

DYNAMIC PURCHASING SYSTEM OUTLINE SPECIFICATION

CONFIDENTIAL

OFF-SITE SURGICAL AND MEDICAL CAPACITY SOLUTIONS “the Services”

1. Aims of the Services

1.1 The overall aims of the Services are to provide NHS Organisations with fully compliant solutions which supplement the delivery of patient care by NHS Organisations in line with the NHS' core Key Performance Indicators including but not limited to: A&E 4 hour wait targets, elective 18 week Referral to Treatment targets, cancelled procedures targets, bed availability and utilisation targets, timely and appropriate diagnostic testing targets and urgent 2 week GP referral rules for suspected cancer. The Services will aim:

- To provide high quality support that can be called upon at relatively short notice.
- To prevent inappropriate waiting times for patients and assist NHS Organisations in meeting national targets and guidelines.
- To enable delivery of a Patient Pathway from referral to treatment that removes unnecessary delay in treatment.
- To deliver treatment that is safe and effective in premises that are certified by the Care Quality Commission (CQC) in England or by equivalent organisations in Scotland, Wales and Northern Ireland, where applicable.
- To establish a positive working relationship between an NHS Organisation and the Supplier to facilitate and maximise service delivery, the emphasis being on timely, quality, cost effective, evidence-based care, with appropriate clinical protocols and audit where possible.
- To provide medical, nursing or other staff as a part of the Services to perform clinical and support activities, including therapies and administration.
- To help Trusts to avoid unnecessary, inappropriate primary and secondary referrals
- To provide tailored audit and review processes with national and locally agreed Key Performance Indicators.

1.2 The Services will cover the full range of Surgical and Medical specialties, including but not limited to:

- Surgical specialties
 - Cardiothoracic
 - General
 - Neurosurgery
 - Oral & maxillofacial (including minor oral surgery)
 - Ophthalmic
 - Otolaryngology (ENT)
 - Paediatric
 - Plastic
 - Trauma & orthopaedic
 - Urology
 - Vascular
- Medical specialties
 - Anaesthesia

- Clinical oncology
- Clinical radiology
- Emergency medicine
- Intensive care medicine
- Medicine
 - Acute internal medicine
 - Allergy
 - Audiovestibular medicine
 - Cardiology
 - Clinical Genetics
 - Clinical neurophysiology
 - Clinical pharmacology and therapeutics
 - Dermatology
 - Endocrinology and diabetes
 - Gastroenterology
 - General internal medicine
 - Genitourinary medicine
 - Geriatric medicine
 - Immunology
 - Infectious diseases
 - Medical oncology
 - Medical ophthalmology
 - Neurology
 - Nuclear Medicine
 - Otolaryngology (ENT)
 - Palliative medicine
 - Pharmaceutical medicine
 - Rehabilitation medicine
 - Renal medicine
 - Respiratory medicine
 - Rheumatology
 - Sport and exercise medicine
 - Stroke medicine
 - Tropical medicine
- Obstetrics and gynaecology
- Occupational medicine
- Ophthalmology
- Paediatrics
 - Paediatric cardiology
 - Paediatrics
- Pathology
 - Chemical pathology
 - Haematology
 - Histopathology
 - Medical microbiology and virology
- Psychiatry
 - Child and adolescent psychiatry
 - Forensic psychiatry
 - General psychiatry
 - Liaison psychiatry
 - Medical psychotherapy
 - Old age psychiatry
 - Psychiatry of intellectual disability

- 1.3 The Supplier will offer managed solutions covering full or partial Patient Pathways (e.g. outpatients, diagnostics, surgery, ward, administration). The extent to which the Supplier manages Patient Pathways will be agreed with the NHS Organisation and described in the Call Off Contract Project Specification. Any prescribing requirement will be agreed with the NHS Organisation and described in the Call Off Contract Project Specification.
- 1.4 The Supplier will offer flexible payment models to align with the various commissioning payment models in operation, including but not limited to Payment By Results (PBR) and NHS Block Contract commissioning models.
- 1.5 "Open Book" costing and other tariff or revenue sharing agreements may be made available to NHS Organisations.
- 1.6 Additional Services to those outlined in Clauses 1.2, 1.3, and 1.4 of this Specification may be undertaken by agreement by the parties. The Supplier will be responsive to changes over time, and work with NHS Organisations in adapting the Services in order to meet the changing needs of the Patients.

