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Social and other specific services – public contracts

Contract notice

Services

Directive 2014/24/EU

Section I: Contracting authority

I.1) **Name and addresses**

NHS Scarborough & Ryedale Clinical Commissioning Group
Scarborough Town Hall, York House, St Nicholas Street
Scarborough
YO11 2HG
United Kingdom
Contact person: Beth Nixon
Telephone: +44 3300452145
E-mail: beth.nixon@brownejacobson.com
NUTS code: UKE2

Internet address(es):

Main address: www.scarboroughryedaleccg.nhs.uk

I.2) **Joint procurement**

I.3) **Communication**

The procurement documents are available for unrestricted and full direct access, free of charge, at:
www.bjaccess.net

Additional information can be obtained from the abovementioned address

Tenders or requests to participate must be submitted electronically via: www.bjaccess.net

Tenders or requests to participate must be submitted to the abovementioned address

I.4) **Type of the contracting authority**

Body governed by public law

I.5) **Main activity**

Health

Section II: Object

II.1) **Scope of the procurement**

II.1.1) **Title:**

Scarborough & Ryedale integrated prevention community care and support service

II.1.2) **Main CPV code**

85100000

II.1.3) **Type of contract**

Services

II.1.4) **Short description:**

NHS Scarborough & Ryedale CCG is commissioning a partially integrated multi-speciality community provider model for the delivery of a range of community based health and care services (see II.2.4) for its registered and non-registered service users. The services include community services which are currently provided by a third

party and some in-house CCG functions. It does not include primary medical care services. This is a 5 + 2 year contract which is subject to an affordability cap (see II.2.14).

The CCG would like to receive innovative bids which meet the CCG's desire for a new model of service delivery. A range of first phase services will be required from the Service Commencement Date with second phase services deliverable from Year 2.

II.1.5) Estimated total value

Value excluding VAT: 80 601 463.00 GBP

II.1.6) Information about lots

This contract is divided into lots: no

II.2) Description

II.2.1) Title:

II.2.2) Additional CPV code(s)

85112200

85141000

85141200

85141210

85141220

85142100

85142400

85121200

II.2.3) Place of performance

NUTS code: UKE2

Main site or place of performance:

This service is being commissioned in respect of the relevant patient population of NHS Scarborough & Ryedale Clinical Commissioning Group. The locality encompasses the population of 15 GP practices

II.2.4) Description of the procurement:

Phase 1 services (from 3rd April 2018):

- Community Services (Ryedale) (including therapies)
- Community Services (Scarborough) (including therapies)
- Community Specialist Nursing
- Early Supported Discharge for stroke
- Community Response Team (Ryedale Hub)
- Community Response Team extension to Scarborough

Phase 2 services (from 1st April 2019):

- Elderly medicine outpatient services
- Primary care frailty service
- Continuing Healthcare assessment (including Funded Nursing Care)
- Fast Track care packages

Stated value is 7 year maximum - an affordability cap. All costs, liabilities including tax and profit elements must come within this affordability cap.

Affordability Cap

The affordability cap contains an indicative budget for the Phase 2 services (April 2019) which is based on a series of assumptions made by the CCG. The CCG will be reviewing these assumptions and indicative budgets

during Year 1 and will notify the Successful Bidder of any adjustments to the available budget for the Phase 2 services.

II.2.6) Estimated value

Value excluding VAT: 80 601 463.00 GBP

II.2.7) Duration of the contract or the framework agreement

Duration in months: 84

II.2.13) Information about European Union funds

The procurement is related to a project and/or programme financed by European Union funds: no

II.2.14) Additional information

Contract will be the NHS Accountable Care Model Contract.

Stated value is 7 year maximum - an affordability cap PLEASE REFER TO II.2.4

Financial payment package is based on: Whole Population Payment; Improvement Payment Scheme; Gain/Loss share; & KPI performance.

Integration agreements with CCG's GP practices & local social care provider are required.

Section III: Legal, economic, financial and technical information

III.1) Conditions for participation

III.1.4) Objective rules and criteria for participation

List and brief description of rules and criteria:

Bidders must submit a PQQ response. The PQQ sets out the rules of the Procurement Exercise, selection criteria & minimum requirements for selecting top 3 bidders for dialogue phase. There will be 1 round of dialogue.

Top 3 scoring bidders will be those who:

- pass all pass/fail questions;
- achieve a score greater than '0' on all scored questions (except finance);
- achieve an overall score of not less than 60%;

and are not otherwise excluded.

There is no minimum financial standing requirements but financial and economic standing is evaluated on a scored basis.

