

Strategic Support for Planning and Service Improvement

Specification

Birmingham and Solihull Mental health NHS Foundation Trust (“BSMHFT”) wish to enter into a strategic partnership with a relevant supplier or suppliers who can provide a range of services or Lots (which might be expanded or reduced later at BSMHFT’s discretion):

- Lot 1 – Strategic Support for clinical demand and capacity analysis, modelling and forecasting – Reach Out, Adults of Working Age and Children & Young People
- Lot 2 - Strategic Support for service improvement work – Reach Out, Adults of Working Age and Children & Young People
- Lot 3 - Backfill for senior clinical managers or acting on behalf of clinical directors in development of clinical model for major service developments

Individual specifications are provided at the end of this document. There is an inter-relationship between Lots 1 and 2 as there is a natural flow between planning and improvement. However, suppliers are free to bid for 1, 2 or 3 of these Lots.

BSMHFT is planning the significant transformation and modernisation of its mental health services and support is required for the work on a number of these services including:

- Inpatient, community and rehabilitation services for adults of working age (CCG commissioned)
- Children’s services
- Secure services (inpatient and community (BSMHFT is commissioner of services for West Midlands patients on behalf of NHS England as well as a key provider

BSMHFT also provides services for older people, but these are explicitly EXCLUDED from this procurement. Newton Europe have been contracted to support the STP’s development of integrated services for older people. BSMHFT staff are heavily involved in this workstream and the pan-organisational nature of the pathway makes the STP-wide approach the most appropriate way of ensuring the right outcomes. The work being procured here must be aligned with the thinking and systems in place for older people’s services.

Lot 1) Strategic Support for clinical demand and capacity analysis, modelling and forecasting
BSMHFT requires strategic support to provide clinical demand and capacity analysis, modelling and forecasting services to help it understand and manage its services and the flows between them. Newton Europe supported the work across the STP regarding older people’s services, but similar support is required across adult, children’s and secure services including the flow between services and teams.

Internal BSMHFT resources, capacity and capability are insufficient to support the required analysis and improvement planning. Further to this, the demand/capacity models developed by NHS Improvement are acute-focused, overly complicated and do not translate well into a mental health context. BSMHFT therefore requires support to put in place the required tools and systems to manage this work and the means of building internal capability to maintain and develop these systems after the completion of the contract.

This work will be used to support business cases for major capital developments. These business cases are outside the scope of this procurement, but outputs MUST be adequate to support the business cases.

Lot 2) Strategic Support for service improvement work – Reach Out, Adults of Working Age and Children & Young People

Based on the analysis and planning systems defined in Lot (b), BSMHFT requires support for the improvement of services required to achieve an efficient balance between demand and capacity.

Lot 3) Backfill for senior clinical managers or acting on behalf of clinical directors in development of clinical model for major service developments

The Trust is committed to clinical leadership of its capital programme. Under normal circumstances, this is provided by asking substantive clinicians to provide part-time support, but inevitably this causes disruption and delays. Associate Directors of Operations are clear that there is a requirement for senior clinical managers to be brought in to either backfill existing senior clinicians (such as the Clinical Directors) to allow them to provide the necessary time themselves or act on behalf of the Clinical Directors in liaising with clinical staff and ensuring the development of a properly owned and defined clinical model.