

London Region APMS GP Contracts

22nd March 2019

Agenda T7



13:30 – 13:35	Introductions
13:35 – 13:45	Overview of London APMS Programme
13:45 – 15:15	Overview of each Contract within T7 Procurement Scheme
15:15 - 15:30	Q&A
15:30 – 15:45	Break
15:45 - 16:15	Contract length discussions
16:15 – 17:00	Bidder Education & Training Module
17:00	Close

Introductions

Ben Farrelly
Regional Head of Procurement

- The programme began in 2013, with the aim of:
 - Raising quality standards;
 - Reducing costs; and
 - Promoting consistency and equity across London.
- It did this by
 - Centralising and standardising the commissioning process with common tools;
 - Centralising and standardising the procurement process; and
 - Using a standard London contract with standard Service Specification, standard KPIs, standard monitoring and management, and a standard Price.

- Under the auspices of London's PMS review programme, London CCGs have committed to 'equalise' the PMS offer across all contract forms i.e. GMS, PMS, APMS. As a result:
 - Each CCG is either offering its own bespoke APMS contract, in line with its equalisation commissioning arrangements or is offering the London APMS contract, with a view to moving to local equalisation at a later stage.
 - The price of each contract reflects the arrangements above - although all retain the £5pwp APMS Risk Premium
 - Management of the APMS programme has been devolved to STP programme leads, in recognition that there is no longer one contract specification form.

- Proposed investment in primary care through the 5 year framework for GP reform as part of the NHS Long Term Plan will apply to APMS contracts in the same way as GMS and PMS.
- In particular, all APMS contractors will be expected to sign up to the new Primary Care Networks DES, ensuring these contracts are subject to the same responsibilities and opportunities as other local providers.
 - £1.90 will be removed from the Standard London APMS Mandatory Terms & Services Price of £12.57 to reduce it to £10.67
 - Saturday morning opening requirement of the Standard London APMS contract will be removed

- NE, NW, NC & SE London STPs are working together to procure their APMS contracts, utilising consistent procurement processes across the Tranche 7 programme.
- Primary Care Commissioning Committees (PCCCs) were asked to determine commissioning intentions for GP contracts that were due to expire before the end of the contract year 2019/20, based upon the strategic review presented by commissioners, which took into account CCG and STP strategic plans; what is legally possible for each contract; and the economic viability of any proposed procurement.
- Where the decision was to re-procure, the contracts fall under the APMS T7 Procurement Programme.

Surgery	CCG	STP
Heston Great West Practice	Hounslow	NWL
Earls Court Health & Wellbeing Centre	West London	NWL
Waterside Medical Centre	Ealing	NWL
Burstled Wood Surgery	Bexley	SEL
Queens Road Practice	Southwark	SEL
Silverlock Medical Centre	Southwark	SEL
Cator Medical Centre	Bromley	SEL
Brunswick Medical Practice	Camden	NCL
Camden Health Improvement Practice (CHIP)	Camden	NCL
Ordinance Unity Centre for Health	Enfield	NCL
Carpenters Practice	Newham	NEL
Newham Transitional Practice	Newham	NEL
SMA Medical Centre	Waltham Forest	NEL
Allerton Road Health Centre	City & Hackney	NEL
Goodman's Field Health Centre	Tower Hamlets	NEL

In 2013 when we embarked on this programme of APMS procurements we looked to establish answers to 2 fundamental questions.

- The contract price
- The preferred contract length

There was a standard London contract with standard contract price and terms. Commissioners and providers agreed a '5 + 5' contract length was preferred.

The equalisation model means the contract price and terms vary between CCGs. Contract price is set by the Commissioner and is essentially the same for all contract formats

CCGs will now want to consider contract length in line with local strategies

So the “contract length” is something we want to revisit later today:

- Is 5+5 still valid given the changing commissioning landscape? or
- Is X+Y the preferred contract length?

And why?

London APMS Procurement

Natalie Polyblank
Senior Procurement Manager –
NEL CSU

- Register on ProContract: <https://procontract.due-north.com/register> and Contract Finder: <https://www.gov.uk/contracts-finder>
- Read all of the ITT documentation, specifically the ITT Guidance and Draft APMS Contract
- Read the Practice Specific Memorandum of Information (MoI). It is impossible to achieve high scores unless you acknowledge and reference the local contextual information provided within responses
- Submit Clarification Questions (via ProContract). Please note the deadlines within the provisional timetable.

- Based on “Open” Procedure
- Conducted online (via ProContract)
- Three Questionnaires:
 - Initial Eligibility
 - Generic Questions
 - Lot / Practice Specific Questions
- As in previous years there will be a restriction on the number of contracts you can be awarded; there is no restriction on how many you can bid for.
- You will be asked to declare (when you submit your bids) what you are bidding for and what would be your preferences, should you be successful.

Key Features Cont:-



- There will be a minimum threshold score to achieve for all contracts. The detail will be provided within the ITT documents.
- Market Management Mechanism
 - Restriction on number of contracts awarded to a single bidder will be a maximum of 50% of those available in each STP area e.g. NEL STP have 5 contracts in T7, therefore a bidder can be awarded 2 of these
 - Next best bid > 10% below highest scoring bid, award decision is deferred to relevant Primary Care Commissioning Committee.
 - If next best bid scores below the minimum threshold, or there are no other bids, highest scoring bidder will be awarded contract regardless.

