# Single Item Commissioning Primary Medical Services Committee Meeting Friday 1 October 2021, 4.00pm via MS TEAMS



# AGENDA

No.	Agenda Item	Papers	Purpose	Lead Officer	Time	Allocated
		attached				time
1.	Apologies for Absence	-	For Information	John Mallalieu	4.00 pm	E mine
2.	Declaration of Interest	-	Action as Required		4.00 pm	5 mins
3.	Interim Community Phlebotomy Service	Att.	For Decision	Martin Pursey	4.05 pm	30 mins



Name of Meeting	Commissioning Primary Medical Services Committee (CPMSC)	Meeting Date	01/10/2021
Title of Report	Calderdale CCG: Interim Community Phlebotomy Service	Agenda Item No.	3
Report Author	Brenda Powell: Procurement Manager	Public / Private Item	Public
Clinical Lead		Responsible Officer	Martin Pursey

#### Executive Summary

The purpose of this report is to:

- Provide assurance in respect of the robust procurement and evaluation undertaken and the recommendation for the appointment of the providers for the Calderdale CCG: Interim Community Phlebotomy Service
- To provide details of the next steps in terms of contract award and mobilisation of the service

#### **Previous Considerations**

Name of meeting	Not applicable.	Meeting Date	Not applicable.
Name of meeting	Not applicable.	Meeting Date	Not applicable.

R	eco	mmendations
	٠	It is recommended that it is NOTED that the process undertaken confirms that a robust
		process has been followed for selecting the providers for the Calderdale CCG: Interim
		Community Phlebotomy Service
	•	The recommendation to approve the award of contracts by Calderdale CCG to the identified

 The recommendation to approve the award of contracts by Calderdale CCG to the identified bidders is ENDORSED

Decision 🛛	Assurance □	Discussion 🗆	Other:
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Implications

Quality and Safety implications (including whether a quality impact assessment has been completed)	Not applicable
Engagement and Equality Implications (including whether an equality impact assessment has been completed), and health inequalities considerations	Not applicable
Resources / Financial Implications (including Staffing/Workforce considerations)	Tendering should provide value for money as well as improved quality of service
Sustainability Implications	The CCG will commission and ensure the provision of sustainable services with the resources it has available

Has a Data Protection Impact Assessment (DPIA) been completed?	Yes 🗆	No 🗆	N/A 🛛
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Strategic Objectives (which of the CCG objectives does this relate to?)	All	Risk (include risk number and a brief description of the risk)	Not Applicable.
Legal / CCG Constitutional Implications	The CCG will apply appropriate governance, follow procurement policy and ensure sound financial management in doing so.	Conflicts of Interest (include detail of any identified / potential conflicts)	Any interests will be managed in line with the CCG's policy for managing Conflicts of Interest.

# 1. Introduction

- 1.1 NHS Calderdale CCG (CCCG) was seeking to commission additional interim Community Phlebotomy capacity from July 2021 until 31 March 2022. This is due to the implications of delivering services within a hospital setting due to the ongoing COVID situation. Specifically, Calderdale and Huddersfield NHS Foundation Trust have informed CCCG that blood tests will now take longer (previously 6, now 10 minute appointments) and that Infection Prevention Control, Social distancing and Personal Protective Equipment requirements will mean a proportion of the annual Calderdale phlebotomy activity will not be able to be undertaken at Huddersfield Royal Infirmary.
- 1.2 The activity of this interim contract is based on a pro rata circa 41,000 venepunctures per annum. CCCG would like to support care closer to home by commissioning additional community phlebotomy capacity until 31st March 2022. The estimated contract value is £151,333 based on 20,500 venepunctures.

# 2. Detail

Process

- 2.1 To gauge provider interest a Market Test was undertaken. At the deadline two responses were received, these demonstrated their ability to offer the service requirements
- 2.2 Following approval to proceed a restricted procurement was undertaken and the providers were informed a collaborative approach would be preferable. The procurement documents were issued in accordance with the timetable and the project plan.
- 2.3 The procurement was managed using the CCG's normal procurement resource and procedures i.e. NHSSourcing (Bravo) e-tendering system. The timetable as agreed is provided below:

STAGE	KEY DATES
Request for Expression of Interest issues	13 May 2021
Market test submission dates	14 May – 1 June 2021
Report produced & shared	1 June 2021
Restricted Timeline	
Invitation to Tender (ITT) submission dates	21 - 30 June 2021
(restricted process to market test only)	
Evaluation and recommendation	30 June – 23 July 2021
Meeting to discuss joint working	2 August 2021
Final Tender submission deadline	6 August 2021
Notify Providers of Outcome	TBC
Suggested Service Start Date	ASAP

2.4 The two providers accessed the details for the procurement and submitted their individual responses and relevant documentation by the deadline date. The responses were then subject to evaluation. Details of the service specific questions are attached at Appendix 1.

