SCRUTINY COORDINATING COMMITTEE

SUNDERLAND APMS PROCUREMENT

REPORT OF CHIEF OFFICER SUNDERLAND CCG

1. Purpose

The purpose of this report is to update the committee on the outcome of the procurement exercise undertaken by NHS Sunderland Clinical Commissioning Group (SCCG) for the patients registered at Encompass, Pennywell and Barmston GP Practices in Sunderland. The Committee last received an update report to the April 2016 meeting.

2. Background

- 2.1 The majority of primary medical service contracts held by GP practices in England and Wales are open-ended. There are however some newer contracts that are time-limited.
- 2.2 Encompass Healthcare, Pennywell Medical Centre and Barmston Medical Practice are GP practices which deliver essential, additional and enhanced services to a combined registered list of 13,407 patients (as at 01 April 2016) under an Alternative Provider Medical Services (APMS) contract. After a number of contract extensions the practice contracts were due to terminate on 31 March 2016. The Encompass Practice was originally contractually provided by Dr Liston and the 2 other practices were provided by IntraHealth Ltd.
- 2.3 A report was presented to the Primary Care Commissioning Committee of SCCG on 16 July 2015 to consider the options to secure continuity of primary medical services for patients of the three practices. The Committee decided to re-procure one APMS contract with three sites.

3. Outcome of Tender Process

- 3.1 The original tender exercise for the one contract was advertised from 4 January 2016 -12 February 2016. One bid was received which was out-with the tender value and therefore could not be assessed. The CCG subsequently reviewed the procurement strategy and members of SCCG's Committee met with NHS England colleagues to review informal and later formal feedback from those providers that had expressed an interest in tendering.
- 3.2 Following this meeting key changes were made to the procurement documentation and a revised tender notice was issued on 10 March 2016, and the closing date for submitting a tender was 13 April 2016, with the contract award date being 7 June 2016. The key changes were noted in the April report to the Scrutiny Committee.
- 3.3 Two bids were received in the second tender exercise; one was deemed to be non-compliant at the financial evaluation stage and therefore did not proceed to

the quality evaluation stage of the procurement exercise. The other bid was evaluated and scored over the required threshold for quality and financial elements. The criteria was weighted 95% on Quality and 5% on finance. (See attached App A re procurement questions). Note 'red flag' questions are where the provider must score more than 50% to be successful. The contract was therefore awarded to Sunderland GP Alliance Limited who will commence the contract on 1 October 2016.

3.4 A letter has been distributed to patients to inform them of the outcome of the tender exercise and key stakeholders will also receive communication (Appendix B – example letter to patients). The mobilisation phase of the tender exercise has now commenced; the incumbent and the new provider of services have met and meetings with the staff at each of the three practices are underway and a comprehensive mobilisation plan is in the process of being implemented.

4. Recommendations

4.1 The Scrutiny Committee is asked to note the update on the outcome of the procurement exercise undertaken by SCCG for the delivery of the Alternative Provider Medical Services contract in Sunderland, which will commence on 01 October 2016.

Glossary of Terms

CCG – Clinical Commissioning Group APMS – Alternative Provider Medical Services (APMS)

Contact Officers

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APPENDIX A: Procurement Questions

Procurement Question Weightings

looui	Red Flag Micro				Macro
	Section	Question Ref.	Question	Weighting %	Weighting %
Quality	Section 1 Clinical & Service Delivery	CSD01 - Accessibility	Red Flag	10	55
		CSD02 - Equity of		5	
		Service & Equality		3	
		CSD03 - Patient		4	
		Involvement &			
		Engagement			
		CSD04 - Partnership		4	
		Working		7	
		CSD05 – Clinical	Red Flag	Red Flag 15	
		Governance	rtea riag		
		CSD06 - Health		4	
		Promotion & Disease			
		Prevention			
		CSD07 - Medicines		4	
		Management			
		CSD08 - Referrals		4	
		CSD09 – Business		5	
		Continuity			
	Section 2 Performance Management	PF01- Performance		4	10
		PF02 - Continuous		3	
		Improvement			
		PF03 - Monitoring		3	
	Section 3 Workforce	WF01- Recruitment &		4	12
		Retention		7	
		WF02 -			
		Organisational	Red Flag	4	
		Structure			
		WF03 - Workforce			
		Supervision &		4	
		Training			
	Section 4 IM&T	IMT01 - IT Systems		2	4
		IMT02 - Information		2	
		Governance		_	
	Section 5 Mobilisation	MB01 - Mobilisation	Red Flag	10	10
	Sub-total for Quality				91
Presentation WF04 – Workforce 4				4	
Finance					5
1 IIIulioo					

