





LIVE WELL KENT SERVICE SPECIFICATION Innovation 2019/2020

Community Mental Health and Well Being Services





1. Introduction

Kent County Council (KCC) in conjunction with the Clinical Commissioning Groups (CCG's) is responsible for providing prevention, early intervention and recovery services. The Community Mental Health and Wellbeing Service (Live Well Kent) will help prevent entry into formal social care and health systems, reduce suicide and prevent negative health outcomes associated with poor mental health. The approach of delivery should be community first, values driven and outcome focused.

Live Well Kent has been jointly commissioned by KCC including Public Health and CCGs in Kent from 1st April 2016 to provide a holistic offer of support for individuals living with mental health and wellbeing needs in Kent and to deliver support in line with national and local guidance and protocols.

Live Well Kent will support KCC and CCG's to deliver against:

- The Care Act
- NHS Five Year Forward View
- Delivery of the Better Care Fund
- No Health Without Mental Health a cross Government mental health outcomes strategy for people of all ages
- Parity of Esteem
- KCC's Strategic Statement and Outcomes Framework

As a direct result of the Live Well Kent service more people will:

- Connect to their communities and feel less lonely and socially isolated
- Have choice, control, and feel empowered
- · Report and optimise physical and emotional wellbeing
- Live safely and independently and optimise recovery
- Be in stable accommodation and managing their life
- Achieve economic wellbeing ensuring people's income is maximised, debts are managed and where appropriate applicable welfare benefits are accessed
- · Feel satisfied with service delivery and service outcomes
- Be involved in service design, service offer and availability
- Access a wide range of opportunities to support their personal recovery which include (but are not exclusively limited to): lifelong learning, employment and volunteering, social and leisure, healthy living support including local opportunities to get fitter and make better lifestyle choices regarding food, smoking, alcohol and harm minimisation.
- Stay in or enter employment
- Be supported to be independent and manage their long term conditions
- Have increased social skills
- Be appropriately supported to manage their recovery
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As the strategic partner Shaw Trust now holds the contract with Kent County Council /Clinical Commissioning Groups and is ultimately responsible for the delivery of the Service through the implementation and development of a sustainable Delivery Network across our lots.

This specification is produced by Shaw Trust for the provision of services within the Live Well Kent programme in the following areas:

- Lot 2 West Kent
- Lot 3 Ashford, Canterbury and Coastal

It forms the agreement to formally engage with delivery network partners to provide services to facilitate the agreed outcomes.

This specification indicates the activity requirements, the volumes anticipated and contractual outcomes.

2. Background

2.1 National context:

Mental health is the largest single cause of disability and represents 23% of the national disease burden in the UK. Mental illness costs the UK economy £70–£100 billion per year; and only 25% of people with mental illness are receiving treatment. There is an unacceptably large 'premature mortality gap' resulting in huge health inequalities - People with serious mental illness die on average 15 to 20 years earlier than those without, often from avoidable causes.

Ending the stigma around mental ill health is vital. The Department of Health and Public Health England should continue to help local communities build a grass roots social movement to raise awareness of good physical and mental health and support people to seek help when they need it. (Five Year Forward View for Mental Health, DH, 2016)

In order to deliver these commitments and realise the associated savings NHS England has set out a number of principles to underpin reform in transforming Mental Health Services:

- Decisions must be locally led
- Care must be based on the best available evidence
- Services must be designed in partnership with people who have mental health problems and with carers
- Inequalities must be reduced to ensure all needs are met, across all ages
- Care must be integrated spanning people's physical, mental and social needs
- Prevention and early intervention must be prioritised
- Care must be safe, effective and personal, and delivered in the least restrictive setting
- The right data must be collected and used to drive and evaluate progress

2.2 Kent Context:

Approximately one in four people will have a common mental illness during their lifetime and one in six people in England has a mental health problem at any given time (point prevalence). One in seven people will have two or more mental health problems at any point in time.







There are an estimated 205,000 people living with common and severe mental illness in Kent communities. Around 5,000 to 7,000 of these will need a clearly defined care programme of support to avoid relapse and promote recovery. The rest will need variable, lower intensity support to stop them reaching a crisis point and unnecessarily entering into health and social care systems.

2.3 Shaw Trust – Live Well Kent Context

As the contracted Strategic Partner for the Live Well Kent programme we are keen to establish the capacity of a formal delivery network to support us in the achievement of the overall contract outcomes related to improvement in wellbeing, recovery and inclusion.

