

**Agenda Item: 14**

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NHS Norwich CCG Governing Body  
Tuesday 28 January 2015

**Norwich****Clinical Commissioning Group**

<b>Subject:</b>	Primary Care Mental Health Service (PCMHS – formerly IAPT) Procurement
<b>Presented By:</b>	James Elliott Director of Clinical Transformation
<b>Submitted To:</b>	NHS Norwich CCG Governing Body Meeting Tuesday 27 January 2015
<b>Purpose of Paper:</b>	Agreement
<b>Summary:</b> <p>In May 2013 the Mental Health &amp; Learning Disabilities Network (Board as it was then) agreed to recommission the Wellbeing (IAPT) service and to explore expanding the service to include patients suffering with severe depression/anxiety – currently treated in secondary care – and to engage with a wide range of stakeholders to evolve the current service model. An engagement process took place and was followed by a procurement that was conducted by NEL CSU and has followed all legal requirements laid down in statute law.</p> <p>The contract to provide the Improving Access to Psychological Therapies (IAPT) service expires on 31 August 2015 following a decision to extend the contract by six months. The delay was necessary following the publication of updated national guidance in respect of mental health 'clusters'.</p> <p>The moderation element of the Invitation to Tender (ITT) will take place on the 19<sup>th</sup> January 2015. At the time of writing this paper the intention of the process is to select a preferred provider. In order to facilitate a full six month mobilisation period for the successful bidder, it is necessary for CCGs to approve the preferred provider by 20 February.</p>	
<b>Recommendation:</b> It is recommended that the Governing Body	
<ul style="list-style-type: none"><li>• considers the process outlined in the report and assures itself that due process has been followed;</li><li>• authorises the CEO and Chair to act on its behalf to approve the preferred provider (subject to that process concluding as documented).</li></ul>	

## Introduction and Background

The current service for provision of the Wellbeing Service (Improving Access to Psychological Treatment or IAPT) is Norfolk-wide (excluding Great Yarmouth and Waveney) The new service is for a wider/larger cohort of patients than the current IAPT service. South Norfolk CCG led the procurement as Coordinating Commissioner with input from NHS Norwich, NHS North Norfolk, NHS West Norfolk and NHS Great Yarmouth & Waveney CCGs. Procurement expertise was provided from the procurement function at NEL CSU, and they have been actively involved at every stage.

## Process

Prior to the procurement, an engagement process was completed over six months and culminated with a full public consultation in November 2013 – January 2014. This process was underpinned by a needs assessment and evidence review conducted by Public Health. The results of the engagement process were used to underpin the procurement – held between March 2014 and January 2015.

The procurement processes followed were:

- Prior Information Notice – release of initial information regarding CCGs requirements
- Market Stimulation Event – opportunity for the market to engage with CCGs and better understand what the process was and what requirements there were
- Pre-qualifying Questionnaire (PQQ) – an evaluated formal process to test whether interested providers could show their credentials to deliver a service of this magnitude
- Competitive Dialogue – a formal dialogue between clinical commissioners and bidding providers to agree a service specification that was mutually agreeable and could be tested
- Invitation to Tender (ITT) – a formal internal commissioning process to evaluate the bidding provider suggested models and agree which organisation will be preferred provider

Closing date for submission of formal bids was 9 January 2015 and we received one formal bid. Full evaluation against published criteria will be undertaken with input from all 5 CCGs (including financial expertise/evaluation). The evaluation criteria were agreed with all five CCGs and are reflected in *Figure 1.0*:

**Figure 1.0**

No.	Subject Area	Abbrev	No. of Qs	Overall Weighting
1	Outcomes	OC	12	15%
2	Service Delivery	SD	10	12%
3	Local Service Integration	LSI	3	10%
4	Workforce	WF	8	8%
5	Quality and Standards	Q&S	5	8%

6	Clinical Governance & Patient Safety	GOV	3	8%
7	Mobilisation	MOB	5	8%
8	Scenarios	SCEN	7	6%
9	Feedback & Patient Satisfaction	FPS	4	6%
10	IM&T and Information Governance	IT	4	5%
11	Marketing and Communications	MAR	4	5%
12	Local Service Variations	LSV	2	4%
13	Research & Development	R&D	1	3%
14	Audit & Reporting	A&R	1	2%
	Totals		<b>69</b>	<b>100%</b>

The procurement team was due to meet on 19 January 2015 to moderate scores before agreeing a provisional score. The bidder may then be invited to interview to allow the procurement team opportunity for clarification on the submission as appropriate. Final moderation and agreement of score will then be undertaken. All the evaluation stages will be properly recorded, including any changes to scores post moderation/interview/final moderation.

The preferred provider will be identified by 31 January 2015, and then the Procurement lead (NEL CSU) will provide a full evaluation report on 6 February 2015. Formal sign off by Governing Bodies is required by 20 February to allow the best practice 10 day 'standstill period' to occur and then award of the contract in March 2015.

### **Agreement of Preferred Provider**

It is therefore proposed that, subject to the Governing Body being assured that the formal procurement process has been properly managed to mitigate risk of challenge, authority is given to the CEO and Chair of the Governing Body to take Chair's Actions to approve the selected Preferred Provider. The evaluation report, provided by the NEL CSU Procurement Lead, will give that final piece of assurance.

### **Recommendations**

It is recommended that the Governing Body,

- considers the process outlined in the report and ask necessary questions to assurance itself that due process has been followed;
- authorises the CEO and Chair to act on its behalf to approve the preferred provider (subject to that process concluding as documented).

It is worth noting that all such decisions taken by Chair's Actions are reported to, and challenged as necessary by, the NHS Norwich CCG Audit Committee.