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**Tender Response Pack (Open Framework)- Part B**

THE PROVISION OF POST-ADOPTION THERAPY SERVICES FOR ADOPT THAMES VALLEY

**I-0003**

**You must read the Invitation to Tender and Conditions of Contract before completing this pack.**

**Tenderers must answer all questions in this document**

**SECTION A SERVICE QUESTIONS**

**Applicants may register an interest in any or all of the categories listed and should indicate therapies being applied for in the table below.**

|  |  |
| --- | --- |
| **Category 1: Psychotherapy** | **Please mark with ‘X’ the types being applied for.** |
| EDMR  |   |
| DDP  |   |
| Attachment  |   |
| Solution Focussed brief therapy  |   |
| Sensory Integration Processing Therapy/ Therapeutic Listening Programme  |   |
| Cognitive Behavioural Therapy (CBT) for the child  |   |
| Brain mapping  |   |
| Systemic Family Therapy  |   |
| Video Interaction Guidance  |   |
| Mindfulness-Based Cognitive Therapy (MBCT)  |   |
| Multisystemic Therapy (MST)  |   |
| Dialectical therapy (branch of CBT)  |   |
| RAMP (Reducing Anxiety Management Plan)  |   |
| MindfulYoga Course  |   |
| Neuro integration System Therapy (NIS)   |   |
| Educational Psychotherapy  |   |
| Psychotherapy for the child  |   |
| Therapeutic Life Story Work  |   |
| Therapeutic Parenting  |    |
| NVR  |   |
| Specialist Multidisciplinary Assessment   |   |
| Therapeutic short breaks   |   |
| Family therapy   |   |
| Internal families system therapy   |   |
| Neuro-integration systems therapy (NIS)  |   |
| Psychoanalytical therapy   |   |
| Reducing anxiety management plan (RAMP)  |   |
| Sensory integration processing therapy or sensory integration listening program   |   |
| Multisystemic family therapy   |   |
| Psychodynamic therapy     |   |
| Tuition in emotional literacy   |   |

|  |  |
| --- | --- |
| **Category 2: Creative Therapies** | **Please mark with ‘X’ the types being applied for.** |
| Play  |   |
| Art  |   |
| Music  |   |
| Drama  |   |
| Video Interaction Guidance  |   |
| Theraplay  |   |
| Lego therapy  |   |
| Dance Movement Therapy  |   |
| MIM – Marschak Interaction Method (common theraplay)  |   |
| MindfulYoga Course  |   |
| Specialist assessment  |   |
| Therapeutic Life Story Work  |   |
| Therapeutic Parenting  |   |
| NVR  |   |
| Creative Therapies involving the child and adults (Please specify)  |   |
| Creative physical therapies- other (please specify)  |   |
| Filial therapy   |   |
| Video feedback intervention to promote positive parenting  and sensitive discipline   |   |
| Koru project  |   |

**OUTCOMES AND EXPERIENCE (QUALITY SCORING)**

(Please give relevant and recent examples to the additional questions below. Please mark as N/A if you do not have experience in this area and be as specific as possible.)

|  |  |  |
| --- | --- | --- |
| **Question No.** | **Outcomes and Experience** | **Word count and % of total score** |
| **1** | Is your therapy experience in children and young people? Please give details   Please also detail if you also work with parents or if you work with parents exclusively?  | **Word count 1000 maximum / Weighting 30%** |
| Detail your experience  - For  Assessment . Expand box as required    |
|   |
| **Question No.** | **Outcomes and Experience** | **Word count and % of total score** |
| **2** | Do you have experience of working with adopted children? Please give details.   | **Word count 1000 maximum / Weighting 30%** |
| Detail your experience  - For  Assessment . Expand box as required   |
|   |
| **Question No.** | **Outcomes and Experience** | **Word count and % of total score** |
| **3** | Please give examples of effective therapeutic support you delivered including outcomes achieved.  Do you specialise in a particular therapy or approach?   Please share any examples of an effective way of providing therapy that you have developed or used?    | **Word count 1000 maximum / Weighting 30%** |
| Detail your experience  - For  Assessment . Expand box as required    |
| **Question No.** | **Outcomes and Experience** | **Word count and % of total score** |
| **4** | Have you had experience in SEND and Inclusion? If so, please give details and an example of recent practice?  | **Word count 1000 maximum / Weighting****10%** |
| Detail your experience  - For  Assessment . Expand box as required    |
|  **OUTCOMES AND EXPERIENCE (INFORMATION ONLY)**   |
| **Question No.** | **Outcomes and Experience** | **Word count and % of total score** |
| **5** | If registered with Ofsted please state registration number and date. Please provide details of any other registered body and state registration number and date.  | **N/A** |
| For Information Only   |

|  |  |  |
| --- | --- | --- |
| **Question No.** | **Outcomes and Experience** | **Word count and % of total score** |
| **6** | Are you able to provide a suitable venue for the therapies, or do you need to hire one? (If so, the hire costs will need to be included in you pricing submission document)  | **N/A** |
| For Information Only   |

