

**From:** Clair Bell, Cabinet Member for Adult Social Care and Public Health  
Richard Smith, Corporate Director Adult Social Care and Health

**To:** Adult Social Care Cabinet Committee – 31 March 2022

**Subject:** **COMMUNITY MENTAL HEALTH AND WELLBEING SERVICE COMMISSIONING**

**Decision Number:**22/00033

**Classification:** Unrestricted

**Past Pathway of report:** Adult Social Care Governance Board – 2 February 2022

**Future Pathway of report:** Cabinet Member decision

**Electoral Division:** All

**Summary:** The Community Mental Health and Wellbeing Service (commonly known as Live Well Kent) is due to end on 31 March 2023.

Live Well Kent is jointly funded by Kent County Council Adult Social Care and Public Health, Kent and Medway Clinical Commissioning Group and Medway Council, in furtherance of the requirement to prevent needs escalating, contained within the Care Act 2014 and the NHS Long Term Plan and the duty stipulated in the Mental Health Act (1983) to provide aftercare services to reduce the risk of readmission.

Ongoing performance and quality monitoring, the 2019 service review and recent market engagement findings provide significant evidence that the service delivers successful outcomes in line with the original vision. The service has supported the market to increase and improve the overall offer of mental health and wellbeing interventions available in Kent.

The outcomes achieved to date for Kent residents who have used Live Well Kent demonstrate the numerous benefits of the service. Live Well Kent has become a vital element of Kent's mental health pathway and the service has demonstrated a clear need for such support.

Due to the success of the service in supporting Kent residents to move from a downward spiral of poor health, deprivation and exclusion to an upward path of good health, financial stability and career progression, Live Well Kent was selected as a case study in the Local Government Association's paper; '*Inclusive economies and healthy futures: Supporting place-based action to reduce health inequalities*' ([Please click here](#)). The aim of this paper is to provide inspiration to everyone seeking to build a more inclusive, healthy and prosperous economy in their local area.

In preparation for the recommission, comprehensive market analysis has been completed – this concluded by stating, considering the evidenced need for community mental health and wellbeing services in Kent, the success of current

provision and the clear interdependencies between the continuation of these services and the success of the Community Mental Health Transformation Programme, it is recommended Kent County Council (KCC) continue to work in collaboration with Kent and Medway Clinical Commissioning Group (K&M CCG) and Medway Council to jointly commission the Community Mental Health and Wellbeing Service. This approach supports the aspiration for closer integration and working with Health/CCG commissioning colleagues.

It is in recognition of these facts, that the conclusions made within this report have been reached, and the below recommendations have been made.

**Recommendation(s):** The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **ENDORSE** or **MAKE RECOMMENDATIONS** to the Cabinet Member for Adult Social Care and Public Health on the proposed decision (Attached as Appendix 1) to:

- a) **COMMENCE** joint commissioning activity for a Community Mental Health and Wellbeing Service; and
- b) **DELEGATE** authority to the Corporate Director Adult Social Care and Health to take other relevant actions, including but not limited to finalising the terms of and entering into required contracts or other legal agreements, as necessary to implement the decision.

