

Invitation to Quote

Instructions & Requirements Document

Atamis Ref: C128716

**Hospital Activity Notifications
Service (HANS) – Pilot**

1. Purpose

This document sets out the process for obtaining quotations for the supply of services within a maximum budget envelope of **up to £99,000 (ex VAT)**.

2. Introduction

This Invitation to Quote (ITQ) has been prepared by NHS England (the 'Authority').

The Authority is seeking to appoint a capable and competent supplier for the provision of a Discovery phase, including development of prototypes and user research, exploring how Social Care / Domiciliary Care providers can receive notifications when their clients / customers have been admitted into acute NHS care, and have constant communications of their likely discharge date and time. It could improve their efficiency by reducing wasted trips, and create additional capacity within social care system, and will allow discharge from hospitals to happen more effectively and improving patient flow throughout the NHS acute system.

A full description of the requirement is found in section 2

The Authority has taken reasonable care to ensure that the information provided is accurate in all material respects. However, the Bidders attention is drawn to the fact that no representation, warranty or undertaking is given by The Authority in respect of the information provided in respect of this transaction and/or any related transaction.

The Authority does not accept any responsibility for the accuracy or completeness of the information provided and shall not be liable for any loss or damage arising directly or indirectly as a result of reliance on this ITT or any subsequent communication.

No warranties or opinions as to the accuracy of any information provided in this ITQ Pack shall be given at any stage by The Authority.

Any person considering making a decision to enter into contractual relationships with The Authority or any other person on the basis of the information provided should make their own investigations and form their own opinion of The Authority. The attention of Bidders is drawn to the fact that, by issuing this ITQ, The Authority is in no way committed to awarding any contract and that all costs incurred by Bidder in relation to any stage of the Tender process are for the account of the relevant Bidder only.

In accordance with The Authority's internal financial instructions and general principles applicable to public procurement, The Authority seeks best value for money in terms of the Contract reached with the successful Bidder.

The Authority has endeavored, therefore, to express as clearly as possible in this ITQ the terms on which it would propose to contract with the successful Bidder and in particular the obligations, risks and liabilities which it expects to become the responsibility of the successful Bidder.

This document contains the following sections:

➤ **1. Instructions**

- Project Team Details
- Timeline
- Supplier Clarification Question process
- Evaluation Criteria
- Scoring

➤ **2. The Requirement:**

- Background Information
- Standards and Service Specification
- Essential Skills Deliverables
- Deliverables
- Proposed Terms and Conditions

➤ **3. Responding to the ITQ**

- Bidders Details
- Further Bidder Information
- Bidders Response

1. Instructions

Project Team Details and Contract Lead

Name of Team	NHS England, Transformation Directorate, Innovation Lab
Name and Title of Contract Lead	Nick Crossland, Product Lead, Innovation Lab

Timeline

Item	Date
ITQ advertised via UK Contract Finder	23 January 2023
ITQ Clarification Deadline	26 January 2023 at 5pm
ITQ Closing Date	6 February 2023 at 12noon
Estimated Award Date	w/c 6 February 2023
Estimated Contract Commencement Date	Monday 13 February 2023

Bidders should note that the timeline is indicative and therefore may be subject to change.

Supplier Clarification Question Process

All clarification questions relating to this ITQ must be submitted via the procurement portal route (Atamis) in-line with date proposed at the timetable. Clarification questions received after this time will not be responded to.

All clarification questions received via other routes will not be reviewed and responded to.

Please Note: To ensure an open and fair process is followed, all Bidders will receive a copy of the question(s) and answer(s).

Evaluation Criteria

The purpose of evaluation in the procurement process is to establish which supplier(s) have submitted the best quotation; ensuring that the assessment of quotes is undertaken in a transparent, fair, and consistent manner so that an effective comparison can be made.

The Authority reserves the right to accept or reject all or any part of the quotation if you have failed to provide the information requested in this quotation or submitted any modification or any qualification to the terms and conditions of contract.