Total

100

Section: Clinical & Service Delivery

CSD01: Accessibility

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders must describe how they will deliver the service to ensure it is accessible to patients at each site.

Response should include but not be limited to:

- Description of booking appointment system, including; face to face, telephone,
 e-mail, fax and options for on-line booking facilities
- Consultation methods offered to patients including telephone
- The number of GP and nurse appointments, per 1,000 registered patients per week offered including consultation times and what will be delivered from each site
- Compliance with service access requirements
- Processes for advising patients on services available to them; including Out of Hours and emergency provision

Word Count: 2000 words Evaluators: See Panel list

CSD02: Equity of Service & Equality

Bidders must describe how they will deliver the service which will address the needs of the local population taking into consideration the local varying demographics to ensure provision of a locally sensitive service.

Response should make reference to the following key areas:

- A consideration of the Equity of Access requirements as outlined in Part 1
 Schedule 2 of the Contract
- Compliance with the Public Sector Equality Duty Act 2010, describing your experience of working with a population of patients with diverse needs including sensitivities to age, gender, ethnicity, religion, sexuality and disability
- Elimination of unlawful discrimination, harassment, victimisation and other conduct prohibited by the Act;
- Advancing equality of opportunity between people who share a protected characteristic* and those who do not; and
- Fostering good relations between people who share a protected characteristic* and those who do not.
- Removing or minimising disadvantages suffered by people due to their protected characteristics*;
- Steps that should be taken to meet the needs of people with certain protected characteristics where these are different from the needs of other people;

• Encouraging people with certain protected characteristics* to participate in public life or in other activities where their participation is disproportionately low.

The following links provide additional information on the Public Sector Equality Duty Act 2010:

http://www.equalityhumanrights.com/advice-and-guidance/public-sector-equality-duty/introduction-to-the-equality-duty/

http://www.equalityhumanrights.com/uploaded_files/EqualityAct/PSED/essential_guide_update.doc

Word Count: 2000 words Evaluators: See Panel list

CSD03: Patient Involvement & Engagement

Bidders must describe the process of how they will engage and involve patients and carers in the development and delivery of this service.

Response should include but not be limited to:

- Identify key patient groups;
- Engagement with the local community to identify needs (including hard to reach groups);
- Undertaking continuous service user engagement;
- Implementing service development resulting from engagement and consultation exercises:
- Sharing information and decisions;
- Ensuring practice strategies dovetail with NHS England's strategy for patient engagement.

Word Count: 1000 words Evaluators: See Panel list

CSD04: Partnership Working

Bidders must describe how they will ensure effective and relevant partnership working with all stakeholders:

Response should include the following groups:

- Patients/service users;
- NHS Sunderland CCG;
- NHS England Cumbria and the North East;
- LMC;
- CQC;

- Local Practices;
- Third Sector Organisations;
- Other primary care providers;
- Local hospitals and community service providers.
- Locality Integrated Multi-Disciplinary Team supporting the transformation of Out of Hospital Care and the city wide Recovery at Home Service.
- Local GP Federation

Word Count: 1000 words Evaluators: See Panel list

CSD05: Clinical Governance

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders must describe how Clinical Governance is core to the service.

Response should include but not be limited to an explanation and evidence of:

- Management of clinical risk including treating patients at home and medical emergencies;
- Patient safety and staff safety (e.g. incident reporting, significant event reporting etc.);
- Reporting of adverse incidents;
- Management of patient complaints;
- System that facilitates learning from experience and action planning, including improvement of quality of care to patients;
- Safeguarding Adults/Children procedure;
- Implementation of evidence based guidelines;
- Implementation of patient safety alerts.