2. Project Management Approach

- 2.1 The Supplier must operate a defined and documented project management process.
- 2.2 The Supplier must operate a defined and documented quality management system.
- 2.3 The Supplier will work closely with the NHS Organisation and integrate in an adaptive and responsive way with the NHS Organisation's clinical and management teams.
- 2.4 The Supplier will work closely with the NHS Organisation to produce a detailed project implementation and mobilisation plan which will include interfaces and transfer points to ensure a seamless Patient experience.
- 2.5 The Supplier will work closely with the NHS Organisation to produce a detailed exit plan for the end of each Contract called off from the DPS.
- 2.6 The Supplier will effectively communicate with and manage the supply chain to deliver the Services for and with NHS Organisations.
- 2.7 Projects will be delivered in accordance with defined programmes of work to be agreed with each NHS Organisation for each Contract called off from the DPS.
- 2.8 The Supplier will ensure that the Services are delivered with minimum disruption to the day-to-day operations of the NHS Organisation.
- 2.9 The Supplier must ensure that the Services do not negatively impact on patient care.
- 2.10 The Supplier will effectively performance manage any subcontractors (and their supply chains) in performing the Services.
- 2.11 The Supplier will effectively manage its costs and budgets to prevent cost over-runs. No further funding will be made available if the Supplier fails to effectively manage its costs and budgets. For the avoidance of doubt, where cost over-runs are partly or

wholly due to the actions or inactions of the NHS Organisation, this element of the cost over-run will be funded by the NHS Organisation to the extent of its responsibility for such an over-run.

- 2.12 The Supplier will achieve value for money and continuous improvement which will be measured by Key Performance Indicators agreed with the NHS Organisation. Key Performance Indicators will include but not be restricted to:
- Improved times to treatment
 - Improved patient experience
 - Improved financial contribution to the NHS
 - Staff morale/satisfaction
 - Cost reductions

3. Corporate governance

- 3.1 The Supplier will be responsible for:
- Delivering the Services in the agreed service environment
 - Leadership of the clinical team, where appropriate
 - Provision of clinical guidance and support where necessary to ensure that staff work to a clinical governance framework
 - Ensuring that all staff are competent to perform all duties that are required of their rôle, including ensuring that all professional registrations and fitness to practice requirements are met
 - Access to relevant training and Continuous Professional Development (CPD) for clinical and non-clinical staff
 - Leading in audit, service evaluation and service development
- 3.2 All persons employed by or subcontracted by the Supplier who may come into contact with Patients during the course of their duties must hold a current enhanced Disclosure and Barring Service (DBS) certificate or Disclosure Scotland PVG certificate, as appropriate, valid for the work that is the subject of any Call Off Contract.
- 3.3 All DBS or PVG checks undertaken must have been completed to include all information pertaining to children and vulnerable adults and will cover induction, all mandatory training, occupational health checks, and all appropriate General Medical Council (GMC), Health and Care Professions Council (HCPC) and Nursing and Midwifery Council (NMC) checks
- 3.4 The Supplier must ensure that the NHS Organisation is informed directly should convictions be received regarding them or their employees or subcontractors after the date of the DBS or PVG check. Appropriate action will be taken if necessary. In the event that any person in any of the groups referred to previously in this Clause 3.4 are substantively employed by the NHS Organisation concerned, that organisation will continue to retain full responsibility for this for those employees. The Awarding Authority will also be informed to allow relevant and permitted information to be passed to other NHS Organisations to promote safeguarding.
- 3.5 The Supplier must ensure that the NHS Organisation is informed directly of any relevant suspension from service proceedings conducted by the GMC, HCPC and/or NMC or disciplinary matters concerning their employees or subcontractors.
- 3.6 The Supplier must maintain Care Quality Commission (CQC) (or equivalent organisations in Scotland, Wales and Northern Ireland, where applicable) registration

and hold appropriate certification for each individual service and site at which the Services are provided throughout the life of the DPS and during any Contract whose performance concludes outside the period of the DPS. The Supplier must have robust, auditable management and corporate governance procedures including clear responsibilities for all staff and appropriate employment policies and procedures, insurances and indemnities and, where relevant, clear written agreements with sub-contractors.

