

**NHS COMMISSIONING BOARD (1)**

**AND**

**WEST MIDLANDS AMBULANCE (2)  
SERVICE UNIVERSITY NHS  
FOUNDATION TRUST**

**National Ambulance Resilience Unit (NARU)**

**NHS-Business Case Ref: BC-15535**

**CONTRACT VARIATION AGREEMENT**

**THIS VARIATION AGREEMENT** is made on

01 April 2023

**BETWEEN:**

- (1) **NHS Commissioning Board** (also referred to as NHS England) of Quarry House, Quarry Hill, Leeds, LS2 7UE ("**the Authority**"); and
- (2) **West Midlands Ambulance Service University NHS Foundation Trust** of Trust HQ, Millennium Point, Waterfront Business Park, Waterfront Way, Brierley Hill, West Midlands, DY5 1LX ("**the Supplier**")

Each a "**Party**" and together referred to as "**the Parties**".

**BACKGROUND:**

- (A) The Authority and the Supplier entered into a contract entitled National Ambulance Resilience Unit (NARU) on 01 April 2020 ("**the Contract**").
- (B) The Authority and the Supplier have mutually agreed to fund the recurring costs of specialist asset enhancements as part of the NHS Long Term Plan commitment to increase specialist ambulance capability to respond to terrorism (1.27).
- (C) The Authority will make payment to the Supplier as detailed below in (3) Costs.

**IT IS AGREED** as follows:

**1. Definitions and Interpretation**

- Capitalised words and phrases in this Variation Agreement shall have the meanings given to them in the Contract.
- The Contract, including any previous Variations, shall remain effective and unaltered except as amended by this Variation.

## 2. Contract Variation

- This contract variation is for funding for 2023/2024 to enable NARU and NHS Ambulance Services in England to continue provision of specialist assets and equipment and training in relation to the capability as part of the NHS Long Term Plan commitment to enhance ambulance service capability to respond to terrorism.
- The Supplier will monitor progress in each NHS Ambulance Service in England against this commitment and report actual spend and outcomes to the Authority.
- The Statement of Requirements for the provision of NARU have been updated for 2023/24 and are accepted as part of this contract variation. NARU Statement of Requirements 2023-24 is included at Appendix 1.

## 3. Costs

- The Supplier shall be paid **£9,037,825** for 2023/2024 to fund central provisions and distribute to the NHS Ambulance Services in England for their respective implementation.
- The existing pass-through monies (£4,194,467) identified in the Contract will be combined with the enhancement monies as shown in the table below
- Any underspend will be returned to the Authority and used to support future developments of the NHS Long Term Plan commitment in subsequent financial years.

<b>Interoperable Capability</b>	<b>Pass-through funding (£)</b>
Mass Casualty Vehicles	819,922
CBRN – training and audit for Acute Trusts	783,048
SORT (MTA and CBRN)	11,629,322
<b>Total</b>	<b>13,232,292</b>

**IN WITNESS OF WHICH the Parties have signed this Extension Agreement on the date(s) shown below:**

**Signed by an authorised signatory to sign for and on behalf of the Supplier**

DocuSigned by:  
  


Full Name: 

Job Title/Role: 

Date Signed: 06/03/23

**Signed by an authorised signatory to sign for and on behalf of the Authority**

DocuSigned by:  
  


Full Name: 

Job Title/Role: 

Date Signed: 08/03/23

## **Appendix 1 NARU Statement of Requirements 2023-24**



# National Ambulance Resilience Unit (NARU)

## Statement of Requirements 2023-2024

## **1. Population Needs**

### **1.1 National/local context and evidence base**

The National Ambulance Resilience Unit's (NARU) main aim is to support the emergency preparedness, resilience and response (EPRR) objectives of NHS England, as required by the NHS Act 2006 and the Civil Contingencies Act 2004 (CCA) and outlined in the NHS Emergency Preparedness, Resilience and Response Framework, putting patients and the safety of staff at the forefront of any response to incidents.

NARU will work with NHS Ambulance Services, and other NHS funded organisations, in England to help strengthen national resilience and improve patient outcomes in a variety of challenging environments.

Service provision is maintained, in line with continuous improvement and efficiencies in the delivery of the service, and the flexibility to respond to changing demands and priorities.

