**Appendix A**

**Request for Information - Response Document**

**NHS England NHS Bowel Screening Managed Service Re-Procurement**

**Ref: C267792**

**Note: Please note that this document must be completed and returned via the e-Tendering portal** <https://atamis.cloudforce.com/>

**All responses will remain confidential; however, an anonymous summary of responses may be published on the e- Tendering portal.**

**The Contracting Authorities are committed to open government and meeting legal responsibilities under the Freedom of Information Act 2000 (FOIA) and the General Data Protection Regulation (EU) 2016/679 (GDPR). Accordingly, any information created by or submitted to the Contracting Authorities (including but not limited to the information contained in this RFI, clarification questions, responses, and feedback) may need to be disclosed by the Contracting Authorities in response to a request for information. Please be aware before proceeding that you may be adding personal data in response to this RFI which may be subject to privacy regulations.**

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| **A Organisational Information** | | | |
| Organisation name. | | Please give details: | |
| Please state the type of organisation e.g., Public limited Company, Limited Company, Charity, Social Enterprise, NHS organisation, other. | | Please give details: | |
| Number of employees in the organisation. | | Please give details: | |
| Name of respondent and contact details. | | Please give details: | |
| **B Market Capability and Capacity**  **The Commissioners wish to understand the capacity and level of expertise within the market to deliver this project. NB: This information is requested to allow the Commissioners to gauge the size and type of organisations interested in providing the service.**  **Please provide the following information:** | | | |
| **Subject/Question** | | | **Response** |
| 1 | Do you currently provide NHS Screening support services as described in the attached documents? | | Yes/No:  If yes, please give details: |

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| 1a | Please describe the contracts you currently hold and geographical locations, including annual activity levels. | Please give details: |
| 2 | Do you think the current service model and draft background document attached achieves the best outcomes for patients considering the vision and scope of the programme? | Yes/No:  If yes, please give details: |
| 2a | If not, what opportunities do you consider could improve pathways and service user experience for patients? | Please give details: |
| 2b | Please provide suggestions of what would need to change to make these elements deliverable. | Please give details: |
| 3 | Why do you believe the existing service model delivers good clinical outcomes, clinical viability, high-quality and value for money? |  |
| 4 | What do you see as the key foundations for this type of service to be successful? |  |
| 5 | What do you foresee as the risks and issues in relation to delivery of the service either in its existing model and any new models of delivery? |  |
| 6 | Do you have any suggestions about how this service could reduce health inequalities relating to service users? | Please give details: |
| 7 | Please provide any further comments you have on the attached draft specification including how we might build in the ability to innovate. |  |

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| **C** | **Contract Model** | |
| 7 | Please indicate if you would be interested in providing the service as a single organisation or in partnership with one or more other organisations (stating whether in its current model and/or your proposed future model.) | Please give details: |
| 8 | We are looking to have a 5 year contract for this service – 3 years plus 2 optional extensions of 12 months each. What do you see as the benefits and risks of this approach? | Please give details: |
| 9 | What contractual risks, if any, have you identified in relation to this service either in its existing model and any new models of delivery? | Please give details: |
| 10 | How could we mitigate against any contractual risks you have identified? | Please give details: |

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| **D** | **Finance**  **We anticipate that TUPE will apply to this contract, however, we do not have any TUPE information to share at this time.**  Indicative Activity - please see Appendix B for further information. | |
| 11 | We are currently working to develop a pricing model for the new service that makes it attractive to the market whilst delivering value for money through incentivised performance delivery. We would like to explore the following models but would like your feedback on what models in your experience would meet the objectives mentioned earlier. What would be your preferred pricing model:   1. Cost per kit 2. Activity based contract with MIG and marginal increase/stepped costs for increased activity 3. Block contract based upon agreed activity with incentivised performance to ensure level of activity is optimised.   d) Other (please state)  (*Please note that potential providers will not be held to any pricing models they provide in response to this RFI, this information is to help the commissioner gauge what the current market thinking is in relation to financial deliverability*). | Please give details: |

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| 12 | If cost per kit, would you expect this price to include all elements (transport, IT, consumables etc.) of the programme or would you prefer a model where the costs are separately identified in a more transparent ‘open book’ approach? Equally, are there some elements that you would expect to be included in the price and some which are separated out, for example, sending invitation letters, sending test kits, testing kits, managing helpdesk calls and enquiries? |  |
| 12a | Please provide an indicative price for FIT kits and/or other elements of the service (please note this will be treated as commercially sensitive, will not be evaluated and is for benchmarking purposes only) |  |
| 13 | Are there any other comments or anything else we should be considering in relation to the pricing model? |  |
| 14 | What financial risks, if any, have you identified in relation to this service and any of the pricing models suggested? | Please give details: |
| 14a | How could we mitigate against any financial risks you have identified? | Please give details: |
| **E** | **Mobilisation** | |
| 15 | How many weeks do you think will be required to mobilise this type of service from contract award notification to contract commencement? Please detail what phases of mobilisation would be required and indicative timescales associated with each step. | Please give details: |

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| 16 | What would you consider the expected start-up costs and investment needed to mobilise this type of service and why? | Please give details? |
| 17 | Please describe the areas and reasons where a supplier may need support from the Commissioners in mobilising this type of service. | Please give details: |
| **F** | **Premises** | |
| 18 | Premises have not been identified for these services,  however, we are interested in the supplier’s views on where the optimum base for service staff might be to meet the requirements for the regions and what type of premise would be needed and why? What might be the barriers to securing adequate premises for this type of service and what in your experience is a realistic mobilisation period for securing appropriate premises in the timescales | Please give details: |
| **G** | **Barriers to bidding:** | |
| 19 | Are there any barriers that might prevent suppliers from bidding, noting that all barriers are not within the control of the contracting authorities? If so please outline. | Please give details: |

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| **H** | **Whole Service Risk** | |
| 20 | Please summarise the high-level material risks associated with the service model, other than those identified already, including brief details of potential impact and provide details of how these might be mitigated | Please give details: |
| **I** | **Any other comments:** | |
| 21 | Are there any other elements that commissioners should be deliberating in addition to the questions above? Please use this as an opportunity to highlight anything else which should be considered in relation to this early market engagement process. |  |