**NHS England - East**

**Health and Justice Commissioning**

**Independent Evaluation of prison mental health day care services**

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# Introduction

NHS England wishes to understand the benefits and models in use in two mental health day care services in prisons in the east of England. This will improve commissioners’ understanding for further service development and will inform future commissioning.

We are seeking to appoint an independent author who can propose an appropriate way to evaluate the services, do the evaluation, provide answers to the questions given and make commendations as a consequence.

# Background

The purpose of the evaluation is to look at the two models and to decide whether each is effective in achieving improved outcomes for service users.

The two services are in different prisons, and provided by different providers.

HMP Woodhill

HMP Woodhill is a category B prison which holds around 500 men who are serving relatively long sentences. The day care centre was set up around 3 years ago as a response to the needs of men who were presenting as complex and for whom existing services did not provide a satisfactory response which supported improvements in outcomes. Men held in the prison are convicted and sentenced and there are reasonable grounds to expect that the structured programme which is provided in the day care centre will be completed by men who are referred to it. The day care model was proposed by the healthcare provider and the proposal was accepted and commissioned by NHS England; additional funding was devolved under the contract to enable the service to be set up. The centre offers a range of therapies and has the ultimate aim of reducing symptom burden, harmful behaviours, reoffending and to increase successful resettlement. Men attend every weekday while they are engaged with the service, for a maximum of 6 months.

HMP Norwich

HMP Norwich is a category B prison with multiple functions including a reception function. The day care centre was set up by the provider as a way of delivering the services described in the contract, and no additional funding was added. There was a higher level of self harm within the prison and solutions were being sought to improve mental health and maintain wellbeing. The provider drafted some details about how they intended to set up the service, which were shared with NHS England. No additional funding was provided. As men in the prison are unconvicted and sentenced, there is an issue relating to the offer of the day care centre to different categories of prisoner; it is unhelpful to offer the service to someone who may not be able to complete the programme on offer due to being released or moved to another prison. Men attend for 6 sessions over a 6 week period and are then discharged from the day care service.

In both prisons, it is appropriate to look at whether the model in use is effective, to inform decisions about the future commissioning of the services. The Norwich service appears to be responding to needs related to emotional regulation, trauma stabilization and mood. It offers six sessions over a six week period.

# Content and scope of report

The successful bidder must produce a report which answers the following questions:

1. How closely has each service complied with any service specification or operational protocol, or other requirements of the contracts?
2. Has the service fulfilled its aims and objectives, as described in relevant documents?
3. Are men who were intended as the recipients of care in the services being referred and receiving care?
4. What benefits, if any, can be identified, for service users who have experience care in one of the services?
5. For each service, what evidence exists that the model(s) in use is/are effective in improving mental health outcomes? Is the range of therapies right? Are there any comparable services in English prisons whose practice could be adopted in either of the services?
6. Is the workforce correct for the purposes of each service?
7. If each service continues, what changes could be introduced, and why?
8. What services do people go on to receive after discharge from each service?
9. What are the views of people who have experienced each service?
10. What are the views of prison staff concerning each service?
11. What are the views of other healthcare staff concerning each service?

The report should have two separate sections, with one section one ach service. The report should then summarise the differences and similarities between the two services, to enable commissioners to quickly assimilate these:

* Number of referrals accepted in a 6 month period
* Hours/week of service delivery
* Maximum period of service delivery per patient (6 weeks/6 months)
* Therapies offered
* Other relevant points of comparison

The author must engage with a representative sample of people for each service to obtain detailed views of those who have accessed the service, using a semi-structured approach. Findings will be analysed using grounded theory or similar, and the report will give the views expressed and relevant themes.

The author must engage with a representative sample of staff involved in service delivery, or referrers, to obtain their views of the effectiveness and value of the service, and any suggestions on its development to improve the contribution it makes to improving health outcomes.

The author will be responsible for ensuring full compliance with ethics approvals, and must describe the arrangements the intend to make to cover this, in their bid.

# Deliverables

The provider of the report must provide both an initial draft and a final draft of the report in Word. This allows comments to be made within the text of the initial draft, and also allows extraction of the text from the final draft for insertion into other documents. The initial draft must be delivered to claire.weston2[@nhs.net](mailto:joanna.langley@nhs.net) in Word format by 11/12/23.

