**NHS South, Central & West Commissioning Support Unit**

**NHS England South East - Market Engagement Briefing - School Aged Immunisation Services for the Thames Valley, Kent and Medway, and Sussex**

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| NHS England South East will be recommissioning School Aged Immunisation Services within the Thames Valley, Kent and Medway and Sussex areas. This Prior Information Notice invites suitably qualified and experienced providers to express their interest and attend a virtual pre-procurement market engagement / briefing event on 24 August 2023 at 2:00pm.The virtual event is intended to give potential providers a briefing on commissioning intentions, service requirements, likely procurement process and timelines. To register your interest in the market briefing event, please register on the Atamis eProcurement portal (details below) and access the project space for this opportunity. To register for the event, you will then need to send a message via the portal confirming your attendee details for the event. Attendee details:NameJob TitleEmailPhone Number The procurement is expected to be split into 3 lots, as detailed below:* Lot 1: Kent and Medway
* Lot 2: Sussex
* Lot 3: Thames Valley (Buckinghamshire, Oxfordshire, West Berkshire and East Berkshire)

The combined annual contract value across all lots is currently estimated to be in the region of £7,609,342, based on 2022/23 contract values and assuming 95% uptake across adolescent immunisation programmes and 60% for the influenza immunisation for the school years of Reception through to Year 6. This value also includes a sum to support action to address variation and inequalities. All figures are subject to change.Contracts are currently expected to be let for an initial 5 year term, with the option to extend for a further 2 years. Services are currently expected to commence on 1st August 2024.This notice is placed as a Prior Information Notice in order to determine market interest levels and relates only to pre-procurement market engagement only. Providers who express interest at this stage are not bound to participate in any future procurement exercise. This exercise is being managed by NHS South, Central and West Commissioning Support Unit (SCW) on behalf of the Commissioner. |

**Lot 1 - Kent and Medway**

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| Lot 1- Kent and Medway has an estimated annual contract value of £2,670,517**(inclusive of a fixed baseline/block contract value and variable element/tariff)****The annual contract value is based on 95% uptake for adolescent programmes and 65% uptake for flu (Reception – Yr6)**Contracts are currently expected to let for an initial 5 year term, with the option to extend for a further 2 years. Services are currently expected to commence on 1st August 2024.The financial model for the contract is expected to include a fixed baseline, adjusted annually for population changes, plus a variable element. The variable element will be payable on a tariff price basis for any additional activity delivered above the fixed baseline. All programme activity will be monitored as part of the contract review process to enable variable payment. TUPE is expected to apply for this lot. **Programme background** Immunisation is one of the most successful and cost effective health protection interventions. High immunisation rates are key to preventing the spread of infectious disease, complications and possible early death among individuals, and to protecting the population’s health.School Aged Immunisation Services provide vaccination to all eligible children and young people of school age, irrespective of where they receive their education. The core aim of the service is to achieve the highest possible levels of coverage of the vaccination programmes in scope to protect school aged children from developing vaccine preventable childhood diseases that are associated with significant mortality and morbidity. To this end, delivery is primarily via schools as being highly accessible for the majority of children. All schools and educational settings (e.g. special schools, pupil referral units, independent schools) are in scope for this element of the model.  In addition, Providers are expected to offer additional opportunities in convenient settings outside of school, and to make opportunities available to children and young people who do not attend school, whether because they are electively home-educated, school ‘phobic’, excluded or not at school on the days when vaccination sessions are held.  The programmes currently in scope are: * Diphtheria, tetanus and poliomyelitis (Td/IPV adolescent booster);
* Meningococcal ACWY (MenACWY);
* Human papillomavirus (HPV);
* Seasonal influenza (flu) immunisation programmes for school aged children (the cohort is expected to expand in future years); and
* Measles, mumps and rubella (MMR) catch-up.
* Catch up of routine childhood immunisations for un- or under-immunised children and young people.