Word count: 2000 words Evaluators: See Panel list

CSD06: Health Promotion & Disease Prevention

Bidders must describe their strategy to deliver a service that focuses on health promotion and disease prevention.

Response should include but not be limited to an explanation of:

- Identification of key public health challenges within the locality
- Identification of at-risk patients for long term conditions

Word count: 1000 words Evaluators: See Panel list

CSD07: Medicines Management

Bidders must describe the systems and processes that they will have in place to ensure safe and effective prescribing and medicines management.

Response should include but not be limited to an explanation of:

- Monitoring of prescribing, including; accuracy, output and prescriber development needs
- Review of repeat prescriptions
- How the bidder will ensure systems and processes are compliant with legislation and national and local guidelines and best practice including reporting mechanisms for medication errors, safe and secure handling of medicines, controlled drugs legislative requirements

Word count: 1000 words Evaluators: See Panel list

CSD08: Referrals

Bidders must describe the systems and processes they will have in place to:

- Monitor referrals in respect of clinical appropriateness
- Identify and manage referrer training and development needs
- Monitor and manage attendances at local emergency and urgent care services
- Work in partnership with relevant stakeholders to reduce unnecessary admissions for patients with long-term conditions

Word count: 1000 words Evaluators: See Panel list

CSD09: Business Continuity

Bidders must describe their approach to disaster recovery and business continuity as a provider and part of the whole pathway. Bidders may evidence some of this with business continuity plans. Policies should **not** be submitted as supporting documents for this question.

Response should include as a minimum but not be limited to:

- Fire or theft;
- Severe weather;
- Staff shortage (including each staff group);
- Peaks in demand of service;
- Surge preparedness (peaks in service); and
- Major Incidents.
- Power failure

Word Count: 1000 words Evaluators: See Panel list

Section: Performance Management

PF01: Performance

Bidders must describe their approach to monitoring performance.

Response should include but not be limited to:

- Key performance indicators;
- Quality & Outcomes Framework;
- Indicators as stated in the Primary Care Web Tool;
- Directed Enhanced Services;
- Approach taken to determine and understand issues and indicated performance failure.

Word Count: 1000 words Evaluators: See Panel list

PF02: Continuous Improvement

Bidders must describe the mechanisms that they will use to ensure continuous service improvement

Response should include but not be limited to:

- Clinical audit plans;
- Plans to improve Quality & Outcomes Framework achievement;
- How they will evidence compliance with evidence-based guidelines (i.e. NICE);
- How they will improve access to services; and

 How they will improve performance in indicators as stated in Primary Care Web Tool.

Word Count: 1000 words Evaluators: See Panel list

PF03: Monitoring

Bidders must outline how they will prepare for quarterly and annual monitoring requirements.

Response should include but not be limited to:

- The mechanisms by which they will internally analyse performance to outline areas for improvement in order to meet the deadlines for submission of data to Commissioners;
- How they will gather information i.e. incidents, complaints and concerns, for discussion at contract meetings; and
- How they will feed back to Commissioners on lessons learned from incidents, complaints and concerns through the use of thematic analysis.

Word Count: 1000 words Evaluators: See Panel list

Section: Workforce

WF01: Recruitment & Retention

Bidders must outline their approach to recruitment and retention and sustainability of the workforce requirements for this service.

Response should include as a minimum but not be limited to:

- Recruitment strategy;
- Job descriptions including role, function, experience and qualification level required for each role;
- Induction process;
- Locums and agency staffing utilisation plans;
- Development of leadership capability/attributes;
- Monitoring of professional credibility of individuals and the service;
- Compliance with current legislation.

Word Count: 2000 words Evaluators: See Panel list

WF02: Organisational Structure

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders must outline their proposed full organisational structure for delivery of this service.