The current price for the service includes £13,232,292 central funding provided to NHS ambulance services (pass-through funding) for the provision of specialist capabilities for EPRR and counterterrorism.

NARU is an essential service for the delivery of EPRR policy in NHS ambulance service providers in England. It contributes to and supports the UK's civil resilience and counter-terrorism (CONTEST) strategies and the Department of Health and

Social Care’s (DHSC) commitments under the UK’s National Security Strategy and the National Security Council.

NARU works on behalf of NHS England to provide a coordinated approach to EPRR and specialist capabilities across NHS ambulance services in England. NARU works with English NHS ambulance services to support the development of appropriately trained, equipped and prepared ambulance responders to deal with hazardous or difficult situations, particularly mass casualty incidents, that represent a significant risk to health. The following are the interoperable capabilities currently delivered:

- Urban Search and Rescue (USAR)
- Safe Working at Heights (SWAH)
- Inland Water Operations (IWO)
- Marauding Terrorist Attack (MTA)
- Mass Casualty Incidents, including mass casualty vehicles (MCV)
- Chemical, Biological, Radiological and Nuclear (CBRN) and decontamination
- Command and Control
- High Consequence Infectious Disease (HCID) transfers

Teams that deliver the interoperable capabilities are:

- Hazardous Area Response Teams (HART)
- Specialist Operations Response Teams (SORT)

SORT comprises CBRN and MTA trained staff

**2. Outcomes**

**2.1 NHS Outcomes Framework Domains & Indicators**



<b>Domain 1</b>	<b>Preventing people from dying prematurely</b>	<b>X</b>
<b>Domain 2</b>	<b>Enhancing quality of life for people with long-term conditions</b>	
<b>Domain 3</b>	<b>Helping people to recover from episodes of ill-health or following injury</b>	<b>X</b>
<b>Domain 4</b>	<b>Ensuring people have a positive experience of care</b>	
<b>Domain 5</b>	<b>Treating and caring for people in safe environment and protecting them from avoidable harm</b>	<b>X</b>

## **2.2 Defined outcomes**

Staff trained and equipped to common standards will be available across England in NHS Ambulance Services to respond to major, complex, high risk and disruptive events; both regionally and nationally. There will be assurance of the state of readiness of the capabilities and national coordination of capabilities in response to incidents, where required.

## **3. Scope**

### **3.1 Aims and objectives of service**

#### **Strategic Aim**

To support NHS England's Emergency Preparedness, Resilience and Response (EPRR) objectives, in line with the NHS Act 2006, Civil Contingencies Act 2004 and NHS EPRR Framework and guidance, to maintain an effective and consistent response to high-risk or complex emergencies, improving clinical outcomes, with patients and staff at the forefront of any response.

## Objectives

- To maintain the national interoperable capabilities ensuring that they remain safe and operationally effective
- Services provided by NARU must remain compliant and commensurate with the relevant regulatory and legislative standards
- To provide an assurance function to the interoperable capabilities, working in conjunction with and supported by NHS England and the Care Quality Commission (CQC)
- To support an effective response to major, complex and disruptive events to NHS Ambulance Services in England through maintaining and enhancing the interoperable capabilities and providing a national coordination function
- To develop and deliver provision of high-quality training in relation to the interoperable capabilities
- To develop and deliver command training programmes for the three levels of command and provide access to the training materials to NHS Ambulance Services (and the wider NHS) on a train the trainer basis
- To develop and maintain, in conjunction with specialist advisors and clinicians from across the NHS, the capability for NHS ambulance services and the wider NHS to respond to High Consequence Infectious Diseases (HCID)
- To coordinate and manage the powered respirator protective suits (PRPS) and associated equipment across the NHS and provide support to those organisations who hold the capability
- To provide and maintain an infrastructure within the NARU host organisation that supports all aspects of the service provision. This is to include support departments to the contract (including, but not limited to fleet, finance, information technology)
- To provide a procurement and contracting process that underpins the interoperable capabilities programme and enables NHS Ambulance Services (and the wider NHS where applicable) to purchase from agreed buying frameworks. This is to include, but not restricted to,
  - The HART fleet and PPE and associated equipment
  - The CBRN capability and associated equipment
  - The MTA associated equipment
  - The Mass Casualty Vehicles and equipment
  - The HCID equipment and PPE

- To ensure that all NARU activity remains patient focussed and promotes the best patient outcomes
- To provide a well governed and patient focused service that offers value for money

### **3.2 Service description**

The objectives and any planned developmental work in year will be subject to an agreed work plan and a delivery cost plan prior to the year commencement. This will detail the operational activities to be undertaken in year.

