**ANNEX 1: PRIOR INFORMATION NOTICE WITHOUT CALL FOR COMPETITION:**

**Neighbourhood Health and Care Service – Health Service components –Market Engagement Questionnaire**

Interested parties are invited to engage with the CCG regarding the information in the PIN notice should to express an interest and submit a duly completed Market Engagement Questionnaire by **17:00 hours on the 4 November 2019**. You must register an account on our e-tendering portal (<https://procontract.due-north.com>). Once registered and logged in, you must express an interest in the project to access the Market Engagement Questionnaire and the specification. Further instructions on how to access the project can be found at the following link: <https://supplierhelp.due-north.com/Opportunities1.html>. Once in the project screen the market engagement questionnaire can be accessed, completed and submitted via the messaging facility on the portal. The expression of interest will be treated as ‘incomplete’ if a duly completed Market Engagement Questionnaire was not submitted.

1. **Background information for interested parties**

The City and Hackney health and care system is committed to transforming and integrating out-of-hospital services for the City and Hackney population. There is a growing evidence base that an integrated system of care can help our population to stay well, access seamless care pathways and realise better outcomes. Our vision of transforming local out-of-hospital services is consistent with the NHS Long Term Plan and the East London Health and Care Partnership strategy development plan and will deliver:

* more localised and personalised care;
* more support for early intervention, prevention and self-management;
* care which addresses the mental, physical and social needs of diverse communities; and
* care which is both high quality and financially sustainable in the context of changing demand and demography.

A key enabler for our vision is to ensure we have joined up local services in neighbourhoods including community health, mental health, list-based enhanced primary care and social care services; tightly integrated and jointly working at a local level with Primary Care Networks and our vibrant community and voluntary sector.

*The City and Hackney Integrated Commissioning and Care System*

The CCG together with the City of London and the London Borough of Hackney established an integrated commissioning governance structure in April 2017 to deliver this vision. The integrated approach has ensured:

* **Sharing learning and resources between organisations:** the programme unites organisations who have historically delivered or commissioned similar services for patients and considers the best way we can collectively use our system resources, including data, buildings and staff, and manage and reduce risk together, in order to provide the highest quality care possible for patients,
* **Joining up financial resource:** we understand that by joining up our financial resource we can make best use of the City and Hackney pound,
* **Changing how we deliver our services:** our services can be more efficient and effective if we make them more personal, local and if we constantly seek to improve their quality. By taking joint accountability for change, we make this happen.

This structure, and the close working between system partners, is securing the best value for money for patients and residents in applying our resources. We believe that solving complex, interdependent problems of service provision which are beyond the management control of any one person or organisation requires a whole-system approach. Our approach aims to deliver a more collaborative and integrated system of local health and care delivery and planning in relation to out-of-hospital services.

*Context*

OurNeighbourhoods Programme began in April 2018 and is in the process of re-designing primary and community care in order to deliver locally integrated health and care services that are responsive to local residents, and support them to stay well. The programme is focused on **meeting the health and wellbeing needs of local communities** whilst **addressing the wider social and economic determinants of health for the whole population**. Early intervention and prevention are prioritised and the programme operates across the local system with the inclusion of commissioners, providers of health and social care services and a wide range of community and voluntary sector partners. The programme has been designed through engagement and co-production with local people.

We want to redesign our community services to provide **increased support within a multidisciplinary context for people with long term conditions.** This model will combine psychosocial and medical approaches as well as ensuring links to access community and voluntary sector services. These services will be **an alternative to traditional models of outpatient care**; will focus on delivering a proactive and preventative service to people with long-term conditions and be delivered closer to people at the neighbourhood/network level.



