* There are also workforce shortages which are making the situation worse, with a high turnover in the clinical workforce and staff leaving the clinical specialty altogether.

Prevalence estimates and types of mental health disorder.

The table below provides modelled estimates for the numbers of children and young people in Berkshire West who may have a mental health disorder. These are based on the prevalence rates identified in the 2017 national survey and take the age and sex of the local population into account. However, these have not been adjusted for other risks or protective factors that will impact on a child’s risk of developing a mental health disorder. Children and young people may present with more than one disorder.

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| **Estimated prevalence of mental health disorders for children and young people in Berkshire West.** | | | | | | | | |
| **Type of mental health disorder** | **5 to 10 year olds** | | **11 to 16 year olds** | | **17 to 19 year olds** | | **5 to 19 year olds**  **(Total)** | |
| Estimated number | Prevalence | Estimated number | Prevalence | Estimated number | Prevalence | Estimated number | Prevalence |
| Mental health disorder (all) | 3,854 | 9.5% | 5,091 | 14.3% | 2,997 | 17.0% | 11,943 | 12.7% |
| Emotional disorder | 1,668 | 4.1% | 3,184 | 9.0% | 2,651 | 15.0% | 7,503 | 8.0% |
| Behavioural disorder | 2,034 | 5.0% | 2,206 | 6.2% | 134 | 0.8% | 4,374 | 4.7% |
| Hyperactivity disorder | 703 | 1.7% | 696 | 2.0% | 135 | 0.8% | 1,537 | 1.6% |
| Other less common disorder | 911 | 2.2% | 782 | 2.2% | 317 | 1.8% | 2,009 | 2.1% |
| *Source: Prevalence from NHS Digital (2017);* [2017 Mental Health of Children and Young People in England](https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017) *Population from Office for National Statistics (2019);* [Estimates of the population for the UK mid-2018](https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland) | | | | | | | | |

There are an estimated 124,667 0-19 year olds in Berkshire West (ONS 2019) of whom 29,991 are aged 0-4 and 94,676 aged 5-19.

The prevalence rate for 0-4s is 5.5%, so we would expect to see difficulties in 1,650 in this age group.

Using the figure of 16% for the population aged 5-19, we would expect to see at least 15,148 Children and Young People with a mental health disorder in Berkshire West (mid-July 2020). A more accurate figure would be slightly higher as prevalence increases from 16% for 5-16 year olds to 20% for the 17-19 year olds.

In addition, these figures do not include 0-4 year olds and SEND young people over 19 for whom more local data is needed. (Berkshire West data is based on national prevalence).

**SCOPE**

The service will target children and young people aged 11 to 17 years (up to the 18th birthday) who are signed up with a GP Practice in Berkshire West or who attend an education setting in Berkshire West with low to moderate emotional and mental health needs, promote resilience and wellbeing, support earlier intervention, provide timely advice and liaison with specialist services to support children and young people via digital media with an App and Web-based service.

This service will support those children and young people who are in the following quadrants of the Thrive Model and:

* **Need Advice** - This group includes both those with mild or temporary difficulties AND those with fluctuating or ongoing severe difficulties, who are managing their own health and not wanting goals-based specialist input. Within this grouping are children, young people adjusting to life circumstances, with mild or temporary difficulties, where the best intervention is within the community with the possible addition of self-support. This group may also include, however, those with chronic, fluctuating or ongoing severe difficulties, for which they are choosing to manage their own health and/or are on the road to recovery.
* **Need Help** - This group comprises those children, young people who would benefit from focused, evidence-based help and support, with clear aims, and criteria for assessing whether these aims have been achieved. This group comprises those who need specific interventions focused on agreed mental health outcomes. An intervention is any form of help related to a mental health need in which a paid-for professional takes responsibility for input directly with a specified individual or group. The professional may not necessarily be a trained mental health provider, but may be a range of people who can provide targeted, outcomes-focused help to address the specific mental health issue.