It is recognised that new threats may emerge at any time and new capabilities to mitigate against those threats may need to be developed by NARU and that these may require change to the work plan at short notice. The provider must ensure that the service is flexible and responsive to the changing demands.

The provider must demonstrate value for money in the delivery of services. Additional services may be agreed with NHS England but must not be at the detriment of the core requirements of the provision.

The service will be managed and led by a 'Head of NARU' (one whole time equivalent (1WTE)).

#### **Key Deliverables and Workstreams**

The work plan will contain the following:

Develop and maintain national competences for interoperable capabilities and NHS Ambulance Service commanders in accordance with established legal and professional standards

Design and produce a range of national standard training courses, education modules and learning aids, that can be delivered locally, including the following delivery mechanisms:

- distance learning
- eLearning
- train the trainer

The national standard training courses will include, but not limited to:

- HART
- CBRN, including PRPS and decontamination
- MTA
- Commander training
- High Consequence Infectious Disease (HCID)

Conduct learning needs analysis for interoperable capabilities and commanders

Design and deliver bespoke modules and training aids for the wider NHS, as required by NHS England

Develop and deliver awareness training for wider staff and multi-agency partners, as directed.

Directly deliver national training courses for the interoperable capabilities, maintain course currency and coordinate local ongoing training for these capabilities, to include:

- HART initial and refresher courses
- MTA
- EDBA Instructor
- Train the trainer, as appropriate
- Commander training
- HCID

Maintain and develop:

- Course evaluations and reviews
- Facilities and infrastructure enabling course delivery

Monitor and quality assure local delivery of national courses

Support local and national education or exercise programmes as required by NHS England

Provide subject matter experts and umpires for planning and delivery of exercises, as agreed with NHS England

Enhance the competency of staff delivering the interoperable capabilities (including commanders) to achieve the required obligations set out in the NHS EPRR Framework, the NHS Core Standards for EPRR and national doctrine

Work with multi-agency partners to ensure coordinated operating principles

Develop specific learner guides for the interoperable capabilities

Maintain the National Safe System of Work for Interoperable Capabilities

For all the interoperable capabilities develop/maintain/review:

- Capability matrices, including interdependency mapping
- National Standard Operating Procedures (SOPs)
- National generic operational risk assessments
- National training information sheets
- National equipment data sheets

Manage and maintain a national change management and safety alerting process and system for the interoperable capabilities and support NHS Ambulance Services to mitigate safety risks

Produce national contract standards and guidance materials for the interoperable capabilities

Annual review of contract standards

Produce, publish, review and update guidance for NHS Ambulance Services in England in relation to EPRR and the interoperable capabilities

Periodically NHS England may ask NARU to provide policy advice on enhancements or changes required in line with the National Security Risk Assessment, intelligence or identified need

Support inspections and regulatory assurance of the interoperable capabilities and contract standards, and consolidation of inspection findings, as required

Provide SME support to NHS England and local commissioners in relation to the interoperable capabilities and to support any investigations, inquests or inquiries as required by NHS England

Engage with operational end users and managers in NHS ambulance services to ensure national provisions remain effective, including the facilitation of meetings for local lead managers of the capabilities and expert practitioners

As directed by NHS England, ensure the outcomes of Public Inquires and national and local reviews are incorporated into the NARU programme of activities

Monitor and engage with national and local reviews to coordinate any appropriate actions, as directed

Provide the national coordination of interoperable capabilities and NHS ambulance service mutual aid in response to national emergencies, especially during mass casualty and complex major incidents, including the short notice mobilisation of interoperable capabilities and HART teams

Provision of 24/7 on call function to support NHS England and NHS Ambulance Services. The support includes specialist advice on the national interoperable capabilities and coordination of national ambulance mutual aid. The on call function must provide an initial response within fifteen minutes of being contacted.

Develop standards for NHS Ambulance Service Tactical Advisers

Develop equipment specifications, evaluation, operating manuals and service and maintenance requirements and ensure appropriate access to national buying frameworks

Ensure all suppliers have suitable and sufficient business continuity plans and that services provided are resilient and robust.