The City and Hackney system is already a high performing health care system having achieved many national performance targets. For 2020/21 the City and Hackney system has agreed a number of system service transformation priorities:

* Embedding the neighbourhoods model in adult community nursing and therapies
* Developing alternative models for outpatient care via a community infrastructure within neighbourhoods
* Neighbourhood-based services and care models for people with serious mental illness and personality disorder
* Neighbourhood-based services and care models for people with dementia
* Interventions across all services to embed a culture of early intervention and prevention
* Developing our workforce to respond more holistically to the needs of people, their families and their wider social needs

**The CCG intends for the Homerton University Hospital NHS Foundation Trust (HUH), East London NHS Foundation Trust (ELFT) and the City and Hackney GP Confederation (GPC) to continue to provide community health, community mental health services and list-based enhanced primary care services as a provider alliance within an integrated service model and for those providers to work in a collaborative partnership with other providers of locality-based services. The care will be a co-ordinated, patient-centred and jointly delivered Neighbourhood Health and Care Service Alliance.**

The CCG believe that commissioning a local provider alliance is in the best interests of patients because these providers are already fully integrated service providers and are part of the existing patient pathways. Additionally, the service model of integration around and involving GP practices and list-based services, maintains our principle of neighbourhood-based and locality-led services.

1. **Contract Form and Provider Integration**

City and Hackney CCG intend to directly award a contract to the three existing local provider organisations, working together as an alliance. The contract form would include a common alliance agreement, signed by HUH, the City and Hackney GP Confederation and ELFT, that are the subject of this PIN; as well as the local voluntary sector organisations and social care functions of the London Borough of Hackney and the City of London. The alliance of providers will be required to deliver all categories of neighbourhood health and care services.

The alliance partners will work closely with voluntary and charity sector organisations, local authority-funded services such sexual health and contraception services, and Primary Care Networks; integrating these services with alliance services through local collaboration, even where these services are not in scope of the Alliance agreement.

City and Hackney CCG intends to enter into this alliance agreement with providers for a term of up to 10 years, which would include City and Hackney CCG as an alliance partner.

As the commissioner, the minimum level of integration that the CCG would be willing to accept is a provider alliance bound together with a legally enforceable alliance agreement.

1. **Scope of services included within the Neighbourhood Health and Care Services Programme**

The following services will be included within the new Alliance agreement:

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| Current Provider | Service Line | Adults/ Children |  | Current Provider | Service Line | Adults/ Children |
| Homerton | Community Paediatrics | Children |  | ELFT | CH MHCOP Liaison | Adults |
| Homerton | Occupational Therapy | Children |  | ELFT | CH MHCOP CMHT | Adults |
| Homerton | Key Working Children disabilities | Children |  | ELFT | CH MHCOP O.T | Adults |
| Homerton | Physiotherapy | Children |  | ELFT | CH MHCOP Arts Therapy | Adults |
| Homerton | Speech and Language Therapy | Children |  | ELFT | CH MHCOP Memory Clinic | Adults |
| Homerton | Safeguarding | Children |  | ELFT | Adult CMHT | Adult |
| Homerton | Sickle Cell and Thalassaemia (S75) | Children |  | ELFT | ADHD | Adult |
| Homerton | First Steps | Children |  | ELFT | Art Therapy (ADULT) | Adult |
| Homerton | CAMHS | Children |  | ELFT | Autism Service | Adult |
| Homerton | Children Specialist Nursing - Specialist H V & Nurses | Children |  | ELFT | C&H Commissioning | Adult |
| Homerton | Children Specialist Nursing - Rotational Nurses | Children |  | ELFT | Clozapine Clinic | Adult |
| Homerton | Children Specialist Nursing - Child Incontinence | Children |  | ELFT | Community Rehab Team | Adult |
| Homerton | Children's Complex Care Team | Children |  | ELFT | Complex Care | Adult |
| Homerton | Children Community Nursing Team (Incl HV) | Children |  | ELFT | Early Intervention | Adult |
| Homerton | Short Breaks | Children |  | ELFT | Crisis Cafe | Adult |
| Homerton | Children Indirect Costs (Transition Service - Hackney Arc) | Children |  | ELFT | Sun Project | Adult |
| Homerton | Hackney Ark Children's Service | Children |  | ELFT | Enhanced Primary Care | Adult |
| Homerton | Children Autism | Children |  | ELFT | Primary Care Liaison | Adult |
| Homerton | Defoe/Other | Children |  | ELFT | CHAMRAS | Adult |
| Homerton | Locomotor Services | Adults |  | ELFT | Occupational Therapy | Adult |
| Homerton | Dermatology | Adults |  | ELFT | Peri Natal Service | Adult |
| Homerton | Foot Health | Adults |  | ELFT | Personality Disorder | Adult |
| Homerton | Primary Care Psychology Therapy (Incl IAPT) | Adults |  | ELFT | Psychology | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  Continence Service | Adults |  | ELFT | Psychotherapy Services | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  Nurse Manag'Nt And Admin | Adults |  | ELFT | Recovery Pathways - Arts in Health | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  Respiratory Nurses | Adults |  | ELFT | Social Inclusion | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  Marie Curie Service | Adults |  | ELFT | CAMHS | Children |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  Community Nursing Wound Care F | Adults |  | ELFT | LD | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  Tissue Viability | Adults |  | ELFT | Adult Acute | Aduit |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  P/Care Discharge Planning | Adults |  | ELFT | Homerton Psych Medicine | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) -  First Response Duty Team | Adults |  | ELFT | Home Treatment Team and Emergency Services | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - ACN Admin | Adults |  | ELFT | PICU | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - LD Liaison Nurse | Adults |  | ELFT | CH MHCOP C-CARE (Thames - Ex Cedar ) | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - Telehealth | Adults |  | ELFT | CH MHCOP ACUTE ( 50% Leadenhall) | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - Integrated Comm Equip | Adults |  | ELFT | Central Dementia Ward ( Columbia ) | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - Cluster 1 | Adults |  | GP Confed | LTC - Core | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - Cluster 2 | Adults |  | GP Confed | LTC - Cancer | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - Cluster 3 | Adults |  | GP Confed | LTC - Time to Talk | Adult |
| Homerton | Adult Community Nursing (Incl Inter Care S75) - Cluster 4 | Adults |  | GP Confed | LTC - Children | Children |
| Homerton | Wheelchair Services | Adults |  | GP Confed | FHV/Proactive Care HV | Adult |
| Homerton | Adult Community Rehab Team (ACRT) - Occupational Therapist | Adults |  | GP Confed | EoL | Adult |
| Homerton | Adult Community Rehab Team (ACRT) - Physiotherapist | Adults |  | GP Confed | Community Anticoag | Adult |
| Homerton | Adult Community Rehab Team (ACRT) - Speech Therapist | Adults |  | GP Confed | Phlebotomy | Adult |
| Homerton | Dietetics | Adults |  | GP Confed | Post-Op Wound Care | Adult |
| Homerton | Community Gynaecology | Adults |  | GP Confed | MHA/EPC/Depot/ADHD | Adult |
| Homerton | MARAC Primary Care Liaison | Adults |  | GP Confed | Early Years | Children |
| Homerton | Sickle Cell Psychology | Adults |  |  |  |  |
| Homerton | Community Heart Failure | Adults |  |  |  |  |
| Homerton | Bi Lingual Advocacy Services | Adults |  |  |  |  |
| Homerton | Psychosexual Service | Adults |  |  |  |  |
| Homerton | Chronic Fatigue Service | Adults |  |  |  |  |
| Homerton | Paediatric Audiology | Children |  |  |  |  |

We have designed the alliance approach to prioritise and encourage service transformation, integration and collaboration in order to deliver co-ordinated and localised health and care services at a Neighbourhood level. The following broad categories provide some further description of the types of services included within the alliance:

**Services for people with complex and diverse needs**

We expect the alliance to provide integrated services to people with complex needs which will include frail older people, people with unstable long-term conditions, chronic pain, heart failure and dementia. Services will be provided on a multidisciplinary team (MDT) basis to people who require the support of a range of specialists and these MDTs may operate at the primary care practice level or at the neighbourhood level. This is in line with the strategic direction for joint working with our partners and will include providers of social care and voluntary sector services as determined by the provider alliance. The service model will be person-centred and providers will be expected to work collaboratively to deliver care to the person at home or in community settings in ways which avoid duplication, unnecessary delays and avoidable admissions to hospital. These services will also provide an integrated crisis response function and discharge from hospital pathway.

Examples of the type of services in scope are:

* Adult community nursing, tissue viability and continuing healthcare teams
* Adult community rehabilitation team
* Community stroke services
* Community pain management,
* End of life care including Hospices,
* Community dementia service and memory clinic
* Community sickle cell services

**Integrated services available closer to home**

We expect the alliance to offer new approaches to community-based services, joining up mental and physical healthcare in providing pathways that make sense to service users and clinical teams. This will involve providers working together to transform care delivery across a range of pathways and will require services to support people with healthier lifestyles and managing their own health. These services will also be expected to support care delivery at the primary care practice level and neighbourhood level (where appropriate and determined by the provider alliance) and will involve adult social care and voluntary sector providers.

