

KCC Health Overview and Scrutiny Committee

15 JULY 2025

Kent and Medway Integrated Care Board Community Services Procurement and Engagement Update

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Summary

The purpose of this report is to:

- update the KCC Health Overview and Scrutiny Committee (HOSC) on the Kent and Medway Integrated Care Board (KMICB) Community Services procurement (annual value c.£237m), including completion of bid evaluation and Contract Award
- outline the next steps to contract sign-off and service 'go live'
- update on communications and engagement plans to make sure we fully engage throughout the lifetime of the contract to achieve the best for our populations.

1. Recommendations

1.1. Members are asked to consider and note the update.

2. Budget and policy framework

2.1. Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013, the Council may review and scrutinise any matter relating to the planning, provision, and operation of the health service in Kent. In carrying out health scrutiny, a local authority must invite interested parties to comment and take account of any relevant information available to it, and, in particular, relevant information provided to it by a local Healthwatch.

The Council has delegated responsibility for discharging this function to this Committee as set out in the Council's Constitution.

3. Background and timeline

3.1. The KMICB Community Services procurement followed the decision by the ICB Board in February 2023, in line with its legal obligations, to reprocure the three main Community Services provider contracts:

- HCRG Care Group (HCRG)
- Kent Community Health NHS Foundation Trust (KCHFT)
- Medway Community Healthcare

3.2. The Community Services Review (CSR) was established to take forward the procurement, to ensure the long term delivery of community health services, including our ambition to address health inequalities for people across Kent and Medway.

3.3. The work to develop the Invitation to Tender (ITT) included drafting and updating service specifications for Adults and Children's Services, to ensure continuity of current services. Additionally, an Ambitions document of proposed service priorities was produced through stakeholder collaboration to inform plans for service transformation to be developed with the preferred provider/s. At approximately £1.8bn over an 8 year (5+3) contract, the procurement is the largest in Kent and Medway.

3.4. Further to Local Authority challenge in September 2023 that the proposed procurement represented 'Substantial Variation', the procurement was paused whilst the ICB worked with HASC and HOSC to clarify the position.

3.5. The CSR was relaunched in February 2024 and has progressed in line with the Programme Plan to ensure a full and transparent procurement of the services to be in place by 27 October 2025.

3.6. The CSR has been overseen by the CSR Steering Committee, involving operational leads and SMEs from the ICB, KCC and Medway Council, supported by the Director of Strategic Commissioning & Operational Planning and his team, as well as procurement and legal advisors.

3.7. The tender for four adult lots (Dartford, Gravesham and Swanley; East Kent,

Medway and Swale and West Kent), plus the two children's lots – Kent and Swale and the rest of Kent, was published in December 2024.

- 3.8. The deadline for bid submissions was 14 February 2025, following which the submissions were comprehensively evaluated and moderated by 65 evaluators

to achieve agreement on final scores, as overseen by the ICB's procurement agency, Arden & Gem CSU (AGEM).

- 3.9. At the end of March, AGEM completed the Contract Award Recommendation Report (CARR) which was also reviewed by the ICB's legal advisors, ahead of submission to the ICB's Executive Management Team (EMT), which approved publication to the ICB Board.

4. Phase 4: Contract award, mobilisation and contract commencement

- 4.1. The final phase of the work programme for the reprocurement of adults and children's physical community healthcare services is summarised below:

22 April – an extraordinary ICB Board meeting was held for CARR approval, following which letters were sent to the successful and unsuccessful bidders, an intention to award notice was published to the market, and updates sent to local authority chief executives and other stakeholders.

7 May - the required eight-working day 'standstill' period was completed and no 'representations' or challenges were received.

8 May - NHS Kent and Kent formally announced the award of new contracts to Kent Community Health NHS Foundation Trust (KCHFT) as lead provider in a partnership between themselves, HCRG Care Group (HCRG) and Medway Community Healthcare (MCH). The awards were announced via ICB channels and emails to key stakeholders, including Kent Council's chief executive. Contract assurance and mobilisation planning commenced with the preferred provider.

12 June – first Contract Management Committee (CMC) meeting for the new Community Services contract to oversee contract sign-off, mobilisation and service transformation planning and delivery. (NB The six individual contracts have been amalgamated into one contract). The CMC took over from the CSR Steering Committee which held its final meeting on 26 June.

