

Soft Market Testing Questionnaire

Summary of Feedback

Introduction

We received survey responses from five parties as a result of this exercise to obtain views on our draft recovery initiative specification.

We have used the feedback to refine the specification into a final version and we're excited to be able to publish this to invite expressions of interest.

We have summarised the feedback we received below and given some further detail on how we have used it.

Summary of Feedback

Survey respondents said...	We said...
Premises - Can existing premises currently utilised by treatment and other community groups be used at a reasonable cost?	Should premises be a core component of any bid, we would encourage providers to work collaboratively and proactively with potential partners who could support with suitable, cost effective provision.'
Links with Residential Rehab – It may be beneficial for the Recovery Initiative to build links with residential rehab services to ensure people can be offered ongoing support in the community	<p>We agree and see substantial mileage in supporting people to exit residential rehabilitation services into community based recovery services.</p> <p>We have included reference to that within the specification under the 'introduction' section of the specification (under background) and also under section 4.09 in relation to identification and strengthening of pathways between residential rehabilitation services and community recovery opportunities.</p>
Health Inequalities – some areas of Derbyshire are more deprived from a health and wellbeing perspective; the recovery initiative should be aware of this and able to respond to this inequality	<p>We also recognise that some areas of the Derbyshire area may be more adversely affected from a health and wellbeing perspective; to this end we would encourage providers to give consideration how this dynamic could be effectively addressed.</p> <p>The new innovative Recovery model is proposed to support individuals with health-related behaviours including but not limited to the following;</p> <ul style="list-style-type: none"> -access to services -social deprivation -access to work and education -social networks <p>There may be some individuals who may prefer to be supported into mainstream services/community groups to achieve their outcomes.</p>

<p>Measuring Outcomes – its important to note that existing services that deliver similar types of activity don't tend to rely on quantitative outcome measures and KPIs and instead focus on finding ways to show improvements in participant wellbeing and increased recovery capital</p>	<p>We agree broadly; in terms of measures of success for the recovery initiative, the council recognise that the nature of the service required to support recover in Derbyshire cannot be constrained by excessive rigid and quantitative Key Performance Indicators.</p> <p>We would welcome proposals that instead would demonstrate the volume and wider impact of the service from perspective that supports the identification and growth of personal and community recovery capital. We hope this will provide bidders with some assurance.</p>
<p>Match funding – there was some concern that providers would be expected to match fund the new recovery service.</p>	<p>We can categorically say that this is not a requirement for this project. We think this may have been mistakenly picked up from the current approach to funding recovery initiatives for through the recovery grant funding approach where providers are required to find ways to become financially viable organisations in their own right from year two onwards.</p> <p>This is not a requirement for the recovery initiative. Whilst with the new service, in the fullness of time we would like to see innovation from the provider in relation to creation of other opportunities (Strand 5), there is no requirement for providers to match fund any proposals made under this proposal.</p>
<p>Budget allocation – there were mixed views as to whether the funding envelope available is large enough to achieve everything.</p>	<p>Derbyshire County Council have committed additional funding for a new and innovative Recovery service model.</p> <p>We would encourage providers to think creatively and forge relationships with partners who may be able to bring added skills, resources etc to a wider partnership in order to be able to create and provide a service which is accessible to all within Derbyshire but not necessarily as simple as equal geographical coverage (e.g. the service should be needs / service user led in the way that it operates and delivers services).</p> <p>The Council recognise the need to support recovery services across Derbyshire however this does need to be considered against other competing and equally valid resource pressures. We have however built in a mechanism detailed in section 6.4 of the specification allowing the council to work with the provider collaboratively in the event that further funding can be sourced to bolster recovery services.</p> <p>Four respondents however did feel that the existing budget envelope was sufficient to be able to establish an effective service.</p>
<p>DCC Roles to Support – the draft specification made reference to a Lived Experience Lead and a Workforce Development/Volunteering and Peer Mentor Lead which could add staff time resources to support the recovery initiative project but providers wanted some clarity on where the funding was coming from for there</p>	<p>These two posts will be established by DCC as a resource for our treatment and recovery system including the recovery initiative. The posts will be funded through non-recurrent Supplemental Substance Misuse Treatment and Recovery Grant money however so they are a time limited resource.</p> <p>We have removed the reference to these posts from the specification for that reason to avoid any confusion. The post holders will however</p>

	work with the provider of the recovery initiative to support its work for the duration of their funding periods.
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<p>Service Operational Hours and Staff Working Hours</p>	<p>There was some confusion about the 40 hours per week minimum service delivery element. In terms of operational delivery hours, we have revised the specification to detail the minimum delivery hours required; this however doesn't mean that every staff member is required to be operational during this time – they can and should work to any agreed work pattern (e.g. 37 hours or thereabouts for a full time equivalent staff member).</p>
<p>Treatment service support to create a 'recovery oriented system of care' – respondents stressed that this needs to be supported by the treatment services and that recover services alone would not be able to create the right conditions for a ROSC in isolation.</p>	<p>We agree that in order to evolve a 'recovery oriented system of care' that there will be a requirement for close working and mutual support between treatment services and recovery services to create the right conditions and pathways between services.</p> <p>To that end, in our adult integrated drug and alcohol treatment and recovery service specification we have included the need for a commitment from treatment services to 'work to support the development of a 'recovery oriented system of care' where there is parity of esteem between experience through training and qualifications and lived experience.'. In addition we have asked for the provider of this service to actively report on the number of people accessing recovery related support in parallel with treatment services.</p>
<p>Legal, governance, training and practical implications of creating a new organisation – one respondent was concerned that this could be a significant task which would require resources in order</p>	<p>The 'Recovery Initiative' specification has been developed in a way that will hopefully provide potential providers (including groups of individual organisations) with a range of options in terms of how the core project strands are devised and developed. We recognise that some contracting models can be more complicated (e.g. special purpose vehicles) but we're hopeful that by taking a collaborative approach, organisations will be able to partner and share resources (including infrastructure support) to develop an innovative approach to delivering the recovery initiative.</p> <p>Providers / collaborative partnerships will need to consider and manage the resource implications attached to their proposed model of delivery. Providers are also encouraged to tap into existing support available to VCSE organisations in terms of governance and structure and factor this into mobilisation plans.</p>
<p>One to One Meetings pre-procurement – we were asked if we planned to carry out any one to one meetings with potential providers before publishing the opportunity</p>	<p>To ensure the impartiality of the council and enable all providers to consider this opportunity in an equal, fair and transparent way, we don't plan to carry out any further exercises to gather views on a one to one basis.</p> <p>We would however strongly encourage any interested parties to build relationships with partner organisations / allies who may have a similar set of organisational values but could bring additional knowledge and experience that could lead to creation of an innovative and effective proposal (which may not be achievable by any one individual organisation).</p>

We would like to thank everyone who took the time to respond to this soft market testing questionnaire. Your input and insight has been very useful in further refining the specification.

We look forward to sharing more with you and working with you to create a vibrant recovery community across Derbyshire through this project.

Best wishes

Derbyshire County Council

Public Health Commissioning Team