REQUEST FOR INFORMATION (RFI)

|  |  |
| --- | --- |
| **Commissioning Organisation** | NHS Blackpool Clinical Commissioning Group (CCG) |
| **Service** | Pulmonary Rehabilitation Service |
| **1** | **Background and Context** |
| 1.1 | Chronic obstructive pulmonary disease (COPD) is a serious long-term respiratory disease in which the flow of air into the lungs is gradually reduced over time. The two most common types of COPD are chronic bronchitis and emphysema, which commonly co-exist. There is no cure for COPD and good symptom management is essential to stablise disease and prevent recurrent flare-ups or exacerbations. Exacerbations often require intensive treatment and can be severe enough to require hospital admission |
| 1.2 | Pulmonary Rehabilitation is a quality standard for the treatment of COPD, both for people with stable COPD and those who have just experienced an acute exacerbation whether that be after being hospitalised or cared for within the community. Pulmonary rehabilitation is an evidenced based treatment for COPD that reduces the short term risk of hospital admission or readmission after an exacerbation, improves quality of life, anxiety, depression, breathlessness and the exercise capacity of people with COPD. |
| 1.3 | COPD is a common cause of emergency admissions/readmissions. Evidence shows that Pulmonary Rehabilitation increases the quality of life for patients and reduces exacerbations. Therefore the service should reduce the burden on both primary and acute provision through the promotion of self-management. |
| 1.4 | The Pulmonary Rehabilitation Service delivery model will consist of the following:* Patient assessment to determine patient suitability for the service
* Pulmonary Rehabilitation via:
	+ A Self-Management web based online application and management tool OR
	+ A six week face to face programme of one hour of education and one hour of exercise.

This delivery model would ensure patients that prefer to attend face to face sessions and those that prefer a self-management option would both be catered for. The provider would be expected to ensure the clinical element of the online platform is maintained for patients i.e. medication. |
| 1.5 | The provider would expect to carry out assessments of patients referred into the service to determine if patients are suitable for the Pulmonary Rehab service. |
| 1.6 | The provider would attract a fee for the following:* Patient assessment
* Completion of face to face course (activity will be capped)
* Enrolment of the patient on the self-management online platform
 |
|  |  |
| **2** | **Instructions** |
| 2.1 | Suppliers wishing to engage in the RFI process should complete the brief questionnaire below and return it sophie.riding@nhs.net **by 7 November 2016** |
| **3** | **Questionnaire** |
|  | All information submitted by your organisation will be dealt with in the strictest confidence in compliance with the Lancashire CCGs Information Governance policies specifically Data Protection Act. Responses are only expected to be brief; however, bidders are invited to submit details of models of service delivery together with any supporting marketing or business details.  |

1. Provider Details

|  |  |
| --- | --- |
| Name of Organisation:  |  |
| Address of organisation:  |  |
| Contact name:  |  |
| Telephone:  |  |
| Email Address:  |  |
| Website Address:  |  |
| Type of organisation e.g. Public limited Company, Limited Company, Charity, Social Enterprise, NHS organisation, other (please state); |  |
| Number of employees in the organisation; |  |
| Do you currently provide a GP contract? If so, please provide the type of contract (eg. GMS, PMS, APMS) and in which geographical locations and/or populations served. |  |

1. Do you currently provide any Pulmonary Rehabilitation Service? (Please tick the appropriate box)

|  |  |
| --- | --- |
| YES |  |
| NO |  |

1. In terms of the outline Pulmonary Rehabilitation Service briefly described above and within the draft service specification:
2. If you do not currently provide a pulmonary rehabilitation service, how would you expect to recruit new staff?
3. Please provide details of cost structure associated with service delivery models?
4. How would you propose to deliver the face to face sessions?
5. How and where would you propose to deliver the service from?
6. Do you think the service is deliverable as described above and within the service specification?

|  |  |
| --- | --- |
| YES |  |
| NO |  |

If no, what elements of the service do you consider undeliverable?

1. Do you envisage any one-off set-up costs related to delivering the service?
2. How many weeks do you think will be required to mobilise staff for the commencement of the service?
3. Please summarise the key risks to the mobilisation of services and the main challenges you would face as a Potential Provider
4. Are there any barriers to prevent you from bidding?
5. Brief summary of any similar existing services you provide and locations (including service models)
6. Existing number of staff and skill mix of staff, for example is the service Nurse/Physio/OT led?
7. What arrangements would you put in place to ensure the transfer of patients from the old service to the new service is a smooth transition?
8. How are the outcomes of the Pulmonary Rehab service that you currently provide (or propose to provide) evaluated?
9. Please add any additional information/ considerations you wish to share at this point