Ensure value for money procurement and ongoing costs of all appropriate national assets. To include the following:

- Prime Mover and All-Terrain Vehicle
- Decontamination Unit
- HART operating equipment
- Incident Ground Technology
- HART Vehicles
- Mass Casualty Vehicles
- Other as required

Ensure policies and processes are in place to protect the security of NHS assets and the protection of critical infrastructure, in relation to the interoperable capabilities and NHS Ambulance Services



Ensure all NARU service deliverables are reviewed and updated following disruptive challenges and maintain appropriate business continuity arrangements

Management of the NHS national powered respirator protective suit (PRPS) programme for the NHS through the provision of a coordinator, maintenance of the national tactical reserve stock and the logistics capability for immediate supply from the reserve

Administration of specialist programmes, as required

Service and maintain, as required:

- National specialist equipment
- National specialist personal protective equipment (PPE), including PRPS reserve
- National specialist vehicles

Ensure that the interoperable capabilities provide an evidenced based pre-hospital clinical response

Ensure minimum levels of clinical skills are standardised across practitioners delivering the interoperable capabilities

Ensuring psychosocial risk assessments and appropriate training and support services are available to safeguard staff undertaking the interoperable capabilities

In conjunction with the NHS England Clinical Reference Group (CRG), coordinate the development of any new pre-hospital clinical interventions in respect of major incidents and the interoperable capabilities

Provide value for money through efficient management of NARU financial resources maintaining compliance with the host NHS Ambulance Service's Standing Financial Instructions

Administrate funds provided under the NARU contract that are to be 'passed through' to NHS Ambulance Services in England for the delivery of the interoperable capabilities and provide assurance that the funding is used for the intended purpose

Provision of policy advice and subject matter expertise relating to the NHS Ambulance capabilities. Undertake legal and regulatory research projects, as required, to maintain and develop the interoperable capabilities

In conjunction with NHS England, horizon-scan for potential operational requirements for EPRR capabilities and future policy development

Develop business cases for capability enhancements as required by NHS England and the National Planning Assumptions

Support the development and enhancement of ambulance provisions within the NHS England EPRR Framework

Ensure effective engagement with stakeholders

Maintain organisational learning, at the national level, for NHS Ambulance Services in England in relation to EPRR matters

Work closely with local NHS Ambulance Service EPRR leads and Heads of Service to provide appropriate support and consultation of future requirements

Support the overall NHS EPRR agenda and ensure input into the wider health EPRR programmes, as required

#### **Desirable Requirements**

Undertake or commission additional research and development programmes to maintain safe and effective interoperable capabilities. Requirements and funding to be agreed through the annual business planning process

Undertake legal and regulatory research in relation to the Duty of Care of NHS Ambulance Services in England and the interoperable capabilities. Requirements and funding to be agreed through the annual business planning process

National coordination of NHS Ambulance Service Tactical Advisers

Collaboration and coordination with EPRR and specialist capabilities provided in the devolved administrations, as directed by NHS England

Where required by NHS England support the Joint Overseas Protect and Prepare programme as part of the CONTEST strategy

Support delivery of multi-agency training, as specified within the work programme

### **3.3 Population covered**

The service will be provided for the resident population of England.

NARU will support all NHS Ambulance Services in England ensuring that they work together in a coordinated way to provide a safe and reliable response to major, complex and potentially protracted incidents as one overall unit. NARU will also support the public, patients and ambulance staff of England, as required within their operational remit.

### **3.4 Any acceptance and exclusion criteria and thresholds**

Support to NHS Ambulance Services and providers of other NHS funded services in the devolved administrations (Scotland, Wales and Northern Ireland) are excluded from this service.

The NARU service does not cover people who are normally resident in England when they are in other countries.

The provider must have agreement from NHS England prior to sub-contracting any aspect of the service provision

### **3.5 Interdependence with other services/providers**

The provider will be expected to work alongside a number of other services including, but not limited to:

#### **NHS Ambulance Services in England**

NARU will support the delivery of the national HART capability across the fifteen established HART units.

