

Developing people for health and healthcare

Library & Knowledge Services

Knowledge for Healthcare – independent audit



eRequest for Quotation


4 December 2015

Version Final

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Sign off

Name	Signature	On Behalf of
Patrick Mitchell		Health Education England

Contact Details for Queries

The contact for all queries relating to this tender is:

Mrs Louise Goswami, National Programme Manager
Library and Knowledge Services Team
Health Education England
Calverley House
55 Calverley Road
Tunbridge Wells
Kent
TN1 2TU

All queries should be raised by email, so that we have a formal record of all questions raised by suppliers, and should be directed to louise.goswami@nhs.net

Suppliers should be aware that in the interests of fairness, responses to questions raised by one supplier may be communicated to all suppliers. If your query is commercially sensitive, then please mark the query "COMMERCIAL IN CONFIDENCE".

In all correspondence, please quote the reference number for this tender LKS-04122015

Instructions Regarding Your Response

Providers may wish to submit their tenders electronically by email in a pdf format quoting the reference number provided LKS – 04122015. Please send to the following address:

➤ **Email:** louise.goswami@nhs.net

Tenders, all documents and all correspondence relating to the tender must be written in English or a full English translation provided at no cost to HEE.

Only one tender is permitted from each provider. In the event that more than one tender is submitted, only the last tender will be evaluated and the other/s will be disregarded.

By submitting a tender you are deemed to have accepted the NHS standard terms and conditions, should it be required please ask for a template copy.

The tender must not arrive later than the date and time stipulated above. Tenders received after that time may not be considered, unless the provider can prove that the tender was dispatched in sufficient time to meet the specified due date.

HEE reserves the right to issue supplementary documentation at any time during the procurement process to clarify any issue or amend any aspect of the tender. All such further documentation that may be issued shall be deemed to form part of the tender and shall supplement and/or supersede any part of the tender to the extent indicated. Where supplementary documentation is issued, HEE may, at its discretion, extend the due date for tenders to enable providers to properly consider such documentation before finalising their submissions.

HEE reserves the right to cancel the further competition at any point and shall not be liable for any costs incurred by providers resulting from any such cancellation.

An acceptance of a tender shall not result in the formation of a legally binding contract. The successful tenderer shall, upon HEE's request, execute a formal written contract, based on the terms and conditions set out in the applicable framework.

Providers for services where a conflict of interest may exist or may arise must inform HEE and submit tenders for avoiding or managing such conflicts.

The successful provider will be party to confidential information. The provider will be expected to observe confidentiality requirements and may not share information with employees of the provider other than those directly involved in the tender.

You are required to complete the Declaration at Annexe III, on your own company letterhead, duly signed by an appropriately authorised employee.

You are also required to note the Freedom of Information and Confidentiality statements included at Annexe IV.

Prices

Your prices for each of the requirements outlined later should be clearly stated. All prices should be quoted exclusive of VAT. For any optional components, please identify these separately from the main requirements to avoid confusion. State any costing assumptions clearly.

References

We will require two references from organisations that you have delivered similar services for in the last three years. We will not be doing site visits, but we may wish to telephone those contacts to discuss your services with them. Please provide suitable contact details so that we can do this effectively.

Introduction

Health Education England (HEE) was established as a Special Health Authority in June 2012, taking on some functions from October 2012 before assuming full operational responsibilities from April 2013.

HEE provides leadership for the new education and training system. It ensures that the shape and skills of the future health and public health workforce evolve to sustain high quality outcomes for patients in the face of demographic and technological change. HEE ensures that the workforce has the right skills, behaviours and training, and is available in the right numbers, to support the delivery of excellent healthcare and drive improvements. HEE supports healthcare providers and clinicians to take greater responsibility for planning and commissioning education and training through the development of Local Education and Training Boards (LETBs), which are statutory committees of HEE.

The establishment and development of HEE was set out in 'Liberating the NHS: Developing the Healthcare Workforce, From Design to Delivery', the Government's policy for a new system for planning commissioning education and training. The driving principle for reform of the education and training system is to improve care and outcomes for patients and HEE exists for one reason alone – to help ensure delivery of the highest quality healthcare to England's population, through the people we recruit, educate, train and develop.

