

DMPC Decision – PCD

672

**Title:****Embedded Youth Work Hospital Accident & Emergency (A&E) Service– Contract Award****Executive Summary:**

DMPC PCD 569 agrees the funding for embedded youth work services in hospital Accident and Emergency (A&E) departments across five priority sites in London, identified by research undertaken by MOPAC's Evidence and Insight team. Those five sites are; Croydon University Hospital, University Hospital Lewisham, Queen Elizabeth Hospital (Greenwich), Newham University Hospital and The Whittington (Islington).

The Service(s) is aimed at vulnerable young people of 12 to 25 years of age who attend the adult or paediatric A&E departments or Urgent Care Centres at the five hospitals listed. The Service will work alongside the team in the A&E to proactively identify vulnerable young people and help them to access and engage with the support they need to prevent any potential escalation of violence and reduce the risk of repeat victimisation or exploitation.

Between September and November 2019, MOPAC undertook a competitive procurement exercise to identify providers able to deliver this embedded youth work service within each hospital. The procurement was split into four separate lots aligned to NHS Trusts. Following completion of the evaluation process, including the assessment of bidders' tenders by a multi-agency evaluation panel, two preferred bidders have been identified that are appointable.

This decision details the procurement process and requests formal approval for the award of the contracts totalling the value of £2,500,000 to Red Thread and St Giles Trust over two years between (March 2020 to February 2022).

**Recommendation:**

The Deputy Mayor for Policing and Crime is recommended to:

Approve the award of the contracts for the delivery of the Embedded Youth Work Hospital Accident and Emergency Service in London totalling a value of £2.5m over two years (March 2020 to February 2022) to Red Thread (total of £1.5m) and St Giles Trust (total of £1m), the preferred bidders identified through the procurement process.

**Deputy Mayor for Policing and Crime**

I confirm I have considered whether or not I have any personal or prejudicial interest in this matter and take the proposed decision in compliance with the Code of Conduct. Any such interests are recorded

below.

The above request has my approval.

Signature

*Ernie Henderson*

Date

*3/12/19*

## **PART I - NON-CONFIDENTIAL FACTS AND ADVICE TO THE DMPC**

### **1. Introduction and background**

- 1.1 The Mayor's Police and Crime Plan 2017-2021 (PCP) puts victims at the heart of everything MOPAC does, making significant commitments regarding the provision of better services and improving the experience of for victims of crime.
- 1.2 MOPAC has been contributing funding towards, and commissioning hospital-based support for young victims of violence since 2014/5. Clinically embedded youth workers engage with victims of serious youth violence who present at the A&E with assault-related injuries, gunshot wounds, stabbings, and those who report having been sexually exploited. The work is done in the hospital immediately after the incident, which research has shown to be unique 'teachable moment'. It is at this critical juncture that young people are often willing to look at making significant changes to their lives.
- 1.3 Commitments were made in the PCP and London Knife Crime Strategy to 'continue to support youth workers and Independent Domestic Violence Advocates (IDVAs) in Major Trauma Centres (MTCs), extending the programme to key A&E departments in Boroughs that have high levels of knife crime'.
- 1.4 There are 29 A&E departments in London. To maximise the impact of the new service provision, it was determined that the most affected Emergency Departments (EDs) should receive the interventions. Analysis was conducted by MOPAC's Evidence & Insight team and Information Sharing to Tackle Violence (ISTV) analysts to identify priority A&E sites suitable for the expansion of the initiative.
- 1.5 Five priority A&Es were identified using data and research collated by MOPAC's Evidence and Insight team. These sites are within scope of this commissioning exercise: Croydon, Newham, Whittington, Lewisham and Queen Elizabeth II (Greenwich) hospitals.
- 1.6 The services are aimed at vulnerable young people of 12 to 25 years of age who attend the adult or paediatric A&E departments or Urgent Care Centres at the five hospitals listed. The Services will work alongside the team in the A&E to proactively identify vulnerable young people and help them to access and engage with the support they need to prevent any potential escalation of violence and reduce the risk of repeat victimisation or exploitation.
- 1.7 PCD 569 commits £1.7m in funding to procure new services to deliver support to young victims of violence in five priority Accident & Emergency sites.
- 1.8 PCD 634 commits £1.5m from the Violence Reduction Unit to support delivery of services for young victims of violence in both A&Es and Major Trauma Centres, of which £0.8m has been earmarked to support the delivery of this contract.
- 1.9 The total £2.5m budget is to be allocated equally across the five sites where youth workers will be embedded. This amounts to £250k per hospital site, per year.