Key Features Cont:-



Score		Definition
0	Non-compliant	No response or partial response and poor evidence provided in support of it. Does not give the commissioner confidence in the ability of the Bidder to deliver the Contract.
1	Weak	Response is supported by a weak standard of evidence in several areas giving rise to concern about the ability of the Bidder to deliver the Contract.
2	Minor reservations	Response is supported by a satisfactory standard of evidence in most areas but a few areas lacking detail/evidence giving rise to some concerns about the ability of the Bidder to deliver the Contract.
3	Compliant	Response is good and supported by good standard of evidence. Gives the commissioner confidence in the ability of the Bidder to deliver the contract. Meets the Commissioner's requirements.
4	Very good	Response is comprehensive and supported by a high standard of evidence. Gives the Commissioner a high level of confidence in the ability of the Bidder to deliver the contract. Exceeds the commissioner's requirements in some respects.
5	Excellent	Response is very comprehensive and supported by a very high standard of evidence. Gives the Commissioner a very high level of confidence the ability of the Bidder to deliver the contract. Exceeds the Commissioner's requirements in most respects.

Provisional Timetable – subject to change



Key Milestones	Date
Advert published on Contracts Finder / OJEU / ProContract	03 June 2019
Invitation to Tender (ITT) issued	03 June 2019
Deadline for receipt of ITT clarification questions	26 June 2019
Deadline for receipt of ITT submissions	05 July 2019 (12pm Noon)
ITT Evaluation	15 July 2019 to 05 August 2019
Moderation	07 – 21 August 2019
Presentations/interviews	w/c 02 September 2019 (TBC)
Recommendation to PCCCs	16 September 2019
PCCC & LPaC approvals	w/c 7 October 2019
Inform bidders of outcome and observe standstill period	w/c 14 October 2019
Contract award	w/c 21 October 2019
Mobilisation	w/c 21 October 2019
Service Go-Live	01 January 2020

Links and Steps Re-Cap



- All major procurements are conducted online using:
<https://procontract.due-north.com/register>
- We advertise all procurements on Contracts Finder and OJEU/UK e-notification service:
<https://www.gov.uk/contracts-finder>
<http://www.ojeu.com/>
- If you are interested in participating in any of the contracts, it would be good to register on both free sites as soon as possible.
- All the CCG's participating in this pan london programme will be using the Pro Contract procurement portal for this project and if you wish to bid –so must you!
- The portal is a web based product, there is nothing to download but you do need to register
- All the links and instruction can be found as part of the Contracts finder advert along with how to register

Overview of each Contract

CCG Commissioners

NHS South East London Commissioning Alliance

NHS Southwark CCG

Background

- **NHS Southwark CCG** and Southwark Council want to enable the best possible health and care outcomes for the people of Southwark as set out in our joint **Southwark Five Year Forward View**.
- Our shared vision is for people to stay healthier at home for longer by: supporting people to manage their own health and well-being, doing more to prevent ill health and by providing more services in people's homes and in the community, with less reliance on care homes and hospital based care, supporting people to feel in control of their lives and their care, with the services they receive co-ordinated and planned with them around their individual needs enabling stronger, more resilient and resourceful communities.
- Southwark health and care providers have come together in two **Local Care Networks** (covering the north and south of the borough) to work collaboratively to try and address common challenges. GP Federations in Southwark represent general practice on the LCN Boards.

- All Southwark practices are members of our GP federations, practices are arranged in to neighbourhoods
- The CCG is working to mobilise the new GP contract in line with our neighbourhoods
- GP federations provide services working with local practices which include:
 - Extended primary care service; appointments 8am – 8pm, 7 days per week
 - Population health management; care coordination and prevention
- Southwark Clinical Effectiveness Approach supports quality improvement
- Our commissioning intentions for general practice focus on the three specific areas – Access/ Prevention/ Care Coordination. These areas are included within the premium specification which was included in all general practice contracts from April 2018
- The Southwark premium specification also includes:
 - a combination of individual and collective incentives to support a reduction in unwarranted variation across practices and to improve outcomes for patients.
 - continuous improvement approach to support the sustainability of general practice in Southwark and quality improvement for our patients.

Silverlock Medical Centre, 2 Verney Way, SE16 3HA

- Located in the Rotherhithe neighbourhood
- A member of the GP federation in north Southwark – Quay Health Solutions CIC
- The practice moved to its current premises in July 2018.
- 11,389 registered patients (Q4 18/19). List size recently grown following a dispersal of a practice at the same site.
- Purpose built premises which were recently refurbished and additional capacity added to enable the relocation.
- Located in an area of significant population growth, close to the Old Kent Road. Approx. 24,000 extra people by 2030.

Queens Road Surgery, 136 Meeting House Lane, SE15 2UA

- Located in Peckham
- A member of the GP federation in south Southwark – Improving Health Limited
- Relocated to purpose built premises on Meeting House Lane in December 2016.
- NHS PS are the head lease holder for the premises. Midwives have a separate lease for part of the building.
- 8,163 registered patients (Q4 18/19). The practice list size has increased by 20% in one year.
- New housing development of approx. 350 flats is being completed next door.