**SECTION B PRICING**

The Open Framework will be for Therapy support services in the following Categories:

**1 – Psychotherapy**

**2 – Creative Therapies**

**Remuneration rates**

Please provide your daily rate for the services applied for in the table below. Please note that most of the work assignments will be subject to mini-competitions with ‘call-off contracts being issued to the successful provider in accordance with the call off process. Providers will be able to adjust their rates for mini-competition, with the daily rate being used for direct awards

Your rates are to be inclusive of all expenses including mileage unless agreed otherwise. This rate will only apply from the time the assignment commences at the setting. No additional costs will be accepted that are over and above the rate stipulated.

**Payments will be made against a verified timesheet**

|  |  |
| --- | --- |
| **Category1: Psychotherapy** | **Daily Rate****£** |
| EDMR  |   |
| DDP  |   |
| Attachment  |   |
| Solution Focussed brief therapy  |   |
| Sensory Integration Processing Therapy/ Therapeutic Listening Programme  |   |
| Cognitive Behavioural Therapy (CBT) for the child  |   |
| Brain mapping  |   |
| Systemic Family Therapy  |   |
| Video Interaction Guidance  |   |
| Mindfulness-Based Cognitive Therapy (MBCT)  |   |
| Multisystemic Therapy (MST)  |   |
| Dialectical therapy (branch of CBT)  |   |
| RAMP (Reducing Anxiety Management Plan)  |   |
| MindfulYoga Course  |   |
| Neuro integration System Therapy (NIS)   |   |
| Educational Psychotherapy  |   |
| Psychotherapy for the child  |   |
| Therapeutic Life Story Work  |   |
| Therapeutic Parenting  |    |
| NVR  |   |
| Specialist Multidisciplinary Assessment   |   |
| Therapeutic short breaks   |   |
| Family therapy   |   |
| Internal families system therapy   |   |
| Neuro-integration systems therapy (NIS)  |   |
| Psychoanalytical therapy   |   |
| Reducing anxiety management plan (RAMP)  |   |
| Sensory integration processing therapy or sensory integration listening program   |   |
| Multisystemic family therapy   |   |
| Psychodynamic therapy     |   |
| Tuition in emotional literacy   |   |

|  |  |
| --- | --- |
| **Category 2: Creative Therapies** | **Daily Rate** **£** |
| Play  |   |
| Art  |   |
| Music  |   |
| Drama  |   |
| Video Interaction Guidance  |   |
| Theraplay  |   |
| Lego therapy  |   |
| Dance Movement Therapy  |   |
| MIM – Marschak Interaction Method (common theraplay)  |   |
| MindfulYoga Course  |   |
| Specialist assessment  |   |
| Therapeutic Life Story Work  |   |
| Therapeutic Parenting  |   |
| NVR  |   |
| Creative Therapies involving the child and adults (Please specify)  |   |
| Creative physical therapies- other (please specify)  |   |
| Filial therapy   |   |
| Video feedback intervention to promote positive parenting  and sensitive discipline   |   |
| Koru project  |   |

**SECTION C SAFEGUARDING**

1. Sole Traders, Partnerships & Charitable Organisations must complete the safeguarding document titled – Safeguarding Contract Checklist (below).

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1. Public & Private Limited Companies must complete the safeguarding document titled – Section 11 Safeguarding Audit Template (below).



**TENDERER CHECKLIST & PRECONTRACT CHECKLIST**

Tenderers should ensure that they have completed the following sections before returning their ITT responses:

|  |  |
| --- | --- |
| **SECTION HEADING** | **COMPLETED?** |
| **Part B Section A Service Questions** |[ ]
| **Part B Section B Pricing** |[ ]
| **Part B Section C Safeguarding** |[ ]

It is important that all sections are completed as failure to do so may result in your ITT response being deemed non-compliant and not further considered by the Council.

Tenderers who do not wish to provide a response to this ITT are requested to advise the Council’s Representative as soon as possible.

**PRE-CONTRACT CHECKLIST**

Following evaluation, the following documents will be required by the Council from the Tenderer(s) who has the Most Economic Advantageous Tender. These documents must be checked prior to contract and the Council is providing this list so Tenderers can be prepared.

|  |  |
| --- | --- |
|  **SECTION**  |  **SECTION HEADING**   |
| **8.1**  | **Insurance Certificates**  |
| **8.2**  | **Equality & Diversity Policy**  |
| **8.3**  | **Safeguarding Policy**  |
| **8.4**  | **Health & Safety Policy**  |
| **9.1** | **Other service specific questions** |
| **Appendix 4**  | **GDPR Supplier Questionnaire**  |

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