The key national functions of the organisation include:

- Providing national leadership for planning and developing the whole healthcare and public health workforce
- Authorising and supporting development of Local Education and Training Boards and holding them to account
- Promoting high quality education and training which is responsive to the changing needs of patients and communities and delivered to standards set by regulators
- Allocating and accounting for NHS education and training resources – ensuring transparency, fairness and efficiency in investments made across England.
- Ensuring security of supply of the professionally qualified clinical workforce
- Assisting the spread of innovation across the NHS in order to improve quality of care

Delivering against the national Education Outcomes Framework to ensure the allocation of education and training resources is linked to quantifiable improvements.

Summary

The purpose of NHS Library and Knowledge Services is to provide knowledge and evidence, and use the expertise of their staff, to enable excellent healthcare and health improvement.

There is evidence of inequity, gaps and duplication in service provision to the NHS workforce and learners. Some NHS organisations operate without access to a library and knowledge service.

Complex funding streams are in place. The premise of the current funding approach is a partnership model whereby HEE contributes educational funding to support education and training and organisations match this with funding to support patient care, continuing professional development and research. Some research attracts specific funding.

The aim of this independent audit is to improve the effectiveness and delivery of library and knowledge services to the NHS in England. The audit will provide clarity on funding and gain assurance by answering these questions:

- Does the current model of funding Library and Knowledge services for the NHS in England bodies, their staff and learners result in the best use of resources?
- If not, what funding model would best support the implementation of our vision for Knowledge for Healthcare?
- Which NHS bodies and education providers do we need to work with to establish equitable service provision and appropriate co-funding of Library and Knowledge Services? (Additionally to include a small number of other organisations, such as local authorities, that provide LKS to NHS staff and learners via local contracts)
- Are the requirements relating to Library and Knowledge Services within Learning and Development Agreements (LDAs) sufficiently robust to enable assurance of the quality of NHS funded Library and Knowledge Services provided to NHS staff and learners?
- Is the requirement for Library and Knowledge Services within Educational Provider Agreements (EPAs) sufficiently robust to enable assurance of the quality of Library and Knowledge Services provided to the learners (both HEI health students and NHS employees on HEI courses) by HEIs?

We recognise that some questions are straightforward and some are complex and in the current environment some are potentially unanswerable. This too needs to be addressed.

The findings of this audit will inform the implementation of [Knowledge for Healthcare](#) and begin to answer questions about whether there are any additional levers or incentives that could be applied for NHS organisations and commissioned service providers not currently covered by LDAs and EPAs.

Purpose of this Document

The purpose is to define the process and requirements for the provision of a consultancy project to determine the funding picture for library and knowledge services across the NHS in England.

The Business Problem

The purpose of NHS Library and Knowledge Services is to provide knowledge and evidence, and use the expertise of their staff, to enable excellent healthcare and health improvement.

- NHS Library and Knowledge Services comprise a network of services, c90% of which are delivered by local Trusts and c10% managed via contracts by Higher Education Institutions on behalf of the NHS.
- In addition education providers are required to ensure that, on programmes commissioned by HEE and its LETBs, learners have access to LKS.

As stewards of NHS investment in healthcare library and knowledge services in England, Health Education England (HEE) is committed to transforming these services to deliver the vision that::

NHS bodies, their staff, learners, patients and the public use the right knowledge and evidence, at the right time, in the right place, to enable high quality decision-making, learning, research and innovation to achieve excellent healthcare and health improvement¹

There is a pattern of complex funding streams for NHS Library and Knowledge Services. This has evolved over many decades in a largely ad hoc manner. See Annex I.

The data shown in [Knowledge for Healthcare](#), HEE's development framework for NHS funded libraries, was derived from data generated by NHS funded libraries. This did not include any funding data from key partner bodies such as NICE, PHE and NIHR. Nor did it include any track through of the HEE-derived funding that HEIs invest in LKS to support their learners.

Rationale

There is evidence of inequity, gaps and duplication in LKS service provision to the NHS workforce and learners. Some NHS bodies operate without access to a library and knowledge service.

HEE aims to ensure a consistent, equitable, funded core library and knowledge service offer to the NHS in England. This will be realised by understanding the current reach of these services, making finite resources go further, and by improving quality – thereby reducing inappropriate variation and implementing *Knowledge for Healthcare* to make more impact.

