Integrated Urgent Care Procurement

Purpose of Report

1. The purpose of this paper is to provide an update on the joint procurement process between Wiltshire Council and Wiltshire CCG, in partnership with B&NES CCG and Swindon CCG for integrated urgent care services.

2. A report will be brought to Cabinet on the 12th September to request delegation of authority, in relation to the services being commissioned by Wiltshire Council (as set out in paragraph 6 below):
   
a) to approve the terms of the contract and all associated documents within the parameters set out in this report; and
   
b) to award and enter into the contract and all associated documents,

   to the Corporate Director for Adult Social Care in consultation with the Cabinet Member for Health (including Public Health) and Adult Social Care.

Main Considerations for the Council

3. Wiltshire Council has worked with Wiltshire CCG since 2014 developing and delivering the Better Care Plan (BCP). The plan focusses on the growing demographic challenge, Delayed Transfers of Care, independence post hospital discharge and reducing unnecessary hospital admissions and admissions to nursing and residential care. The Better Care Fund (BCF) is a pooled budget of £44 million to promote integration, with the ambition of providing care close to home, the priority being home, and creating and delivering innovative services.

4. On the 14th November 2016 Wiltshire Council entered a Memorandum of Understanding (MOU) with Wiltshire CCG, Swindon CCG and BANES CCG. The MOU set out the arrangements for the procurement of an integrated urgent care service and summarises the roles, responsibilities and obligations which flow from these arrangements.

5. The principles that govern the joint procurement and the conduct of Wiltshire Council and the CCGs are to collaborate and co-operate to work towards ensuring that the commissioning ambitions and intentions of each are met. This has been, and will continue to be, achieved by all parties working effectively and collaboratively to identify solutions to any issues. The intention is that this joint working will be further reinforced following contract award with a Collaborative Commissioning Agreement and a Finance Memorandum of Understanding.
Background

6. The services included within the joint procurement of integrated urgent care are detailed in the table below:

<table>
<thead>
<tr>
<th>Service</th>
<th>BaNES CCG</th>
<th>Swindon CCG</th>
<th>Wiltshire Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Care Service, including Single Point of access to Intermediate Care</td>
<td></td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Acute Trust Liaison Service</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carers Emergency Card, Response Service</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>GP Out of Hours service</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Integrated Urgent Care Access, Treatment and Clinical Advice Service (clinical hub), including Health Care Professional Line</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>NHS 111 Service</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Telecare call monitoring</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Telecare equipment and installation *</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telecare response service and urgent domiciliary care service</td>
<td></td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Out of Hours Dental Services</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>

* To be included during the lifetime of the contract from January 2019

7. Previously, it was our intention to include the in-house Emergency Duty Service and the Out of Hours Emergency Call Handling Service within this procurement. The Corporate Leadership Team took the decision to remove both services from the procurement due to alternative opportunities being explored.

8. To support an effective procurement several working groups, with representation from Wiltshire Council and the CCGs, have been operating and reporting to the Procurement Board. This has enabled the Procurement Board to make key decisions and timetable outlining key dates for decisions in line with the procurement timeline.

9. The table below outlines the timetable of the procurement:

<table>
<thead>
<tr>
<th>No</th>
<th>Stage</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ITN1 released to Bidders</td>
<td>02/12/2016</td>
</tr>
<tr>
<td>2</td>
<td>Deadline for clarification questions</td>
<td>13/12/2016</td>
</tr>
<tr>
<td>3</td>
<td>ITN1 submission closing date</td>
<td>09/01/2017</td>
</tr>
<tr>
<td>4</td>
<td>ITN1 Bidder clarification event</td>
<td>27/01/2017</td>
</tr>
<tr>
<td>5</td>
<td>ITN1 evaluation and shortlisting to Three Bidders</td>
<td>16/2/2017</td>
</tr>
<tr>
<td>6</td>
<td>Invitation to Negotiate stage 2 (ITN2) released to Shortlisted Bidders</td>
<td>21/02/2017</td>
</tr>
<tr>
<td>7</td>
<td>Deadline for clarification questions</td>
<td>14/03/2017</td>
</tr>
<tr>
<td>8</td>
<td>Negotiation meetings</td>
<td>1st, 7th, 8th and 15th March 2017</td>
</tr>
<tr>
<td>9</td>
<td>ITN2 submission closing date</td>
<td>27/03/2017</td>
</tr>
</tbody>
</table>
The final stage was amended with a Preferred Bidder Stage, replacing the previously identified Calls for Final Tenders (CFT) stage. This decision was taken due to the confidence gathered following thorough evaluation of written bids during ITN1 and ITN2. The evaluation included presentations and questions and answer sessions with bidders and final scoring completed by a team of multi-disciplinary evaluators.