## 1. Introduction

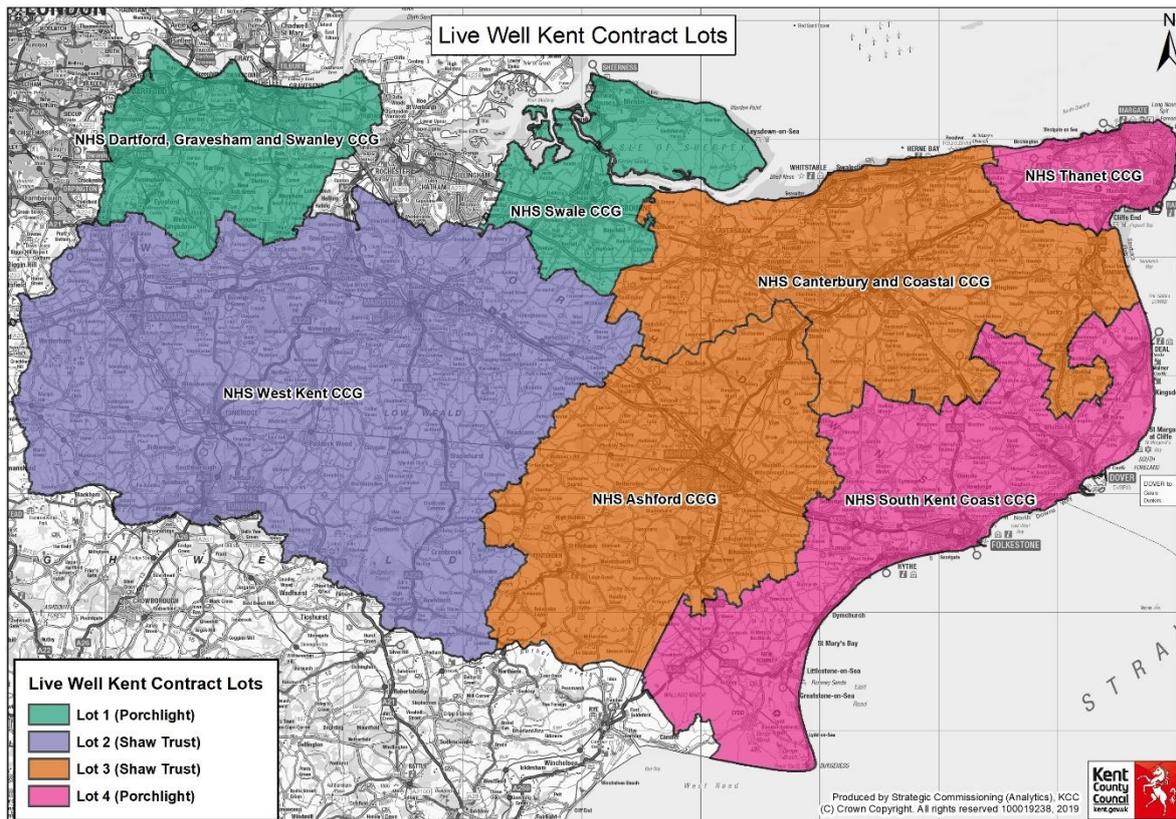
- 1.1 One in four adults in Kent experience at least one diagnosable mental health problem in any given year, and it is estimated that around 212,000 people in the county have a common or severe mental illness.
- 1.2 In line with national guidance and the NHS Five Year Forward View, Kent County Council (KCC) and Kent and Medway Clinical Commissioning Group (K&M CCG) jointly commissioned an integrated offer of community mental health and wellbeing support, which came to be known as Live Well Kent (LWK).
- 1.3 The vision for Live Well Kent (LWK) is to keep people well and provide a holistic offer of support for individuals living with and without a mental health diagnosis.
- 1.4 The service commenced on 1 April 2016 and ends on 31 March 2023.
- 1.5 This paper provides an overview of the current service, outlines the recommissioning work that has been completed and presents options and recommendations in the context of the planned future commissioning of LWK.

## 2. Background and Current Position

- 2.1 KCC, K&M CCG and Medway Council are responsible for providing mental health and wellbeing services in Kent and Medway.
- 2.2 In line with national guidance and the NHS Five Year Forward View, KCC and K&M CCG jointly procured an integrated offer of community mental health and

wellbeing support, which was soon named Live Well Kent (LWK). A competitive procurement process was used to select Strategic Partners. Tender submissions were evaluated against robust criteria to evidence each bidder's ability to enable and support a flourishing network of providers and ensure delivery of quality services to meet the needs of local residents.

- 2.3 The new model for community mental health services changed significantly to provide a more integrated offer of support; prior to its introduction, 66 grants were awarded across multiple providers, which had been rolled over on an annual basis for many years. Due to these historic commissioning arrangements, the grant funding allocation across the county was no longer based on need and deprivation levels in Kent. Data and performance returns from the grant funded providers were not able to demonstrate an accurate account of numbers of people accessing these services, especially in terms of those receiving social and employment activities and interventions. Following a full and detailed public consultation and a comprehensive engagement programme, the new specification and service model was developed in co-production with stakeholders and users. It aimed to reduce duplication, improve outcomes for users and make it simpler to access services through a 'no wrong door' approach.
- 2.4 The vision for LWK is to keep people well and provide a holistic offer of support for individuals living with and without a mental health diagnosis.
- 2.5 The outcome-based Contract was designed to engage people in innovative approaches to improving their mental health and wellbeing, based on their individual needs.
- 2.6 The new integrated service commenced on 1 April 2016 and ends on 31 March 2023.
- 2.7 The service is delivered by two Strategic Partners, Porchlight and Shaw Trust. The Contract was split into four Lots based on pre-existing CCG areas across Kent. Each Strategic Partner was selected to manage the service in two Lots, as detailed below.
  - Lot 1 - Dartford, Gravesham Swanley and Swale (Porchlight)
  - Lot 2 - West Kent (Shaw Trust)
  - Lot 3 - Ashford and Canterbury Coastal (Shaw Trust)
  - Lot 4 - Thanet and South Kent Coast (Porchlight)