Specification for Quotation

We are sending this request for quotation to potential suppliers via Contracts Finder. Given the above introduction, the Library and Knowledge Services Team is seeking your response to the following questions:

Please provide clear, succinct answers to the questions – we are not looking for lengthy responses from suppliers, but of course it must be sufficient to understand your experience and capabilities. As a general point, if you have supplementary / supporting information that you think substantiates your proposal, then please include it as an annexe, and refer to it clearly in your response document; for the avoidance of doubt, general marketing materials are not considered useful supporting documentation.

Aims and Objectives

The aim is to improve the effectiveness and delivery of library and knowledge services to NHS bodies, their staff and learners. An independent audit is required to provide clarity on funding and gain assurance

1. To ensure that all NHS bodies their staff and learners, benefit from Library and Knowledge Services.
 - How many NHS organisations have, or contract, a library and knowledge service?
 - How many NHS staff have access to a library and knowledge service via their employer?
 - How many NHS organisations neither host nor contract a library and knowledge service?
 - How many NHS staff do not have access to a library and knowledge service via their employer?
 - How many learners on placement do not have access to an NHS LKS (*it is a given that all HEI learners have access to their own HEI library service) (Annexe II contains an example of services to learners on placement)?

2. To inform the transformation of Library and Knowledge Services, and the adoption of new models of service to deliver [*Knowledge for Healthcare*](#)
 - Of the Library and Knowledge Services being provided to the NHS:
 - How many are in, or managed by, Higher Education Institutions?
 - How many are in, or managed by, NHS bodies?
 - How many are in, or managed by, another body (such as a local authority)?
3. To be assured that HEE spending on LKS for NHS bodies staff and learners is being used to best effect
 - What are the funding streams?
 - How much money is currently being spent on Library and Knowledge service provision?
 - By HEE
 - By LETBS
 - By NHS Trusts, CCGs and CSUs
 - To support partnership working, to ascertain, by invitation, how much money is currently being spent by those bodies with a significant role or function on LKS provision and infrastructure
 - By HEIs to support learners on placement in NHS bodies
4. From the information gathered and systematic analysis we need to address the following questions:
 - Does the current model of funding for Library and Knowledge services across the NHS in England bodies, their staff and learners result in the best use of resources?
 - If not, what funding model would best support the implementation of our vision for Knowledge for Healthcare?
 - Which NHS bodies and education providers do we need to work with to establish equitable service provision and appropriate co-funding of Library and Knowledge Services?*
 - Are the requirements relating to Library and Knowledge Services within Learning and Development Agreements (LDAs) sufficiently robust to enable assurance of the quality of NHS funded Library and Knowledge Services provided to NHS staff and learners?
 - Is the requirement for Library and Knowledge Services within Educational Provider Agreements (EPAs) sufficiently robust to enable assurance of the quality of Library and Knowledge Services provided to the learners (both HEI health students and NHS employees on HEI courses) by HEIs?

Standards

- NHS Library Quality Assurance Framework, NHS England (LQAF)
- Promoting excellence: standards for medical education and training, GMC

Out of Scope

- HEFCE funding for Library and Knowledge Services to support undergraduate courses
- Provision of information services for patients and the public
- Provision of Library and Knowledge Services to non-NHS health care providers such as Spire and charities

Supplier Measurement Criteria

Item	Criteria	Weighting
1	Overall quality of the suppliers response; clarity, brevity, content, evidence etc.	5
2	Prior experience of working with the NHS and specifically with Library and Knowledge Services	10
3	Past record of delivering similar projects	10
4	Proposed methodology	10
5	Indicative high level response to objective 1	15
6	Indicative high level response to objective 2	15
7	Indicative high level response to objective 3	15
8	Indicative high level response to objective 4	15
9	Relationships; suppliers approach to managing the engagement / relationship with the client	5
	Total	100