Examples of the type of services in scope are:

* Community gynaecology service, pelvic floor and continence services,
* Improving Access to Psychological Therapies services,
* Psychotherapy services
* Dietetics, weight management, and
* Community physiotherapy,
* Community dermatology services

Types of services which are out of scope but we would expect to see strong integration with:

* Public health services, sexual health services, contraception

**Children and Young People’s services**

We will require services to work with system partners to create the conditions for a children and families model for City and Hackney. The ambition will be for a 0-19 service and providers will need to be fully engaged in developing this service model in a phased approach across the lifetime of the contract. This will include links and learning from the integrated approach to services applied to adults elsewhere by the alliance.

Examples of the type of services are:

* Children’s community nursing including extended hours nursing team
* Specialised community nursing,
* Community paediatrics,
* Speech and language therapy,
* Audiology,
* Sickle cell services for children and young people
* Children’s safeguarding services including designated doctors in acute services and looked after children services

Types of services which are out of scope but we would expect to see strong integration with:

* School nursing and health visiting services

**Child and Adolescent Mental Health Services (CAMHS)**

CAMHS services will be aligned to the 0-19 Children and Families model and the alliance will be required to ensure that their services are proactively connected with partners in managing perinatal mental health, early years of life and transition. Alliance partners will also be required to deliver the full CAMHS Transformation agenda within the relevant partnership and the CAMHS alliance.

Examples of the type of services are:

* Children’s autism services,
* CAMHS disability services,
* First steps (CAMHS Tier 2)
* CAMHS Tier 3

Types of services which are out of scope but we would expect to see strong integration with:

* Specialist CAMHS Tier 3

**Language support, translation and community navigation**

A number of additional services provide a fundamental function to the system by establishing a coherent network of providers to offer translation and language support within a defined population cohort as well as enabling people to access and navigate City and Hackney health and social care services where required. This network will also provide navigation support to clinicians and practitioners in enabling people to access services especially in the context of earlier interventions and prevention. The alliance will be required to collaborate with multiple organisations and local initiatives that provide relevant services to ensure there is limited duplication and increased clarity on the availability of local support services.

Examples of the type of services are:

* Community Bilingual Advocacy services

Types of services which are out of scope but we would expect to see strong integration with:

* Social Prescribing services
* Well family services
* HIYAC
* Health coaches commissioned by public health

1. **Financial value of services that are within scope**

The total financial value for the alliance services (listed in part C above) which would be offered as a single lot. Over a 10 year period, the total contract value, including an annual uplift, would be **£970,676,638.**

1. **Provider Engagement**

Provider engagement will enable the commissioners to gather more information that will help us to understand options available when it comes to commissioning this new model of care. This engagement is not a formal consultation or the commencement of a longer engagement process.

**Please submit your response, using this form, by the 4 November 2019. The CCG aims to respond to Expressions of Interest by 29 Nov 2019.**

To engage with the CCG in relation to this notice please provide the following information:

* Organisation name

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* Main name and address for correspondence

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| **Name** |  |
| **Job Title** |  |
| **Email** |  |
| **Telephone** |  |
| **Fax** |  |
| **Address** |  |

* A summary/introduction about your organisation outlining your current health and care service delivery activities and experience in providing and deeply integrating community health services, mental health services, and enhanced primary care services.

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* Do you currently provide any services under contract to City and Hackney CCG, the London Borough of Hackney or the City of London Corporation?

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* What knowledge and experience does your organisation have of working with local providers, in City and Hackney or elsewhere, to deliver health or social care services in an integrated way, including integration with primary care and the voluntary sector?

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* Does your organisation have experience of provider led innovation that you would like to bring to the attention of the CCG?

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1. **Provider Interest and Understanding**

To engage with the CCG in relation to this notice please answer the following questions:

* What you think are the key challenges and opportunities of implementing an integrated community service and how the challenges can be overcome.