### **3.6 Constraints and Dependencies**

The supplier must have systems in place, that are compatible and interoperable with other information technology systems, including:

- ResilienceDirect
- Email services, that must meet Government Digital Service requirements for secure email (<https://www.gov.uk/guidance/securing-government-email>) and NHS Digital DCB1596: Secure email
- The ability to manage and share information and documents with NHS Ambulance Services
- The provision of 'real time' monitoring of resources across the interoperable capabilities, with the ability to log exception reports
- The provision of an incident and lessons identified database
- Notification mechanism for important information

All electronic systems must include the following principles and characteristics:

- Flexible, intuitive interfaces appropriate to the varying capabilities and needs of users
- Scalable to allow for growth
- Extensible to accommodate changing needs
- Secure to prevent unauthorised access and changes to data. Server must be located in UK
- Resilient to ensure availability
- Permission based structure for control at various levels

Relevant staff must have in depth current knowledge of ambulance operations, the interoperable capabilities and relevant EPRR policies, procedures and doctrine to provide the specialist advice and undertake the work programme. They must be credible and competent (Skills for Justice civil contingencies national occupational standards and Skills for Health EPRR related national occupational standards). This would include, but not limited to, all on call staff. Roles with specific requirements will be agreed with NHS England once the provider's organisational structure has been finalised.

#### **4. Applicable Service Standards**

##### **4.1 Applicable national standards (e.g. NICE)**

NHS Emergency Preparedness, Resilience and Response Framework

##### **4.2 Applicable standards set out in Guidance and/or issued by a competent body (e.g. Royal Colleges)**

## Joint Emergency Services Interoperability Principles (JESIP)

### **4.3 Applicable local standards**

NHS England will ensure that appropriate governance and accountability mechanisms are in place to ensure best value from combined resources and to support service improvement.

### **4.4 Contract Management**

The service provider will attend contract meetings arranged by NHS England. The contract meetings will be attended by at least the Head of NARU along with other attendees, as required, for specialist knowledge.

A nominated Business Contract Manager, supported by a commercial contract manager, will be appointed.

A NARU Steering Group will be established to determine priorities, set direction, agree business cases and funding, annual business plan approval and in year additions/requirements will include representation from:

- NHS England, including the Business Contract Owner
- NARU
- Host NHS Ambulance Service
- NHS Ambulance Service not involved in the provision of the contract
- Department of Health and Social Care

Meetings:

- NARU steering group meeting – quarterly
- Contract monitoring meeting – monthly

Reporting information:

- Contract monitoring meeting – Data returns as per KPI's.
- Work plan progress
- Finance and budget
- Risk register
- Asset register update (biannually)

Written reports are to be provided five working days in advance of the meeting or as stated in the KPI's.

All relevant staff involved in the performance of the contract will have National Security Vetting to the appropriate level undertaken through NHS England arrangements, this will include the transfer of any existing security vetting. NHS England will advise on the requirements for security vetting for specific roles as part of the detailed work plan.

The provider will work with NHS England communications teams. All publicly available documents will be subject to NHS England publications processes.

5. Applicable quality requirements and CQUIN goals			
5.1 Applicable Quality Requirements			
Performance Indicator	Indicator Measurement	Description/frequency	Target
KPI 1	The supplier to ensure that all	As required	100%



Incident reporting	incidents escalated to NARU on call are reported to the NHS England National Duty Officer within 30 minutes of receipt		
KPI 1.1 Incident Reporting	<p>Safety notifications received are reviewed within 2 hours of receipt</p> <p>Immediate action required – national safety notification issued within 1 hour of review</p> <p>All other reports reviewed the next working day and appropriate action taken</p> <p>Where national interoperability is compromised the NHS England National Duty Officer is notified within 30 minutes.</p>	<p>Monthly report</p> <p>Update on safety alerts received and action taken within timeframes</p>	98% compliance with time limits
KPI 2 Service availability	To support an effective response to major, complex and disruptive events to NHS Ambulance Services in England -	<p>The provider must operate a 24/7 on call rota</p> <p>A copy of the rota must be made available to the</p>	100%

