

Appendix 2: Contract Award for Integrated All Age Mental Health Services in Medway – Minutes from Health and Adult Social Care Overview and Scrutiny Committee meeting of 20 August 2025.

Discussion:

The Chief of Staff from the Integrated Care Board (ICB) introduced the report which informed the Committee about a recent decision to award a new Integrated All Age Mental Health Services (IAAMHS) contract to Kent and Medway NHS and Social Care Partnership Trust (KMPT). The previous provider of the child and adolescent mental health services (CAMHS) had informed the ICB that they did not wish to continue to provide services in Kent and Medway beyond the end of the contract. The change provided an opportunity for there to be one provider for all age mental health services, enabling the system to improve transition between services and be more integrated and joined up for patients and their families.

The lead Members of the Children and Young People Overview and Scrutiny Committee had also been invited to attend the meeting. They raised concerns regarding the procurement process route used to direct award without going out to full tender, and the lack of experience in children's mental health services within KMPT.

The ICB emphasised that staff and services would be transferred over as is, so there would be no change in services and paediatric mental health specialists would remain, with no expectation that adult mental health services staff would have to start treating children. In addition, there was experience within KMPT's leadership team of children's mental health services. The ICB also explained that KMPT had been identified as the only provider to have the experience, infrastructure, clinical governance and estate in place to be able to provide an all age mental health service. They also emphasised that as opportunities for improvement were developed, the Committee would be involved and be part of that journey.

Members then raised further comments and questions, which included:

- **Waiting lists** – in response to how the decision would impact on waiting lists for CAMHS, the ICB informed the Committee that for general mental health services for children, this had dramatically reduced. However, for neurodevelopment pathway assessments, this remained a Kent and Medway and a national problem. Due diligence was on going to ensure safe and accurate waiting list information was transferred and the ICB remained confident that this would not have a detrimental impact on waiting times.
- **All-age service model** – in response to a question about how the all-age service would work in practice, KMPT explained that it was not unusual for mental health providers to provide all age mental health services but due to the specialisms involved, CAMHS would sit as its own separate clinical directorate and would not be subsumed within the wider adult mental health services. The ICB added that families had shared that they found transition between CAMHS and adult services to be duplicative and confusing, whereas an all-age single provider gave an opportunity to improve information sharing,

improve transition experiences and may reduce the number of patients escalating into crisis.

- **Relationship with the local authority** – in response to a question about how effective and strong the relationship between the ICB and the Council was, both officers and the ICB recognised there were some examples of strong and productive professional relationships, but this was not always consistent. There had been occasions when the joint commissioning team would find out about an issue post decision making therefore improvements to the relationship were needed.
- **Frustration** – Committee Members expressed their frustration at not being informed early enough about the decisions made and considered there to have been a lack of transparency. The decision not to go out to full tender concerned Members as there appeared to therefore not have been a full test of the market and the Committee considered that the actions taken had shown a disregard to the Committee.
- **Service change** – the ICB confirmed that services were transferring to the new contract as is, however, service change was anticipated during the life of the contract to reflect opportunities for improvement.
- **Milestones** – reference was made to the ICB needing to demonstrate to the Committee what the key milestones over the next six months would be to involve the Committee in development of the service.
- **Risks around staff** – concerns were raised of existing staff choosing to resign instead of moving over to KMPT under TUPE arrangements and thereby exposing a gap in service. In response, KMPT explained they were working hard to ensure a safe and smooth transition of services. Structures between KMPT and the current provider NELFT were similar which assisted in terms of settling and stabilising services. There was a great deal of consultation and engagement ongoing with staff, the predominant number of which lived in Kent. KMPT were closely monitoring the situation to enable them to be reactive to any risks around vacancies caused by staff wishing not to transfer to KMPT

Decision:

The Committee noted the update from the Kent and Medway Integrated Care Board, as set out at Appendix 1 to the report and decided that the proposals did constitute a substantial variation or development in the provision of health services in Medway as it had concerns around engagement not being robust enough and that the service would change during the lifetime of the contract.