# SPECIFICATION OF REQUIREMENTS

# HEALTH & JUSTICE WOMEN’S PRISON PEER 2 PEER PROJECT

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# Specification of Requirements

## Background to the requirements

### Current Arrangements/ Context

#### In 2016 the World Health Organisation set the first ever global targets for eliminating Hepatitis C as a major public health concern by 2030; NHS England have committed to achieving elimination in advance of the target. Hepatitis C is thought to affect 89,000 in England - the majority of those being from marginalised and underserved groups, including those within the criminal justice system.[[1]](#footnote-1)

#### The blood-borne virus (BBV) opt-out ‘reception’ testing programme in prisons, covering hepatitis C, hepatitis B and HIV, has been operational since 2015/16. Since April 2017 the programme has been rolled out nationally in phases overseen by Public Health England and is now being delivered and overseen by NHS England and NHS Improvement. In prisons, the hepatitis C part of the opt-out testing programme also includes high intensity test and treat initiatives, officer enabling, capillary testing and peer programmes, all of which support the hepatitis C elimination target.

#### The original Women’s Prison Peer Project was launched in February 2018. The model was an adaptation of the Hepatitis C Trust’s successful community peer programme was developed to support the implementation of the national BBV opt-out policy across the female prison estate. This was done through partnership working with the prison health and substance misuse teams, raising awareness around hepatitis C in prison, and increasing the number of people getting tested and treated.

#### Although the primary focus of this programme is hepatitis C, it is crucial that there are also appropriate support and pathways in place for those who test positive for other BBVs (hepatitis B and HIV).

#### The Hepatitis C Elimination Programme has seen many successes in intensive patient-finding, which has tackled a significant lack of awareness around hepatitis C, low levels of uptake of testing and treatment, and little support for those with hepatitis C in the prison estate. However, anxiety and stigma is still very prevalent in the prison estate, and suppresses open conversations about hepatitis C. Other issues such as staff shortages, overcrowding, and general prison environment restrictions mean that there are still significant challenges to testing and treating in prisons.

#### The women’s prison estate is further disadvantaged, as women in need of specialist healthcare can be restricted to the availability of staff to accompany them to appointments, and with the women’s prison estate only having two open prisons, there is not the conversation and support around HCV across the estate. Women’s prisons – during population testing – also have a higher rate of Hep C prevalence than the men’s prison estate.

#### In addition, women are in the minority in the criminal justice system, making up only 5% of the whole prison population. Over 53% of women in the criminal justice system experienced abuse as children, compared to 27% of men. Far more women than men are primary carers for children, with significant consequences for the children of those who go to prison, as well as the mothers. 49% of women in prison suffer from both anxiety and depression, as compared to 23% of men. Some are engaged in street sex work and significant numbers have chronic substance misuse problems.[[2]](#footnote-2) As such, the support and programmes designed to meet the needs of women in prison need to be different than those designed for men.

## Scope of the Procurement

### Aims & Objectives

#### NHS England and NHS Improvement are seeking to raise awareness, reduce stigma, and provide emotional and practical support around hepatitis C in the women’s prison estate. This will be undertaken by the successful bidder through establishing a network of peers working across the women’s prison estate and criminal justice settings to deliver regular workshops with key prevention, diagnosis, linkage to care, and treatment messaging.

#### The successful bidder must ensure community support is available across England on release, through working in close partnership with Her Majesty’s Prison and Probation Service, Drug and Alcohol Service providers, and healthcare providers across the female estate and the community. This will ensure those who have tested positive in prison are linked into treatment on release, and those who have already commenced treatment can continue without interruption when back in the community, and can still access the support they need.

#### The successful bidder is also to identify peers, and train and support them to deliver workshops and one-to-one ‘buddy’ support to women who are newly diagnosed, awaiting testing, or going through treatment. Given the high turnover in some establishments, it is anticipated 2 peers every other month will need to be trained to support the ongoing programme.

#### Another key objective for the successful bidder will be to raise the voice of the women affected by hepatitis C within the prisons. Their views and experience should be collected, ensuring they are heard within oversight meetings of the most appropriate Operational Delivery Network (ODN), tasked with delivering hepatitis C services in the area.

#### In order to assist with this, the successful bidder should provide access to a confidential, free-phone helpline that is operational at least 5 days per week, and those operating the phoneline should have access to those with lived experience of hepatitis C. If the successful bidder does not have access to a confidential, free-phone helpline, they should have knowledge and experience of setting one up and will have it running by the time of the go-live date.

#### The successful bidder will also need to train key prison personnel around hepatitis C, which may include prison officers, healthcare staff, and substance misuse staff.

#### Practical hepatitis C virus advice should be given at key opportunities and can be done through in-custody advice surgeries, through letters and leaflets, or through the free-phone service.

#### In order to conduct this, the successful bidder will need access to the prison estate. The bidders will need evidence of experience of successfully negotiating security access (usually keyholders within the adult custodial estate), and experience of working within the prison estate (male or female). Evidence of effective partnership working with Her Majesty’s Prison and Probation Service (HMPPS) will need to be evidenced.