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# Timetable

The opportunity will be advertised to any potential provider in August 2023 and bids must be submitted by 17.00 on 18/9/23 to Claire.weston2@nhs.net . NHS England will notify all bidders of the outcome within 1 week of this date. Bidders should request a receipt of their bid, and if this is not received by 17.00 on 25/09/23, they should request this.

The successful bidder must be in a position to begin work upon being appointed, and to complete the initial draft by 11/12/23. Comments will be provided within 1 week and a final draft should be provided by 10/01/24.

Bidders are expected to notify the commissioner of progress towards delivery of the initial and final drafts.

**Price and Payment Terms**

The maximum value of acceptable bids is £20 000 (net of VAT). Any bid which does not clearly state the price for the report will be rejected. In formulating the bid price, bidders are asked to show their daily rate, the number of days consumed in each element of the preparation of the report, and other non-pay costs. There will be no payment above the bid price for ay reason, if the bid is accepted.

Interested parties are requested to advise Commissioners of their fully inclusive price for undertaking the report to the specification set out in this document. Should the report fail to fully meet the requirements of the service specification or deadline (unless due to factors outside of the Provider’s control) NHS England reserves the right to withhold up to 10% of the total contract value when paying the invoice if the report does not deliver in alignment with this service specification. NHS England terms and condition will be applied. No payment will be made for part completion of the report.

**Evaluation and Scoring**

1. Please submit a bid using the template completing each section.
2. Please provide details of similar evaluations which you have previously undertaken including the date completed, and be prepared to provide these documents to NHS England on request.
3. Please ensure that the bid to provide your report is the same name as the author of the report. The purchase order will be raised in the name of the bidder and the invoice must correspond to the name on the purchase order and the bid.

Applications will evaluated and scored as follows:

**Scoring Methodology**

|  |  |
| --- | --- |
| 0 | The Provider is unable to fulfil the requirement or no response is received |
| 1 | The Provider is only able to partly fulfil the requirement |
| 2 | The Provider is able to fulfil the requirement |
| 3 | The Provider exceeds fulfilment of the requirement |

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| --- | --- | --- |
| **Quality – weighted at 60% of total score** | | |
| The Provider has demonstrated that: | | |
| Review Deliverables | 1. All the objectives and products contained within the specification will be delivered. | |
| 1. Comprehensive and suitable methodologies are proposed for all aspects of the evaluation, with the rationale for each. | |
| 1. A suitable methodology and rationale will be adopted to operate focus groups | |
|  | 1. Project challenges have been identified and suitable mitigations proposed. | |
| Capability | 1. Experience of having recently (within last 2 years) undertaken a similar piece of work, delivered to timescale. NB similarity will be in relation to health and criminal justice, and in relation to the evaluation of services | |
| 1. The availability of suitably competent staff who have relevant experience | |
| 1. An understanding and application of, data confidentiality and information governance issues. | |
| 1. They can deliver the report within the project deadline with a realistic timetable. | |
| **Price – Weighted at 40% of total score** | | |
| Price | | Price will be evaluated by the bid with the lowest score scoring 100 and all other bidder prices being expressed as an inverse proportion.  *For example, where maximum value for an opportunity is £60 000*  *Bid A – Price £30,000 = scores 100*  *Bid B – Price £40,000 = scores 75*  *Bid C - Price £50,000 = scores 60*  *Bid D – Price £60,000 = scores 50* |

**Checklist for bidders**

This check list may be helpful in developing your bid but may not be exhaustive:

* Each bid states ‘Evaluation of day care services + [bidder name]’ as a foot note on each page
* Each bid is page numbered
* Price for the bid has been provided, is net of VAT and is not subject to any proposed discounting.
* The bid describes how ethics approval will be obtained.
* Each bid excludes the cost of making a presentation to NHS England on the findings
* Each bid states that the report will be delivered in Word.
* Each bid states the daily rate for the author and any associates and the number of days consumed in each element of the task
* Each bid comes from the same organisation as the organisation which will submit the invoice for the report once complete, and the name of the invoicing organisation is clearly given.\_

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