- 1.10 The key objectives for the funding of hospital-based interventions to support young victims of violence are to:
- (a) improve the identification of, and reduce vulnerability of, young victims of violence, ensuring they receive the right support at the right time; and
  - (b) increase the number of vulnerable young people being supported through appropriate local longer-term interventions with the aim of disrupting the cycle of violence and reducing further victimisation or exploitation.

## **2. Issues for consideration**

### Procurement Process:

- 2.1 Transport for London's (TfL) Collaborative Procurement Team were engaged to provide specialist procurement support, and a compliant route to market using their e-tendering system, Pro-Contract. The process followed the Open procedure under the 'Light Touch Regime', in line with the Public Contract Regulations (PCR) 2015.
- 2.2 The Service was procured as four lots, aligned with the NHS Trust structures, in order to promote collaboration and partnership working between A&Es that fall under a single trust:
- (a) Lot 1 - Croydon University Hospital A&E (Croydon Health Services NHS Trust)
  - (b) Lot 2 - University Hospital Lewisham A&E and The Queen Elizabeth Hospital A&E (Lewisham and Greenwich NHS Trust)
  - (c) Lot 3 - Newham University Hospital A&E (Barts Health Trust)
  - (d) Lot 4 - The Whittington A&E (Whittington Health NHS Trust)
- 2.3 The Procurement and Evaluation Strategies for the Embedded Youth Work Hospital A&E service were reviewed and approved by TfL's Strategy, Evaluation, Award Recommendation (SEAR) panel, in line with their procurement oversight and governance processes, to provide assurance that the process being followed was fully compliant with UK and EU procurement regulations.
- 2.4 A Prior Information Notice (PIN), announcing our intentions to commission the service, was published on 26 April 2019 in the Office of the Journal of the EU and on Contracts Finder. The information was also published on MOPAC's website and sent out, along with information regarding market-warming activity to relevant service providers.
- 2.5 A market-warming event was held on 4 June 2019. This was well-attended by support service providers, demonstrating a healthy level of interest in the opportunity to bid.
- 2.6 Consultation with stakeholders including hospital and clinical staff helped to shape and refine the specification, which was published on Pro-Contract on 13<sup>th</sup> September 2019. The full timeline for the procurement process is detailed in the table below:

Procurement activity	Timeline
ITT Issued	13 <sup>th</sup> September 2019

ITT clarification deadline	10 <sup>th</sup> October 2019
Tenders due	24 <sup>th</sup> October 2019
Evaluation of tenders	28 <sup>th</sup> October – 5 <sup>th</sup> November 2019
Moderation / Clarifications	7 <sup>th</sup> – 14 <sup>th</sup> November 2019
Notify bidders	6 <sup>th</sup> December 2019
Standstill Period	7 <sup>th</sup> -17 <sup>th</sup> December 2019
Preferred bidder contract signing	18 <sup>th</sup> December 2019