The Authority does not bind itself to accept the lowest priced, or any quotation, nor guarantee any value or volume and shall not be liable to accept any costs you have incurred in the production of your quotation.

The Authority will check each quotation and submission for completeness and compliance with the requirements in this Invitation to Quote document, thus, you should ensure that you carefully examine this document in full.

Quotes will be evaluated on the following Quality and Costs basis.

Section	Weighting (%)
Technical/Quality Including Sustainability and Social Value	70
Commercial	30

A weighted scoring system will be applied to the response, the high-level evaluation criteria are given below:

Scoring:

Question	Weighting (%)
<p>1 - Team and skills (max 750 words)</p> <p>Please describe who will work on this project in order to provide the skills and experience listed in the project requirements section.</p> <p>Your response should include</p> <ul style="list-style-type: none"> - Short CVs or pen profiles of the team who will deliver this work, detailing what experience and expertise the identified team member will bring to this project. 	15%
<p>2 - Project Management and Service Delivery (max 750 words)</p> <p>Please describe how you will apply your experience and expertise to provide the Deliverables listed in the project requirements section.</p> <p>Your response should include:</p> <ul style="list-style-type: none"> - details of your proposed technical approach - a high-level timeline (identifying key milestones) confirming proposed timescales for the delivery of this work, including any assumptions. 	20%
<p>3 – Quality Assurance and Risk Management (max 750 words)</p> <p>Please describe how you will ensure high quality of service outputs and how you will ensure it aligns with GDS service standard.</p> <p>Your response should include:</p> <ul style="list-style-type: none"> - details of your established approach to Quality Assurance. - an outline of your understanding of the particular risks and constraints surrounding meeting the requirements (including for Information Governance) and how you will mitigate these. 	15%
<p>4 - Knowledge Transfer (max 500 words)</p> <p>Please describe how you will ensure that all knowledge from the project will be documented and transferred to the NHS England team.</p>	10%
<p>5 - Social Value (max 500 words)</p> <p>Please outline how your proposal will contribute to social value in the delivery of this work, in line with the NHS's Social Value Model and Policy.</p>	10%

Bidder information

The 'Bidders Detail' will be 'For Information Only' and not scored.

The 'Further Bidder Information' will be given either a 'Pass/Fail' for each section.

Quality

The Authorities evaluation system is based on the familiar "weighted scoring approach", in which the officer scores responses to the quality questions according to a pre-agreed scoring system 0-4 (see table below). The scores for the sections are then added together to give a total quality score for the quotation response.

Score	Interpretation
4 Excellent	The Tenderer's response provides full confidence that the Tenderer understands and can deliver the Requirements well and addresses all of the requirements set out in the question.
3 Good	The Tenderer's response provides a good level of confidence that the Tenderer understands and can deliver the services and the Tenderer's response addresses all or most of the requirements set out in the question.
2 Satisfactory	The Tenderer's response provides a satisfactory level of confidence that the Tenderer understands and can deliver the services and the Tenderer's response addresses at least some of the requirements set out in the question. However, the response is lacking in some areas.
1 Poor	There are weaknesses (or inconsistency) in the Tenderer's understanding of the services and/or Tenderer's response fails to address some or all of the requirements set out in the question.
0 Unacceptable	No response and/or information provided is deemed inadequate to merit a score.

Scoring Cost

The financial weighted score is calculated by using the following formula:

$$\text{Tenderers Price Weighted Score} = \frac{\text{Lowest Total Cost offered}}{\text{Tenderer Total Cost}} \times (30\% \text{ weighting})$$

(Lowest Total Cost divided by Tender Total Cost multiplied by 30)

The financial score will be calculated to two decimal places.

Therefore, the bidder who submits the lowest compliant bid (based on the pricing model created for evaluation purposes) will receive the full 30% available.

2. The Requirement

The Requirement is detailed below which provides background to the project/business need, the standards or specification required alongside the essential supplier skills and the objectives of the requirement.