	service provision must be maintained, in line with continuous improvement and efficiencies in the delivery of the service, and the flexibility to respond to changing demands and priorities	<p>BCM 6 months in advance under KPI 4</p> <p>Changes to the rota to be notified as they occur</p> <p>Access to the live rota on Proclus will be considered as compliance with this KPI</p>	
KPI 2.1  Service availability	Routine on call communications test	NHS England will carry out periodic on call testing. The provider will be expected to respond within 15 minutes.	100%
KPI 3  Attendance at contract meetings	The supplier will attend monthly contract meetings arranged by NHS England. The contract meetings will be attended by at least the Head of NARU along with other attendees as required for specialist knowledge	The provider can send a nominated suitably qualified representative if the named officer is unable to attend the monthly meeting. Meetings can only be cancelled/rescheduled with the agreement of the business contract manager	100% attendance
KPI 4  Reporting	Written reports are to be provided in advance of the contract meeting	Electronic reports. Monthly – 5 working days in advance of the contract meeting	100%

	covering the following areas for the month: Work plan progress, Finance and budget, Risk register		
KPI 4.1 Reporting	Submit a full asset register update	Submission every 6 months	100%
KPI 5 Availability of courses	Number of spaces available per course compared to the number of attendees per course. (I.e. five available spaces with only three attendees in that period).	Supplier to issue a report (including the course title, date/duration in terms of days/hours, number of available spaces & the number of attendees). In addition to this the Authority may also carry out spot checks.  To be submitted with KPI 4	Quarterly
KPI 6 Student Feedback	% of completed quality assurance surveys at the end of each course.  Report on key themes and actions taken	Quarterly	N/A
KPI 7 Complaints	Number of complaints received  % formal and informal complaints	Monthly report check (electronic submission or scheduled visit)	95%

	satisfactorily resolved		
KPI 8 National Procurement	Develop equipment specifications, evaluation, operating manuals and service and maintenance requirements and ensure appropriate access to national buying frameworks	Provide detailed business case for replacement/upgrade programmes, with monthly updates on national procurement projects (i.e., MCV project, HART fleet replacement programme, IGT).	100%
KPI 9 National PRPS Stock Management	Management of the national CBRN PPE for the NHS, through the provision of a coordinator, maintenance of the national tactical reserve stock and the logistics capability for immediate supply from the reserve.	Provide quarterly reports detailing the number of CBRN PPE in stock, service and maintenance schedules, suit expiry date, and forecast replacement schedules.	100%

## 5.2 Applicable CQUIN goals

Not applicable

## 5.3 Sustainable Development Requirements

NHS England believes in health and high-quality care for all, now and for future generations. This means that the way we operate today must meet the needs of the present, without compromising the needs of future generations.

The service must maintain a sustainable development management plan, in line with the NHS Standard Contract. In particular, regard must be made to mitigation of air pollution, including through business travel and energy use, and waste reduction. All frameworks, procurement and products sourced through NARU must undergo a robust due diligence process with respect to ethical and labour issues in the supply chain.

#### **6. Location of Provider Premises**

**The Provider's Premises are located at:**

NARU Education Centre

Defence CBRN Centre

Winterbourne Gunner

Wiltshire

SP4 0ES

Education and training will be delivered from Winterbourne Gunner for at least the first year of the contract. Consideration will be made between the provider and NHS England to the future location for the delivery of education and training.

The other services can be delivered from any suitable location within England. Unless otherwise agreed with NHS England the provider will remain at existing premises. The provider will inform NHS England of all locations used for the delivery of services.

Current premises for additional office accommodation are at:

Police National CBRN Centre

College of Policing

Leamington Road

Ryton on Dunsmore

Coventry

CV8 3EN

Travel throughout England will be required, frequency and locations will vary.

There may be occasional overseas travel required.

## **7. Contract**

The contract term is three (3) years with an option to extend for a further two periods of one (1) year, subject to performance on contract deliverables. The maximum contract period shall not exceed 31 March 2025.

Payment will be made quarterly against set deliverables. Provision of pass-through monies for prompt distribution to NHS ambulance service providers will be made quarterly based on spend during the previous quarter to minimise underspend. The provider must operate open-book accounting allowing NHS England to view the full NARU accounts at any time requested. NHS England will decide how any surplus/savings made by the provider will be used, such as whether it is credited to NHS England or used to develop additional requirements.

NARU is accounted for as a NHS England hosted service on a net accounting basis as outlined in ALB Guidance Annex 5. The host acts as an agent on behalf of NHS England and no transaction is recorded with the host unless it is a payment retained by the host as a participant in NARU workstreams. NARU funding is solely for the delivery of the work programme agreed with NHS England and cannot be used for any other purpose. A facilitation fee is payable for the services provided by the host organisation. Any surplus in year may be recovered by NHS England.