**NHSE Vaccination and Screening Directorate: Infectious Diseases in Pregnancy (IDPS) Screening Programme- Data collection and outcomes surveillance service Request for Information (RFI)**

The Vaccination and Screening directorate (V&S) forms part of NHS England and exists to protect and improve the nation’s health and wellbeing and reduce health inequalities. This is achieved through world-leading science, knowledge and intelligence, advocacy, partnerships, and the delivery of specialist public health services. NHSE V&S leads the NHS Screening Programmes.

Screening is a process of identifying apparently healthy people who may be at increased risk of a disease or condition. People can then be offered information, further tests and appropriate treatment to reduce their risk and/or any complications arising from the disease or condition.

This document is related to the NHS Infectious Diseases in Pregnancy Screening Programme.

**NHS Infectious Diseases in Pregnancy Screening (IDPS) Programme**

The UK National Screening Committee (UK NSC) recommends systematic population screening in pregnancy for HIV, hepatitis B and syphilis. This is to enable early detection and treatment for infections in pregnancy in order to significantly reduce the risk of vertical transmission of infection. The NHS Infectious Diseases in Pregnancy Screening (IDPS) programme has responsibility for implementing this policy in the NHS.

The broad potential health outcomes of the IDPS Programme are:

* safeguarding the health of women identified with these conditions in pregnancy
* preventing new infant infections
* protecting the health of infants born to women with HIV, hepatitis B or syphilis

Approximately 650,000 pregnant women enter the antenatal screening pathway in England each year, with more than 3,500 of these women expected either to have a screen positive result for HIV, hepatitis B or syphilis, or to be identified as having a prior diagnosis of these infections. Uptake of antenatal screening for HIV, hepatitis B and syphilis is high in England, over 99% for all three infections in 2020 to 2021.

A formal IDPS Programme was established in 2008 and became part of the population screening programmes within Public Health England in 2013. The screening programmes moved to NHS England in October 2021. Each condition has a screening pathway that describes a woman’s ‘step by step’ journey from booking to delivery. The pathway goes from identification of the eligible population and the offer of screening through to timely referral and entry into care and specialist services. The pathway correlates with the themes of the programme screening standards.

The IDPS screening standards to include defined metrics to support screening quality assurance processes. From April 2016 the IDPS programme took over coordination of the annual data collection from PHE National Infection Service’s National Antenatal Infections Screening Monitoring (NAISM)

IDPS data collection and the outcomes surveillance service aims to follow women with a diagnosis of HIV, hepatitis B or syphilis in pregnancy through the screening pathway, diagnostics and specialist treatment services, to the point of delivery and the initial postnatal period.

This includes follow up of infants exposed to any one of the infections and outcomes for each infant are also part of the outcome’s surveillance, including additional data collection on any infant diagnosed with a vertical transmission of infection, regardless of maternal infection status in pregnancy.

The purpose of the surveillance is to assess the impact of the IDPS programme on the population and improve outcomes for babies born to women with HIV, hepatitis B and syphilis.

Data is collected via a secure online system from all NHS Trusts across England which enables the IDPS service to deliver desired outcomes.

The current contract initiated in January 2018

**Overview of Requirements**

The following section describes NHS England’s potential plans to re procure the services of IDPS data collection and surveillance service.

The future service would be required to provide:

**Audits:**

* surveillance of vertical transmissions for HIV, hepatitis B, syphilis and congenital rubella syndrome
* expert input on function, technical aspects and governance, in close collaboration with the IDPS programme and other key stakeholders
* collect, analyse and report obstetric and paediatric data on HIV, hepatitis B and syphilis in pregnant women and children in order to assess the key outcomes of the IDPS Programme and its impact on:
  + prevention of vertically acquired HIV, hepatitis B and syphilis
  + protecting the health of women with HIV, hepatitis B and syphilis during and after pregnancy
  + protecting the health of infants newly diagnosed with HIV, hepatitis B and congenital syphilis
* provide KPI and standards data for IDPS standards S05 (a, b & c), S06 (KPI ID2), S07 (a & b), S08, in line with national timeframes
* support the production of annual reports by NHS England into each of the 3 infections

**Description of the Engagement**

NHS England is asking potential bidders to complete a market assessment questionnaire to help inform the future commissioning of the service

The aim of the market engagement exercise is to inform potential providers of the opportunity and to collate feedback. The information will be used to assist NHS England V&S in deciding on the most appropriate approach for the future of the service.

Completed questionnaires must be submitted by **14th March 2023** via the Atamis Tendering system. The RFI questions are provided on page 4 of this document

Any procurement conducted as a result of this notice will be advertised separately and all suppliers interested will be required to respond to the procurement advertisement once published. This process is not in any way connected to the tendering and evaluation process of any subsequent procurement process and responses to this RFI will not be evaluated or scored or part of any selection process.

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| **Name of your Organisation:** |  |
| **Contact Name(s) and Role(s):** |  |
| **Address:** |  |
| **Telephone Number:** |  |
| **Email Address:** |  |

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| 1.Serve model (Clinical and Programme management) |
| 1.1 What are your views on the current model and how do you think this could be improved/ developed? |
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| 1.2 How do you envisage the service model working in relation to the clinical and wider programme aspects? |
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| 2. Stakeholders |
| 2.1 Which key stakeholders do you think would be key to the delivery of IDPS data collection and surveillance service? |
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| 3.Access to information/Data sources |
| 3.1 Please outline the timescales and elements required in developing an online submission portal for the service. In relation to;   * software development * PID and information Governance * regulation 3 approval * communication and engagement with maternity services |
| 3.2 What initial resources would need to be considered/ required for creating an online portal for data collection? |
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| 4.National Standards |
| 4.1 How do you envisage the screening standards and reporting requirements being met for the service? |
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| 5. challenges |
| 5.1 Are there any challenges you would foresee in the development/ overall delivery of the service? |

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| 6. Other |
| 6.1 Please provide any feedback or observations you think we should consider as part of the service |
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| 6.2 Would you be interested in bidding for this service? please provide any rationale for your response |
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