Request for Information

*Instructions and Guidance*

*NHS CERVICAL SCREENING – SELF-SAMPLING IN SERVICE EVALUATION*

*Ref:* C202278

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Dear Provider(s)

This Request for Information (RFI) process is being undertaken to engage with the market to inform the further development of draft proposals for future NHS Cervical Screening- self sampling In Service Evaluation.

The objective of the RFI is to:

* Understand market Capability and Capacity to deliver the service.
* Understand the preferred service model for delivering the service.
* Understand if the proposed service model is viable.
* Understand the preferred / most viable contract length.
* Understand if there are any financial risks with the delivery of the service.
* Understand the mobilisation requirements of the service.
* Understand any barriers to bidding and whole service risk and
* Understand the social value deliverables of the service.

Whereas this RFI has been prepared in good faith by NHS England it should not be assumed that the information in this RFI has been verified for absolute accuracy and completeness by NHS England and/or any advisor(s) to NHS England.

Expressions of interest to meet with the contracting authority to further explore responses to the Request for Information is not required at this stage, however maybe required at a later stage. Please indicate on Question 24 of Appendix A if you would be happy to participate in the supplier meetings should the contracting authority wish to do so. Supplier meetings will be allocated on a first come first served basis via Atamis. All written responses will be considered regardless of whether interested parties wish to participate or are invited to participate in meetings.

NHS England and their respective officers, directors, employees, agents, and affiliates do not make and will not make at any time, in connection with this service, any representation or warranty, express or implied as to the accuracy or completeness of this RFI or any such summaries.

In providing this RFI, the NHS England does not undertake any obligation to provide the recipient with access to any additional information or to update the RFI or correct any inaccuracies in the RFI, which become known to it. Nothing in the RFI or accompanying documentation should be relied upon as a promise or a representation as to the NHS England’s ultimate decisions in relation to the next stage, which will depend, at least in part, on the outcome of the discussions during this RFI process.

NHS England will not reimburse any expenses incurred by interested parties in preparing their responses to this RFI including attendance at any meetings. NHS England reserves the right to discontinue the process at any time and will not accept any liability towards interested parties should it be required to do so.

Completed RFI’s must be submitted by no later than 12 noon on Monday 25th September 2023. Any submissions received after this specified deadline may not be considered in the market engagement process undertaken through the RFI process.

Yours faithfully

**Kaysha Maynard**

**Procurement Manager**

**Commercial Directorate**

**NHS England**

1 **THE RFI PROCESS**

1.1 The RFI process is being undertaken to allow the early market testing for NHS Cervical Screening- self sampling In Service Evaluation.

1.2 The documentation is available to all interested parties who have registered an interest in the service via the e-Tendering portal following the advertisement of a Prior Information Notice/RFI on Contracts Finder and Find a Tender (FTS).

1.3 Accompanying this document, the following attachments are available to interested parties to further inform the submission of the respective RFI: -

* Appendix A - RFI Response Document (Please note that this document needs to be completed and returned via the Atamis system).
* Appendix B – Service background information document.

1.4 These documents are provided to assist potential providers in the completion of the RFI submission, however, please note that this information is indicative only and may not reflect the data used in any forthcoming procurement process if applicable. Interested parties are required to complete Appendix A – RFI Response Document and return via Atamis.

1.5 Expressions of interest to meet with the contracting authority to further explore responses to the Request for Information is not required at this stage, however may be required at later stages. Please indicate on Question 24 of Appendix A if you would be happy to participate in the supplier meetings should the contracting authority wish to do so. Supplier meetings will be allocated on a first come first served basis via Atamis. All written responses will be considered regardless of whether interested parties wish to participate or are invited to participate in meetings.

 **2 SCOPE OF THE SERVICE**

2.1 The service requirements are outlined in Appendix B – Background Information. Please note that this is a summary of the current service model and proposed ISE model and is subject to change based on feedback including that from the RFI process.

## 3 VISION

3.1 The NHS Long Term Plan outlines a commitment to detecting more people at risk of developing cancer and facilitating their treatment to prevent cancer.