### Constraints and Dependencies

#### NHS England and NHS Improvement is committed to a target to eliminate hepatitis C by 2025. The funding for the Women’s Prison Peer 2 Peer Project will be funded for 24 months from the start date of the contract.

#### There is an expectation that the successful bidder has experience in successfully negotiating security access to the prison estate (keyholder access) and will be able to gain access to all women’s establishments in England for the duration of this project.

#### The successful bidder and all staff within that organisation must be able to physically access all women’s establishments on a regular basis. They are geographically dispersed throughout the country, but this project must enable equitable access.

#### The successful bidder will be required to engage with NHS England and NHS Improvement using video conferencing such as Microsoft Teams/ Zoom for remote engagement. NHS England and NHS Improvement uses Microsoft Teams, so the provider’s capability to access this platform would be an advantage.

#### A quarterly report should be submitted for NHS England and NHS Improvement, exact dates will be negotiated. This report is to include updates on the activities of the previous year, and what amendments or adjustments might need to be made for the following year of the contract. Further information on this can be found in 3.7.1.

#### As the Hepatitis C Elimination Programme has a definite target for elimination of 2025, it is crucial this project can be running as soon as possible. It will be a significant advantage if the bidders have some of the requirements already in place, such as the free-phone helpline, and access to the prison estate.

## Requirements

### Mandatory and Minimum Requirements

#### Access to the women’s prison estate, and a good working relationship with Her Majesty’s Prison and Probation Service (HMPPS), prison staff, and prisoners.

#### An understanding of the role of peers and their ability to relate to prisoners.

#### A good working knowledge of the different and specific needs of women within the criminal justice system.

#### An ability to find, test, and treat prisoners within the women’s prison estate.

#### The ability to navigate and facilitate security clearance for service staff entering the custodial estate.

#### To provide and run a confidential, free-phone helpline to communicate with prisoners and provide confidential advice and support to them on hepatitis C through this. The helpline must be accessible at least 5 days per week, 10:30 to 16:30 Monday to Friday (minimum).

#### The ability to implement the service as soon as possible.

#### Adherence to all Her Majesty’s Prison and Probation (HMPPS) policies whilst onsite at any HMPPS locations.

### Desirable Requirements

#### Access to Microsoft Teams to communicate with NHS England and NHS Improvement virtually.

### Timescales - Mobilisation and Implementation

#### The anticipated mobilisation and implementation timescales for the new contract are 2 months. Oversight of the mobilisation and implementation period will be managed by NHS England and NHS Improvement.

#### The mobilisation period should last no longer than 8 weeks. There is no existing provider of this service so there is no service to take over.

#### The successful bidder will have contacted all appropriate establishments (listed in 3.4 of this specification) within the mobilisation period.

### Location

#### The successful bidder must be present in all establishments across the women’s prison estate in England. The list of these prisons is below.

1. HMP Askham Grange
2. HMP Bronzefield
3. HMP Downview
4. HMP Drake Hall
5. HMP East Sutton Park
6. HMP Eastwood Park
7. HMP Foston Hall
8. HMP Low Newton
9. HMP New Hall
10. HMP Peterborough
11. HMP Send
12. HMP Styal.

#### There may be additional sites that become part of this service specification, such as ‘community prisons’ or residential centres, If and when they become live during the duration of this contract, the successful bidder will need to be able to adapt to changes in locations. The prisons listed above are those that are currently operational upon writing this specification, and is not necessarily an exhaustive list.

#### It is down to the successful bidder to determine how often the peers are physically present in each establishment, but it should be at least 2 days per quarter in each establishment. The confidential free-phone helpline must be accessible in all the above establishments.

#### The bidder must adhere to all HMPPS policies whilst onsite at any HMPPS location.

### Roles and Responsibilities

#### The key responsibilities of NHS England and NHS Improvement will be:

* To manage the contract with the successful bidder with quarterly performance management meetings.
* To provide strong engagement and support to the successful bidder through a nominated point of contact.
* To agree with the successful bidder each year any priorities or other pieces of work at the beginning of each year of the contract.

#### The key responsibilities of the successful bidder will be:

* Run a confidential, free-phone helpline for advice and support to prisoners (minimum 5 days a week).
* Organise and conduct workshops and one-to-one support to women newly diagnosed, undergoing testing, or commencing treatment for hepatitis C.
* Identify and train peers to conduct the workshops, and continue to raise awareness, reduce stigma, provide emotional and practical support, and conduct testing for hepatitis C in the women’s estate.
* Monitor expenditure against the funding envelope, monitoring pressures reporting regularly on this to NHS England.
* Develop and maintain a risk register for the Programme and report significant risks quarterly to NHS England as part of monitoring arrangements.
* Ensure women’s voices and experiences of hepatitis C are heard.
* Ensure community support is available on release across England.
* Ensure relationships between HMPPS, prison healthcare, probation and prison staff are maintained.
* Provide quarterly reporting on rates of infection, levels of testing, and anything else the successful bidder feels is relevant to report to NHS England and NHS Improvement.
* Provide training and awareness raising to prison officers, who can continue the work of the peer workers when they are not at the establishment.
* Attend quarterly meetings as required with NHS England and NHS Improvement.