2.8 The Strategic Partners take on a market stewardship role to build capacity and sustainability within the voluntary sector network, which is funded through the contract. The network has changed over the life of the Contract, responding to the needs of users. The contract limits the amount Strategic Partners can deliver themselves.

2.9 LWK is open to those 17 and over and offers support on areas such as:

- Managing money, including debt and benefits advice
- Employment
- Housing support and guidance
- Improving relationships and social inclusion
- Lifelong learning, employment and accessing volunteering
- Brief advice and signposting to healthy lifestyle support
- Evidence based activities shown to improve health and wellbeing e.g., Arts, yoga, outdoor activities, poetry, reading etc

2.10 The service aims to provide individuals with the skills and confidence to self-manage their mental health and encourages those with enduring mental illness to engage in mainstream activities, in ordinary settings, alongside other members of the community who are not using services. Furthermore, LWK aims to 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 is aimed to be community first, values-driven, and outcome focused.

- 2.11 The service provides a universal offer across Kent, supported by the LWK website. Providers actively promote positive wellbeing messages to reduce mental health stigma in communities. The service is targeted at individuals who reside in the most deprived quintiles (quintiles 1 and 2), where there are higher levels of mental illness.
- 2.12 Since service commencement, the contracts with both Strategic Partners have been varied to include the management of additional services:
- Shaw Trust also manage the 24-7 Telephone and Online Support Service for Kent and Medway, the Mental Health Housing Relating Support Service in Lots 2 & 3, and the Mental Health Debt Counselling Service (Kent Only).
  - Porchlight also manage the Mental Health Housing Relating Support Service in Lots 1 & 4 and an Activity Programme for Young People aged between 14 – 35 who have suffered from a first episode of psychosis (Kent only).
- 2.13 An overview of each of these services can be found in Appendix A.
- 2.14 A comprehensive service review was conducted in 2019 which aimed to provide the evidence base to inform ongoing development of the current contract and inform decision making around any consideration of extension.
- 2.15 The review identified:
- LWK continues to deliver successful outcomes in line with the original vision for the service, supporting the market to increase and improve the overall offer of mental health and wellbeing interventions available in Kent.
  - The LWK identity is recognised and well received across the county, to the benefit of the network, and the 'No Wrong Door Approach' taken has improved access to interventions, to the benefit of service users.
  - The Strategic Partners have demonstrated to commissioners that they work pro-actively and effectively with the Delivery Network. The Strategic Partners have identified and expanded high performing services, increasing the ability of these services to meet needs. LWK has allowed for more flexibility to enable a now more proactive sector to address the needs of individuals.
  - Effective multi-agency working is demonstrated throughout the service and Strategic Partners have driven their network to develop and implement robust systems and processes, including those relating to recruitment, training, and safeguarding.
  - LWK is meeting the intended outcomes for the service and the personal needs of service users.
  - The outcomes achieved to date for Kent residents who have used LWK demonstrate the numerous benefits of the service. LWK has become a vital element of Kent's mental health pathway, and regardless of the future approach to delivery, the service has demonstrated a clear need for such support.
- 2.16 The review recommended that the Community Mental Health and Wellbeing Contract including the following varied services; 24-7 Telephone and Online Support Service for Kent and Medway, The Mental Health Housing Relating

Support Service, Debt Counselling and the Activity Programme for Young People aged between 14–35 who have suffered from a first episode of psychosis was extended for the maximum period permitted, 24 months. The extension period comes to an end on 31 March 2023.