The Strategic Partner will be responsible for the overall performance of the contract and will need to collate and analyse the performance information from the network and will be required to monitor the delivery of all outcomes identified within the contract. The Strategic Partner will manage the Delivery Network and ensure a proportionate approach to risk management.

Our aim is to:

- To improve support for people with mental health problems
- To get the best possible outcomes within the resources we have available
- To develop a system that is both affordable and sustainable
- To encourage growth and diversification of provider market including the voluntary, community and social enterprise sector

The service is underpinned by:

- 6 Ways to Wellbeing
- Tracking of outcomes
- Improved inequalities, reduced stigma
- Crisis Support
- Co-production
- Developing Communities

The new model of community mental health and wellbeing services supports self-management, promotes recovery, tackles social isolation and reduces stigma. This model has a focus on prevention and early intervention to reduce need for secondary mental health services and is outcome focused.

System Outcomes

By working with health and social care partners the service will:

- Reduce the number of people entering hospital in crisis and residential care admissions
- Reduce the numbers entering secondary mental health care
- Increase the numbers of people being transferred from secondary services to primary care
- Increase numbers of people accessing support including information, advice and sign posting
- Increase number of people self-caring following a period of enablement through the short term recovery service
- Increase access to early intervention services
- Improve transition from children and young people services to adult mental health
- More people in employment
- More people in stable housing and managing their tenancies
- More people supported to achieve emotional wellbeing
- Reduce stigma and discrimination





- Increase awareness raising of mental health in the workplace to reduce barriers to employment
- Support co-working and collaboration between primary care services, health and social care to meet the totality of individual and family needs
- Increase levels and models of mutual/peer support
- Improve outcomes

Personal Outcomes

- Connect to their communities and feel less lonely and socially isolated
- Have choice, control, and feel empowered
- Report and optimise physical and emotional wellbeing
- Live safely and independently and optimise recovery
- Be in stable accommodation and managing their life
- Achieve economic wellbeing ensuring people's income is maximised, debts are managed and where appropriate applicable welfare benefits are accessed
- Feel satisfied with service delivery and service outcomes
- · Be involved in service design, service offer and availability
- Access a wide range of opportunities to support their personal recovery which include (but are not exclusively limited to): lifelong learning, employment and volunteering, social and leisure, healthy living support including local opportunities to get fitter and make better lifestyle choices regarding food, smoking, alcohol and harm minimisation.
- Stay in or enter employment
- Be supported to be independent and manage their long term conditions
- Have increased social skills
- Be appropriately supported to manage their recovery

Measures of Success

- People are talking about and taking positive care of their mental health
- Services focus on a move from a crisis driven to a preventative model of support
- Services create an environment which facilitates progression and personal achievement
- Flourishing communities, self-management and personal resilience life not a service
- Integrated delivery network, sharing costs, sharing best practice, continuously improving and diversifying
- Improved community engagement leading to sustainable lives
- Reduced discrimination and stigmatisation in local communities
- Reduce demand on primary and secondary care health services
- Reduce social dependency

3. Scope of Service

The Live Well Kent service is person centred, holistic and non-stigmatising. It has a strengths based approach, focusing on assets, independence, recovery and social inclusion with no wrong door. The service is community focused, built on the principles of community development and community capacity. There is an emphasis on prevention and improving wellbeing and services should deliver interventions that have an evidence based approach demonstrating good practice.







3.1 Delivery Model

The model has been designed to create a broader response across the system beyond the current provision and to work toward the ethos of what Live Well Kent aspires to deliver as a community mental health and wellbeing service. As such, the requirement of the model has been built within a framework around three elements and this specification is seeking to contract a range of services that fit within these areas that meet the needs of those people requiring support.



3.2 Key Objectives

- Work to identified wellbeing goals based on persons' aspirations and needs
- Provide a motivational, coaching, empowering and progressive provision to clients.
- To facilitate time limited brief interventions and peer led support, focussing on an individual journey to achieve positive outcomes.
- Work with individuals to ensure they are engaged with the local community and support networks that will facilitate continued recovery.