The following list is an indication of what we anticipate will/will not be in scope. This list in not exhaustive and it might change post market engagement

| **The service will provide:** | **The service will provide with close supervision** | **The service will not provide  Significant levels of need /complex conditions** |
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| **Behavioural difficulties – identification, and brief parenting support** |  | Conduct disorder, anger management, full parenting programmes (e.g., Triple P, Solihull Approach). |
| **Training parents and teachers to support interventions with children** |  | Treatment of parents’ depression and anxiety. |
| **Low mood** | Irritability as a symptom of depression – (can present as anger) | Anger management training, Chronic depression |
| **Worry management**Low self-esteem, social anxiety disorder Low confidence, Assertiveness or interpersonal challenges – e.g., with peers |  |  |
| **Anxiety/Avoidance:**  **e.g. simple phobias, separation anxiety** | Some short-term phobia exposure work | Extensive phobias e.g. Blood, needles, or vomit phobia |
| **Panic Management** |  | Not trained to deliver interventions for Panic Disorder. |
| **Assessing self-harm and supporting alternative coping strategies. Pupils with history of self-harm, but not active.** | Thoughts of self-harm, superficial self-harm. Basic harm reduction techniques | Severe, active, high risk self- harm. |
| **Sleep Hygiene** | Insomnia | PTSD, trauma, nightmares |
| **Thought Challenging – negative automatic thoughts** | Assessment of complex interpersonal challenges | Assessment and diagnosis of neurodevelopmental disorders and learning difficulties. |
| **Problem Solving** |  | Any level of OCD, attachment difficulties or ritualistic behaviour |
| **Relationship problems -counselling for issues such as relationship problems.** |  | Pain management . |
| **Navigating the day to day ups and downs (it’s ok to not feel ok all the time, this is part of the normal growing up and part of our lives)..** |  | Historical or current experiences of abuse or violence |

* Provide a comprehensive and safe digital solution that is young person-friendly and empowers young people to take control of their mental health and wellbeing, for young people who live or go to school in Berkshire West aged 11-17 years (up to the 18th birthday).
* Provide a range of forums to offer young people an appropriate first point of entry including:
* A chat function for a young person to ‘speak’ to someone;
* A messaging function for young people to contact the service;
* Live discussion groups – run by professionals and with all comments moderated, to enable groups of young people to interact with each other in a safe environment;
* Brief psychological interventions (counselling, BPI etc.);
* Activities on the site for young people to download.
* Provide a secure, moderated website available also in an app (iOS and Android functionality).
* Provide the opportunity for step-up options which will support young people experiencing, or at risk of deteriorating emotional health and wellbeing with the ability to connect with a qualified clinician via digital option to prevent levels of distress rising.
* Provide a fully integrated service, through building strong working relationships with: Schools (notably head teachers, nominated pastoral leads, child protection leads, MHSTs, school nurses and any existing counselling provider in schools), Community-based young people’s counselling services, Primary Care, Youth services, Children’s Services (inc. social care and early help), Health, CAMHS crisis services.
* Work in close partnership with other services to ensure the appropriate level of access and the appropriate level of emotional wellbeing and mental health intervention for children and young people.
* Ensure that pathways are in place for follow on referral work, signposting and to work closely with education (schools and Local Authorities), the CAMHS provider, urgent and emergency care to develop effective service pathways.
* Have clear safeguarding protocols in place.
* Offer a range of local promotion opportunities to a range of key stakeholders i.e. schools to facilitate awareness, engagement, uptake and evaluation.
* Develop a communications and engagement plan in collaboration with the ICB and local authorities ensuring this is co-designed with Berkshire West partners.
* Use recognised assessment tools and outcomes measures with CYP using the service.
* Provide effective management and clinical oversight to the online services.
* Provide a trained qualified workforce experienced in working with CYP.
* Ensure the online service is developed in participation with children and young people.
* Ensure that there are clearly established and followed pathways to all relevant local services.
* Proactively target those children and young people in the Getting Advice and Getting Help quadrants of Thrive, with a particular focus on those young people who are hard to engage through other routes.
* Work closely with the Local Authorities, BHFT and IBC Berkshire West to implement effective safeguarding and child protection procedures and referral processes.
* Provide quarterly, detailed reports to the lead commissioner on key performance areas (which is detailed at a locality level e.g Reading, West Berkshire, Wokingham).
* Collect and report baseline and outcome data for young people accessing the service using appropriate, validated measures. Successful outcome parameters will be defined by agreement between the Provider and lead commissioner.
* Demonstrate how feedback is used to inform continuous quality improvement, service development and practice, and how children and young people and families/carers participate in wider decision making.
* Ensure a prompt and efficient response to any queries or concerns raised by the lead commissioner, young person or other local stakeholder within 48 hours.