Background Information:

The Innovation Lab is a multidisciplinary team within NHS England's Transformation Directorate that exists to explore problems across the health and social care system; and rapidly prototype and test new technologies and solutions to these problems in "real world" and clinical settings, evaluating their effectiveness, and using the learnings to inform policy and strategy.

The Digitising Social Care team in NHS England's Transformation Directorate comprises both NHS and DHSC staff. Together they are championing a person-centred approach to the use of technology and data in the adult social care sector, improving the quality and safety of care, understanding the barriers to adoption and tackling digital and health inequalities

In October 2022 the Innovation Lab, alongside the Digitising Social Care team, commissioned The PSC to carry out a Discovery Phase (working title "Where are My Patients?") to explore the problem space that when a person receiving social care is admitted to hospital for unplanned reasons, there is no systemic mechanism to notify their domiciliary care provider. This can lead to wasted home visits, additional burden for providers having to track down their clients, and potentially additional anxiety for people's families at an already stressful time.

Following extensive user research and analysis, the Discovery Phase identified a potential solution to the problem in order to notify subscribed registered care providers of an admission event and recommended a running a limited-time pilot with live data to test this. The working title for this service is *Hospital Activity Notification Service* (HANS). The technical requirements of this recommendation are detailed below.

We anticipate the pilot will run for a minimum of one month, in one local area, with the co-operation of at least one suitable hospital (or LCHR area), at least one home care provider, and possibly a local authority. The purpose of the pilot is to validate the technical approach, test the utility and value for users, and develop and evaluate a robust evidence base.

The full report and outputs from the Discovery Phase will be made available to the successful bidder.

This work is to begin ASAP and should be completed by end of March 2023.

Standards and Service Specification:

Project governance / stakeholder management

- € Timely and accurate regular highlight reports detailing status, progress against timeline, dependencies, risks, issues and tracking against budget
- € Maintenance of roadmap and detailed workplan
- € Regular show and tell sessions (minimum 3 across the course of the project, including a final presentation) in line with an agile approach
- € A light touch approach to delivery is acceptable, but must align with GDS service standard

Collaboration

- € To lead the process, working collaboratively with the Innovation Lab team (Product Owner, User Researcher, Business Analyst and Developer) and other relevant stakeholders through regular communications and workshops to ensure co-design and sharing of expertise and knowledge
- € Participation at regular stand ups
- € Participation in update meetings with team leadership

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- € Any code created under this contract must be published under an open-source license on the NHS Github repository
- € All material and artefacts developed as part of this contract is the property of NHS England and shall be transferred to NHS England prior to the end of the contract.

Essential Skills Deliverables:

The appointed supplier will need to demonstrate:

- Ability to build and operate a cloud-based, database-backed web service, API and messaging system in one of Python, Ruby, Javascript, or Clojure
- Experience working with providers of domiciliary care
- Knowledge of in-Trust NHS systems and data
- Relationships with hospitals, ICBs and/or Local Authorities
- Knowledge of NHS Information Governance constraints
- User research and prototyping, in line with the NHS design system
- Experience running data-flow trials in NHS Trusts
- ISO27001 and CE+ certification

Deliverables:

Develop a Technical Solution

- To set up a data flow following the publish-subscribe model using NEMS
- To build a cloud-based publishing system (within NHS England cloud tenancy) to ingest HL7v2 ADT messages and transform them into the required format for the data flow
- To build a cloud-based subscribing system (within NHS England cloud tenancy) for the pilot to subscribe to the data flow and generate email notifications via NHSMail, to include at this stage:
 - System administrator-facing interface for managing which service users are linked to which care providers (interfacing with NEMS as needed)