3.3 Geographical Provision

Services will be delivered in a range of locations and venues but in order to ensure there is equity of provision in each geographical area, we are seeking to provide in the following localities:

	Localities	Potential outlying locations for delivery
Lot 2	.ot 2 Tonbridge Hadlow	
	Tunbridge Wells	Sherwood Estate,
	Sevenoaks	Edenbridge
	Maidstone	Parkwood Estate,
Lot 3	Canterbury	Faversham
	Ashford	
	Coastal	Herne Bay, Whitstable,







3.4 Elements of the Delivery Model

Offer	Description	Provision	Contract
Innovation programmes	 Structured programmes of support to young people aged 17 -25 to develop resilience, learn new skills and to enhance physical wellbeing. Delivery of a programme of support offered in each locality and/or surrounding area. The programmes will have an agreed set of outcomes to support inclusion and recovery and progression. 	 Resilience and Physical Wellbeing Programme Programme of sessions to support and promote resilience, new learning and wellbeing. Service delivery could be One to one sessions or as a group dependent on activity. Service delivery to commence by 31 March 2020. 	1 year contract to deliver agreed service provision within a geographical area for the agreed caseload at time of commissioning.

3.5 Activity Requirements, Volumes and Costs

Specific delivery venues will be identified by the provider within their bid submission and it is envisaged that there may be more than one delivery venue in a key geographical location.

Delivery Locations and allocated funding

Lot	Locality	Outlying Areas	Provision	Funding Allocated
	Ashford	Ashford Central	Resilience and Physical Wellbeing Programme	£6,000
1.64				
Lot 3	Canterbury and Coastal	Faversham Herne Bay Whitstable Canterbury Central	Resilience and Physical Wellbeing Programme	£6,000
	Maidstone	Parkwood Estate Maidstone Central Maidstone Outskirts	Resilience and Physical Wellbeing Programme	£6,000
Lot 2				
	West Kent	Sherwood Estate Edenbridge Hadlow Tonbridge Tunbridge Wells Sevenoaks	Resilience and Physical Wellbeing Programme	£6,000







3.6 Provider Premise Requirements

- The Provider will give Shaw Trust details of proposed locations for delivery of the service.
- The Provider will be responsible for securing and developing any fixed site premises and will be
 responsible for any rent, maintenance, running costs, safety and upkeep of any premises used
 for the provision of the service.
- The sites will be suitable to accommodate open access and be Equalities Act compliant.
- The Provider will provide and operate all required premises within the contract price
- The Provider will conduct risk assessments on all premises utilised and ensure appropriate insurance are in place

4. Standards and Best Practice

- The Provider shall meet any nationally recognised standards which may be introduced by the Regulatory Bodies which apply to the service provided from time to time during the Contract Period.
- The Provider shall also participate in local, regional and national for a relevant to the Service in order to ensure organisational learning from developing practice / evidence and networks for sharing innovation.
- The Provider shall ensure representation at Network Interface activities as indicated by Shaw Trust.
- The provider must deliver time limited evidence-based interventions / support which are aimed at progression to meet the needs of clients accessing the provision

5. Service Delivery

5.1 Eligibility Criteria

- To accept referrals from with the Live Well Kent Programme and as such the client remains under the shared support of the LWK team and the contracted service provider.
- All attendees will be referred by the Live Well Kent Programme following acceptance onto the Community Navigator caseloads.
- Programme Age Criteria 17 years and above and not in crisis.
- Live Well Kent Delivery Model see Annex 11.2.

5.2 Level of Service delivery

- Ensure that each client's experience is welcoming and supportive when joining the services
- Ensure that clients are treated with dignity and respect at all times
- Ensure that every client contact is a kind, compassionate and positive experience
- Support people to realise their aspirations and work on their own individual goals and to achieve the goals agreed in their individual Wellbeing Action Plan
- Recognise each client's right to take risks in order to develop / extend opportunities and ensure that clients are able to choose the risks they wish to take

5.3. Completion Criteria

- The client completes their activity with evidenced successful outcomes within the agreed timeframe.
- The provider will keep a record of attendance of each client and will inform the Community Navigator of the clients' completion of the service, where appropriate.
- The Provider will inform the Community Navigator if the client no longer wishes to receive the service and it will be the responsibility of the Community Navigator to follow up the client.







6. Resourcing

6.1 The Provider shall ensure that it complies at all times throughout the contract period with its staffing profile contained within the contract to ensure that the staffing meets service specification requirements. Shaw Trust is to be notified at the earliest opportunity of any staffing changes in the management or delivery of the contract.