This scope may be extended in future to include additional programmes as advised/recommended by the Joint Committee of Vaccinations and Immunisations and/or at the request of the Commissioner. Providers will also be expected to support responses to outbreaks of vaccine programme preventable diseases. **Aim and Objectives**The aim of the service is to deliver safe and effective, evidence-based, population-wide immunisation programmes for the eligible children. The service offer will incorporate the following features: * Strong local clinical and managerial leadership focussed on maximising coverage and uptake and reducing inequalities
* Identification of, and full offer to, the whole eligible population, with repeated offers until school leaving age as required to achieve maximum coverage
* Capacity and capability to reach out and engage with the communities served to build awareness and trust, supported by a programme of promotional activities
* Planned and co-ordinated annual programme of delivery that is focussed on children and families, is accessible, convenient and culturally sensitive, takes account of local needs and inequalities, with tailored and targeted interventions including outreach as required
* Safe and effective delivery by suitably trained, flexible staff with effective use of skill mix, striving for a workforce that reflects the local population
* An effective model for securing consent
* Access to timely and accurate data to inform delivery, supported by flexible IT systems that can respond to national changes and local needs

There is an expectation that the contract holder will work with public health nursing and children’s services across the relevant geography/ies to maximise collaboration and opportunities for an integrated service offer and delivery. The provider will work with the commissioner to implement and respond to the recommendations of the national immunisation strategy (publication imminent). The strategy is expected to include a requirement for providers to work as an integrated network of local immunisation services which work collaboratively to ensure no one is left behind. The provider will therefore be expected to link in with wider models of vaccination delivery at Integrated Care System level. **Kent and Medway School Aged population** In scope are those children eligible for the programmes identified within the service specification. This includes: 1. Children who attend school in the local area
2. Children who are registered in the local area but are not a resident and/or do not attend a school in the local area
3. Children who are resident in the local area but are not registered with a local GP or who do not attend a local school.

The adolescent programme is predominantly delivered within secondary schools but will be offered in other locations to meet children’s and families’ needs.The Seasonal Flu programme is predominantly delivered to primary school children from reception to year 6 but the provider will be expected to vaccinate any additional cohorts that are advised in the annual flu letter. For the 2023/2024 flu season, the programme will include children in school years 7 to 11.The catch-up service for the routine childhood immunisation programmes will include school aged children who are of school age or about to start school, who are in further education and a referral service for children/families of pre-school age. The below shows the **approximate** number of children for academic year 2021/22 in schools by area. Children (Reception to Year 11):

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| Kent  | 256,764 |
| Medway | 50,339 |
| **Total** | **307,103** |

Please note that these are approximate numbers at the date of publishing.[Schools, pupils and their characteristics, Academic year 2021/22 – Explore education statistics – GOV.UK (explore-education-statistics.service.gov.uk)](https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics) |

**Lot 2 - Sussex**

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| Lot 2 - Sussex has an estimated annual contract value of £1,987,595 **(inclusive of a fixed baseline/block contract value and variable element/tariff)****The annual contract value is based on 95% uptake for adolescent programmes and 65% uptake for flu (Reception – Yr6)**Contracts are currently expected to let for an initial 5 year term, with the option to extend for a further 2 years. Services are currently expected to commence on 1st August 2024.The financial model for the contract is expected to include a fixed baseline, adjusted annually for population changes, plus a variable element. The variable element will be payable on a tariff price basis for any additional activity delivered above the fixed baseline. All programme activity will be monitored as part of the contract review process to enable variable payment. TUPE is expected to apply for this lot. **Programme background** Immunisation is one of the most successful and cost effective health protection interventions. High immunisation rates are key to preventing the spread of infectious disease, complications and possible early death among individuals, and to protecting the population’s health.School Aged Immunisation Services provide vaccination to all eligible children and young people of school age, irrespective of where they receive their education. The core aim of the service is to achieve the highest possible levels of coverage of the vaccination programmes in scope to protect school aged children from developing vaccine preventable childhood diseases that are associated with significant mortality and morbidity. To this end, delivery is primarily via schools as being highly accessible for the majority of children. All schools and educational settings (e.g. special schools, pupil referral units, independent schools) are in scope for this element of the model.  In addition, Providers are expected to offer additional opportunities in convenient settings outside of school, and to make opportunities available to children and young people who do not attend school, whether because they are electively home-educated, school ‘phobic’, excluded or not at school on the days when vaccination sessions are held.  The programmes currently in scope are: * Diphtheria, tetanus and poliomyelitis (Td/IPV adolescent booster);
* Meningococcal ACWY (MenACWY);
* Human papillomavirus (HPV);
* Seasonal influenza (flu) immunisation programmes for school aged children (the cohort is expected to expand in future years); and
* Measles, mumps and rubella (MMR) catch-up.
* Catch up of routine childhood immunisations for un- or under-immunised children and young people.