- 3.7 Where required by legislation, the Supplier must hold a current NHS Provider Licence throughout the life of the DPS and during any Contract whose performance concludes outside the period of the DPS. If the Supplier is exempt from the requirement to hold a current NHS Provider Licence, it must clearly state the reason for this exemption.
- 3.8 The Supplier must ensure that the Service Environment and Equipment where the Services are to be provided from comply with the Fundamental Standards of Care - <http://www.cqc.org.uk/content/fundamental-standards>
- 3.9 The Supplier will provide details of their policies and procedures for corporate governance to any requesting NHS Organisations and will notify the NHS Organisations that have entered into a Call Off Contract of any changes in these.
- 3.10 Where applicable and to the extent defined in each of the following points in this clause 3.10, the Supplier must comply with the following:
 - Data Protection Act 2018
 - Caldicott Guidelines 1997
 - The relevant requirements of the Access to Health Records Act 1990
 - Freedom of Information Act 2000
 - Access to Medical Reports Act 1988
 - Confidentiality Code of Practice 1998
 - The relevant requirements of the Care Standards Act 2000
 - Any other relevant statutory requirements.
 - Any amendments to the above.
 - Any equivalents to the above that are applicable to Scotland, Wales or Northern Ireland
- 3.11 The Supplier must be registered with the Information Commissioners Office as a Data Processor. Registration as a Data Controller may be required for individual contracts. The status of the Supplier as Data Processor or Data Controller will be determined for each Call Off Contract and described in the Call Off Contract Project Specification.
- 3.12 Patient records will remain the responsibility of the NHS Organisation. The Supplier shall obtain no proprietary interest in any Patient data and shall ensure the return of any material detailing or recording such Patient data to the NHS Organisation on demand.
- 3.13 Where the Supplier needs physical access to Patient case notes to perform its duties under the terms of the Service, the Supplier will ensure that all such notes are transferred to the Supplier in a secure manner securely and kept securely at the Supplier premises.
- 3.14 The Supplier shall ensure that all Staff engaged to undertake any of the Services fulfil all statutory requirements of employment including but not limited to the right to work in the UK.

- 3.15 The Supplier shall be responsible for ensuring compliance with all relevant HM Revenue and Customs regulations regarding the correct accounting for and payment of tax and National Insurance by and for Staff engaged in the performance of the Services.
- 3.16 The Supplier shall take all reasonable steps to ensure that no NHS Organisation is exposed to any liabilities resulting from any part of the Services being determined by HM Revenue and Customs as disguised employment as defined in 2017 Public Sector Contracting (“IR35”) regulations.
- 3.17 The Supplier will commit to notifying the NHS Organisation of any relevant Staff changes as soon as they become aware of this.
- 3.18 The Supplier will commit to provide any information as reasonably required by the Awarding Authority for the purposes of monitoring the DPS.
- 3.19 The Supplier will be responsible for ensuring that all applicable clinical negligence insurances are in place prior to the performance of any Service under a Contract called off under the DPS.
- 3.20 The Supplier must ensure that it retains all appropriate public liability, professional liability and employer liability insurance at all times throughout the life of the DPS and during any treatments whose performance concludes outside the period of the DPS.
- 3.21 The Supplier shall produce to the Awarding Authority or to any NHS Organisation on request documentary evidence that the insurance required is properly maintained.
- 3.22 Where Supplier employees or subcontractors deployed under a Contract are responsible for procuring and maintaining their own professional indemnity insurance cover as specified in the Call Off Contract Project Specification, the Supplier shall procure that any such employees or subcontractors maintains such cover in an amount adequate to cover potential liabilities for the minimum insurance period specified in a Call Off Contract and exhibits details of the relevant policy with confirmation from the insurers if required that the professional responsibilities performed in connection with the provision of Services are covered by such insurance.
- 3.23 Any Patient enquiries to the Supplier will be dealt with in an appropriate and timely manner.
- 3.24 The Supplier will maintain a complaints procedure in line with applicable law and provide as and when necessary details of such a procedure to the Awarding Authority or to any NHS Organisation.
- 3.25 The Supplier shall inform the Awarding Authority of any complaints made by any NHS Organisation about services performed under a Contract called off under the DPS and supply copies of all correspondence to the Awarding Authority which relates to complaints or the handling of them.
- 3.26 In the event that complaints regarding the Services are made by Patients to an NHS Organisation, the NHS Organisation will forthwith inform the Supplier and supply relevant correspondence.

- 3.27 The Supplier will co-operate as required with any statutory and regulatory bodies in relation to the complaints procedure and with any independent investigation of complaints. Accordingly, the Supplier will:
- Appoint a complaints manager or individual with complaints remit
 - Provide the Awarding Authority and any NHS Organisation with relevant details of the complaints manager
- 3.28 The Supplier will undertake to provide information to the NHS Organisation to support the NHS Organisation's adherence to national or local frameworks for waiting times and performance reporting.
- 3.29 The collection of data to assess Patient Reported Outcome Measures will remain the responsibility of the NHS Organisation. The Supplier will provide assistance to the NHS Organisation where the Supplier can help in gathering additional information
- 3.30 The NHS Organisation shall on reasonable notice in writing be entitled to request additional information from the Supplier covering the provision of the Services if such information is reasonably required by the NHS Organisation and to comply with any written requests under the Freedom of Information Act 2000 (as amended) or under the Freedom of Information (Scotland) Act 2002 (as amended) or under the Environmental Information Regulations 2004 (as amended) or under the Environmental Information Regulations (Scotland) 2004 (as amended).