- 2.17 Recently, both Strategic Partners were approached by K&M CCG to look at expanding LWK into Medway based on the success of the Strategic Partner model and the value and positive contribution the service has had in Kent. Shaw Trust and Porchlight worked together on a joint Strategic Partner Proposal for Medway, which was approved by K&M CCG. Consultation with stakeholders and clients took place in quarter 4 (2020/2021) which informed a tendering process for a locally led funded network. The service went live in May 2021. **This service is currently commissioned outside of the Contract managed by KCC. However, this will be included within the new procurement and therefore will be included in the Contract starting 1 April 2023.**
- 2.18 The 2021/22 annual value of the service including all varied services and Live Well Medway is £6,801,872.
- 2.19 KCC currently fund 77.78% (£5,290,185) of this and K&M CCG 21.89% (£1,488,837). Medway Council fund the remaining 0.34% (£22,850), which goes towards funding of the 24-7 Telephone and Online Support Service for Kent and Medway.

### 3. Performance Data

- 3.1 The monitoring of this contract is led by KCC Adults commissioning (supported by KCC Public Health and CCG Commissioners), who are responsible for organising and operating meetings with Strategic Partners, and monitoring outcomes.
- 3.2 A comprehensive set of performance and quality measures are used to provide assurance that the service is performing as expected and the quality standards are met, as specified in the contract.
- 3.3 Since the beginning of the Contract (1 April 2016) until 31 December 2021, Live Well Kent (not including the varied services) has supported 17,608 people.
- 3.4 99% of people asked between 1 April 2017 – 31 March 2021 would recommend the service to a family or friend, or someone in a similar situation and 84% maintained or improved their Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS) score. SWEMWBS is validated tool to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing

3.5 Some of the highlights to come out of the most recent LWK (not including the varied services) performance monitoring data (financial year: 20/21, up until the end of Quarter 2) include:

- The service has supported 164 unemployed people to start paid employment and the average number of hours worked weekly per person is 29 hours
- 99% of sign ups to the housing service with a tenancy or accommodation, maintained their tenancy or accommodation
- 58% of sign-ups reside in the most deprived areas of Kent (Quintiles 1 and 2)
- Average number of working days between accepted referral and start of journey is 6

3.6 Regarding the varied services, some of the highlights to come out of the most recent performance monitoring data include:

- Since 1 April 2019 until 30 September 2021, the 24-7 Telephone and Online Support Service for Kent and Medway has handled 72,009 calls
- Since the 1 October 2019 until 30 September 2021, the Mental Health Housing Relating Support Service has supported 132 individuals to move onto independent living in a planned way

3.7 Case Studies providing real life stories of how LWK has changed people's lives can be found in Appendix B.

#### **4. Kent County Council and Adult Social Care and Health Strategies**

4.1 LWK directly contributes towards the Making a difference everyday approach and aligns with the priorities as set out in KCC's Interim Strategic Plan.

4.2 The Interim Strategic Plan sets out the five main challenges that KCC is facing and what we will do to help address them. Working in partnership with key partners to design and commission effective services focused on mental health prevention and recovery will help KCC and the wider system to mitigate the risk of increasing demand.

4.3 KCC Adult Social Care has recently moved towards a new diagnostic approach, Making a difference everyday (MADE). Central to this approach are three pillars of focus: practice, meaningful measures and innovation.

4.4 In relation to practice, a person-centred approach is embedded within the contract and service delivery. The approach of the service is strength based, focusing on assets, independence, recovery and social inclusion with no wrong door. Individuals accessing the service are fully supported on their personalised recovery journey and receive individually tailored support. The service uses "I" Statements as set out in Think Local Act Personal (TLAP) to develop personalised strategies to keep people well. The service also delivers interventions that have an evidence-based approach demonstrating good practice.

- 4.5 To ensure that LWK was monitoring meaningful measures, KPIs were selected through a collaborative exercise undertaken in tandem with the two Strategic Partners. KPIs and management information reported are regularly reviewed to make sure they are fit for purpose. To date, performance reporting has clearly evidenced the outcomes achieved by Kent residents who have accessed LWK and demonstrates the numerous benefits of the service. LWK has become a vital element of Kent's mental health pathway, and regardless of the future approach to delivery, the service has demonstrated a clear need for such support.
- 4.6 The outcome-based contract was designed to engage people in innovative approaches to improving their mental health and wellbeing, based on their individual needs. From the outset of the contract, it was vital the service continued to innovate to meet emerging demand and need. Those accessing the service are encouraged to be fully involved in the design and delivery of all services and are included in the development of new and innovative approaches. Each year LWK opens a grant application to seek a new range of projects and ideas from organisations that help people to improve their mental health or general wellbeing through their Innovation Fund. New Ideas could be awarded for anything from £500 to £10,000. This enables the Strategic Partner to pilot and evidence effective new solutions to bring into the network in the longer term. Current Delivery Partners can also bid for this funding and this has enabled creative services, by consulting with the people who access their services to identify what they need.

