

**Central Lancashire Substance Misuse Service Modernisation
Partnership and Provider Information Day –
Friday 6th November
Civic Centre, West Paddock, Leyland, PR25 1DH**

Questions & Answers

Question 1

Asked by Dr John Richmond, Delphi

“At the East Lancashire Information Day, partners and providers were told that joint partnerships could be formed, when do the partnerships have to be fixed by in Central Lancashire?”

Tom Woodcock (TW), Strategic Director stated that it is the lead organisation which must go through the Pre Qualification Questionnaire (PQQ) process. Simon Smith (SS), Head of Operations & Commissioning added that the PQQ process was in place to obtain an indication as to who lead organisations may partner with. However formal partnerships do not have to be made until the final ITT stage.

Question 2

Asked by Dr John Richmond, Delphi

“Will smaller organisations be red flagged in comparison to larger organisations in the PQQ process? And can we partner up with more than one organisation at tender stage?”

SS replied that this is a £6 million contract for which any organisation needs to be able to demonstrate their capacity to deliver against and should be fit for purpose. TW answered that we will seek clarity and confirm shortly whether an organisation can be a partner in more than one bid.

Question 3

Asked by Normandie Wragg, Addaction

“Partnership Arrangements at PQQ stage limits smaller organisations and can they partner up with larger organisations?”

TW answered as above – We will seek clarity and confirm shortly about partnership arrangements.

Question 4

Asked by Paul O'Rourke, Next Stage Ltd

“If you are the lead organisation within a partnership, do both organisations have to undergo financial and other tests or just the lead undergo all tests?”

TW replied that it would only be the lead organisation.

Question 5

Asked by Paul O'Rourke, Next Stage Ltd

"What is the roll out plan for the successful tender and implementation?"

SS replied that there would be a 3 month implementation period to allow for a transition process. TW stated that the DAAT would work closely with the successful provider to develop a clear implementation plan.

Question 6

Asked by Paul O'Rourke, Next Stage Ltd

"How will finance be allocated?"

SS answered that the finer detail regarding drawing down of funds would need to be confirmed at a later stage in the process.

Question 7

Asked by Lynne Stafford, Inward House Projects

"What will happen on 31st March and 1st October with current service provider and with regards to the timescales?"

Samantha Jones (SJ), Locality Commissioning Manager that she had been working with the Treatment Effectiveness Group (TEG) and current providers to ensure the current services and systems are sustained.

Question 8

Asked by Liz Stafford, Vice Chair of Local Pharmaceutical Committee

"We are not a contracting organisation; however, we would be very interested in speaking with other bidders as potential partners".

Question 9

2 part question:

Asked by Mike Ore, NHS Halton & St Helens

"Is there an expectation from the DAAT around cost realisation of the contract and any efficiency savings; do you know what it is today, especially in this economic climate?"

TW replied that LDAAT will issue an indicative budget; there is also a wide range of funding which is extensive and includes adult pooled treatment, DIP main grants, PCT, district councils etc.

"During the presentations Samantha referred to, some of the data could show double counting, will there be clear indicators in the PQQ?"

TW explained that some of the data was based upon provider performance data but the majority of data shown in the presentation is from the NTA NDTMS and show more accurate figures.

Question 10

Asked by Kath Talboys, Drugline

"In the East Lancashire Modernisation, the PQQ was quite firm around partnerships is there more flexibility in Central and does the lead organisation oversee the governance of partnership agencies"

TW explained that the legal responsibility was through the lead provider and the panel would be testing out all partnership arrangements.

Question 11

Asked by Kath Talboys, Drugline

“Could two smaller organisations join together?”

SS stated that if the lead provider decided to sub contract then this would be their choice, however, one organisation would need to be legally responsible so a voluntary partnership arrangement would be difficult to manage. Mike Sinnott (MS), Associate Director of Mental Health also added that all potential lead providers need to remember that they have to pass the red flag stages as if they do not pass these stages, they will go no further in the process.

Question 12

Asked by Anne Marie Sawdon, DISC

“As a potential lead organisation, can we partner with anyone who has gone through the PQQ stage?”

TW answered, Yes.

Question 13

Asked by Tim Woolley, Arch Initiatives

“Red Flags; Economy of Organisation – can we confirm what economy the DAAT/PCT are looking for?”

TW explained that he would ensure that there was an electronic version of the formula available to all in due course.

Question 14

Asked by Gary Oulds, ADS

“Do Sub-contractors have to have been through the PQQ stage?”

TW replied that the lead provider is the only one who needs to have been through the PQQ process.

Question 15

Asked by Dr John Richmond, Delphi

“What does IDTS include? Will it include CARATS etc?”

TW answered that it includes drug treatment services and is a national specification which has specific IDTS budgets which resources clinical activity in Preston, Garth, and Wymott. There are advanced discussions on-going about other provision such as CARAT's clarification which will be made available after PQQ stage and detailed in the service spec.

Question 16

Asked by Dr John Richmond, Delphi

“What elements of CARATS will go in?”

TW explained that clarification regarding this question would be available after the PQQ stage.

Question 17

Raised by Paul Townsley, CRI

“Can we have a specific list of partners who would be interested in entering into partnerships or can the DAAT host a networking day for interested parties?”

TW expressed that we would collate and circulate information details on all potential partners.

Question 18

Asked by Ann Rogers, Merseycare

“Will IDTS include Alcohol and when is it funded until?”

TW replied that the IDTS funding streams and other DAAT funding streams are annual and that we need to ensure that to continue to receive funding that we are meeting requirements around DIP and IDTS. The service model is a combined model for drug and alcohol treatment in both prisons and the community.

Question 19

Asked by Mike Ore, NHS Halton & St Helens

“Is there any reason for shared care disparity in Preston, as it is only 41%?”

Liz Jennings (LJ), Central Lancs Shared Care Manager explained that this was due to culture and GP’s being reluctant to work with substance misuse.

Question 20

Asked by Raymond Lee,

“What is not included in the Service Specification?”

TW explained that the Central Lancashire Specification for Community services will be very similar to the East Lancashire Specification with the addition of prison services.