6.2 The provider shall ensure that all Staff both paid and unpaid have the skills, qualifications and support required to promote and support equal opportunities. The Provider shall employ an equal opportunities policy when selecting its staff. All Providers must have an Equal Opportunities policy (which references the Equality Act 2010)

6.3 The Provider shall ensure that each member of Staff and Volunteer who is responsible for providing support is provided with effective training and guidance in relation to each of the following in addition to any specialist requirements:

- A. Confidentiality;
- B. Disability awareness;
- C. Equal opportunities;
- D. Cultural awareness;
- E. Anti-racist and anti-discriminatory practices;
- F. Mental health awareness;
- G. Crisis support;
- H. Safeguarding Adults;
- I. The recognition and management of challenging behaviour;
- J. Health and safety;
- K. Personal safety;
- L. Customer care;
- M. Basic first aid;
- N. Information technology and the Provider's administrative systems;
- O. The management of risk.

6.4 DBS requirements.

All staff and volunteers working on the Live Well Kent programme as a provider must have a current enhanced DBS and adults barred list check in place and recorded prior to working with clients

7. The contract requirements

7.1 Expected Contract Performance Requirements

It is expected that the Delivery Network will sign a formal agreement, in the form of a Contract with Shaw Trust. It is anticipated that the agreement type used will be proportionate to the service value and service type for each Delivery Partner.

The Provider will be responsible for the collection of delivery activity, performance monitoring and information which demonstrates how they have met the outcomes for the people they are delivering a service to. This will be undertaken in a timely manner and provided in a format which meets the requirement of Shaw Trust. This will be provided in both quantitative and qualitative format, in order to demonstrate the breadth of activity.





Each Provider will have regular scheduled contract monitoring meetings with Shaw Trust to discuss delivery of the service and performance against the agreed outcomes. Formal analysis of delivery activity will be discussed and reviewed at the contract monitoring meetings.

Community wellbeing

Each Provider will be expected to demonstrate the impact of their service or provision against a set of Outputs, Client Outcomes and Quality metrics:

7.2. Performance Metrics

The below table provides an indication of what requirements will be applied but this will be agreed within contract negotiations and proportionally applied.

Outputs (Volumes and timeframes)	Outcomes	Quality Metrics (Quarterly)
 Numbers attending each contracted activity Throughput and progression figures for each contracted activity Referrals received Accepted and actual starts Unable to start Rejected Response time to referrals Waiting times 	 Helping people achieve personal goals and ambitions. Progressive mutual support in a shared journey of recovery. Supporting clients to access community resources and assets. Giving people the confidence and support to access the services and support as part of their recovery journey. Helping people to recognise their own resources and seek their own solutions. Facilitating progression towards independence 	 Number of unresolved complaints Number of serious incidents Vacancy Management Volunteer engagement Service user feedback mechanisms and outcomes Evidence of continuous quality improvement activity Onward referral data – Number and percentage of participants accessing mainstream activities during and at completion of service provision – this will include who; where; what and why.

8. Contract/service management requirements - this will need to be updated

A Performance Management Framework based on the expected contract performance will be agreed and written into the contract, outlining key review dates, information required, etc following an agreement to contract.



9. Procurement and contractual requirements Key Dates:

Action	Date
2019-20 Innovation Service Specification released	From 20 th January 2020
Live Well Kent email opened for invitation to providers to submit bids	20th January 2020
Clarification questions period – questions from providers	20 th – 31st January 2020
Deadline for submission	14 th February 2020
Evaluation of bids	w/c 17 th February 2020
Contract award	21 st February 2020
Issue new contracts	February 2020
Contract start	23rd March 2020





10. Provider Scoring Mechanism

Scoring Grid – Shaw Trust will use a rating or scoring grid that works by scoring the Provider's submission against the standards set. Scoring systems give a score for the Provider's ability to meet each of the non-priced criteria. All answers are scored as follows:

Category	Definition	Score Range
Unacceptable	No response to the question or has not provided any information about how the requirement will be met.	0
Poor	Has made some reference but with no supporting knowledge or evidence and/or only partially addresses the question.	1
Acceptable	Has made reference with some limited supporting knowledge, and evidence. Addresses the question.	2
Good	A good response in terms of the level of detail and relevance. The response is good but there are either some omissions of important issues or negative indications that reduce the extent to which the service requirements will be achieved.	3
Very Good	A comprehensive response in terms of detail and relevance and clearly meets the requirements. With good supporting knowledge or evidence and practical examples included.	4
Excellent	A more than comprehensive response in terms of detail and relevance. Clearly meets or exceeds the requirements with no negative indications. With excellent supporting knowledge or evidence and clear understanding and practical examples included	5

11. Annexes

11.1 Expression of Interest Form



11. 2 Live Well Kent Delivery Model

