NHS Cambridgeshire and Peterborough ICB, Digital Enablers Programme: New Model of Care, Digital Front Door, Workflow Optimisation, Health Optimisation - Market Engagement

Description of the procurement:

Local people and our staff have told us that we need to make improvements to services in the following ways:

1. Supporting people to live longer, healthier lives by improving health and well-being, and supporting people and communities to look after themselves by improving our digital self-care products and services.

2. Facilitate more effective digitally enabled triage, digital patient communications, signposting, and booking into services (physical and digital), and reducing clinical workload.

3. Simplifying people's journeys through health and care when they need help including advice and options (choice).

We can only support, enable and simplify services if we provide a Digital Front Door. The scope of our intended procurement will cover:

1. Selection of a Partner / Partners to work with us over the duration of the contract as our new model of care evolves and the scope of our vision of digital enablement develops. We don't know everything we will need now and will seek flexibility, including flexible commercial models. We do know that we will always act in the service of our people and therefore we will seek partners that are committed to providing social value.

2. Provision of digital services for integrated care. We will be especially interested in the potential for outcome-based contracts where partners are offering, for example, services that enable our technology to be supported and to become integrated in clinical services.

3. Provision of digital solutions. Our mandatory requirements will be to improve the technology available to us. The scope of technology we need will be described more fully in future market engagement or via our RFP, however, it is also briefly summarised below. We will be urging partners to consider our goals to support, enable and simplify services. This will mean that our procurement will focus on solutions which, for example, understand and improve the citizen and workforce experience of our care system.

Our mandatory solutions requirements are:

• Full end-to-end transparency of data and reports available to the ICB and provider organisations as consumers.

• Adherence to open standards and the use of APIs for storing and sharing health and care data with the ability to fully integrate with national, regional and local IT systems, with an emphasis on the delivery of integrated health

o Provision for development of new API feeds to facilitate the goal of connected care and joined up care records. This includes shared care records for direct care.

o A facility for analytics and reports that provide simplified reporting

• Conformance to the national specification for Personal Health Records and alignment to the NHSApp, or an alternative approach to supporting, enabling, and simplifying services which delivers greater benefits. Integration with NHS Login is a mandatory requirement.

• Simplification of the current App landscape, ensuring improved direct access to care for patients. Ability to integrate closely with third party App partners so that one or more long term health conditions can be self managed.

• Alignment of the Apps to the way users want to consume services and the way services are designed.

• Optimisation and Correction of existing Apps to ensure a lean and agile landscape.

• Implementation of well-being management digital pathway and landscape.

• Implementation and enhancement of chronic condition self management digital landscape.

• Implementation and enhancement of self-care and mental health digital landscape.

We suspect that no single vendor can meet the aspirations for our digitally enabled New Model of Care. The ICB will be especially open to approaches from consortia, and supply chains, who can meet the following criteria:

1. Bring innovation and a fresh perspective to the challenge faced. The ICB will not constrain the ability to innovate by setting over prescriptive requirements, which may not be as wide or up to date as that of vendors.

2. Vendors will present as a stable and viable set of organisations that can invest in the relationship with the ICB and can be flexible in meeting our evolving needs.

3. They are compliant with current standards so we can mitigate the risk of not being locked into a bespoke set of products and services which do not deliver and do not evolve.

The potential scope of a digital enablers programme could be summarised as providing 4 sets of complementary core services.

A: PRIMARY CARE

A citizen could be enabled to:

• Access clinical advice online.

• Book online consultation with my GP or other practice professional including video.

• Book a GP appointment.

• Follow care navigation - e.g. book pharmacy services, or NHS 111 "option 2" mental health crisis support.

• Order prescriptions.

• View their patient record.

• Interact with digital patient communications - e.g. Receive /send in-app messages.

• Access or seamless link to health information e.g. NHS 111 online.

• Access or seamless link to social prescribing apps.

• Benefit from a future AI triage pathway for the above functions over time.

B: HEALTH APP CAPABILITIES

With citizen consent the app:

• Learns about individual health-related behaviour.

• Offers individualised information and content to modify behaviour (e.g. weight, smoking, exercise, sleep).

• Has the option to link to mobile /wearable devices.

• Uses data to identify risks and engages in health optimisation programmes.

• Accesses or seamlessly links to their condition specific apps e.g. asthma, COPD.

• Enables citizens to provide service experience feedback.

• Provides 'waiting well' support and advice.

• Has a development path for the potential use of genomic sequencing to identify risk and improve care.

C: VIRTUAL WARD & REMOTE MONITORING

Citizens receiving care on virtual wards or accessing remote monitoring will:

• Benefit from access or seamless link to my virtual ward and remote monitoring apps.

D: DIGITAL INTEROPERABILITY

• In addition, we would want the provider(s) of the above functions to enable direct access or a seamless link to hospital portals, such as MyChart, which already provide a wide range of appointment booking, information and record viewing capabilities.

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We will be hosting a supplier day on 13.11.2024 at the Marriott Hotel in Huntingdon. This day will be an opportunity for the ICB to further engage with the market, share our vision and engage with vendors.

Please indicate your interest in attending this day by completing the survey that is available on Atamis and returning it via Atamis as soon as possible and no later than 25/10/24. Each company/ organisation may have a maximum of 2 attendees as delegates or exhibitors.

Interested providers will be able to view this opportunity via the 'Live Opportunities' list on the 'Health Family' e-procurement system, Atamis. Click on 'View our Live Opportunities' from the home page, available on the following link: <https://health-family.force.com/s/Welcome>

The project is listed under the name of NHS Cambridgeshire and Peterborough Digital Enablers Programme - Market Engagement - reference number C308563

Once you have found the opportunity (via the search function, using the title or reference number), to gain full access, you will need to click on 'Register interest' - this will take you to the log-in page.

If you are not already registered on the system, you will need to do so before gaining full access to the documentation and to submit your market engagement survey, interest to attend and ask any clarification questions.

Please note, attendance at the supplier day will not influence the outcome of the procurement process and suppliers not attending will not be disadvantaged.

We expect to undertake further market engagement around the specification with a view to completing a procurement by the end of March 2025.