 This scope may be extended in future to include additional programmes as advised/recommended by the Joint Committee of Vaccinations and Immunisations and/or at the request of the Commissioner. Providers will also be expected to support responses to outbreaks of vaccine programme preventable diseases. **Aim and Objectives**The aim of the service is to deliver safe and effective, evidence-based, population-wide immunisation programmes for the eligible children. The service offer will incorporate the following features: * Strong local clinical and managerial leadership focussed on maximising coverage and uptake and reducing inequalities
* Identification of, and full offer to, the whole eligible population, with repeated offers until school leaving age as required to achieve maximum coverage
* Capacity and capability to reach out and engage with the communities served to build awareness and trust, supported by a programme of promotional activities
* Planned and co-ordinated annual programme of delivery that is focussed on children and families, is accessible, convenient and culturally sensitive, takes account of local needs and inequalities, with tailored and targeted interventions including outreach as required
* Safe and effective delivery by suitably trained, flexible staff with effective use of skill mix, striving for a workforce that reflects the local population
* An effective model for securing consent
* Access to timely and accurate data to inform delivery, supported by flexible IT systems that can respond to national changes and local needs

There is an expectation that the contract holder will work with public health nursing and children’s services across the relevant geography/ies to maximise collaboration and opportunities for an integrated service offer and delivery. The provider will work with the commissioner to implement and respond to the recommendations of the national immunisation strategy (publication imminent). The strategy is expected to include a requirement for providers to work as an integrated network of local immunisation services which work collaboratively to ensure no one is left behind. The provider will therefore be expected to link in with wider models of vaccination delivery at Integrated Care System level. **Sussex School Aged population** In scope are those children eligible for the programmes identified within the service specification. This includes: 1. Children who attend school in the local area
2. Children who are registered in the local area but are not a resident and/or do not attend a school in the local area
3. Children who are resident in the local area but are not registered with a local GP or who do not attend a local school.

The adolescent programme is predominantly delivered within secondary schools but will be offered in other locations to meet children’s and families’ needs.The Seasonal Flu programme is predominantly delivered to primary school children from reception to year 6 but the provider will be expected to vaccinate any additional cohorts that are advised in the annual flu letter. For the 2023/2024 flu season, the programme will include children in school years 7 to 11.The catch-up service for the routine childhood immunisation programmes will include school aged children who are of school age or about to start school, who are in further education and a referral service for children/families of pre-school age. The below shows the **approximate** number of children for academic year 2021/22 in schools by area. Children (Reception to Year 11)

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| Brighton & Hove | 33,295  |
| East Sussex | 68,755  |
| West Sussex | 121,162  |
| **Total** | **223,212**  |

Please note that these are approximate numbers at the date of publishing.[Schools, pupils and their characteristics, Academic year 2021/22 – Explore education statistics – GOV.UK (explore-education-statistics.service.gov.uk)](https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics) |