- 2.7 In total twelve bids were submitted across the four lots by the stipulated deadline. Lots 1&2 received three bids each, Lot 3 received four bids and Lot 4 received two bids. Each lot was evaluated individually according to predetermined criteria.
- 2.8 The clarification, evaluation and moderation process was overseen by a procurement professional working with Tfl's Collaborative Procurement Team.
- 2.9 The technical submissions relating to each bid were assessed and scored by an expert panel assembled by MOPAC. Each lot was evaluated by a core panel made up of MOPAC staff and representatives from the local authority that each hospital is based in. The knowledge and expertise of the local authority representation was key to ensuring the delivery model could embed and work alongside local agencies beyond the hospital setting.
- 2.10 To ensure that panels were also inclusive of key health perspectives, each panel also featured a representative from the relevant health trust to score 2 key questions related to the provider's delivery model and approach to engaging with young people in a hospital setting.
- 2.11 A key consideration for the panel was the ability to meet the needs of vulnerable young victims, ensure effective safeguarding practices and work well both within the hospital setting and the communities served by it. These elements were scrutinised during the evaluation and clarification process and by the panel who brought their insight to the scoring.
- 2.12 Assurance was also provided, through the evaluation process, that the preferred bidder was able to deliver the minimum service requirements within the specification and had a sufficiently robust mobilisation plan in place to enable them to mobilise the service effectively within the required timescales.
- 2.13 Following completion of the evaluation and clarification process, it is the view of the selection panel that the providers are appointable to deliver the Embedded Youth Work Hospital A&E Service in London, and the recommendation is that the DMPC approve award of the contract to the preferred bidders, Red Thread and St Giles Trust.
- 2.14 The results of the process have also been written up and included in a formal contract award report which has been reviewed and approved by Tfl's Strategy Evaluation Award

Recommendation panel (SEAR) on 25<sup>th</sup> November 2019, in line with their governance processes and to provide assurance that the process has been conducted in line with the previously agreed procurement and evaluation strategies, and in compliance with procurement regulations.

### **3. Financial Comments**

- 3.1 This report seeks approval for the award of the contracts for the Embedded Youth Work Hospital A&E Service, worth a total of £2,500,000 over two years, (between March 2020 and February 2022) under MOPAC's scheme of delegation.
- 3.2 Given the procurement process set out above, the funding is broken down and divided by 'lots' procured. Each lot presents a total value of £500,000 over two years, except lot 2 – Lewisham and QEH, which is worth £1,000,000 over two years as contains is two priority hospital sites within a single NHS trust.
- 3.3 The contracts are to be awarded to the following providers as per the value's stipulated below:

<b>Lot</b>	<b>Contract Value</b>	<b>Successful provider</b>
1 – Croydon	£250,000 per year	Red Thread
2 – Lewisham and Queen Elizabeth Hospital	£500,000 per year	Red Thread
3 – Newham	£250,000 per year	St Giles Trust
4 - Whittington	£250,000 per year	St Giles Trust

- 3.4 The funding for the Embedded Youth Worker Hospital A&E Service comes from a range of sources, including the Young Londoners Fund, the Violence Reduction Unit and MOPAC Core budget. The amounts of funding from each source are set out in PCD569 and PCD634.

### **4. Legal Comments**

- 4.1 MOPAC's general powers are set out in the Police Reform and Social Responsibility Act 2011 (the 2011 Act). Section 3(6) of the 2011 Act provides that MOPAC must "secure the maintenance of the metropolitan police service and secure that the metropolitan police service is efficient and effective." Under Schedule 3, paragraph 7 MOPAC has wide incidental powers to "do anything which is calculated to facilitate, or is conducive or incidental to, the exercise of the functions of the Office." Paragraph 7(2) (a) provides that this includes entering into contracts and other agreements.
- 4.2 Section 143 (1) (b) of the Anti-Social Behaviour Crime and Policing Act 2014 provides an express power for MOPAC, as a local policing body, to provide or commission services "intended by the local policing body to help victims or witnesses of, or other persons affected by, offences and anti-social behaviour." Section 143(3) specifically allows MOPAC to make grants in connection with such arrangements and any grant may be made subject to any conditions that MOPAC thinks appropriate.
- 4.3 The powers in section 143 were given to MOPAC following the Government's response to the consultation Getting it Right for Victims and Witnesses (2 July 2012) in which it

set out a package of reforms to the way in which support services for victims of crime are to be provided.

4.4 The recommendations in this decision are in line with the legislation and in line with MOPAC's Scheme of Delegation.

4.5 The contract terms for the Embedded Youth Work Hospital A&E service are based on MOPAC's standard contract for services, and TfL legal team have been consulted on any changes to the standard template.

## **5. Commercial Issues**

5.1 Professional, technical advice has been sought from TfL procurement colleagues in relation to the commissioning approach which has been followed for the Embedded Youth Work Hospital A&E Service, in order to ensure that the process followed was fully compliant with the Public Contract Regulations 2015.