## **5. Recommissioning Considerations**

### **5.1 Market Analysis**

5.1.1 In preparation for the recommission, KCC commissioners responsible for the management of the contract completed a comprehensive market analysis which aimed to provide the evidence base to inform decision making around any consideration of future contract arrangements post March 2023.

5.1.2 Regarding the extent of mental illness nationally and in Kent, the market analysis found:

- Mental ill health currently represents 23% of the total burden of ill health in the UK and is the largest single cause of disability. Nearly 11% of England's annual secondary health budget is spent on mental health and estimates suggest that the cost of treating mental health problems could double over the next 20 years.
- According to the 2018 Global Burden of Disease UK Study, depression was the fourth leading cause of years lived with disability, behind low back and neck pain, skin and subcutaneous diseases, and migraine.
- The 2014 APMS found that one adult in six had a common mental disorder (CMD): about one woman in five and one man in eight. In Kent, 22% of the general population have a common mental health disorder.

- Drug and alcohol problems are prevalent in the population where 21% of the population are drinking at hazardous levels and 8% are misusing drugs. The more serious and persistent conditions can also be seen within the depression category where 2.6% have serious and enduring depression, 8.7% have bi-polar, 10% of adults have attention deficit hyperactivity disorder (ADHD), 4% have post-traumatic stress disorder (PTSD) and less than 1% have psychosis. It is important to note the high degree of co-morbidity and co-occurrence of mental health problems.
- The predicted incidence of severe and enduring mental illness (SEMI) is expected to grow at a faster rate than the population. For example, in East Kent, the annual growth of predicted incidence of SEMI is expected to rise 13.9% over the next 10-year period and the prevalence of SEMI is expected to rise 25.3% over the next 10-year period.
- there is evidence that self-reported mental health and wellbeing worsened during the first national lockdown of the COVID-19 pandemic. Psychological distress, anxiety and depressive symptoms appeared to peak in April 2020. There is evidence of some recovery since April, but not yet to pre-pandemic levels.
- There is also evidence that the COVID-19 pandemic has had a larger adverse impact on the mental health and wellbeing of particular groups. One study has found that Black, Asian and Minority Ethnicity (BAME) men (when grouped together) reported a larger deterioration in mental health than White British men during the first national lockdown.
- Adults with pre-existing mental health conditions have reported higher levels of anxiety, depression and loneliness than adults without pre-existing mental health conditions.
- A greater proportion of adults with low household income or relative socioeconomic position reported symptoms of anxiety and depression than adults with higher household income or socioeconomic position during the first national lockdown.

5.1.3 The market analysis concluded that considering the evidenced need for community mental health and wellbeing services in Kent, it is recommended KCC continue to fund and commission a service which meets current and future demand.

5.1.4 The market analysis also recommended that KCC work in collaboration with K&M CCG and Medway Council to jointly commission the service and that future commissioning needs to be informed and aligned to the Mental Health Transformation Programme and wider Wellbeing commissioning and delivery in Kent and Medway.

## **5.2 The National Community Mental Health Framework (Transformation Programme)**

5.2.1 The National Community Mental Health Framework for Adults and Older Adults was published in September 2019 and sets out a plan for radical change in the design of community mental health care.

5.2.2 The National Community Mental Health Framework (CMHF) supports delivery of the NHS Long Term Plan vision for an accessible, person-centred and place-based comprehensive mental health offer through the alignment of Community Mental Health Teams (CMHTs) and Primary Care Networks (PCNs) and stronger relationships with Local Authority and voluntary sector services.

5.2.3 Development and delivery of this programme will be based on a set of underpinning principles, these include:

- Removing siloed working
- No wrong door to accessing support
- People accessing the right support at the right time in the right place
- People having increased choice and personalised care
- Care plans will be co-produced with the person at the centre
- Sharing of information
- Proactively engaging with harder to reach communities
- Key emphasis on support being provided by the voluntary and community sector

5.2.4 In order to achieve its vision all Integrated Care Systems (ICS) in England will receive their 'fair share' of central transformation funding to deliver new models of integrated primary and community mental health care for adults and older adults with severe mental health problems.