Scoring Regime

Score	Rationale
3	(Requirements completely met) The supplier has demonstrated clearly, with suitable evidence/examples that they meet the requirement, and there are no causes for concern
2	(Requirements substantially met) The supplier has provided a good response which meets the majority of the

	requirement, but there are some areas of ambiguity/deficiency which raise some risks
1	(Requirements substantially unmet) The supplier has provided insufficient information / evidence to demonstrate that they meet the requirement, which therefore raises some substantial concerns / risks
0	(Requirements not met) None of the requested information has been provided and/or the response does not indicate that the Tenderer has sufficient understanding to meet the specification of requirement or any aspect of the response gives cause for major

Timetable for Procurement

This procurement will run to the following provisional timetable

Tender Released	Friday 4 December 2015
Tender Closure	Thursday 7 January 2016 at 17.00
Evaluation & Selection	Monday 11 January 2016
Notification of Successful Bidder	Friday 15 January 2016
Contract Signing	Friday 22 January 2016
Starting Work	Monday 25 January 2016

Intellectual Property Rights and Copyright

All Intellectual Property Rights and Copyright will be owned and retained by the purchasing organisation.

Annexe I – Funding streams for Library and Knowledge Services

[*Knowledge for Healthcare*](#) draws on 2013/14 data. At that time major sources of funding were:

- Education and training tariff via Learning and Development Agreements 42%
- NHS employers at local level 29%
- Other LETB funding (out of tariff) 15%

The premise of the current funding approach is a partnership model whereby HEE contributes educational funding to support education and training and organisations match this with funding to support patient care, continuing professional development and research. Some research attracts specific funding.

Education tariffs were introduced in 2014/15. A contribution to the cost of delivering (or contracting) library and knowledge services is included within the postgraduate medical tariff. For most parts of the country there is no separately distinguished payment for these services in the funding that Trusts receive from their Local Education and Training Board. Hence, sources of funding for library and knowledge services are less transparent.

LETB Library and Knowledge Service Leads have sought to achieve some consistency of funding and standards by setting expectations that:

- NHS library and knowledge services comply with LQAF
- employers make a financial contribution, with the aspiration that NHS employers should match LETB funding for library and knowledge services. However, there is considerable variation in practice.

Under the Learning and Development Agreement (Section B), placement provider organisations are required to ensure that there is sufficient funding (from tariff and employer contributions) to enable staff, trainees and learners to have access to multi-disciplinary library knowledge services and resources in line with the LQAF. This applies whether the Trust hosts its own library knowledge service or funds a service agreement with another organisation for delivery of the service.

NICE funds and manages contracts with external suppliers of key elements of the infrastructure on which NHS Library and Knowledge Services rely to deliver e-library resources and services. These include HDAS, Open Athens and the Link Resolver. HEE is not sighted on the full cost of the infrastructure and associated staffing.

The cost of provision of Library and Knowledge Services to students by HEIs is included in Education Provider Agreements between HEE and education providers. This specifies a requirement that students on commissioned programmes must have access to Library and Knowledge Services. These costs are included in benchmark price.

Annexe II Provision of Library and Knowledge Services to Learners on Placement

1. Minimum level of service provision

Library membership entitles users to:

- access to reference and study facilities (where provided) during staffed hours;
- book and multimedia loans;
- use of photocopying facilities;
- use of simple enquiry services.

2. Access to reference and study facilities

Users are entitled to have access to reference and study facilities (where available) during staffed hours.

Access outside staffed hours will be subject to local security policies and procedures.

Local rules on use of facilities (e.g. quiet study areas, eating and drinking) will apply.

3. Book and multimedia loans

Users are entitled to borrow a minimum of three items of stock.

Loan periods will be locally determined, based on availability and demand for stock.

Users will be responsible for returning items to the library from which they were borrowed.

Fines for late return of material may be charged according to local policies. Libraries participating in this agreement will assist each other in recovering overdue material. To facilitate this, library registration forms will contain a statement that information may be passed to a third party for the purposes of recovering overdue material.

4. Photocopying facilities

Users are entitled to use of self-service photocopying facilities (where available) during staffed hours.

Local charges for photocopying may be applied.

5. Simple enquiry services

Users are entitled to the use of simple enquiry services. These are defined as enquiries, such as directional or procedural enquiries, taking not longer than five minutes to fulfil.

6. Other library services

Other library services outside the scope of this policy include:

- document supply services;
- mediated literature searching;
- current awareness;
- complex enquiries;
- information skills training;
- access to and use of PCs.