5.2 The Procurement and Evaluation Strategies for the A&E expansion have been reviewed and approved by TfL's Strategy, Evaluation, Award Recommendation (SEAR) panel, in line with their procurement oversight and governance processes throughout the procurement exercise to ensure that the process is fully compliant with UK and EU procurement regulations.

## **6. Public Health Approach**

6.1 A proportion of the funding for this service(s) is provided by the Mayor's Violence Reduction Unit. The phase 1 spend plan for the VRU is approved by PCD 634, clearly outlining that the VRU takes a public health approach to tackling violence. This approach looks at violence as a preventable consequence of a range of factors, such as adverse early-life experiences, or harmful social or community experiences and influences.

6.2 The principle of youth workers embedded in hospital Major Trauma wards and A&Es aligns well with the public health approach that is at the heart of the VRU. These services will identify and deliver interventions to young people at point of crisis – a significant number who are under 18 and not previously known to services. They provide trauma-informed and child-centered support with the aim of disrupting the cycle of violence, in particular, retaliation.

6.3 They will also support the victim to cope and recover more effectively, accessing wider health services, with the aim of supporting that young person to be access relevant services (e.g. training, education, mental health support) for them to be able to make more positive life choices.

6.4 The VRU is also informed by data and evidence to understand and tackle the causes of violence. The data received quarterly from the existing Major Trauma Centres and A&E services allows us to see a picture of victimisation that neither, police or ambulance data shows us. The existing services have shown that hospitals receive substantial proportions of 'walk ins' so the data collected helps us to better understand the locations, age, ethnicities and genders overrepresented in the violence data. This data picture will be further enhanced through the commissioning into five more A&E sites, following contract award.

## **7. GDPR and Data Privacy**

- 7.1 The Provider(s) shall be required to deliver in full compliance with both the General Data Protection Regulation (GDPR) and the Caldicott Principles.
- 7.2 All bidders were required to supply copies of their data protection policy to evidence their compliance with data protection legislation as part of the tender process.
- 7.3 All contracts and grant agreements will include clear provisions relating to compliance in this area, and in relation to the processing of personal data. These terms have been drafted following consultation with MOPAC's GDPR Project Manager.
- 7.4 To ensure that these principles are embedded in service delivery following contract award, a full Data Protection Impact Assessment (DPIA) will be completed by the successful provider(s) as part of the mobilisation activity for the service. NHS staff will be consulted in this process to incorporate health perspective.
- 7.5 Where the DPIA identifies the need for the sharing of personally identifiable information to support service delivery, Information Sharing Agreements (ISAs) will be drafted between the provider and other agencies to ensure safe and secure transfer of personally identifiable information.

## **8. Equality Comments**

- 8.1 Under section 149 of the Equality Act 2010 (the Equality Act), as a public authority the Deputy Mayor/MOPAC must have due regard to the need to eliminate discrimination, harassment and victimisation, and any conduct that is prohibited by or under this Act; and to advance equality of opportunity and foster good relations between people who share a protected characteristic and those who do not. Protected characteristics under the Equality Act are age, disability, gender re-assignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, and marriage or civil partnership status (the duty in respect of this last characteristic is to eliminate unlawful discrimination only).
- 8.2 The Police and Crime Plan and associated commissioning plans are based on two principles:
- Victims First – putting victims at the heart of everything we do.
  - Reducing inequalities in communities – a focus on setting an agreed standard and addressing the disparities we see across the city.
- 8.3 To address the inequalities that exist in London, MOPAC has four targeted priorities directed at those people who are disproportionately affected by crime. The priorities aim to provide specialised services that safeguard the most vulnerable in society and reduce evident existing inequalities. These priorities are reflected in MOPAC's victims' commissioning plans over the next three years and are as follows:
- A better police service for London
  - A better Criminal Justice Service for London

- Keeping Children and Young People Safe
- Tackling Violence Against Women and Girls.