**Evaluation** 

- 2.5 In accordance with the CCGs' procedures, the evaluations were undertaken by a suitably qualified and experienced panel, including service, finance and contracting leads. The responses were evaluated in accordance with the pre-determined percentage weighted criteria.
- 2.6 Scoring rationale used for this procurement was:

Confidence Score	Definition	Score
Excellent	Exceeds the required standard	100
	Response answers the question with precision and relevance	
	Includes improvement through innovation / added value.	
	Provides practical examples	
Good	Meet the standard required	90
	Comprehensive response in terms of detail on relevance to the question	
Acceptable	Meet the standard in most aspects but fails in some areas	70
	Acceptable level of detail, accuracy and relevance	
Limited	Fails the standard in most aspects but meets some	30
	Limited information / Inadequate / only partially addresses the question	
Inadequate	Significantly fails to meet the standard	10
	Inadequate detail provided / questions not answered / answers not directly relevant to the question	
Not Eligible	Completely fails to meet the standard	0
for Considerati on	Response significantly deficient / no response	

- 2.7 Bidders were informed they must reach a 60% overall threshold on their scores to be considered. The scores would then form the basis of the recommendation to award a contract.
- 2.8 The AWARD e-evaluation system was used by evaluators to input their score and rationale/comments on the bid received to ensure a full audit trail and to aid feedback following the award of the contract. Following evaluation, moderation of scoring took place

i.e. a consensus meeting was held to ensure consistency of scoring and to agree the final scores.

- 2.9 The summary of the consensus (moderated) scores are detailed below in section 2.11. An example of a consensus extract from the AWARD e-evaluation system is attached as Appendix 2; this shows the breakdown of the different elements. The AWARD system provides a full audit trail to demonstrate the robustness of the process and to provide appropriate detail for feedback to bidders.
- 2.10 Following evaluation, both bidders met criteria with one provider scoring substantially higher. A joint meeting was held with the CCG and both providers to request they submitted a joint bid; providers agreed and were given a deadline of the 3 August 2021 to confirm they would work together. The amended bids was evaluated and a further consensus meeting held.
- 2.11 A partnership bid was received, due to the high cost submitted 2 further meetings were held with the provider and the CCG representative. A final revised bid was received and a robust evaluation undertaken. See below for scores:

	Evaluated Scores (%)	Moderated Score (%)
Bid 1	93.3	93.5
Bid 2	78.5	69.0
Bid 3	95.9	96.5

#### 3. Next Steps

- 3.1 To note the process undertaken and confirm that a robust process has been followed for selecting the provider for the Calderdale CCG: Interim Community Phlebotomy Service.
- 3.2 The recommendation of contract award to Bid 3 is approved. Providers will then be notified of the tender outcome and provided with a debriefing report.
- 3.3 Mobilisation will begin on confirmation of costs and activity for the term of the contract, with a start date early October 2021 until the end of March 2022.

#### 4. Implications

#### 4.1 Quality and Safety Implications

- 4.1.1 None identified.
- 4.2 Engagement and Equality Implications
- 4.2.1 None identified

#### 4.3 Resources / Finance Implications

- 4.3.1 The CCG will commission and ensure the provision of sustainable services within the resources it has available.
- 4.4 Data Protection Impact Assessment
- 4.4.1 None identified

# 4.5 Risk

4.5.1 None identified

# 4.6 Legal / CCG Constitutional Implications

4.6.1 The CCG will apply appropriate governance, follow procurement policy and ensure sound financial management in doing so.