**Lot 3 - Thames Valley (Buckinghamshire, Oxfordshire, West and East Berkshire)**

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| Lot 3 – Thames Valley (Buckinghamshire, Oxfordshire, West and East Berkshire) has an estimated annual contract value of £2,951,230, **(inclusive of a fixed baseline/block contract value and variable element/tariff)****The annual contract value is based on 95% uptake for adolescent programmes and 65% uptake for flu (Reception – Yr6)**Contracts are currently expected to let for an initial 5 year term, with the option to extend for a further 2 years. Services are currently expected to commence on 1st August 2024.The financial model for the contract is expected to include a fixed baseline, adjusted annually for population changes, plus a variable element. The variable element will be payable on a tariff price basis for any additional activity delivered above the fixed baseline. All programme activity will be monitored as part of the contract review process to enable variable payment. TUPE is expected to apply for this lot. **Programme background** Immunisation is one of the most successful and cost effective health protection interventions. High immunisation rates are key to preventing the spread of infectious disease, complications and possible early death among individuals, and to protecting the population’s health.School Aged Immunisation Services provide vaccination to all eligible children and young people of school age, irrespective of where they receive their education. The core aim of the service is to achieve the highest possible levels of coverage of the vaccination programmes in scope to protect school aged children from developing vaccine preventable childhood diseases that are associated with significant mortality and morbidity. To this end, delivery is primarily via schools as being highly accessible for the majority of children. All schools and educational settings (e.g. special schools, pupil referral units, independent schools) are in scope for this element of the model.  In addition, Providers are expected to offer additional opportunities in convenient settings outside of school, and to make opportunities available to children and young people who do not attend school, whether because they are electively home-educated, school ‘phobic’, excluded or not at school on the days when vaccination sessions are held.  The programmes currently in scope are: * Diphtheria, tetanus and poliomyelitis (Td/IPV adolescent booster);
* Meningococcal ACWY (MenACWY);
* Human papillomavirus (HPV);
* Seasonal influenza (flu) immunisation programmes for school aged children (the cohort is expected to expand in future years); and
* Measles, mumps and rubella (MMR) catch-up.
* Catch up of routine childhood immunisations for un- or under-immunised children and young people.

This scope may be extended in future to include additional programmes as advised/recommended by the Joint Committee of Vaccinations and Immunisations and/or at the request of the Commissioner. Providers will also be expected to support responses to outbreaks of vaccine programme preventable diseases. **Aim and Objectives**The aim of the service is to deliver safe and effective, evidence-based, population-wide immunisation programmes for the eligible children. The service offer will incorporate the following features: * Strong local clinical and managerial leadership focussed on maximising coverage and uptake and reducing inequalities
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* Planned and co-ordinated annual programme of delivery that is focussed on children and families, is accessible, convenient and culturally sensitive, takes account of local needs and inequalities, with tailored and targeted interventions including outreach as required
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* An effective model for securing consent
* Access to timely and accurate data to inform delivery, supported by flexible IT systems that can respond to national changes and local needs

There is an expectation that the contract holder will work with public health nursing and children’s services across the relevant geography/ies to maximise collaboration and opportunities for an integrated service offer and delivery. The provider will work with the commissioner to implement and respond to the recommendations of the national immunisation strategy (publication imminent). The strategy is expected to include a requirement for providers to work as an integrated network of local immunisation services which work collaboratively to ensure no one is left behind. The provider will therefore be expected to link in with wider models of vaccination delivery at Integrated Care System level. **Thames Valley School Aged population** In scope are those children eligible for the programmes identified within the service specification. This includes: 1. Children who attend school in the local area
2. Children who are registered in the local area but are not a resident and/or do not attend a school in the local area
3. Children who are resident in the local area but are not registered with a local GP or who do not attend a local school.

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| Buckinghamshire | 87,205  |
| Oxfordshire | 102,716  |
| West Berkshire | 25,190  |
| Bracknell Forest | 18,858  |
| Reading | 22,900  |
| Slough | 29,588  |
| Windsor & Maidenhead | 23,057  |
| Wokingham | 29,271  |
| **Total** | **338,785**  |

Please note that these are approximate numbers at the date of publishing.[Schools, pupils and their characteristics, Academic year 2021/22 – Explore education statistics – GOV.UK (explore-education-statistics.service.gov.uk)](https://explore-education-statistics.service.gov.uk/find-statistics/school-pupils-and-their-characteristics) |