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* Describe how your organisation(s) have the resources, expertise and ability to consider bidding for an alliance service that:
  + Includes mental health, physical health and list-based enhanced primary care working in a City & Hackney alliance working in an integrated way with social care providers and the voluntary sector;
  + Is expected to be delivered by an alliance of established and integrated providers who are delivering services to patients in the community already, and working together already under a legally binding MoU;
  + Has the necessary information and **data sharing agreements** and information governance apparatus in place to ensure safe and legally compliant joint clinical working;
  + Has existing integrated IT systems or shared patient records across alliance partners with a roadmap and commitment to further integration with local partners in City and Hackney such as acute partners in East London
  + Is underpinned by a 10 year contract commissioned at the value stated in the notice.

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* How an alliance service could be delivered that would meet the varying needs of neighbourhoods when there could be significant variation in the requirements of those neighbourhoods.

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* How your organisation would comply with the GDPR requirements for processing personal data while the data is being shared with other providers delivering locality-based services.

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* How your alliance would address the requirement to deliver list-based enhanced primary care services locally in City and Hackney, and work in tight integration with local Primary Care Networks as part of a deeply integrated approach to out-of-hospital care and population health management?

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* Does your organisation have experience of delivering integrated care models such as alliance contracting, joint venture, federation or another provider configuration?

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* When delivering a new model of integrated care there may be a requirement to shift resources from one setting to another. Do you have the expertise to manage the transferring of resources from one service to another in this context? Please provide details of your experience.

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* What risks or issues can you identify that might impact upon the delivery of an integrated care model in the future?

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* Which integrated organisational forms / delivery vehicles has your organisation been party to? Please answer in the context of the CCG requiring there to be at least a formal alliance between the providers of the service but the CCG being willing to consider a lead provider model.

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* Please name any organisations that you are willing or are not willing to work in collaboration with in order to deliver an integrated model of care.

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* What is your experience of payment mechanisms that include risk sharing or incentivisation from your perspective as a provider? Please provide details of how these operated, and the factors that contributed to their positive use.

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* Please describe what social value your organisation can add to the delivery of an integrated care model for City and Hackney?

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* Would you be willing to discuss your view further with the commissioner and if so please provide contact name, job title, email address and phone number of the person that should be contacted.

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1. **Procurement and Legal Considerations**

For the reasons set out above, the CCG plans to enter into a contract directly with the Homerton University Hospital NHS Foundation Trust, East London Foundation Trust and the City and Hackney GP Confederation for a Neighbourhood Health and Care Alliance service. However, the CCG requests that any other providers who would genuinely be capable and interested in providing the Neighbourhood Health and Care Alliance service within the CCG's desired timescales as described above submit an expression of interest by the **4 November 2019**. This will help inform the CCG’s decision as to whether it will proceed with its proposed direct award.

If the CCG receives no expressions of interest by the 4 November 2019, the CCG plans to award a contract under the provisions of Regulation 32(2)(b)(ii) of the Public Contracts Regulations 2015 and Regulation 5 of the National Health Service (Procurement, Patient Choice and Competition) Regulations (No.2) 2013. For the avoidance of doubt, the receipt of expressions of interest from third parties shall not commit the CCG to carry out any further tender process, nor shall this notice constitute a formal call for competition under the Public Contracts Regulations 2015 or the National Health Service (Procurement, Patient Choice and Competition) Regulations (No.2) 2013.

Any expressions of interest received by the 4 November 2019 will reviewed be an independent panel that will make a recommendation to the Governing Body about the decision on whether to proceed with the proposed direct award.

The services in the scope of this notice fall within Schedule 3 to the Public Contracts Regulations 2015("the Regulations") which are not subject to the full regime of the Regulations, but are instead governed by the "Light Touch Regime" (LTR) contained within Chapter 3, Section 7 of the Regulations (Regulations 74 to 77). The Authority does not intend to hold itself bound by the Regulations save those applicable to services coming within the scope of the LTR. In line with Section 75b of the Regulations, the Authority intends to make no further publication following this PIN prior to the award of contract/s for these services and interested parties are invited to express their interest in writing via the stated process by the deadline stated.

Any responses provided will not be treated as commercially confidential and may be used by the CCG to modify service specifications used for the community service contracts.

Any information supplied in this questionnaire may be made available on demand in accordance with the Freedom of Information Act 2000 (the ‘Act’).