Contract Value 19/20 = £108.24 pwp + London Allowance of £2.18 prp

£108.24pwp includes:

- Global Sum (£89.88)
- APMS Time Limited Premium (£5.00)
- Southwark premium specification (£17.29)
- Out of Hour deduction (- £4.33)
- Non recurrent premium specification (£0.41) This is subject to confirmation of MPIG

NHS South East London Commissioning Alliance

NHS Bromley CCG

1. Pragmatic workforce development and new skill mix

2. Rethinking the role of the GP: The expert medical generalist

3. The key to retention: Achieving an acceptable workload

4. Going beyond education and training towards peer support networks and portfolio working

5. At scale working and practice collaboration to build resilience

6. Maximising the opportunity of delegated commissioning

7. Digital enablement of both practices and patients, including patient activation

8. Improving primary care premises and how we think about space

9. Commissioning enhanced care for care home patients

10. General practice at the centre of an 'aspirant Integrated Care System'



Bromley PMS Premium

- ✓ Enhanced End of Life care: £1 pwp
- ✓ Integrated Case Management of at-risk adults: £3 pwp
- ✓ Promoting bowel and breast screening uptake: £2 pwp
 - ✓ Promoting flu vaccinations and childhood immunisations: £1.50 pwp
 - ✓ Hearing the Patient Voice: 59p pwp
- ✓ Post operative wound care in the community: £1 pwp
- ✓ Practice development planning: £2.28 pwp

Total additional funding available = £11.37 pwp
(based on 2018/19)

Bromley GP Enhanced Services

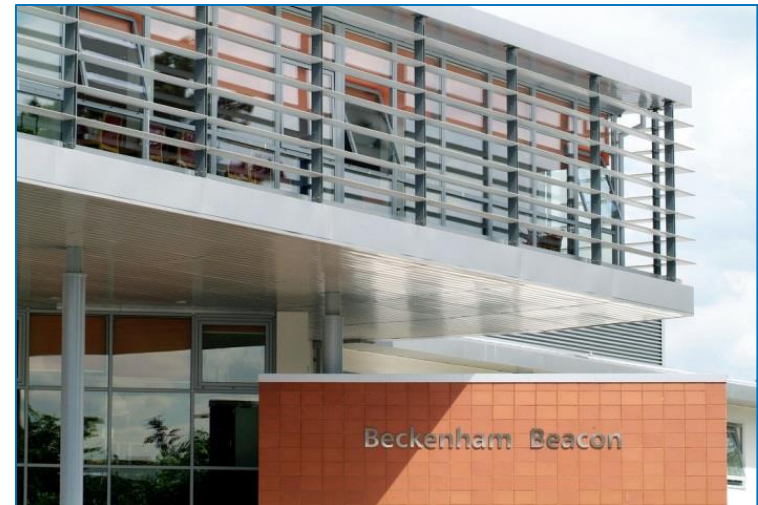
- ✓ Safeguarding children
- ✓ Safeguarding adults
- ✓ Phlebotomy
- ✓ Prescribing for Gender Dysphoria, ADHD, DMARD and Gonadorelin



Cator Medical Centre, Beckenham



- ❑ Current raw patient list size is 10,775, with a weighted list size of 9,150 patients
- ❑ Based at Beckenham Beacon, a purpose-built medical centre in Beckenham (BR3 3QL)
- ❑ Boundary area is a three mile radius except where this falls outside of the borough, with most patients residing in BR3 and SE20 (Penge) postcodes
- ❑ Co-located with one other GP practice, an Urgent Care Centre and other community, mental health, diagnostic and outpatient services
- ❑ Expected opening hours under the new contract will be 8am–6.30pm, Monday to Friday
- ❑ Expectation that the provider will sign up to the Extended Hours DES, Bromley PMS Premium and all local incentive schemes and enhanced services
- ❑ Expectation that the provider will actively participate in Primary Care Networks



North East London (NEL) STP

NHS City & Hackney CCG

- Continue developing the City and Hackney model of integrated commissioning with our local authority partners to deliver the objectives of our four care workstreams: Children & Young People, Planned Care, Prevention, and Unplanned Care.
- Continue to progress the development and delivery of the City and Hackney Neighbourhoods (Network) Model to deliver integrated services able to address the wider determinants of health.
- Deliver financial balance through commissioning joined up services aimed at reducing inappropriate use of secondary and urgent care services.
- Ensure that our LTC patients are supported through the continued provision of high quality primary medical services and investment in enhanced services, particularly CVD for which the CCG has higher than national rates of mortality.
- Support people to take a more active role in their own health

- Contract Expiry 31st March 2020
- Current hours are 8am-6.30pm Mon – Fri, with extended access provision on specific weekdays.
- List size 5440 raw and 5187 weighted (Oct 18) with steady growth in recent years and further growth expected due to large scale residential development in the Woodbury Down area.
- Current contract includes provision of all essential and additional primary medical services to a registered list.
- The CCG is seeking to procure services on a GMS equalisation price of £91.86 per weighted patient plus £5 pwp for the time limited nature of the contract. No KPIs will be included in the contract.
- Outside the core contract the practice is also signed up to, and would continue to be eligible for, a suite of local enhanced services relating to LTC management, Frail Home Visiting, primary management of patients with mental health conditions, and children and young people amongst others. Practice income from these contracts in 16/17 was approximately £117,000.
- CQC report, published in October 2015, rates the practice as 'Good' and 87% of patients on the F&F test would recommend it.
- Situated in the north of the London Borough of Hackney, the practice's demography includes a significant proportion of Orthodox Jewish patients which bring unique challenges in provision of primary medical services.