5.2.5 Transformation funding should be used to bring about whole system change across local health & care partnerships, enabling people with severe mental health problems to live well in their communities. Kent and Medway has now secured funding over three years to deliver this ambitious programme.

5.2.6 In Kent and Medway, the programme delivery team has been established, workstreams have been developed and work has begun. They are following a staged approach regarding implementation, and they are first focusing on Medway and Swale ICP area.

5.2.7 This programme has huge implications for the future commissioning of this service now and throughout the lifetime of the new contract.

## 6. Commissioning Options and Model

6.1 As a result of the findings and recommendations set out in the market analysis, KCC commissioners worked in partnership with colleagues in KCC Public Health, KCC Adult Social Care and K&M CCG to develop commissioning options.

6.2 In order to select a preferred commissioning option, KCC commissioners conducted an options appraisal process (attached as Appendix C).

6.3 Following this process option 4 was selected as the preferred commissioning option. Option 4 comprises of commissioning the same service, following the same commissioning model (Strategic Partnership). However, develop one service specification which encompasses all current services and includes any additional services deemed to be suitable. The service:

- will be delivered by a Key Strategic Partner model with a diverse network of providers (delivery network). Illustrated in the diagram in Appendix D
- will operate across Kent and Medway. But some service elements will be provided just in Kent
- length will be 3 years with 2-year extension option
- client age will be flexible
- budget will increase throughout the lifetime of the Contract as a result of an annual inflationary uplift (estimated to a minimum of 2%) and additional commissioning requirements identified by the Community Mental Health Transformation Programme
- be configured so it can be adapted or added to throughout the life of Contract
- include commissioning requirements identified by the Community Mental Health Transformation Programme. Acknowledging that some of these requirements will likely become known after the Contract has gone live and therefore it will be a phased approach to implementing these.

6.4 The justification for including an annual inflationary uplift is to mitigate against the following risks:

- The service becomes unsustainable and therefore it would need to reduce the number of individuals supported further exasperating demand in the system
- Service providers unlikely to agree to sign Contracts without this clause and therefore the re-commissioning fails
- If the above two risks become reality it would have a considerable negative impact on the Community Mental Health Transformation achieving its objectives.

6.5 Furthermore, there is an objective to move towards equal funding levels from KCC and K&M CCG, noting the current % split. To achieve this, it is recommended the K&M CCG commit to funding the additional inflationary

annual uplift (estimated to a minimum of 2%). K&M CCG have formally approved this recommendation.

- 6.6 The preferred commissioning option was shared with wider stakeholders, including Kent & Medway CCG, Medway Council, KCC Adult Social Care, KCC Public Health and ICP leads. Representatives from each organisation informally agreed with this preferred option.

## **7. Market Engagement and Public Consultation**

- 7.1 KCC Commissioners responsible for the management of the contract have also designed and delivered market engagement events and a public consultation was undertaken between 23 August 2021 to 3 October 2021.

- 7.2 Analysing the public consultation responses identified that the current personal outcomes set in the services specification continue to be important and those who responded detailed additional personal outcomes to be considered as part of the new procurement.

- 7.3 The Market Engagement events were held on the dates listed below. The aim of the Market Engagement Events was to share the proposed commissioning option, gather feedback on this option and to improve understanding regarding the state of the market within each Placed Based Partnership (PBP) locality and opportunities available to maximise outcomes for current and future people accessing the service.

- East Kent PBP: 6 September 2021
- West Kent PBP: 6 September 2021
- Medway and Swale PBP: 8 September 2021
- Dartford, Gravesham and Swanley PBP: 9 September 2021

- 7.4 Analysing the feedback clearly demonstrated support for the proposed commissioning model, as shown in the statements below:

- *“The model works really well. As a Strategic Partner in another type of provision and in areas outside Kent I can confirm that the management allows for the service to innovate across the duration of the Contract”*
- *“Strategic partner model works well and ICP areas makes most sense. Use of local providers with capacity/capability to deliver as SP and delivery partner is essential”*
- *As a 'Delivery Partner' the relationship with the existing Strategic Partner has worked really well, communication has been excellent and this will need to be replicated under the new Contract”*

- 7.5 Analysis of feedback from the market demonstrated that the current service is very successful, and the personal outcomes set in the service specification continue to be important.

- 7.6 However, the market noted gaps in mental health provision more broadly and argued pathways between mental health services needs to be improved.

