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Planning

## **NWL0147 Community Specialist Palliative and End of Life Care Services - Hillingdon, Brent, Harrow, Hounslow, Westminster, Kensington & Chelsea, Hammersmith & Fulham**

NHS North West London Integrated Care Board

F01: Prior information notice

Prior information only

Notice identifier: 2023/S 000-006242

Procurement identifier (OCID): ocids-h6vhtk-03add3

Published 3 March 2023, 7:15am

### **Section I: Contracting authority**

#### **I.1) Name and addresses**

NHS North West London Integrated Care Board

15 Marylebone Rd,

London

NW1 5JD

#### **Contact**

NHS North West London Contracts Team

#### **Email**

[nhsnwlccg.contracting@nhs.net](mailto:nhsnwlccg.contracting@nhs.net)

#### **Country**

United Kingdom

**Region code**

UKI32 - Westminster

**Internet address(es)**

Main address

<https://www.nwlondonics.nhs.uk>

Buyer's address

<https://www.nwlondonics.nhs.uk>

**I.3) Communication**

Additional information can be obtained from the above-mentioned address

Electronic communication requires the use of tools and devices that are not generally available. Unrestricted and full direct access to these tools and devices is possible, free of charge, at

<https://health-family.force.com/s/Welcome>

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

Body governed by public law

**I.5) Main activity**

Health

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## Section II: Object

### II.1) Scope of the procurement

#### II.1.1) Title

NWL0147 Community Specialist Palliative and End of Life Care Services - Hillingdon, Brent, Harrow, Hounslow, Westminster, Kensington & Chelsea, Hammersmith & Fulham

#### II.1.2) Main CPV code

- 85100000 - Health services

#### II.1.3) Type of contract

Services

#### II.1.4) Short description

NHS NW London ICB requires the provision of Community Specialist Palliative and End of Life Care Services for adults (18+) living with progressive life limiting/ terminal conditions with or without co-morbidities; such as but not limited to irreversible organ failures of heart, liver, kidney; cancer, complex neurological conditions, HIV/Aids; from 1 April 2023 to 31 March 2024.

These services are currently being delivered by the organisations set out below (contract values as of 22/23):

- Harington Hospice (Hillingdon): £933,606
- St John's Hospice (Brent): £276,970
- St John's Hospice (Triborough): £2,047,974
- St Luke's Hospice (Harrow & Brent): £720,951+ £1,072,111
- Marie Curie Hampstead Hospice (Brent): £114,107
- Marie Curie Nursing Services (EOL Rapid response and Planned variable nursing services – Hounslow): £213,932

The current total contract value of the above contracts is £5,379,651. The estimated total contract value for the 12 month period (1 April 2023 to 31 March 2024) is £5,508,760. The purpose of this notice is to be transparent in the ICB's intentions to award a further contract to these organisations, being the only capable providers. The contract version used will be the NHS Standard Contract (Shorter-Form) Particulars.

The ICB is of the view that the services described are capable of being provided only by the providers mentioned in this notice, and are not aware of other providers who can deliver the required level of care and services at the current tariffs and who have estates

in the areas where services need to be delivered. The described charitable hospice services are partially funded by the service providers including charitable contributions. The funding envelope available is based on continuation of charitable funding to support delivery of specialist palliative care services, in line with the stated aims of the charitable hospice sector. For a provider to be able to apply, they need to be able to demonstrate that they have the appropriate estates (i.e. hospice inpatient unit facilities), are specialist palliative care providers with the necessary specialist workforce in line with the conditions of participation set out in the notice.

Should your organisation be interested and capable to deliver this service in the required location(s), please submit your interest via [nhsnwl.contracting@nhs.net](mailto:nhsnwl.contracting@nhs.net) and include a 300-500 word summary of how your organisation meets the set out condition of participation set out in the FTS PIN notice. Capable providers may come forward by 17:00 on 31 March 2023. In absence of competition, a further 12 month contract will be awarded to the providers set out above.