North East London (NEL) STP

NHS Newham CCG

CCG Strategic Priorities

- To lead the development of a Newham-based health and care system which will bring together services in a way that delivers high quality services and the best outcomes for the people of Newham
- To develop GP services that are modern, accessible and robust enough to care for the local population now and into the future
- To change the urgent care pathway to deliver a more integrated service model in response to feedback from patients.

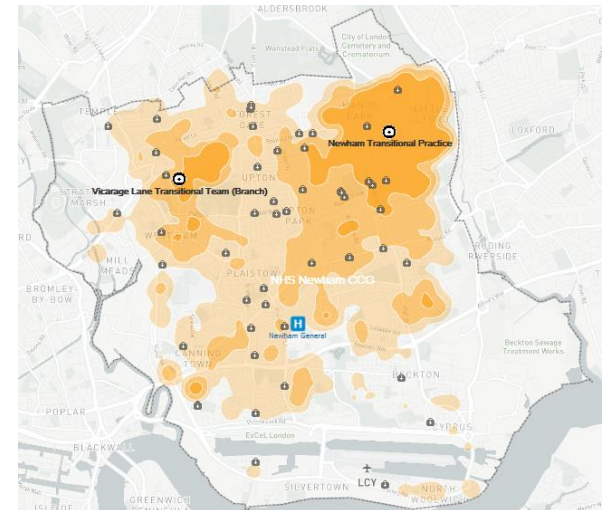
Enabling Priorities

- Securing financial stability
- Making sure our governance is fit for purpose
- Valuing and enabling our staff, Board and Clinical Leaders to learn and develop thereby enabling them to deliver against the CCG Priorities
- Ensuring we maintain our performance across the key business areas

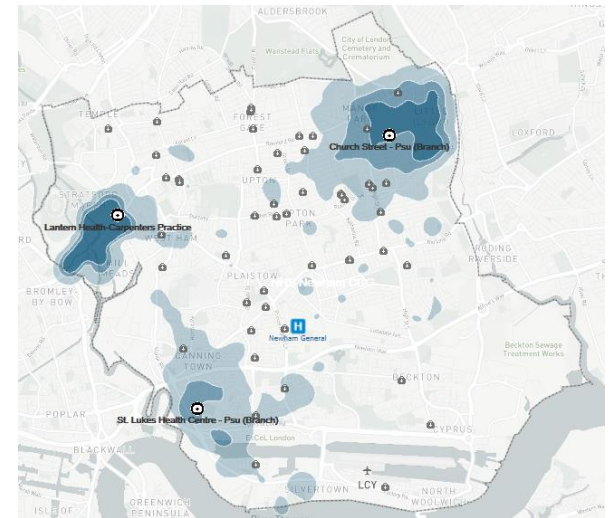
Newham Transitional Practice



- Practice situated within the London Borough of Newham – Contract expires 31 March 2020
- Practice across two sites (Vicarage Lane and Church Road Health Centres) with 3.15 km between the sites
- List size of 4959 (Raw) and 4542.54 (Weighted) as of 1 January 2019
- Contract provides services for homeless population of Newham, inclusive of community outreach
- Procurement on the basis of maintaining the two sites
- Current CQC Rating of 'Good' with last inspection 10 June 2016
- 2017/2018 QOF Achievement 534.41 out of 559 – 95.60%
- Procurement on a block contract of £650,000 per annum inclusive of KPIs



- Practice situated within the London Borough of Newham – Contract expires 31 March 2020
- Practice across three sites (Carpenter Road, St Lukes and Church Road Health Centres) with 3-4 km between the sites
- List size of 15142 (Raw) and 14789.93 (Weighted) as of 1 Jan 2019
- Contract provides core APMS services registered population
- Procurement on the basis of maintaining the three sites
- Current CQC Rating of 'Good' with last inspection 21 January 2018
- 2017/2018 QOF Achievement 556.32 out of 559 – 99.52%
- Procurement on an APMS contract with GMS plus £5 contract value.



North East London (NEL) STP

NHS Waltham Forest CCG

The WF primary care strategy outlines the CCGs Priorities, these are:

Integrated Care Systems
Using the London Strategic GP
Commissioning Framework to
improve access, proactive care
and co-ordination of care.
Integrated Urgent Care
The Development of GP Primary
Care Networks

Our clinical priorities are supported by the Waltham Forest Health and Wellbeing Board.