7.7 It was recognised there is a significant amount of public engagement occurring within the mental health system and therefore to avoid duplication the aim of the public consultation was to identify whether the current personal outcomes detailed in the service specification are still important to people and whether there are any additional personal outcomes currently not included. The consultation captured responses from people residing in both Kent and Medway as services (Live Well Kent and Medway and the 24-7 Telephone and Online Support Service for Kent and Medway) span the two local authority areas.

## **8. Service Specification**

8.1 Varying in additional services throughout the lifetime of the current contract has resulted in there being five separate service specifications connected with the Strategic Partner Contracts.

8.2 KCC Commissioners worked in partnership with colleagues in KCC Public Health, KCC Adult Social Care, K&M CCG and Medway Council to develop the new service specification which encompasses all current Service Specifications and learning from the public consultation and market engagement.

8.3 The Service Specification also includes an additional requirement for Strategic Partners to provide facilitation and support for the Kent Sheds Network and creation of new Sheds in their contracted lots, including providing advice, guidance and support.

8.4 The Service Specification is based on outcomes, but there are certain service specific requirements which must be incorporated into the service delivery model. Some of these are only required in the local authority area of Kent or require one Strategic Partner to commission them.

8.5 The Service Specification clearly outlines the vision of the service and the approach.

## **9. Route to Market**

9.1 The contract for the current service is due to expire on 31 March 2023.

9.2 In advance of this date, we are seeking approval to conduct a competitive procedure with negotiation with the aim of successfully identifying and selecting the strategic partners.

9.2 If approval is received to go out to recommission the service, the key milestones are as follows:

Selection Questionnaire Published	April 2022
Deadline for Selection Questionnaire Responses	May 2022
Selection Questionnaire Evaluation Period	May 2022
Invite Tender Responses	June 2022

Tender Evaluation Period	August 2022
Final Negotiation Period	September 2022
Tender/Contract Award	September 2022
Service Mobilisation	October 2022 - March 2023
New Contracts Go Live Date	1 April 2023

9.5 This will enable us an opportunity to engage in further negotiation on the submitted bids. This approach paves the way for a collaborative development of the service, drawing upon the unique expertise and specialist knowledge of the potential strategic partners.

## 9.6 Lotting Strategy

9.6.1 There will be five separate Contracts (Lots) as shown below:

1. Dartford, Gravesham, and Swanley Placed Based Partnership Area
2. West Kent Placed Based Partnership Area
3. Medway and Swale Placed Based Partnership Area
4. East Kent Places Based Partnership Area
5. Kent and Medway Wide Service Specific Lot – Management of 24hr Telephone and Online Support

9.6.2 The funding available when the Contract is awarded will be per lot and distributed based on the needs of the population.

9.7 A report detailing the outcome of the tender exercise and subsequent contract award will be shared with committee members at the September meeting of the Adult Social Care Cabinet Committee.

## 10. Financial Implications

10.1 The Contract length will be 3 years with a 2-year extension option. The tables below outline the costs to KCC Adult Social Care and KCC Public Health and the contract costs to K&M CCG, for the initial 3 years and extension option.

**Table 1: Contract costs to KCC Adult Social Care and Public Health (Initial 3 years and extension options)**

	KCC Public Health	KCC Adult Social Care
Initial 3-Year Contract Term	£6,757,945.50	£9,232,609.50
2 Year Optional Extension Period	£4,505,297.00	£6,155,073.00
<b>Total (Initial 3-Year Contract Term + 2 Year Optional Extension Period)</b>	<b>£11,263,242.50</b>	<b>£15,387,682.50</b>

10.2 The above contract values can be funded from within the approved budget and there will be a reduction in spend/budget for Adult Social Care and Health as the contribution from Public Health is from their ring-fenced grant.

Table 2: Contract costs to K&M CCG (Initial 3 years and extension options)

	Kent & Medway CCG
Initial 3-Year Contract Term	£4,466,511.00
2 Optional Extension Period	£2,977,674.00
<b>Total (Initial 3-Year Contract Term + 2 Optional Extension Period)</b>	<b>£7,444,185.00</b>

10.3 It is recommended that the service includes an annual inflationary uplift to mitigate against the risks outlined in section 6.4.

10.4 There is an objective to move towards equal funding levels from KCC and KM CCG, noting the current % split. To achieve this, it is recommended K&M CCG commit to funding the additional inflationary annual uplift (estimated to a minimum of 2%). K&M CCG has formally approved this recommendation.