#### During the contract, the successful bidder will be required to report on a regular basis on the following areas:

* Milestone achievements (quarterly)
* Risks and issues (quarterly)
* Current occurrence of infection rates of hepatitis C within women’s prisons (quarterly)
* Current levels of testing of hepatitis C within women’s prisons (quarterly)
* The raising of any key issues that might significantly impact the ability for the successful bidder to continue work on the project (as soon as possible but no later than 2 working days after identification)
* A breakdown of spend to date against project spend (quarterly).

### Management Information & Governance

#### NHS England and NHS Improvement is to know of any updates or issues at least quarterly.

#### Information can be provided in either Word documents, Excel spreadsheets (or other analysis tools, such as Tableau) if it is data, or PowerPoint.

#### The deadline dates for the quarterly reports will be agreed upon contract start.

#### For the purposes of the Data Protection Legislation and the delivery of the Data Processing, NHS England is the Controller and the Supplier is the Processor.

#### The appointed supplier must provide evidence of compliance with the Data Security and Protection Toolkit or equivalent ISO data security accreditation.

#### Upon termination of the contract the appointed supplier must return all data in an agreed digital format to NHS England and NHS Improvement or their nominated supplier within 1 month or provide a certificate of destruction if it is agreed that the data does not need to be retained.

#### All products of the work commissioned within the contract as identified in this specification will remain the intellectual property of NHS England and NHS Improvement and data and information relating to this work cannot be disclosed without prior approval of NHS England and NHS Improvement in writing.

### Performance and Measurement

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***KPI Ref. Number*** | ***Services that KPI relates to*** | ***Description of KPI*** | ***Measurement*** | ***KPI Tolerances (Percentage tolerance)*** |
| KPI1 | Governance | The supplier will be expected to create a programme of works for the following twelve (12) months detailing planned activities and milestones, with a focus on how Peers will encourage testing of Hep C, delivering of practical workshops, and continuous enhancement of the “buddy” system. | Programme of works presented within 6 weeks of commencement date. | N/A |
| KPI2 | Reporting | The supplier will complete progress reports including but not limited to the overall status updates of the project, milestone achievements, and key risks and issues on a quarterly basis to NHSE.  The format of these reports is to be agreed between both parties prior to commencement date. | Quarterly progress reports submitted at agreed timeframes | N/A |
| KPI3 | Reporting | The supplier will ensure that they can report against the following elements:   * Current occurrence of infection rates of Hep C within Women’s prisons * Current levels of testing of Hep C within Women’s prisons   The supplier will be expected to report against changing levels of the above two metrics to understand project impact in treatment and education. | Quarterly reporting submitted at agreed timeframes | N/A |
| KPI4 | Social Value – Real Living Wage | Supplier will currently be paying, **or working towards** paying, the real living wage as specified by the Living Wage Foundation (£9.50 throughout the UK, £10.85 within London - 2021) | 100% of staff employed within the bounds of this contract receiving Real Living Wage  OR  Supplier Accredited Living Wage Employer (as per Living Wage Foundation) | N/A |
| KPI5 | Social Value – Modern Slavery | Supplier will comply with the provisions of the Modern Slavery Act 2015 and have in place a modern slavery and human trafficking statement | Annual submission of Modern Slavery and human trafficking statement shared with the Authority | N/A |
| KPI6 | Social Value – Environmental Impact | Supplier will have in place a policy or approach to reducing environmental impacts as well as an approach to achieving net zero carbon status | Annual submission of environmental impact policy or net zero carbon policy shared with the Authority | N/A |

### Contract Term

#### The contract will run for two (2) years, with the option to extend for a further 12 months if required.

#### The minimum notice is 3 months following a performance review for an extension.

### Budget

#### Costs will account for 30% of the scoring in the evaluation criteria.

#### Payment will be provided monthly in arrears with an annual review of deliverables.

#### Any costs included in the bidder’s pricing schedule that is over and above the budget will score a zero in commercial evaluation. Please refer to the contract notice for details of budget.

### Sustainable Development Requirements

#### NHS England and NHS Improvement is committed to leading by example in sustainable development and reducing the use of natural resource, in line with government commitments, through the NHS Long Term Plan.

#### The NHS is also committed to comply with labour rights, ethical issues, and ensuring taxpayers funds are invested to create maximum social value.

#### Ways in which the successful bidder is expected to support this include ensuring their carbon footprint is reduced (for example using public transport where possible or electric vehicles), reducing waste and single use plastics, and creating social value in communities.

### Exit Plan

#### The contract will terminate following the initial contract period or after any extension period as notified. Notice period as outlined in 3.8.2 above.

#### A plan should be agreed with NHS England and NHS Improvement 3 months before the end of the contract, to ensure sustainability of the project once it has been terminated.

1. Public Health England – ‘Hepatitis C in England: 2020 Report’ [↑](#footnote-ref-1)
2. Clinks, Women in the Criminal Justice System, (2020) [Women in the criminal justice system | Clinks](https://www.clinks.org/our-work/women-criminal-justice-system) [↑](#footnote-ref-2)