- 8.4 All providers and services commissioned by MOPAC must be compliant with the public sector equality duty set out in section 149(1) of the Equality Act 2010 and demonstrate a commitment to equal opportunities and understanding of equality issues.
- 8.5 The Police and Crime Plan 2017-21 Integrated Impact Assessment (IIA) takes into account feedback from the public and stakeholders and makes an assessment of its impact on a number of objectives including Crime, Safety and Security, Equality and Inclusion and Social Integration.
- 8.6 The Impact Assessment shows that young people are disproportionately impacted by crime as both victims and offender and that serious youth violence has increased steadily for the past three years, with 6,600 young victims in the 12 months to September 2016. The number of knife crimes with injury committed against Londoners under the age of 25 is, at 1,782 offences in the year to September 2017, the highest level since 2012. The evidence is clear that when young people are victimised, they are subsequently at much higher risk of both offending themselves and re-victimisation.
- 8.7 This decision supports an initiative and interventions for young victims, but particularly those victims of more serious crimes, vulnerable and repeat victims, and particular sections of the community who are over-represented amongst victims of crime.
- 8.8 The specification for the service included a section on equality and accessibility standards, which made particular reference to the requirement for the service provider to take into account the specific needs of under-served groups and those with protected characteristics, and to remove or minimise the disadvantage suffered by them.
- 8.9 Diversity monitoring will remain an integral part of quarterly performance management processes following contract award.
- 8.10 The contract for the service includes clear provisions relating to compliance in this area, and to supporting MOPAC in the discharge of its duties in relation to promoting equality of opportunity and eliminating discrimination. The performance indicators within the contract include measures to enable MOPAC to monitor the accessibility of the service and to agree actions with the provider if necessary, to address the under-representation of specific groups.

## **9. Background/supporting papers**

- 9.1 PCD 569 - Support to young victims in London's Major Trauma Centres and A&Es
- 9.2 PCD 634 – VRU Work Programme: Phase 1

**Public access to information**

Information in this form (Part 1) is subject to the Freedom of Information Act 2000 (FOIA) and will be made available on the MOPAC website following approval.

If immediate publication risks compromising the implementation of the decision it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary.

**Part 1 Deferral:**

Is the publication of Part 1 of this approval to be deferred? YES

If yes, for what reason: Following the decision being reached, a formal standstill period will commence. Until the standstill period has elapsed, and the contract has been formally awarded to the preferred bidder, the decision should not be made public.

Until what date: 5<sup>th</sup> January 2020.

**Part 2 Confidentiality:** Only the facts or advice considered as likely to be exempt from disclosure under the FOIA should be in the separate Part 2 form, together with the legal rationale for non-publication.

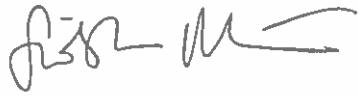
Is there a Part 2 form – No

ORIGINATING OFFICER DECLARATION	<i>Tick to confirm statement (✓)</i>
<b>Financial Advice</b> The Strategic Finance and Resource Management Team has been consulted on this proposal.	✓
<b>Legal Advice</b> The TfL legal team has been consulted on the proposal.	✓
<b>Equalities Advice:</b> Equality and diversity issues are covered in the body of the report.	✓
<b>Public Health Approach</b> Due diligence has been given to determine whether the programme sits within the Violence Reduction Unit's public approach to reducing violence. This has been reviewed and supported by a senior manager within the VRU.	✓
<b>Commercial Issues</b> The Contract Management Team has been consulted on the commercial issues within this report. The proposal is in keeping with the GLA Group Responsible Procurement Policy.	✓
<b>GDPR/Data Privacy</b> <ul style="list-style-type: none"> <li>GDPR compliance issues are covered in the body of the report and the Data Protection Officer has been consulted on the GDPR issues within this report.</li> <li>A DPIA has been completed OR A DPIA is not required.</li> </ul>	✓
<b>Director/Head of Service</b> The Head of Service has reviewed the request and is satisfied it is correct and consistent with the MOPAC's plans and priorities.	✓

**Interim Chief Executive Officer**

I have been consulted about the proposal and confirm that financial, legal and equalities advice has been taken into account in the preparation of this report. I am satisfied that this is an appropriate request to be submitted to the Deputy Mayor for Policing and Crime.

**Signature**



**Date**

3/12/19