## 11. Legal Implications

11.1 It is the intention to undergo a procurement exercise to identify a suitable supplier in accordance with PCR 2015 Regulation 32(2)(c) and Procurement Policy Note 01/20.

11.2 Section 2 of the Care Act 2014 places a general duty on local authorities to provide, arrange or otherwise identify services, facilities, and resources to prevent, delay or reduce the needs of adults for care and support. Within the Care Act statutory guidance, secondary prevention or early intervention is defined as more targeted interventions aimed at individuals who have an increased risk of developing needs, where the provision of services, resources or facilities may help slow down or reduce any further deterioration or prevent other needs from developing.

11.3 Section 117 of the Mental Health Act places a duty on Health and Social Care to provide aftercare services to individuals in relation to the reason for their admission under Section 3, 37, 45A, 47, or 48 of the Mental Health Act 1983. to reduce the risk of readmission.

11.4 The NHS Long Term Plan reinforces a focus on better care for vulnerable groups, better access to preventative mental health services and a reduction in suicide rates.

11.5 The Community Mental Health and Wellbeing Service contributes significantly to:

- Prevention and Recovery
- Integrated partnership working and
- The provision of good quality services and goods

11.6 A Section 256/Memorandum of Agreement will be entered into by all funding parties to provide a framework within which to work with health partners and other local authorities and includes financial protections for KCC.

11.7 If there is a change in Strategic Partners, TUPE regulations will apply. KCC needs to be conscious to mitigate the disruptive effect that this may have on current service users.

## **12. Equality Implications**

12.1 An Equality Impact Assessment is in place for the commissioning of the Community Mental Health and Wellbeing Contract. No major issues were identified.

## **13 Data Protection Implications**

13.1 There are no anticipated data implications associated with these decisions, as there will be no change to current services, or the data collected or shared, and therefore this will be covered under existing contract clauses.

13.2 It will be necessary for the Strategic Partners to complete a Data Protection Impact Assessment (DPIA) as they are controlling confidential data. A completed DPIA may be required to be completed as part of tender submissions.

## **14. Conclusions**

14.1 The Community Mental Health and Wellbeing Service (commonly known as Live Well Kent) is due to end on 31 March 2023.

14.2 LWK is jointly funded by KCC Adult Social Care, KCC Public Health, K&M CCG and Medway Council, in furtherance of the requirement to prevent needs escalating, contained within the Care Act 2014 and the NHS Long Term Plan and the duty stipulated in the Mental Health Act (1983) to provide aftercare services to reduce the risk of readmission.

14.3 Ongoing performance and quality monitoring, the 2019 service review and recent market engagement findings provides significant evidence that the service delivers successful outcomes in line with the original vision, supporting the market to increase and improve the overall offer of mental health and wellbeing interventions available in Kent.

14.4 The outcomes achieved to date for Kent residents who have used LWK demonstrate the numerous benefits of the service. LWK has become a vital element of Kent's mental health pathway and the service has demonstrated a clear need for such support.

14.5 In preparation for the recommission, KCC commissioners responsible for the management of the Contract completed a comprehensive market analysis. The market analysis concluded by stating, considering the evidenced need for community mental health and wellbeing services in Kent, the success of current provision and the clear interdependencies between the continuation of these services and the success of the Community Mental Health Transformation Programme, it is recommended KCC continue to work in collaboration with K&M CCG) and Medway Council to jointly commission the Community Mental Health and Wellbeing Service. This approach supports the aspiration for closer integration and working with Health/CCG commissioning colleagues.

14.6 It is in recognition of these facts, that the conclusions made within this report have been reached, and the below recommendations have been made.

## 15. Recommendations

15.1 Recommendation(s): The Adult Social Care Cabinet Committee is asked to **CONSIDER** and **ENDORSE** or **MAKE RECOMMENDATIONS** to the Cabinet Member for Adult Social Care and Public Health on the proposed decision (Attached as Appendix A) to:

- a) **COMMENCE** joint commissioning activity for a Community Mental Health and Wellbeing Service; and
- b) **DELEGATE** authority to the Corporate Director Adult Social Care and Health to take other relevant actions, including but not limited to finalising the terms of and entering into required contracts or other legal agreements, as necessary to implement the decision.

## 16. Background Documents

Community Mental Health and Wellbeing Public Consultation Report  
<http://www.kent.gov.uk/mentalhealthconsultation>,

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