## 4.7 Conflicts of Interest

4.7.1 Any interests will be managed in line with the CCG's policy for managing Conflicts of Interest.

## 5. Recommendations

- 1. It is recommended that it is NOTED that the process undertaken confirms that a robust process has been followed for selecting the providers for the Calderdale CCG: Interim Community Phlebotomy Service
- 2. The recommendation to approve the award of contracts by Calderdale CCG to the identified bidders is ENDORSED

## 6. Appendices

Appendix 1 – Service specific questions: Restricted Process Appendix 2 – Submission scores (Evaluation)

#### Appendix 1 – Service specific questions

Financial (20% Weighting)

2.1.1 Please provide a breakdown of finances by completing the attached Finance Matrix found under the supplier attachments area

2.1.2 Please quantify the financial risks associated with the service and provide a contingency plan in the event that demand exceeds capacity

Maximum word count: 500 words

Delivery Model (25% Weighting)

2.2.1 Please describe your proposed service model, this should include:

- proposed venues
- hours of operation
- staffing of operation
- proposed clinical oversight
- referral process and management
- operational process of transporting bloods to the laboratory from the venues

Maximum word count: 1500

2.2.2 Please describe how you will ensure that staff providing the services are suitably qualified and competent and that appropriate arrangements are in place for maintaining and updating relevant skills and knowledge for supervision

Maximum word count: 500

Service Delivery (20% Weighing)

2.3.1 Please describe how you will work with primary care and Calderdale and Huddersfield NHS Foundation Trust to ensure a co-ordinated approach to phlebotomy delivery in Calderdale

Maximum word count: 1000 words

2.3.2 Please describe how you will ensure:

- the community venue(S) meets required safety, quality, infection, prevention and control standards and is registered as an additional Provider venue via CQC
- all premises and equipment used for the provision of service are at all times suitable for the delivery of those services and sufficient to meet the needs of the patient

Maximum word count: 1000 words

Mobilisation (25% Weighting)

2.4.1 Please provide an implementation plan for mobilisation of the service by the given date which also covers the post contract start date intentions

Maximum word count: 1000 words \*Project Plan templates can also be added in addition to the word count

Organisational Capability (10% Weighting)

2.5.1 Please describe how the service will manage and respond to clinical risk, incidents and patient safety including issues relating to safeguarding and any contingency plans that the provider will enact if the levels of COVID-19 rise in the Calderdale area

Maximum word count: 1000 words

Question		Submission	Score	Weighting	Score (%)
Financial	2.1.1	Bid 1	Acceptable	10	7.0
Financial	2.1.1	Bid 2	Acceptable	10	7.0
Financial	2.1.1	Bid 3	Good	10	9.0
Financial	2.1.2	Bid 1	Good	10	9.0
Financial	2.1.2	Bid 2	Limited	10	3.0
Financial	2.1.2	Bid 3	Good	10	9.0
Delivery Model	2.2.1	Bid 1	Good	15	13.5
Delivery Model	2.2.1	Bid 2	Acceptable	15	10.5
Delivery Model	2.2.1	Bid 3	Good	15	13.5
			Excellent	10	10.0
Delivery Model	2.2.2	Bid 1	Response		
Delivery Model	2.2.2	Bid 2	Acceptable	10	7.0
			Excellent	10	10.0
Delivery Model	2.2.2	Bid 3	Response		
Service Delivery	2.3.1	Bid 1	Good	10	9.0
Service Delivery	2.3.1	Bid 2	Acceptable	10	7.0
			Excellent	10	10.0
Service Delivery	2.3.1	Bid 3	Response		
			Excellent	10	10.0
Service Delivery	2.3.2	Bid 1	Response		
Service Delivery	2.3.2	Bid 2	Limited	10	3.0
			Excellent	10	10.0
Service Delivery	2.3.2	Bid 3	Response		
			Excellent	25	25.0
Mobilisation	2.4.1	Bid 1	Response		
Mobilisation	2.4.1	Bid 2	Good	25	22.5
			Excellent	25	25.0
Mobilisation	2.4.1	Bid 3	Response		
Organisational			Excellent	10	10.0
Capability	2.5.1	Bid 1	Response		

Organisational				10	9.0
Capability	2.5.1	Bid 2	Good		
Organisational			Excellent	10	10.0
Capability	2.5.1	Bid 3	Response		
	Overall	Bid 1		100	93.5
	Overall	Bid 2		100	69.0
	Overall	Bid 3		100	96.5