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Tender

National Neonatal Audit Programme

Healthcare Quality Improvement Partnership Ltd

UK4: Tender notice - Procurement Act 2023 - [view information about notice types](#)

Notice identifier: 2026/S 000-004645

Procurement identifier (OCID): ocds-h6vhtk-0606bc

Published 20 January 2026, 10:05am

Changes to notice

This notice has been edited. The [previous version](#) is still available.

Scope

Description

The contract will initially be delivered for NHS-funded care in England, Wales, Scotland and the Isle of Man for a period of 3 years, at a maximum total budget of up to £1,233,000 GBP including VAT, £1,027,500 GBP excluding VAT. Bids exceeding this limit will be rejected. There is potential to extend the contract for up to two additional years.

All pricing submissions must be in regard to this 'core' value, and not inclusive of any extension costs or aspirational intent costs, i.e. Please only submit a cost schedule up to the maximum core value of £1,233,000 GBP including VAT, £1,027,500 GBP excluding VAT.

The maximum budget 'core' value is £1,233,000 GBP including VAT, £1,027,500 GBP excluding VAT excludes the potential two year extension and aspirational intent as described in section 14 of Annex A - Service Specification.

Please note, there is no commitment by the Authority at this stage to include any aspirational intent measures. Taking the total of this aspirational intent into account, as well as the possibility that a contract extension may be offered for an additional two years, the potential ceiling value is £8,069,908 GBP including VAT.

The role of a national clinical audit is to stimulate healthcare quality improvement through the provision of high-quality information on the organisation, delivery and outcomes of healthcare, together with tools and support to enable healthcare providers and other audiences to make best use of this information. Outcomes are benchmarked against available national guidance and standards e.g. quality standards from the National Institute for Health and Care Excellence (NICE), and those from other established professional and patient sources. Successful national audits are those where the individuals who are engaging with and using the audit results are also in a position to improve the system, and where there is a shared understanding of what good care looks like.

National clinical audits are expected to:

- a. Develop a robust, high-quality audit designed around key quality metrics likely to best support local and national healthcare quality improvement
- b. Detect, describe and help reduce unwarranted clinical variation by systematically benchmarking performance, identifying outliers, and supporting services to understand variation in outcomes, processes and experience
- c. Achieve, articulate and maintain close alignment with relevant NICE national guidance and quality standards throughout the audit, as appropriate
- d. Enable healthcare quality improvement through the provision of timely, high-quality data that compares providers of healthcare, and comprises an integrated mixture of named Trust or Health board, Integrated Care System (ICS), commissioner, multidisciplinary team (MDT), possibly consultant or clinical team level and other levels of reporting
- e. Engage patients, carers and the public in a meaningful way, achieving a strong patient voice which informs and contributes to the design, functioning, outputs and direction of the

audit

- f. Consider the value and feasibility of linking data at an individual patient level to other relevant national datasets either from the outset or in the future, and plan for these linkages from the inception of the contract
- g. Ensure robust methodological and statistical input at all stages of the audit
- h. Identify from the outset the full range of audiences for the reports and other audit outputs, and plan and tailor them accordingly
- i. Provide audit results in a timely, accessible and meaningful manner to support healthcare quality improvement, minimising the reporting delay and providing continual access to each unit for their own data
- j. Utilise strong and effective project and programme management to deliver audit outputs on time and within budget
- k. Develop and maintain strong engagement with local clinicians, networks, commissioners, patients and their families and carers and charity and community support groups in order to drive improvements in services

The anticipated outputs are:

- 1. Near real-time dynamic and interactive metric results
- 2. Publication of an annual state of the nation report
- 3. Quality improvement resources
- 4. The identification and notification of outliers

Additional desirable features are set out below; however, the supplier will work with stakeholders to identify the functionalities important to them:

- Presenting data via a range of graphic and tabular methods
- Allowing users to define their own views (in addition to any pre-defined filters)
- Functionality that compares a selected healthcare provider against other relevant comparators, and against averages for their nation, and allows the user to set their own healthcare provider comparators
- Functionality for users to download the aggregate data being presented in each view,

and the full set of graphs and visualisations for a chosen healthcare provider

- Planning this secure, non-disclosive public data visualisation system alongside any provision of login-protected local visualisation for data to support direct care and / or local quality improvement
- Presenting data on outlier status, particularly over time