- Generation of emails to be sent to whitelisted email addresses only
- To provision and manage appropriate cloud-based resources in the NHS England cloud tenancy to support a continuous integration / continuous deployment (DevOps) pipeline
- To prepare for external pen test (to CHECK standards) and remediating any issues
- To develop the technical solution in the open, according to the NHS Open Source Policy: <https://github.com/nhsx/open-source-policy/blob/main/open-source-policy.md#coded-in-the-open>
- **Setup Governance**
 - To establish a data governance and information security plan, including risks and mitigations
 - To ensure all relevant controls are in place as the data processor, and assist NHS England, where required, in their duties as data controller
- **Conduct a pilot**
 - Identify a suitable locale and partners for conducting the pilot using live data (the Innovation Lab has some contacts with potential participants identified during the discovery phase, but it would be the supplier's responsibility to expand this list if necessary and then negotiate agreements with suitable participants)
 - Set up the pilot with at least one hospital and at least one homecare provider, and ideally at least one local authority, including creation of Terms of Reference to be signed by all parties
 - To run the pilot for a minimum of 1 month, checking in on a weekly or fortnightly basis with all parties in order to assess progress, respond to emerging issues, and beginning to evaluate impact
 - Monitor the health of the service, providing remedial action to any issues which affect the service (during office hours only)
 - Provide support to users of the pilot service (during office hours only)
 - Decommission the service when the pilot is over
 - Gather feedback from users
- **Continue to iterate Service Design**
 - To iterate service options (eg timing and content of messages) in line with user feedback
 - To update the existing prioritised product backlog based on new findings
- **Evaluation**
 - To produce an overall evaluation of the pilot, including impact on users and quantitative benefits, and to use refined information on benefits to update the benefits model and projections
 - To make final recommendations on whether to pursue a private beta phase, and define costs and timelines associated
 - To contribute to comms activities such as blog posts and videos to promote the product and gain wider buy-in from health and social care stakeholders and senior decision-makers.

Payment Method:

The payment method of this fixed price contract is via BACS

Full payment due upon successful completion of specified deliverables and milestones as approved by the Authority's representative.

Proposed 50% payment at mid-point of the contract, then remaining 50% to be paid on submission and full acceptance by the Authority's representative of the final Report.

Proposed Terms and Conditions

The proposed terms and conditions for this engagement are the NHS Standard Terms and Conditions for the supply of services, Purchase Order Version.

No amendments shall be considered or accepted in relation to the Terms and Conditions. Failure to accept the terms will result in disqualification.

There are available to view on <https://www.gov.uk/government/publications/nhs-standard-terms-and-conditions-of-contract-for-the-purchase-of-goods-and-supply-of-services>.

The Purchase Order will serve as the contract.

3. Responding to ITQ

When responding to this ITQ, Bidders must ensure that their Tender covers all the information required. Bidders are required to download Appendix A_Bidder's Response Form from the procurement portal (Atamis) for re-upload on submission. Failure to do so may render the response non-compliant and it may be rejected.

In evaluating Tenders, the Authority will only consider information provided in the Supplier Response Form.

Bidders should not assume that the Authority has any prior knowledge of the Bidder, its practice or reputation, or its involvement in existing services, projects or procurements.

If there are any questions that do not apply to a Bidder, please answer with a N/A and explanation where appropriate.

Where any section of the ITQ indicates a word limit, any response will be reviewed to that word limit and any additional information beyond that word limit will not be considered. Bidders must provide a word count for each question response.

The Authority may at its own absolute discretion extend the Deadline for receipt of Tenders specified in the timetable. Any extension to the Deadline granted under this paragraph will apply to all Bidders.

Tenders must be submitted via the Authorities procurement portal (Atamis) no later than the ITQ submission Deadline specified in 'Timetable'. Tenders may be submitted at any time before the Deadline.

Tenders received before this Deadline will be retained unopened until the opening date.

The Tender and any documents accompanying it must be formatted in Word or Excel as appropriate and be in the English language.

Price and any financial data provided must be submitted in or converted into pounds sterling. Where official documents include financial data in a foreign currency, a sterling equivalent must be provided. Tender pricing must be provided including Expenses and excluding Value Added Tax (VAT).

END.