The Preferred Bidder process was designed and completed to effectively address any weaker elements of the bid, as identified during the evaluation process. This was achieved through Work Streams (as summarised within the Work Stream remits at Appendix 1) undertaking comprehensive work to achieve the agreed outcomes established during the evaluation process.

**Risk Assessment**

The scope of the procurement across the Sustainability and Transformation Plans footprint has added complexity to the procurement process, due to co-commissioning approach and governance arrangements of four commissioning organisations.

With any integrated procurement, it is important to avoid the risk of dispute by agreeing the following:

a) robust contract terms setting out the relationship between all partner commissioners and the provider. Legal Services have been fully involved throughout the procurement and given advice on the contract documentation, including the implications of the collaborative commissioning structure, in order to mitigate the risk of any dispute with the provider; and

b) separate terms setting out how the partner commissioners will work together to manage the contract and deal with any risks or liabilities during the lifetime of the contract. Legal Services are advising on a separate Collaborative Commissioning Agreement and an accompanying Finance Memorandum of Understanding is being

**Financial Implications**
14. This is a joint tender across partners where the final bid is within the overall available budget.

15. The total value of the integrated urgent care service is £14,420,000 per annum for five years, with an extension option of up to sixty further months, giving a maximum possible contract value of £144,200,000. The initial five-year period is planned to commence from 1st May 2018.

16. The percentage of Wiltshire Council services within the total contract value is 13.93%, which equates to £2,045,030 per annum with the total ten year contract value to the Council expected to be £20,450,300.

17. The Council’s share of this budget is paid via the Better Care Fund, a joint arrangement between Wiltshire Council and Wiltshire CCG and the Council will continue to work with its partner to establish and enforce budget monitoring processes to ensure robust management of this contract.

Legal Implications

18. The procurement has progressed in strict compliance with procurement law.

19. Legal Services have advised on:

   a) all relevant procurement documents;

   b) the form of contract; and

   c) associated documents, including the proposed Collaborative Commissioning Agreement and Finance Memorandum of Understanding between the Council and the commissioning CCGs.

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Appendices

Appendix 1: Work Streams

1. Project Oversight:
Project Oversight Meetings are intended to pull together all the Work Stream Meetings that have taken place so far and confirm mutual understanding, identify and capitalise on any further opportunities or economies of scale presented by joint working and agree next steps including joint approach and plans for engagement.

Objectives:
- Satisfaction that the Preferred Bidder Status is Complete
- Preferred Bidder and Joint Engagement Plan
- Recommendation to IUC Project Board for Contract Award

1.1. Work Stream 1: Finance and Legal
The service must be provided within budget, with due financial management procedures in place. A compliant and practical contract must be drafted.
Objectives:
• Principles and Payment Mechanism
• Schedule 3 - Payment
• Dental finance commissioning agreement (Wiltshire CCG and NHSE only)

1.2. Work Stream 2: Service Delivery, Quality, Policies and HR
The provider must provide an Integrated Service Model encompassing each of the service lines included within this procurement which meets the Critical Success Factors and Outcomes provided in the Bidder Information Pack. The service must be appropriately staffed, with an appropriate approach towards the transfer of staff into the new service.

Objectives:
• Schedule 2 A3 – IUC Service Delivery Model Specification
• Service Line Specifics including Dental and Telecare
• Schedule 2K – Safeguarding and Mental Capacity Policy
• Schedule 4 – Quality

1.3. Work Stream 3: Information Management and Technology
The prime provider will be expected to ensure that the service has the IT hardware and software to suit the needs of the services being procured.

Objectives:
• IM&T Compliance
• Information Governance

1.4. Work Stream 4: Governance and Implementation & Contract Management
The Commissioners require an integrated urgent care service with a robust and demonstrable clinical integration and governance process between the various providers. The bidder must have in place suitable plans to conduct the service mobilisation to commence delivery on time and to deliver quality, performance and outcome measures in a manner which meets the requirements outlined in the service specification.

Objectives:
• Governance arrangements between subcontractors
• Governance arrangements for commissioners (commissioner only)
• Schedule 5 – Documents to be Relied upon
• Fully Detailed mobilisation Plan
• KPIs for baseline year agreed