4. Clinical governance

- 4.1 The Supplier shall ensure that a full list of Consultants is available to the NHS Organisation at all times.
- 4.2 The Supplier shall take all reasonable care to engage or employ in and about the provision of the Services only such Medical Staff as are carefully skilled and experienced in their several professions and callings.
- 4.3 The Supplier must commit to comply with any NHS Organisation's policies and procedures appropriate to the performance of the Services, including but not restricted to clinical governance policies and risk management strategies. NHS Organisations will provide these to the Supplier as necessary or upon written request
- 4.4 The Supplier must not through its actions or inactions jeopardise the NHS Organisation's compliance with Care Quality Commission (or equivalent organisations in Scotland, Wales and Northern Ireland, where applicable) standards, and with those of any future regulatory bodies as appropriate throughout the life of the DPS and during any Contract whose performance concludes outside the period of the DPS. The Supplier will use best endeavours to ensure that the actions or inactions of the Staff do not jeopardise the compliance referred to in this clause 4.4.
- 4.5 The Supplier must maintain a defined and documented quality assurance system which will ensure:
- Adherence to the NHS Organisation's Policies and Procedures where applicable. Details of applicable Policies and Procedures and the points to which adherence will be required will be determined for each Call Off Contract and described in the Call Off Contract Project Specification;

- Effective measures of infection prevention and control are used including, where relevant, decontamination and/or sterilisation of surgical and medical equipment;
 - All requirements relating to health and safety in the workplace are satisfied;
 - All legal requirements relating to radiological and laser protection are satisfied;
 - Professionals are appropriately trained and competent to perform duties required of their role
- 4.6 The Supplier must hold and maintain Care Quality Commission (CQC) (or equivalent organisations in Scotland, Wales and Northern Ireland, where applicable) registration for all premises at which the Services will be provided and operate within the guidelines outlined within the NHS Organisation's own Standard Operating Procedures throughout the life of the DPS and during any Contract whose performance concludes outside the period of the DPS.
- 4.7 The Supplier must record within the Supplier's own relevant systems, within two working days, any adverse incidents and supply the NHS Organisation with a summary of any internal enquiry into such incidents. The Supplier must commit that a copy of the full report will be provided to the relevant NHS Organisation in the event of a homicide.
- 4.8 The Supplier will be responsible for updating Patient case notes immediately following the Services. Updates must be compliant with the NHS Organisation's Standard Operating Procedures and common practice as a minimum and must include, where appropriate
- Any risk of the Patient bleeding excessively during surgery.
 - Consent forms.
 - Discharge notes and forms.
 - The date of the operation, the incision time and the end of surgery time.
 - The type of anaesthetic used, neuraxial or general.
 - Any contraindication to or variance from any of the NHS Organisation's policies for example antibiotic policy or venous thromboembolism (VTE) prophylaxis policy.
- The list above is not exhaustive. Specific requirements will be determined for each Call Off Contract and described in the Call Off Contract Project Specification
- 4.9 Where applicable, the WHO Safety Checklist documentation used by the NHS Organisation will be completed by the Supplier, copied and filed within the NHS Organisation's patient record. If the NHS Organisation's case notes are not available or have not been accessed for any episode then a copy of the WHO Safety Checklist must be provided to the NHS Organisation's Admissions Department for inclusion in the NHS Organisation's Patient notes.
- 4.10 The Supplier will implement specific audit arrangements and submit evaluation of audits to the Awarding Authority or to any NHS Organisation on request.
- 4.11 Topics for audit will be agreed between the NHS Organisation and the Supplier and will be detailed in tailored agendas for review meetings. The Supplier will ensure attendance at such meetings by an appropriately senior office of the Supplier who will be named within the Call Off Contract

- 4.12 The Supplier will have access to the NHS Organisation's full range of clinical and non-clinical risk assessments, including written policies on business continuity, and will use them as agreed with the NHS Organisation for each Call Off Contract.
- 4.13 The Supplier must have a robust system in place for reporting Patient safety incidents and reviewing of this data at appropriate levels.
- 4.14 The Supplier will investigate and manage Serious Untoward Incidents and complaints in line with the NHS Organisation's complaints and incident reporting procedures, implementing the NHS Commissioning Board Special Health Authority (formerly NPSA) investigation toolkit (or the procedures of equivalent organisations in Scotland, Wales and Northern Ireland, where applicable).

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