Care for Older People
Mental health
Long Term Conditions
Management
Child and Maternity Care
Cancer

Demographic information:

- The practice has a young population, only 6% of patients aged over 65 years and 28% were aged under 18
- Approximately 60% of the practice population do not have English as a first language
- 48% of patients have a long standing health condition, which is similar to the CCG average of 49%
- The practice has a lower rate of unemployment 3% compared to the CCG's 7%
- The practice is rated as two on the deprivation scale, where a rating of one represents the most deprived and 10 represents the least deprived
- The practice is current being managed under a 'caretaking' arrangement which will come to an end in December 2019
- The practice boundary is in an area of significant growth

- Currently the practice operates under the name SMA Medical Centre
- Practice located in a purpose built building with a registered raw list size of 10,719 patients and weighted 9523.62 in Leytonstone, Waltham Forest.
- Operating Hours: current hours are 8am-6:30pm Monday – Friday



- **APMS Contract Price**
 - GMS standard price
 - + £5.00 risk premium
 - + £10.90 local KPIs
- **Local KPIs (£10.90)**
 - Below are the current KPI's which will be offered to the provider to ensure equity in service provision across all Waltham Forest practices:

KPI	Funding
• Records management	£2.70
• Access – Clinical consultation	£3.00
• GP patient survey outcomes x 2	£0.20 £0.20
• Quality Improvement – utilising the Life QI tool	£1.00
• Improving Chronic Kidney Disease outcomes	£0.80
• Long term conditions – Asthma	£1.50
• Long term conditions – COPD	£1.50

North West London Collaboration of Clinical Commissioning Groups

NHS Ealing CCG

- NHS Ealing CCG has a registered population of 442,742 (as at January 2019). There are 75 member practices across three localities. All practices are a part of one seven networks and all practices are part of a single GP Federation, Ealing GP Ltd, covering all practices within the Borough.
- NHS Ealing CCG has been fully delegated to commission Primary medical services from NHS England from 1st April 2017
- All 75 practices provide the NHS Ealing CCG commissioned Primary Care 'wrap-around' contract called The Ealing Standard. The contract covers 23 different specifications and is designed to ensure equity in quality and provision across all of the Ealing-registered population. The Ealing Standard is in addition to core contracts.
- The core contract used for the Ealing T7 procurement will be the standard London APMS contract.

- Ealing has three extended access hubs to ensure patients can be seen seven days a week between 8am and 8pm, with choice across the borough to ensure population coverage.
- NHS Ealing CCG has now awarded and signed a 10-year contract for the delivery of community services in Ealing, which will be mobilised from July 2019 onwards. The provider will be a pivotal member in the progress and development of both the local integrated care partnership and wider system. They will also support the progression and alignment of services to primary care networks

- The current APMS contract will come to an end on 31st March 2020
- Purpose built premises in Norwood Green, owned by NHS Property Services
- Opening hours will be 8am to 6.30pm Mon to Fri and 9am to 1pm on Sat
- List size at January 2019 was 4,749 (4461.43 weighted) and is therefore eligible for PSS
- The Practice is in an area of high development which will see significant population increases. The current practice population has risen by 9% since January 2014.
- Price (2018-19) £104.62pwp after OOH deduction including KPIs at 100%
- CQC rating is good (June 2016)
- Current provider also provides the Special Allocation Scheme, which is funded separately.
- Higher than average number of patients from BAME community with 85% of the population identifying themselves from non-white ethnic groups.

North West London Collaboration of Clinical Commissioning Groups

NHS Hounslow CCG

- NHS Hounslow CCG has 46 member practices across five localities.
- Each locality is a distinct GP organisation with a borough-wide Federation, Hounslow Consortium Ltd, covering all practices across the area.
- The CCG commissions a GP Primary Care Contract in addition to practice core contracts. Practices sub-contract through the consortium for their activity.
- The core contract used for the Hounslow T7 procurements will be the standard London APMS contract.
- The CCG and partners are progressing the development of out-of-hospital services towards integrated Care and supporting Primary Care at scale as part of this process.
- NHS Hounslow CCG voted to move to full delegation of Primary Care from NHS England from 1st April 2018

- Caretaking arrangements will be in place from the 1st May to 30th December 2019.
- Located across two purpose-built health service facilities. Both sites are owned by property services and are situated within a mile of each other, at the Heston Health Centre and The Meadows Centre for Health.
- Each site services a distinct population.
- Heston Health Centre is in the process of being rebuilt within the next two years. The Meadows is an excellent facility with space for expansion.
- Patients at both sites have access to Hounslow extended access service with additional urgent and routine appointments provided every evening, as well as Saturday/Sunday from 8-8.

- A site visit to both premises is highly recommended.
- The list size across both sites at January 2019 was 8,888
- Price before OOH deduction and KPIs is £103.71 pwp
- The practice currently hosts the Special Allocation Scheme for Hounslow
- The practice has just undergone a CQC inspection and was rated as inadequate (February 2019)
- The practice is part of the Great West Road Locality, made up of 9 practices providing out-of-hospital services to their population