Response should include as a minimum but not be limited to:

- Organisation chart with clear lines of accountability and leadership;
- A schedule that details staffing levels at each site and ways in which clinics will operate at each site;
- Skill set profile including evidence that clinical roles meet GMC and NMC requirements;
- Planned working patterns to show staff complement during contract hours;
- Staff ratio to manage demand;
- Use of agency staff if applicable;
- Consideration of skills and competencies of the entire workforce;
- Clear rationale for the selected skill mix to be used for the service;
- Evidence of linking service delivery with the service requirements and staffing allocation.

Responses in this section will be cross referenced with the staffing model submitted in the FMT to ensure consistency.

Word Count: 2000 words plus attachments

Evaluators: See Panel list

WF03: Workforce Supervision & Training

Bidders must outline their approach to clinical and non-clinical supervision and training for delivery of this service.

Response should include but not be limited to:

- Demonstration of clear appropriate professional leadership;
- Continuous development/training and support requirements;
- Supervision training;
- · Staff appraisal;
- Supervision of locum/agency staffing.

Word Count: 1000 words Evaluators: See Panel list

WF04: Presentation section - Workforce

Bidders are to give a 15 minute presentation that will clearly identify how they propose to operate the delivery of services from a staff workforce perspective, including **but not limited to**:

- Can you describe how you are going to deliver the working pattern to ensure the needs of the service are met from 1 October 2016;
- Can you describe how the practice will manage patient demand, given the ratio of staff to patients from 1 October 2016;
- Can you describe the skill mix you are proposing to have in place and how you will deliver the proposed skill mix profile from 1October 2016;
- Identify potential strengths and weaknesses of workforce to deliver service and proposed solution if required

Further information will provided to bidders who have been successful at stage 3 in respect to dates, times, venue and attendance requirements

<u>Section IM&T [questions need to be reviewed in line with service requirements]</u> **IMT01 – IT Systems**

Bidders must identify the IT systems the provider will use to deliver and manage the service as part of their proposal (clinical and administrative). In addition bidders must describe how these systems will support management of Primary Care as detailed in the Service Specification.

Your response should include but not be limited to the details of:

- IT systems;
- Directory of Service and Capacity Management Services Integration;
- Receiving and processing referrals;
- Use of the NHS Number as the key identifier for patients:
- Appointment bookings/scheduling etc.;
- Clinical coding;
- System integration with SCR and PDS;
- Mobile GP access to clinical records for home visits;
- Onward referrals:
- Communication with GPs on the close of an episode; and
- Activity information

- System back-up and security
- Disaster recovery and business continuity plans
- Expected system availability
- Service level agreements to meet availability
- Desktop and laptop data loss prevention

IMT02: Information Governance

With reference to the tender documentation please describe your approach to Information Governance, confidentiality and data protection assurance. Response should include (but not be limited to) the details of:

- IG Toolkit score or level expected to achieve with plans and timescales to achieve:
 - Policies and procedures;
 - Strategic development;
 - Operational management:
 - Standards and good practice;
 - Statutory obligations;
 - Confidentiality and Data Protection Assurance;
 - Information Security;
 - Information Risk Management;
 - o Records Management; and
 - o Information Incident Management.

MBO1 - Mobilisation

RED FLAG QUESTION 50% MINIMUM SCORE REQUIRED ON THIS QUESTION

Bidders are to provide a suitable and appropriate mobilisation/implementation plan. The plan must detail the key tasks and milestones on a week by week basis (for premobilisation) the bidder will complete during and post mobilisation period to deliver the services in accordance with the contract.

The plan must set out tasks, deadlines and implementation responsibilities and be segmented into the work-streams, including:

- Planning /implementation and Governance arrangements across pathway;
- Workforce (including TUPE);
- Finance;
- IM&T:
- Facilities management arrangement for premises;
- Equipment;
- Communications and relationships; including how they will work with the current provider to ensure a smooth transition of services
- Stakeholder engagement;

- Patient and Public engagement;
- Risk management and contingencies;
- Process and service readiness tests;

• Outputs/outcomes monitoring.

Word Count: 1000 words, plus allowed attachments Evaluators: See Panel list