**Camden VCS Pre-Market Engagement Session**

Monday 11h July 2022 14:15 – 3.30pm

Online

**Attendees:**

Mark Lister (ML) - NELFT

Emily van de Pol (EvdP) - Camden and Islington Foundation Trust

Alice Langley (AL) - Camden and Islington Foundation Trust

Anna Makepeace (AM) - Camden and Islington Foundation Trust

Simon Ramage (SR) - Camden and Islington Foundation Trust

Elina Marques (EM) – Mind in Camden

Ikran Amed (IM) - Mind in Camden

Linda Parkin (LP) - Association for Deaf People

Sigal Avni (SA)

Sally Miller (SM) -

Ismail Bahriyeli (IB)

Michael O’Dwyer (MoD)

Gerard Omasta-Milsom (GOM)

Emma Whitby (EW) - Healthwatch Islington

Louise Castello (LC) -

**Apologies:**

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| **Agenda** | **Discussion** |
| 1. Background paper | AL presented on the background to the Camden Community and Mental Health transformation programme.  AL emphasised that a key component of this new approach is fully embedded VCS staff into the core teams  AM presented the timescales in the paper, with contract expected to go live 1st April 2023 |
| 1. Q1 Does our vision and service seem something that you would be interested in providing and are there any challenges that you foresee in delivering this service? | HR indicated they are interested in providing services. Challenges identified include operating across a number of different organisations involved in the transformation programme with different frameworks and policies. HR also identified the challenge of finding resources to meet the ever-growing demand  EM also indicated an interest in providing services. Challenges identified include the difficulty in the past of embedding staff in NHS organisations for instance getting honorary contracts and ICT equipment. EM asked it there were ways that this could become faster.  LP identified the biggest challenge as bringing the traditional NHS model of disability and providing services in this way and a new more holistic model of supporting people to work together. |
| 1. Q2 - How would you foresee delivering this service and some of our options are? Would it be more of a one organization approach or would you be willing to do a collaboration with with other colleagues and other voluntary community sector organizations within the sort of the local area? | LP indicated that collaboration across partners takes a long time. The proposed tender timescale gives a very short timescale to allow this to happen. LP thought the easiest approach would be lead partner and subcontractor approach. However, the service specification should make this arrangement clear if that is the preferred model  BD indicated that they would be willing to work in a collaborative way and that given the scope of the services that are being delivered it is only possible through collaboration. BD also indicated that services delivered in a more localised way are likely to be more responsive than services delivered across boroughs.  IM expressed the view that more details from the specification are needed to have a particular view about what sort of collaborative approach would work in delivering services.  HR agreed that without more details of the specification, it is difficult to suggest which collaborative model will be best for the tender |
| 1. Q3 – The intended contract length is 2 years plus 1 plus 1 | HR expressed the view that longer is better. Building new ways of working is time consuming so two years feels short. 3 + 2 year or 3+1+1 would be preferred.  BD agreed that 3+1+1 would be better to allow services to bed in given the working across different organisations and culture shift which is needed.  IA agreed that 3 years would be ideal as it would allow time to evaluate the service showing the data improvement, how well it is affecting the community and any improvements that can be made  IM agreed that a 3 year base would be preferred. |
| 1. Q4 – We are currently considering the type of contract to award this. What are your thoughts? | BD explained it would be good to have a choice over what kind of contract different organisations could bid for, once the specification has been released because it is difficult to comment without seeing the details. The preference would be for it to be as open an approach as possible. |
| 1. Q5 – The proposed timescales allows potential bidders 6 weeks. How long do you need to respond to a tender of this nature? | BD expressed the view that the longer the process the better. The proposed 6 weeks is reasonable, but a longer process might be better.  HR agreed that 6 weeks is possible, but a longer process would allow more time to investigate options. HR additionally noted that August can be a challenging time to pull together a bid and that moving the time to September would be better.  LP agreed that the longer the better especially for putting partnerships together. So, 8 weeks would be better than 6. LP also asked if C&I would be doing anything to facilitate partnership development.  AM Indicated that if the tendering process was delayed by a month this would result in a reduced mobilisation period and asked if that would present a challenge to any of the organisations.  HR and BD indicated that they didn’t think a reduced mobilisation period would be an issue.  ML asked the group if separate procurement processes for Camden and Islington were preferred. BD and HR agreed that separate procurement processes were preferred. |
| 1. Provider questions | HR asked about what would happen to staff in existing contracts. ML indicated that current providers would be contacted ahead of publishing the Invitation to Tender to find out if there are existing staff that would be subject to being transferred to new providers.  ML confirmed that the presentation and the notes will be shared on the portal |
| 1. AOB |  |
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