Further details of the current audit can be found at - <https://www.rcpch.ac.uk/work-we-do/clinical-audits/nnap>

To respond to this opportunity, please visit <https://www.delta-esourcing.com/respond/65789NT583>

To view this notice, please click here:

<https://www.delta-esourcing.com/delta/viewNotice.html?noticeId=1007684720>

Total value (estimated)

- £8,069,908 including VAT

Above the relevant threshold

Contract dates (estimated)

- 1 April 2027 to 1 April 2030
- Possible extension to 31 March 2032
- 5 years

Description of possible extension:

Up to 2 years

Main procurement category

Services

CPV classifications

- 85000000 - Health and social work services

Contract locations

- UK - United Kingdom

Participation

Particular suitability

- Small and medium-sized enterprises (SME)
- Voluntary, community and social enterprises (VCSE)

Submission

Enquiry deadline

9 February 2026, 12:00pm

Tender submission deadline

23 February 2026, 12:00pm

Submission address and any special instructions

<https://www.delta-esourcing.com/respond/65789NT583>

Tenders may be submitted electronically

Yes

Languages that may be used for submission

English

Award decision date (estimated)

9 July 2026

Award criteria

Name	Type	Weighting
STIMULATING HEALTHCARE QUALITY IMPROVEMENT	Quality	12%
DATA ACQUISITION STRATEGY AND BURDEN	Quality	12%
DATA QUALITY ANALYSIS	Quality	12%
USES OF THE DATA	Quality	12%
PROGRAMME GOVERNANCE AND DELIVERY PLAN	Quality	12%
SOCIAL VALUE	Price	10%

Name	Type	Weighting
ENGAGING AND INVOLVING PATIENTS, CARERS AND THE PUBLIC	Quality	8%
HEALTHCARE PROVIDER ENGAGEMENT, PARTICIPATION AND SUPPORT	Quality	5%
ALLOCATION OF BUDGET	Quality	5%
LEADERSHIP	Quality	4%
INFORMATION GOVERNANCE	Quality	4%
RISK MANAGEMENT	Quality	4%

Other information

Description of risks to contract performance

Full descriptive details of these measures, as well as the mechanisms for invoking them can be found in section 14 of Annex A - Service Specification.

All figures are inclusive of VAT

Up to 24-month extension that mirrors the NCAPOP headline contract. - Up to £822,000 plus a pro-rata of any costs invoked under aspirational intent

Inclusion of additional clinical audits and/or Clinical Outcome Review Programmes (CORP). - Up to £1,440,000

Transition to different models of data collection/outputs &/or operational methods/processes for the audit. - Up to £631,080

Extending specific service coverage to include privately funded care. - Up to £360,000

Additions or enhancements to the service delivery of the project. - Up to £1,200,000

Additional quality improvement initiatives either related to or linked with the project. - Up to £360,000

Changes in line with national policy. - Up to £1,200,000

Providing information on national rates of brain injury in in preterm and term babies. - Up to £375,000

HQIP also allow additional devolved nations / crown dependencies (not listed in the service specification) to join programmes. The below figures are based off the Barnett formula, and are the maximum values exclusive of VAT.

Set up and development fees for additional national or international funders. - Up to £96,000

Northern Ireland - Up to £201,683

Guernsey - Up to £6,642

Jersey - Up to £9,961

Conflicts assessment prepared/revised

Yes

Procedure

Procedure type

Open procedure

Documents

Associated tender documents

[20.01.2026 NNAP specification FINAL revised.docx](#)

This revised specification removes the indicative transition dates for the transition tasks previously published under section 14.2 of the specification.

Any transition tasks detailed in section 14.2 of this revised specification should be included within the tendered proposal and cost envelope.

Contracting authority

Healthcare Quality Improvement Partnership Ltd

- Public Procurement Organisation Number: PVVQ-6113-CJWD

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London

EC1V 2NX

United Kingdom

Email: procurement@hqip.org.uk

Region: UKI43 - Haringey and Islington

Organisation type: Public authority - sub-central government