North West London Collaboration of Clinical Commissioning Groups

NHS West London CCG

- **West London CCG's** objective is to improve health and the wellbeing of our local populations. **Our vision** is for people to stay healthier at home for longer by championing self-care and engaging with and supporting people to look after themselves to help to avoid further escalation
- **Key priorities** are to improve the management of long-term conditions, eliminating unwarranted variation, improve outcomes for people with mental health needs, achieve better outcomes and patient experience for older people and improving emergency and urgent care pathways
- **Primary care services** will be developed to lead integrated care systems with increasing focus on network delivery and 100% population coverage
- At **£6m** we have one of the **highest PMS Premiums in the country which** is being reinvested across all WL CCG practices to provide funding opportunities of an additional £25.76 PWP by 2023
- WL CCG practices and patients also benefit from **My Care My Way** which provides complex case management for older people. Additional funding and support through case managers is available to practices
- The CCG also commissions a large suite of Out of Hospital services from its practices and extended hours above and beyond the DES

- Original APMS contract for ECHWBC commenced as a zero list practice in 2011
- Practice list currently stands at 5913 (raw) and 4700 (weighted) as of Jan 2019
- Situated in the Earls Court Ward of Royal Borough of Kensington & Chelsea.
- Rated as Overall Good as of 14th March 2019 with a QOF achievement in 2017-18 of 556 points out of 559
- Purpose built premises, 7 consulting rooms, potential scope for expansion
- The practice is in the Kensington and Chelsea PCN with 8 other practices
- An equalised contract is offered on a term of 5 plus 5 years comprising:
 - GMS price (global sum) 2019-20 = £89.88 pwp
 - APMS Risk Premium = £5pwp
 - OOH deduction = -£4.33
 - £2.18 prp London weighting
- In addition to the core contract funding a yearly premium is available of up to £16.57 PWP in 20/21, £21.16 PWP in 21/22 and £25.76 PWP thereafter
- Additional funding is available through Out of Hospital Services and Commissioning Learning Sets

North Central London STP

NHS Camden CCG

- Camden has 34 general practices across five GP neighbourhoods and two GP federations.
- Our resident population is approximately 253,400, with around 280,000 people registered with a Camden GP.
- The CCG became a fully delegated commissioner of primary care in April 2017.
- Our business plan objectives are to:
 - Commission the delivery of NHS constitutional rights and pledges
 - Improve the quality and safety of commissioned services
 - Improve health outcomes, address inequalities and achieve parity of esteem
 - Integrate and enable local services to deliver the right care in the right setting at the right time
 - Work jointly with the people and patients of Camden to shape the services we commission
 - Involve member practices and commissioning partners in key commissioning decisions
 - Maintain financial stability and ensure sustainability through robust planning and commissioning of value-for-money services
 - Build a high performing organisation that attracts, develops and retains a skilled and motivated workforce.
- Priority areas in relation to primary care include ensuring timely and appropriate access; commissioning for quality and outcomes; supporting independence and self-care; increasing integration with community services; developing our providers and workforce.

- Contract to start 1 January 2020
- Located in the Bloomsbury Ward in South west of Camden
- Registered list size 6937(January 2019) Raw 7057
- CQC rating Good – August 2017, QOF 552/559
- Current Opening Hours –
 - Mondays - Friday - 8.00am to 6.30pm, opening until 8pm on Monday, Tuesday and Wednesday
 - Saturdays - 9.00am to 12.00pm
- Contract will be based on Standard London APMS contract – will equalise in the future
- Contract Price £103.58 pwp (2018-19 price, net of OOH, Including KPIs)
- NHPS hold head lease for the building

- Contract to commence 1st April 2020
- Provision of primary medical services to a registered list
- Integration of care delivery across health, social care and homelessness services through strongly managed co-ordination of services and partnership working
- CQC report published in April 2017 rates the practice as 'Good'
- Reduced hours due to restrictions of building - currently 9.30am to 4.30pm Monday to Friday
- Registered list size 830 at January 2019. Expected to grow further due to increasing levels of homelessness in Camden.



The Contract

- 5 +5 Year APMS Contract based on HLP homeless specification
- Proposed contract value c.£620K baseline
- Small number of financially linked KPIs to attract additional 10% of baseline price
- QOF + ES available

Key Outcomes of the Service Specification:

- Improved identification, treatment and health of homeless patients
- Reduction in inappropriate use of secondary care
- Increase in health promotion, promote self management and the use of planned care.
- Collaborative working with Mental Health and Drug and Alcohol Service to ensure effective services for patients who may have complex problems
- Support to move back into mainstream primary care services when appropriate

North Central London STP

NHS Enfield CCG

- Practice one of 13 in the North East of the borough. North East Alliance established as a local group of practices that have already piloted a LTC hub;
- Develop locality working at scale in networks;
- Commissioning of the Enfield Single Offer – LCSs commissioned through the local Federation with most of the resources going to practices;
- Meet the challenge of local health inequalities and reduce the variation in population-based health and wellbeing outcomes;
- Tackle the challenge of LTC with particular focus on the high rates of Diabetes Respiratory diseases and care of the frail elderly;
- Support the CCG initiatives in achieving financial balance and reducing unnecessary A&E attendance

- Enfield CCG has 47 practices over three localities (North East, South East and West) serving a population of 337,000 residents.
- The single GP federation, Enfield Healthcare Cooperative Limited serves practices in all three localities and has full membership across all 47 practices
- Within Enfield there is a super-partnership of 14 practices that has been established since April 2018;
- The CCG has had delegated commissioning responsibilities for primary care services since April 2017 and has been working with the federation and member practices to drive transformation of primary care services outlined in the strategic commissioning framework and the GPFV