3.2 The Aim of the NHS Cervical Screening Programme (NHS CSP) is to reduce the incidence of and mortality from cervical cancer through a quality assured, population-based screening programme for women and people with a cervix aged 24.5 to 64. Up until December 2019, cervical screening was based on cytology, however, a national programme of primary HPV screening was [fully implemented in England in December 2019](https://phescreening.blog.gov.uk/2020/01/23/significant-landmark-as-primary-hpv-screening-is-offered-across-england/)

3.3 Primary HPV screening is when the first test carried out on a sample looks for high-risk strains of the human papillomavirus (HPV). If HPV is detected a cytology test is used as a triage, to check for any abnormal cells.

3.4 The current model involves screening laboratories supplying sample taking organisations with sample pots. Samples are taken in primary care and forwarded to regional screening laboratories for HPV testing. Those testing positive for HPV have cytology performed. Individuals referred to colposcopy for further examination/treatment are referred to their local colposcopy clinic, usually located at the nearest NHS Trust, through a process of direct referral undertaken by the laboratory. Biopsies taken at colposcopy are usually examined at the local NHS Trust histopathology service.

3.5 The Self Sampling Model In Service Evaluation (ISE) (**purpose of the RFI**) provides an opportunity to change the method of sample collection and allow people to self-collect a vaginal/urine sample at home via a self-sampling device. Self-sampling offers opportunities to engage eligible women and people with a cervix in the programme, reduce inequalities, increase participation, and continue to reduce the incidence of cervical cancers. The UK National Screening Committee has requested an in-service evaluation (ISE) is undertaken. The English NHS Cervical Screening Programme will be responsible for implementing the ISE using HPV self-sampling as a primary screening option for eligible people. The ISE will explore several issues including:

* the effect on uptake
* sensitivity for high grade cervical intraepithelial neoplasia (CIN2+)
* rate of uptake in under screened individuals
* rate of switching from clinician to self-sampling
* slightly reduced sensitivity of self-sampling against adherence to a follow up triage test that requires a clinician sample to be taken

3.6 The ISE will be an ethically approved research study nested in the English NHS Cervical Screening Programme. Participants will be recruited from the eligible screening population, potentially across the whole of England. More than one type of self-sampling device may be included in the ISE. It is anticipated that the ISE will commence in Autumn 2024.

3.7 The provider of the self-sampling service model will be responsible for:

* self-sampling kit design (in line with NHS CSP requirements)
* kit assembly (including printing of supplementary contents and labelling)
* packaging and the accompanying kit instructions/letter
* distribution to participants opting for a self-sample, through interface/download from Cervical Screening Administration Service or ISE portal/app
* participant prompt/reminders
* provision of addressed envelope/packaging for onward postage of completed kit to the laboratory
* helpline for advice/replacement kits

# 4 SUBMISSION REQUIREMENTS

4.1 This document is **not** an Invitation to Tender (ITT), nor does it form any part of a procurement process. It is a Request for Information (RFI) based on the draft service requirements provided with this document.

4.2 The RFI Response Document should be submitted by no later than 12:00 Noon on Monday 25th September 2023

4.3 Interested parties’ responses do not constitute firm offers capable of acceptance. Instead, their responses will be construed as indicative only.

4.4 Unless otherwise agreed, NHS England shall not be obliged to return any materials submitted by interested parties before, during or after any procurement process.

4.5 Any information provided as part of this RFI may be used by the NHS England to inform future market analysis activity.

4.6 NHS England recognises that with a new service model there is a clear need to test with interested parties that outline requirements are not deficient to any material degree and that the content as to outcomes, as designated, are deliverable and affordable. To understand and appreciate these issues, it is essential that NHS England seek a fuller understanding from interested parties to enable requirements to be fully reflective of issues and concerns, which are relevant, and to adopt these, where appropriate in the final service model.

4.7 In addition, there is an option to allow interested parties to submit their individual caveats in relation to any section of the proposed service model where they may identify outcomes that they may not be able to provide and/or offer alternative suggestions. It should be noted by interested parties that in making these suggestions, the areas where this information may arise should be substantive in the context of delivering service model outcomes.