Access to and use of these services will be at the discretion of local library managers, and local charging policies may apply.

These services will normally be provided to users by the Library service which their employing organisation manages or with which a service level agreement is in place.

Annexe III – Declarations

Dear Mrs Louise Goswami
National Programme Manager
Library and Knowledge Services
Health Education England
Calverley House
55 Calverley Road
Tunbridge Wells
TN1 2TU

Ref: LKS 04122015

Having examined the Tender dated 4 December 2015 and associated documents, I/we offer to enter into a contract with HEE for the requirement specified in the documents.

I/We undertake to keep the tender open for acceptance by HEE for a period of 60 (sixty) days from the tender due date. I/We understand that HEE is not bound to accept the lowest priced tender or any tender.

I/We acknowledge that if my/our tender is accepted I/we will be required to execute a formal written contract.

Declaration of Good Faith

I/We declare that this tender is submitted in good faith, intended to be competitive, and that I/we have not fixed or adjusted the amount of the tender by, or under, or in accordance with, any agreement or arrangement with any other person.

Declaration of Non-collusion

We further declare that we have not done, and we undertake that we will not do, any of the following acts prior to award of the contract (if any):

- communicate to a person other than HEE the amount or approximate amount of my/our proposed tender except in confidence to our professional advisers (including insurers) and only where essential;
- collude with any third party to fix the price of any of the tenders for the contract;
- offer, pay, or agree to pay any sum of money or consideration directly or indirectly to any person for doing, having done, or promising to be done, any act or thing of the sort described herein and above.

Declaration of Non-canvassing

I/we hereby certify that I/we have not and will not canvass any member, director, employee, representative or adviser of HEE in connection with the proposed award of the contract by HEE, and that no person employed by me/us or acting on my/our behalf, or advising me/us, has or will do any such act.

Declaration as to Accuracy of Information

I/We confirm that the information supplied to HEE and forming part of this tender including (for the avoidance of doubt) any information supplied to HEE as part of my/our initial expression of interest in submitting a tender, was true when made and remains true and accurate in all respects. I/We confirm and undertake that if any of such information becomes untrue or misleading that I/we shall notify you immediately and update such information as required.

Signature

I/we agree that HEE may, in its consideration of the tender and in any subsequent actions, rely upon the statements made in this letter.

Signed:

Name:

Title:

Date:

Duly authorised to sign tenders and enter into contracts for and on behalf of:

[Insert name of provider.....]

Annexe IV– Freedom of Information & Confidentiality

Freedom of Information Act 2000

As a public authority, HEE is under a duty to comply with the provisions of the Freedom of Information Act 2000 (the FOI Act) and the Environmental Information Regulations 2004 (the EIR). As part of those duties, HEE may be required to disclose any information supplied to it in connection with the procurement process (including any subsequent contract). HEE may also wish to include such information in the Publication Scheme which it maintains under the FOI Act.

If providers consider that any information supplied to HEE is commercially sensitive (meaning it could reasonably cause prejudice to the organisation if disclosed to a third party), then that information should be clearly marked “Confidential – not for disclosure to third parties”. Providers should also submit valid reasons for exempting the information under the FOI Act and/or the EIR and indicate the time period in which it considers that information should remain confidential.

HEE cannot accept any obligation of confidence in relation to trivial information or information which by its very nature cannot be regarded as confidential regardless of whether the information is marked as such.

In the event of a third party request, HEE shall decide whether to disclose the requested information or to apply an exemption in accordance with the provisions of the FOI Act and/or the EIR. HEE shall endeavour to consult with providers before it releases any information to a third party, however the decision to disclose or exempt the information remains at HEE’s absolute discretion regardless of whether or not it has consulted the provider.

Information and Confidentiality

Information supplied as part of this tender process is supplied in good faith to providers and their professional advisers for the purpose of preparing a tender and for no other purpose.

However, providers must satisfy themselves as to the accuracy of such information and, in the absence of fraud, HEE accepts no responsibility for any loss or damage of whatever kind or howsoever caused arising from the use by the providers of such information.

Providers are expected to examine all of the instructions, forms of tender, terms and conditions and specifications that comprise this ITT.

All documents issued in connection with the ITT remain the property of HEE and must be regarded as confidential.