NLFT Network RFI

Exec Summary
Please see the attached Support document that shows the current technical detail.

Fully Managed Network (including WAN, LAN, WIFI & Network Security)

The North London Foundation Trust (NLFT) is the merger of two NHS Trusts in North London that provides mental healthcare services across the five boroughs of Barnet, Camden, Enfield, Haringey and Islington.

The new Trust has a digital strategy that commits us to transforming our digital landscape and becoming a leader in the use and application of technology to deliver mental health services. This commitment requires investment given the new Trust has inherited two standalone environments. Although some systems have already merged and seen efficiencies (such as the Electronic Patient Record System, NHS Mail migration and our Intranet), there is still comprehensive activity needed to bring the two standalone IT infrastructures together as one. There will be sunk costs in providing a coherent IT Infrastructure that are inevitable to get the best out of investments and to deliver on both our digital and clinical strategies.

The current environment is diverse from a technology perspective and has accumulated significant technological debt.

Creation of NLFT offers once in a generation opportunity to review legacy approach to provision of technology services and support.

The first tower to be considered is the Network (WAN, LAN, WIFI & Network Security).

There are multiple managed contracts and service providers providing support and maintenance, hindering our ability to make changes and/or innovate at pace.

Legacy C&I defined as South with legacy BEH as North.

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| --- | --- | --- | --- |
| Supplier | North/South | Tower | End Date |
|  |  |  |  |
| BT | South | WAN | December 2025 |
| BT | South | LAN | December 2025 |
| BT | South | Firewalls | December 2026 |
| Expo-E | North | WAN | December 2027 |
| Bulletproof | South | SIEM | December 2025 |
| Atos | North | SIEM | July 2026 |

As part of forming the NLFT Network Tower procurement we wish suppliers to consider our current state and identify opportunities that will enable us to provide improved Patient Care via our Network Tower.

We seek responses to the following questions to inform us of our options and to potential identify suppliers that can partner us on this journey.

Questions:

1. NFLT have a preference to consolidate to one supplier across our Network Tower. How would you approach recognising everything within the scope of the network Tower, What approach, methodology and timeline would you recommend taking us on this journey of over 5 to 10 years incorporating procurement, design, build, support and innovation?
2. Do you have insights regarding on existing technology and whether we should be considering building on existing or considering a greenfield option.
3. NHS Trusts can move services in and out of scope, how would your recommendation empower this to happen with flexibility, minimal cost and low Risk? For example, phasing out a current service that would no longer be required.
4. How would you take us on a journey of Innovation, both to migrate us to our future state and beyond?
5. Regarding reducing our Network operational risk what options would you consider?
6. How would your recommendations support the Clinician user journey to ensure they have connectivity and access to systems to provide the best and safe patient care?
7. Would you approach consider the Patient Experience with regard their ability to connect to location independent access as they move around our whole estate seamlessly? Please consider the context of migration from one or both environments.
8. Please demonstrate how with investment the Network Tower could reduce OPEX costs without reducing quality or increasing risk
9. Please provide any experience of operating as a SIAM, and how this enables you to partner us on this journey
10. Any experience of innovative network architectures, integration of cloud and how it could support our Network Tower direction?

Timeline:
All responses must be submitted by **Monday, 28 April 2025 at 5:00 PM**. Late submissions will not be considered.