4.1 Service Commencement and opening hours

The online services will be up and running by 1st July 2023.

There is an expectation that the online portal will be available 7 days a week 365 days a year with access to the chat. It is advised that the chat service should be provided as a minimum from 12 noon to 11pm Monday to Friday and 4pm to 11pm at the weekends.

If at any point the support is not operational, there should be a clear business continuity plan to divert users to appropriate alternative service.

The support must be up to date and current guidance and advice and use a best practice approach.

**QUESTIONS**

No questions in this questionnaire are scored. There are no word counts for any of the responses. Responses to this questionnaire will not impact any evaluation of any future opportunity. Your input, effort and insights are very much sought and will be appreciated to aid and inform the Authorities in developing the most appropriate strategy and approach.

A response to this questionnaire does not guarantee an automatic invitation to any subsequent formal process, which the Authority will consider in due course. The Authority and NHS South, Central and West will not be liable for costs incurred by any interested party in participating in this exercise.

The responses to these questions could help to inform a possible market engagement event(s).

Thank you for your time and participation.

In order to process this questionnaire, we will ask you to provide some basic personal information, e.g. contact details. All information will be treated as **CONFIDENTIAL** and will only be shared amongst members of the Project Team. No details about your organisation, including names or contact details, will be shared without your express permission. The information will be destroyed following completion of this project. Further details on how we process personal information can be found on our Privacy Notice: <https://www.scwcsu.nhs.uk/privacy-and-cookies>

1. **PROVIDER/SUPPLIER DETAILS**

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| Name of authorised representative *(this should be completed by the supplier or a partner or an authorised representative in their own name)*: |

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| Position: |

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| For and on behalf of (*Please detail the company / organisation the abovenamed person is completing this questionnaire for)*: |

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| Contact telephone number:  Email address: |

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| What is your organisation type e.g. limited company, sole trader |

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| What is your core business? |

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| What is your main business address and website address (if available)? |

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| If invited, would you be interested in attending market engagement events with the Authority regarding this procurement?  YES or NO |

1. **GAUGING THE LEVEL OF INTEREST**

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| B1) What features of the services interest you as a supplier and why? |

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| B2) Are there any requirements that are of concern to you? If yes, what and why? How might these be addressed? |

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| B3) Would your organisation consider submitting a tender (or participating in a collaborative response) to deliver the services? If not, is there any reason why? Could the Authority take any steps to encourage greater participation? |

1. **MARKET INFORMATION**

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| C1) Do you currently have experience of delivering a digital mental health support service or elements of the service described in this scope? |

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| C2) In your/your organisation’s experience, what works well, what not so well and what doesn’t work at all with the delivery of a Digital Mental health Support Service for Young People with wide ranging needs and varying levels of demand? |

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| C3) In your/your organisation’s experience, please provide any additional observations and feedback to which you feel are relevant to this service requirement. |

1. **SCOPE AND REMIT OF THE SERVICES**

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| D1) What delivery model do you feel would suit the requirements? Please can you explain why you feel this is the best approach. |

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| D2) The Commissioner anticipates that the procurement is estimated to run between January 2023 and March 2023. With consideration of this, please indicate any potential barriers to your participation in the process. |

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| D3) Do you subcontract or rely on third party suppliers to deliver some of the services? |

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| D4) How do you suggest we measure performance and impact in the delivery of services and how regularly should this happen? |

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| D5) Funding for the service is provided on an annual basis with no guarantee that funding will be renewed. The Authority is considering two contract period options:   1. 1+1+1 with a 3 month notification of an extension decision; or 2. 3+1+1 with a termination period of not less than 3 months at any point throughout the life of the contract.   Which of the contracting options above would you prefer and why? |

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| D6) Please tell us how long your organisation would require to mobilise this service from the point of contract award to the contract start date? |

**provided.**

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| D7) Can you identify any obstacles that you perceive might prevent your organisation delivering the services? What can the Authorities do to address these. |

1. **OTHER INFORMATION**

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| E1) Please do share any information you would like us to review or consider. |

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE**