

Cardinal Square

Nottingham Road

Derby

DE1 3QT

Tel**: 01332 888023**

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| Request for Quotation |  |  |

**Request to Quote: Evaluation of the Learning Disability Assessment and Treatment Unit (ATU)**

**Reference number: GEMCSU/TRANS/16/386**

I am writing to you on behalf of NHS Nottingham City CCG. We currently have a requirement for the evaluation of the Learning Disability Assessment and Treatment Unit (ATU), the details of which are set out in Annex A to this letter.

If you are interested in quoting for this requirement, please reply by email to [Karen.Martin@ardengemcsu.nhs.uk](mailto:Karen.Martin@ardengemcsu.nhs.uk) & [mark.didcock@ardengemcsu.nhs.uk](mailto:mark.didcock@ardengemcsu.nhs.uk) by 5pm Friday 16th September setting out how your organisation meets the evaluation criteria contained within Annex B of this RFQ.

Your response must be valid for acceptance for 90 days from the deadline for receipt of quotations. Your response constitutes an offer and if the Authority accepts that offer then a legally binding contract will exist between us.

Respondents accept that the Authority is subject to the Freedom of Information Act and government transparency obligations which may require the Authority to disclose information received from you to third parties.

This letter and your response do not give rise to any contractual obligation or liability unless and until such time as the Authority issues a letter referencing this Request for a Quotation accepting your quotation. The Authority does not make any commitment to purchase and shall have no liability for your costs in responding to this Request for a Quotation.

If you have any queries about this letter or the requirement, please contact Karen Martin/Mark Didcock, [Karen.Martin@ardengemcsu.nhs.uk](mailto:Karen.Martin@ardengemcsu.nhs.uk) and [Mark.Didcock@ardengemcsu.nhs.uk](mailto:Mark.Didcock@ardengemcsu.nhs.uk).

If you are unable to meet this requirement or are otherwise not intending to provide a quote, I would be grateful if you could let me know as soon as possible.

Yours sincerely,

David Bailey

# Annex A – Service Specification

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| **Service / Programme** | Learning Disability Assessment and Treatment Unit (ATU) Evaluation | | | |
| **Project Coordinator** | Adele Smith | | **Contact for tender enquiries** | Karen Martin |
| **Period of Evaluation** | **Start Date** | October 2016 | **End Date** | January 2017 |

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| 1. **Service / Programme Description** |
| **1.1 Background**  The Learning Disability Assessment and Treatment Unit (ATU) is commissioned by NHS Nottingham City CCG, the five County CCGs (Newark & Sherwood, Mansfield & Ashfield, Nottingham North East, Nottingham West, and Rushcliffe), and NHS Bassetlaw CCG.  The ATU is provided by Nottinghamshire Healthcare NHS Foundation Trust and is based at the Orion Unit, Highbury Hospital.  Nottinghamshire Healthcare NHS Foundation Trust informed commissioners on 10 March 2016 of their intention to temporarily suspend admissions to the ATU. The rationale that was provided was due to the acuity of patients and a high proportion of staff sickness due to injury. The unit started to accept admissions on 15 April 2016.  **1.2 Service Description**  The aim of the service is provide an assessment and treatment service for those people with a Learning Disability and associated behaviour that challenges and mental health issues, providing specialist health interventions based on a person centered approach within a multidisciplinary/agency framework.  The clinical team provides a range of specialist health interventions that are based on individual needs identified by a robust assessment process, in partnership with service users, carers, advocates and other agencies.  The ATU has 16 beds and a seclusion and segregation suite.  The current service specification is attached.    The diagram below illustrates how the ATU should function. |
| 1. **Purpose of Evaluation** |
| **2.1 Reason for Evaluation**  To independently evaluate the effectiveness of the service in meeting the current service specification, to highlight any changes or areas that have either positively or negatively impacted on the service and to inform decision making and future developments in relation to ways of working, future team configuration and service delivery. To assess if the fabric of the building is suitable for the admitted patient group, including safety, privacy and dignity.  To assess if the aims and objectives outlined in the service specification are still in-line with best practice guidelines. To make recommendations for an updated service model, if required, following the review.  On behalf of the commissioning organisations and the provider, Nottingham City CCG is looking for a supplier to carry out an evaluation of the ATU.  **2.2 Aims of the Evaluation**  The evaluation aims to:   * Assess the extent to which the service aims and objectives are being achieved. * Identify any service issues including (but not limited to) capacity, demand, partnership working and care pathways. * Assess the complexity of individuals accessing the service and identify provision required to ensure needs are met. Identify if the acuity of patients being admitted has changed. * Measure the impact of the service delivery model and whether they work effectively as an ATU. * Make recommendations around existing and future ways of working, role development and service development.   In particular the evaluation will focus on :  **Safety:**   * The number, type and severity of incidents since the unit opened * Assaults: - to staff and other patients * Injury and RIDDOR * No. of safeguarding referrals * No. of calls to police   **Operational:**   * The number, reasons and routes of admission (e.g. placement breakdown) * The number and reasons for readmission * Length of stay and DTOCs including how long the person was classed as DTOC and the reason why. * Discharge destinations * Diagnosis   **Quality:**   * No. of complaints * Service User and Carer Experience (SUCE) and patient opinion feedback * Process for implementing recommendations from Care and Treatment Reviews and process for learning from other forms of feedback such as complaints, compliments, service reviews etc * Approach to person centred planning * Service delivery in line with best practice guidance e.g NICE and Transforming Care Plans * Physical health of service users including annual health checks and use of Health Action Plans / liaison with other professionals as necessary (i.e. Hospital Liaison Nurses, Health Facilitators). * The use of clear and comprehensive patient-centred care plans that include timeframes and targets, warning signs of deterioration and clear instructions on how to prevent behaviour that challenges in terms of proactive and reactive strategies and how these are understood by supporting staff at the point of delivery * Implementation of the Care Programme Approach * Meaningful activities including physical exercise, access to faith support, and how independent living skills are supported. * Use and promotion of advocacy. * Application of the mental capacity act and involvement of family when the person does not have capacity * Discharge planning * Effective use of disciplines in terms of interventions delivered and the timeliness of these   **HR:**   * Staffing, skill mix and numbers, preparedness and resilience * Multi-disciplinary working * Turnover * Sickness * PRDs and supervision * Training, expertise and application of Positive Behavioural Support (including functional analysis)   **Therapeutic Interventions:**   * Use of restraint and other restrictive practises * Use of 1:1 * Use of seclusion and segregation * Review of above policies   **Environmental:**   * Damage * Use of rooms for segregation   **2.3 Any other relevant information**  The quote must specify a named lead person who will be responsible for delivery of the contract on behalf of the evaluators.  The evaluator may make no reference to the Commissioner in literature, promotional material or sales presentations without prior written consent from the Commissioner. |
| 1. **Scope of Evaluation** |
| **3.1 Methodology**  The evaluator is required to set out the most appropriate approach to evaluating the Assessment and Treatment Unit. It is expected that there will be a mixed methods approach including a range of data collection methods for example:  *Quantitative data collection:*   * Staffing establishment * Clinical hours * Cost data * Activity data   *Qualitative data collection:*   * Interviews with staff, service users, family/carers, commissioners and stakeholders. * Observation * Anonymised case file audit * Compliments/complaints * Policies and procedures   All data provided by the service provider will be in an anonymised format.  Consent must be obtained from staff, service users, family/carers, commissioners and stakeholders prior to involvement in interviews and observation and all information obtained will be treated as confidential.  It must not be possible to identify any individuals in the final report and any quotes used will be anonymised.  **3.3 Budget**  £18,500 including VAT (maximum)  A full costing schedule including staffing, non-pay and set up costs must be included in the quote.  **3.4 Additional requirements**  The quote must demonstrate how the evaluator will:   * Ensure the evaluation is methodologically robust * Conduct the evaluation in accordance with ethical principles and standards of good   Governance including DBS checks where required for team members   * Contain a GANTT chart to demonstrate project timelines * The evaluation team must contain at least one individual with professional clinical experience of working with adults with learning disabilities |
| 1. **Timescales** |
| **4.1 Start and End dates**  The evaluation will commence in October 2016 and will be completed in January 2017  A final report will need to be produced by January 2017  **4.2 Reporting**  The external evaluation lead should apply vigilance to the project and identify any difficulties which may compromise the work. These should be communicated in a timely manner to the Project Coordinator, whether they have logistical, financial, ethical or any other implications for the conduct of the evaluation.  **4.2.1 Interim reports**  The evaluator will provide short informal reports by email for the duration of the contract as agreed with the Programme Lead. The report will provide information on the progress of the evaluation i.e. number of completed interviews, completion of milestones etc.  **4.2.2 Final report – including executive summary**  A full written evaluation report (with executive summary) is required at the end of the evaluation to include the evaluation findings and recommendations. A draft copy must be agreed with the CCG prior to final submission.  **4.2.3 Presentation of findings**  The evaluator will also be required to present the end of evaluation findings to a group of key stakeholders.  **4.2.4 Receipt of copies of data sets**  All data collected and the full evaluation report are to be treated as strictly confidential and are the property of the CCG not the evaluator. Full data sets must be transferred to the CCG. |

**Annex B**

**Scoring Matrix**

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| **Assessment** | **Score** | **Interpretation** |
| Excellent | 5 | Exceeds the requirement.   Exceptional demonstration by the supplier of the relevant ability, understanding, experience, skills, resource and quality measures required to provide the services.  Response identifies factors that will offer potential added value, with evidence to support the response. |
| Good | 4 | Satisfies the requirement with minor additional benefits.  Above average demonstration by the supplier of the relevant ability, understanding, experience, skills, resource and quality measures required to provide the services.  Response identifies factors that will offer potential added value, with evidence to support the response. |
| Acceptable | 3 | Satisfies the requirement.   Demonstration by the supplier of the relevant ability, understanding, experience, skills, resource and quality measures required to provide the services with evidence to support the response. |
| Minor Reservations | 2 | Satisfies the requirement with minor reservations.   Some minor reservations of the supplier’s relevant ability, understanding, experience, skills, resource and quality measures required to provide the services with little or no evidence to support the response. |
| Serious Reservations | 1 | Satisfies the requirement with major reservations.  Considerable reservations of the supplier’s relevant ability, understanding, experience, skills, resource and quality measures required to provide the services, with little or no evidence to support the response. |
| Unacceptable | 0 | Does not meet the requirement.  Does not comply and/or insufficient information provided to demonstrate that the supplier has the ability, understanding, experience, skills, resource and quality measures required to provide the services, with little or no evidence to support the response. |

**Evaluation Criteria –** Proposals will be evaluated on the basis of the evaluation criteria below. You must respond demonstrating how you meet each of the criteria set out below. There is space next to each criteria to state/attach your response, although please note if you would prefer to use your own format please do so.

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| **Conformance Criteria - These criteria will be evaluated on a Pass/Fail basis Should your response fail any of these sections your proposal will be excluded from further consideration** | **Please attach your evidence in the space below** |
| Ability to begin delivery of evaluation as per schedule |  |
| Insurance & indemnity cover - minimum level |  |
| Evidence of solvency provided relating to previous trading through the presentation of audited accounts |  |
| Ability to provide two satisfactory references |  |
| Ability to provide DBS disclosures (formally CRB) for staff, where applicable to their role in the evaluation |  |

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| **Criteria** | **Please describe how you meet the evaluation criteria within the space below. Expand as required.** |
| Proposed approach including timetable - Includes a clear well-articulated detailed description of the methods, sample size, data collection (including piloting) and analysis to meet the evaluation aims and objectives. |  |
| Previous experience of delivering similar projects. |  |
| Skills and experience of consultants including 2 page CVs per team member. One member of the team must demonstrate professional clinical experience of working with adults with LD. |  |
| Costs – detailed breakdown of costs and value for money. |  |
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**Explanation of Scoring:**

There are 4 questions and each will be scored on the basis of the 0-5 criteria set out above. Any supplier who exceeds the published budget (see contracts finder notification) will be excluded from consideration, as will any supplier who does not meet the conformance criteria set out above.

Following the evaluation of bids the highest scoring bidder will be designated as the preferred supplier and all other bidders notified will be notified. The Authority does not make any commitment to purchase and shall have no liability for your costs in responding to this Request for a Quotation

**Annex C**

**Terms and Conditions of Contract.**

Please note that any Contract arising from this Request for Proposal will be governed by the NHS Terms and Conditions of Contract for the Supply of Services August 2014.

Please note these Terms and Conditions are mandatory and if you are unable to agree you quotation will not receive consideration.

A copy of the Terms and Conditions are available to view at: <https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>.