- Contract expiry 30 September 2019. New contract will commence from 1 April 2020, interim period – caretaking contract
- Purpose-built health service facility, with minor surgery suite. Building shared with a dental service; Library and community health.
- Current opening hours 8.00 am – 6:30 pm M-F and 9:00-13:00 Saturday.
- List size 9412 raw and 8343 weighted (January 19); list size has steadily grown over the past 3 years.
- The latest CQC report from March 2018 rated the as practice 'Good'
- QOF achievement 17/18 512/559
- Contract will be based on Standard London APMS contract – will equalise in the future
- Contract Price £103.58 pwp (2018-19 price, net of OOH, Including KPIs)

NHS South East London Commissioning Alliance

NHS Bexley CCG

NHS Bexley CCG Commissioning Intentions



- NHS Bexley CCG has 23 practices over three localities serving a population of 243,000 patients
- The CCG has had delegated commissioning responsibilities for primary care services since April 2017 and has been working with the federation and member practices to drive transformation of primary care services outlined in the strategic commissioning framework and the GPFV
- Bexley's APMS contract has been equalised with its PMS and GMS offers, aligning service specification, management regime, KPIs and price.
- APMS price = £96.27pwp (expected 19/20 prices) + £2.18prp
- Service requirements include:
 - Imms & Vacs - Childhood Imms Year 1
 - Screening - Bowel Screening
 - Patient Voice - Overall Experience & Confidence & Trust in GP
 - Dementia Service
 - Wound Care
 - Shared Care - ADHD / DMARDs / Gonadorelin Analogues

- Located in the Clocktower locality with a mixed patient demographic
- Registered list size 5,229 (January 2019) which is growing
- Current provider in place since 2012 and the contract has come to a natural end
- CQC “Good” and consistently gets positive patient feedback
- Operates from a single site - 219 Erith Road, Barnehurst, DA7 6HZ
- Plans to redevelop the adjoining site over the next 2-3 years with the potential provision of a new practice building
- Opening hours from 1st January 2020:
 - 8.00am to 6.30pm Monday to Friday
 - Expectation to provide extended hours as per requirements of EH DES
- Access to GP ‘hubs’ at Erith Hospital and Queen Mary’s Hospital
 - 6.30pm to 8.00pm Monday to Friday
 - 8.00am to 8.00pm on weekends and bank holidays



- The current contract term is 5+5.
- Historically based on a standard London contract with standard contract price and terms.
- The equalisation model means the contract price and terms vary between CCGs.
- Contract price is set by the Commissioner and is essentially the same for all contract formats
- CCGs need to consider contract length in line with local strategies
- **Questions**
 - **Is 5+5 still valid given the changing commissioning landscape?**
 - **Or is X+Y the preferred contract length?**

And why?

Comfort Break



Bidder Education and Training Module

Ben Farrelly

- The ITT as a whole comprises the following:
 - ITT Guidance document
 - Practice Specific Mols
 - ITT Evaluation questions
 - Initial Eligibility Questionnaire
 - Generic - Just 1 set
 - Practice specific - 1 set per lot / practice bid for
 - Financial management Template (FMT) 1 set per lot/practice bid for
 - Service Specification
 - Draft APMS Contract
 - Supporting Schedules (TUPE, Premises, Equipment, etc)

- Initial Eligibility Questionnaire
 - The Initial Eligibility Questionnaire (SQ) represents an evaluation of your organisation, in terms of fundamental capability and capacity (Legal, Financial, Technical) and is assessed on a Pass/Fail basis.
 - Adapted from standard Cabinet Office document, and augmented with additional an “Technical Capability” section.
 - Questions seek confirmation of willingness and ability to provide evidence (ie. Finance section) when properly called upon to do so.
 - You only need to complete the Initial Eligibility Questionnaire once.

- ITT Questionnaires
 - The ITT Generic Questionnaire and Practice Specific Questionnaires (collectively known as ITT) represent an evaluation of your detailed proposal, ability to fulfil requirements of the APMS Contract, and understanding of local commissioning elements.
 - Assessment is formulated on a scored basis.
 - You only need to complete one copy of the ITT Generic Questionnaire.
 - You need to complete Practice Specific Questionnaires for every practice for which you are bidding. ie. 1 Practice = 1 Practice Specific Questionnaire; 10 Practices = 10 Practice Specific Questionnaires (all are labelled with Practice names to enable differentiation).

- Financial Model Template (FMT)
 - The FMT represents an evaluation of your financial capability and viability to deliver an APMS contract
 - Assessment is formulated on a Pass/Fail basis
 - You need to complete an FMT for every practice for which you are bidding. ie. 1 Practice = 1 FMT; 10 Practices = 10 FMTs (ensure all are labelled with Practice names to enable differentiation)

- Get your team together, appoint a “Bid lead”, and conduct a detailed review and interpretation of the ITT requirements.
- Where possible get your clarifications in early, don’t leave it until the last minute.
- Check the portal regularly for other bidders clarifications. All clarification questions asked are shared with all potential bidders. unless marked as “Commercially Confidential” **and** it is deemed to be so by the procurement team.
- Prepare work plan & allocation of roles/tasks/milestones in reference to the ITT submission deadline. DO NOT leave it all to one person.
- When you use generic policies downloaded from sites like First Practice Management, make sure you fill them in relevant to your practice. Date and Sign them. It needs to be YOUR policy not A policy.
- Build in time to review, refine and style your bid submission. 68

How to structure your bid



Planning and preparation is key to any successful bid process.