30 June – the date for contract sign-off (by KCHFT for the main contract and concurrently KCHFT's sub-contracts with HCRG and MCH) is on hold, subject to NHSE approval.

27 October – service commencement further to completion of service mobilisation, including development of Data Protection Impact Assessments (DPIAs) and Service Development Improvement Plans (SDIPs). Contracts will run for at least five years, with the potential for a three year extension.

5. Service Transformation and Stakeholder Engagement

- 5.1. As part of the submission process, providers were asked to set out their plans for engaging people who use their services and involving staff.
- 5.2. A new community services transformation and improvement group, as cited in the Ambitions document, will develop transformation plans for adults and children's services. The group, comprising stakeholders including providers, VCSEF groups, Kent's Health Advisory and Scrutiny Committee and Kent's Health Overview and Scrutiny committee, Healthwatch and other patient representatives and NHS Kent and Kent, will work together to determine how our ambitions can be best met.
- 5.3. Our ambitions will inform the development of a Transformation Plan to be published by KCHFT and their partners to the ICB by 31 March 2026 for approval, with agreed milestones and deliverables confirmed through costed service development improvement plans (SDIPs). In line with the contract, planning (Year 1) and delivery of agreed plans (Years 2,3 and potentially 4) will be funded to a maximum 2% of the total annual contract value.
- 5.4. The group's role will include regular review of service specifications, to reflect any changes from the implementation of our ambitions, making sure redesigned community services – adults and children's - are fit for the future.
- 5.5. Critical to this will be development of a communications and engagement subgroup, whose membership will reflect the make-up of the main group and include subject matter experts, to ensure there is adequate patient, staff and community involvement. The engagement we carried out in summer of 2024 and previous engagement carried out by partners shows what matters most to people using services and, also, what matters to staff.
- 5.6. Following contract sign off, the group will review the ambitions document with its focus on:

Adults: Ageing well, community nursing, community outpatients' appointments, diagnostics, elective community hubs, end of life care, frailty,

integrated specialist services, intermediate care, rehabilitation, single point of access – out of hospital urgent care.

Children's: A new model of care, which demonstrates integration, services as close to people as possible, a single clinical record, elective community care, specialist care, therapies, community nursing.

- 5.7. The group will look at different areas of community healthcare services, identifying how best to make sure they meet the ambitions we have already set. We will involve people who use services and staff in these development plans – putting their voice and experience at the heart of what we do.
- 5.8. Some developments may be grouped together around areas of care or service use to meet the needs of the population. For example, to improve frailty care, several services may need to change. In these cases, we will engage on them together.
- 5.9. Each change will have its own communications and engagement plan, specific to services users, audiences and scale.
- 5.10. From Spring 2026, engagement and – where relevant – formal consultation on the agreed transformation plans will begin.
- 5.11. There will be discussion with Kent and Medway's health scrutiny committees to agree levels of engagement or formal consultation on each project, depending on the change envisioned and in line with an agreed approach to the management of major change.
- 5.12. Engagement will be overseen by a patient or lived experience panel – we will recruit this panel from users and from community members. Engagement will include:
 - pre-engagement with service users and staff, which will usually take between three and four months, but up to six months for some areas identified as needing bigger change. There will be a series of workshops looking at each area for transformation and developing a proposed pathway of care. HOSC members will be invited to workshops
 - further development through publication of pathways of care – checking with staff and patients following workshops
 - oversight from the patient or lived experience panel.
- 5.13. Our fundamental communications and engagement principle is to make sure there is enough time built into work to ensure full engagement and

formal consultation, where necessary. We will work with the Committee to make sure we continue to carry out meaningful engagement with our population, and we will continue to engage with members at every available opportunity.

- 5.14. Implementation of the costed Transformation Plan, including necessary engagement and consultation, is expected to be two years although, if required, a third year has also been built into the contract.

6. Risk management

- 6.1. There are no significant risks to the council arising from this report.

7. Financial implications

- 7.1. There are no financial implications for the council arising from this report

8. Legal implications

- 8.1. There are no legal implications arising from this report