PQQ also evaluates/considers: grounds for mandatory/discretionary exclusion, technical & professional ability, requirements of Modern Slavery Act 2015, insurance, skills & apprentices, CQC registration, bidder's past performance, compliance with equality legislation, environmental management, health & safety, Performance guarantees/specific legal form may be required

III.1.5) Information about reserved contracts

III.2) Conditions related to the contract

III.2.1) Information about a particular profession

Execution of the service is reserved to a particular profession

Reference to the relevant law, regulation or administrative provision:

Bidders should note that the services required are such that the Bidders will need to comply with the legal requirements for regulatory registrations both for the provider and individual staff members, for example:

- CQC registration;
- NHS Provider Licence (where applicable);
- individual professional registration requirements (e.g. GMC registrations).

Further details are available in the tender documents and specified in the Contract. Bidders should note that some registration applications have significant lead times and Bidders should make their own enquiries as appropriate.

III.2.2) Contract performance conditions:

As set out in the draft contract and supporting contractual documentation to be released in due course. The draft contract will be based on the prevailing NHS Accountable Care Model Contract. Interested providers should in the meantime refer to the draft MCP contract and Integration Agreement available from <https://www.england.nhs.uk/ourwork/new-care-models/vanguards/care-models/community-sites/>

III.2.3) Information about staff responsible for the performance of the contract

Section IV: Procedure

IV.1) Description

IV.1.1) Form of procedure

Procedure involving negotiations

IV.1.3) Information about framework agreement

IV.1.10) Identification of the national rules applicable to the procedure:

IV.1.11) Main features of the award procedure:

A light touch regime procedure akin to competitive dialogue - a 2 stage procedure with a selection stage followed by a single dialogue phase.

It is envisaged that 3 bidders will proceed to dialogue, which will include the delivery of presentations and written working solutions culminating in a final call for tender.

Top level Evaluation Criteria (to be confirmed in ITPD):

Service delivery 30 - 45%

Mobilisation and Infrastructure 20 - 35%

Commercial, legal and risk 25 - 40%

IV.2) Administrative information

IV.2.1) Previous publication concerning this procedure

Notice number in the OJ S: [2017/S 057-105751](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:2017/S_057-105751)

IV.2.2) Time limit for receipt of tenders or requests to participate / Time limit for receipt of expressions of interest

Date: 31/07/2017

Local time: 09:00

IV.2.4) Languages in which tenders or requests to participate may be submitted:

English

Section VI: Complementary information

VI.2) Information about electronic workflows

Electronic invoicing will be accepted

Electronic payment will be used

VI.3) Additional information:

Access to Procurement Documents

Interested providers requiring access to the PQQ and other relevant documents should email Beth Nixon on beth.nixon@brownejacobson.com (see I.1) to request access links to www.bjaccess.net which is the procurement portal for this Procurement Exercise.

Further information

This procurement falls under the “light touch” regime of Regulations 74 to 78 of the Public Contracts Regulations 2015. Therefore this procurement exercise is being run in accordance with the 2015 Regulations as they apply to “light touch” services.

The Integrated Support and Assurance Process applies to this procurement and the CCG reserves the right to take such steps as necessary to comply with this. NHS Scarborough & Ryedale CCG is part of the Capped Expenditure Process (see below) and reserves the right to take such steps as necessary to address and respond to this process.

The CCG reserves the right to:

- conduct engagement and consultation exercises where required to do so based on the solutions put forward by bidders to comply with legal obligations or as otherwise deemed necessary by the CCG
- move to a managed negotiation in the event it only receives 1 compliant response to its PQQ or if bidders drop out or are removed from the process leaving only 1 bidder
- amend, add to, or withdraw all, or any part, of any tender document, cancel this procurement at any time and consider alternative procurement options without any liability to operators, prospective bidders or bidders
- vary, at its discretion any published timetable in relation to the Procurement Exercise.

Capped Expenditure Process

Across the local health system there are significant financial pressures. As a result, it has not been possible to produce financial plans that meet the funding allocations for York and Scarborough. This has caused the local health community to be placed into a process known as the Capped Expenditure Process (CEP), a national programme that includes a number of other financially challenged health communities. Further detail is contained in the PQQ.

NHS Scarborough & Ryedale CCG is working together, with NHS England and NHS Improvement, to draw up short-term financial recovery plans to improve the local financial position. At the same time, it is continuing to plan for the medium and longer term, focusing on designing better, more joined up services that will help people to stay well and reduce reliance on hospital-based care.

In the best interest of patients and service users, partner organisations from the local health and care system will be holding engagement and involvement events throughout the year so that local people will be able to find out about what might change and to help the CCG to put in place the kind of services that keep people well. Further engagement and involvement opportunities will be announced soon.

VI.4) Procedures for review

VI.4.1) Review body

VI.4.2) Body responsible for mediation procedures

VI.4.3) Review procedure

VI.4.4) Service from which information about the review procedure may be obtained

VI.5) Date of dispatch of this notice:

13/07/2017