- Mirroring the structure.
- Right skill sets.
- 6Ps & 3Cs.
- Timetable to match the procurement timetable minus 1 week.
- Project meetings.
- No one man is King.

- Plan a clearly structured ITT response, aligned against each question requirement and criteria. Write in plain English,, use short sentences and paragraphs.
- Demonstrate a clear understanding of the requirements. If you're not sure ask!
- Methodology: clearly show who does what, why, when, how, and who benefits from this, consider Patients / Commissioners perspective – illustrate with charts where requested (ie. Gantt).
- Identify and demonstrate clearly your capability and the uniqueness of your offer (USP) - can your offer exceed the contract requirements and provide additional benefits, outcomes?
- Avoid technical jargon where possible and unexplained abbreviations, Question: **What does PM mean?**
- Use 'active' verbs, refer to 'we' and 'you' not I

- What is this question asking me? have I answered all the elements of the question.
- Break down the question in it's parts
- If you are using an external bid writer check:
 - If they are working with anybody else,
 - If they have supported in the writing of APMS Bids,
 - Own the responses, check you are happy with what has been said.

- In your response try to reflect key wording as found in the tender specification
- Lay-out: Use clear headings aligned to the ITT, standardise fonts, illustrate with examples where possible
- Only use bullets as an element of the response not the whole response
- Punctuation and spelling really matter.....
- Have you articulated 'Why choose us?'
- Have you fully defined the key features, quality and benefits of your approach?
- Have you used and made the most of recent and relevant case studies to illustrate your capability?
- Conduct a mock assessment against the evaluation criteria and allocated weightings

So What (the benefit)



We will be able to deliver a really great service from our practice to serve your service users.

- **So What**

Our practice is on the main road right near the factory so we will be able to deliver a really great service from our practice to serve your service users.

- **So What**

Our practice is on the main road right near the factory so we will be able to deliver a really great service from our practice to serve your service users that gives them access to the service at a convenient time and location

- **So What**

Our practice is on the main road right near the factory which has the largest male density in the area so we will be able to deliver a really great service from our practice to serve your service users that gives them access to the service at a convenient time and location ensuring **early detection and better long term patient care** with minimal disruption to them ensuring a much great take up of the service

- **Collation**
 - Only give them what they ask for and ensure that information is not repeated unless absolutely necessary. If two questions ask for the same information, it is very likely they are viewing from different perspectives.
- **Clarity**
 - Be clear about what you are saying don't leave answers ambiguous because you are "Winging it" until you get the job. Equally don't waffle and go off to a tangent. Keep focused
- **Cohesion**
 - Make sure your answers show structure, organisation and they all link together.

Pitfalls / What to watch out for



- **Words**

Describe, Give detail, Explain, Briefly Describe, Attach

- **Word Limits**

use the limits, the more words the more detail expected.

- **Documentation Submissions**

Ensure you send in all requested documents. Have a check list, you will be surprised at what people forget to submit.

- **Planning**

Not just who but when, mirror the tender timescales.

- **Ask Questions**

Don't be afraid to ask clarification questions via the portal no matter how silly you may think them, the worst we would say is we can't tell you. Nothing ventured nothing gained.

- **DO:**
- Read the Mols. To reiterate, it is impossible to achieve high scores unless you acknowledge and reference the local contextual information provided within responses
- Respond by the correct date and time, avoid last minute submissions
- Ensure the submission is complete and compliant with requirements eg. Supporting documents, declarations, word counts, etc
- Review the evaluation criteria, scores and “weighting”. This should influence time and effort in preparation of your responses.
- Use experts such as Finance and HR

Don'ts....



- **DON'T:**
- Attempt to find an “inside track” (canvassing)
- Ignore the ITT Guidance and Instructions
- Submit with incomplete or missing answers/ sections/ documentation
- Repeat answers or refer to ‘see above’ (cross-referencing is not permitted)
- Talk about you as the incumbent without explanation
- Recycle old responses, making sure you edit them first.
- Beware of ‘cutting & pasting’! without editing
- Provide generic responses to practice specific requirements

Conclusion



- Follow Guidance, word limits and the ITT submission format. Be compliant.
- Understand each question, if you don't, seek clarification. Answer the Question fully.
- Note the scoring / weighting of criteria. Allocate time / effort accordingly.
- If in need of clarification, contact the buyer (but be aware that any question you ask will be notified to other bidders).
- Answer all questions honestly and be positive in your responses - Emphasise your USP.
- Double check your response / second pair of eyes.
- Ensure you complete and submit all the documents required.
- Make careful note of the date and time of the deadlines and make sure you submit well in advance. Avoid last minute submissions.

- **We will send you:**

- A copy of the presentation
- A copy of the clarification questions and responses prepared from this meeting (also published on ProContract)

- **Key dates:**

- Advert & ITT available from 03 June 2019
- Submit completed ITT responses by 05 July 2019



Close