Main components of the Specialist Level Palliative Care (SLPC) services:

- Delivered by a Specialist Level Palliative Care Multidisciplinary Team (SLPC MDT) with the requisite qualifications, expertise and experience in offering care
- Specialist knowledge (specialist consultant and specialist nursing services as a minimum) to assess and manage physical, psychological, social, religious and spiritual needs to reduce symptoms, suffering and distress
- Providing 24/7 specialist telephone advice
- Community SPC nursing
- Providing education and training to the wider care team who are providing direct core level palliative care to the person
- Supporting complex assessment and symptom management
- Coordinated home support with general providers to enable patients to stay at home day care services
- Hospice inpatient beds, Hospice At Home, Hospice outpatient, day and other wellbeing services
- Family & Carer support
- Bereavement support

Please refer to the Conditions Of Participation section below.

#### **II.1.5) Estimated total value**

Value excluding VAT: £5,508,763

#### **II.1.6) Information about lots**

This contract is divided into lots: No

## II.2) Description

### II.2.3) Place of performance

NUTS codes

- UKI74 - Harrow and Hillingdon

### II.2.4) Description of the procurement

#### CONDITIONS FOR PARTICIPATION

Capable providers with appropriate premises/estates (ie SPC inpatient units) that have the ability to meet the below key service provisions may come forward to express their interest in the opportunity:

- Hospice inpatient beds
- Hospice At Home services
- A SLPC MDT with ability to provide specialist telephone advice on 24/7 basis.
- Community SPC Nursing to support care at home/ usual place of residence.
- Hospice outpatient, day and well-being services
- Advanced symptom management (complex symptom management skills, knowledge of the deterioration and dying process, understanding of rare disorders and their pathways) meet the needs of patient (physical, emotional and psychological).
- Psychosocial support for patients and their families, and professionals (this may be via referral to other community services).
- Bereavement support for people with complex needs (this may be via referral to other community services).
- The specialist MDT will deliver training and education as for wider generalist workforce (eg. GPs, Care home staff, District Nursing) and the person's carers to ensure they have the relevant skills and know when to seek specialist advice.
- Support for personalised care and support conversations and advance care planning, including emergency care and treatment planning and accessing NHS continuing healthcare funding and care.
- Parallel planning with condition-specific teams, e.g. heart failure specialists, respiratory team, complex neurological diseases team – this is appropriate for people whose recovery is uncertain.
- Support for end of life decision-making, including preferred place of care if important to the person.
- Support access to specialist equipment in the home.
- Input into MDTs, pre- and debriefs relating to a person's death, and other professional meetings, at hospitals, hospices and in the community.
- The MDT should work closely with other community and acute services to achieve seamless care in line with the agreed personalised care and support plan for patients.

Assurance of delivery against the key objectives of a SLPC MDT:

- Use the personalised care and support plan co-produced with the patient and those important them, and where applicable an advance care plan (or equivalent), and support implementation of a plan where required.
- Advise on equipment and resources required to support the patient; ensure this is available at the right time and in the right place.
- All medicines and prescribing are available when needed, with appropriate specialist support as required.
- All transfers of care are planned for with plans communicated, e.g. discharge or between care settings.

#### Staffing requirements:

- Consultants in palliative medicine – who may provide clinical leadership across a number of locality teams.
- Nurses specialising in palliative care.
- Within a locality, the SLPC MDT must have arrangements in place with the following professionals experienced in palliative care: physiotherapists, occupational therapists, social workers, practitioners with recognised postgraduate qualifications in psychological care and experience, practitioners with spiritual care experience, dietitians, speech and language therapists, pharmacists, specialists in interventional pain management.
- Established liaison with primary care networks and social care, and mechanisms for them to contribute to MDTs.

Capable provider can submit their interest by 17:00 on 31st March 2023 via [nhsnw1.contracting@nhs.net](mailto:nhsnw1.contracting@nhs.net) and include a 300-500 word summary of how their organisation meets the set out condition of participation set out in the FTS PIN notice.

The ICB is committed to assess the needs of the service users and consider how it needs to secure the needs of the people, and improve the quality and efficiency in the provision of the services including through the services being provided in an integrated way.

### **II.3) Estimated date of publication of contract notice**

2 March 2023

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## **Section IV. Procedure**

### **IV.1) Description**

#### **IV.1.8) Information about the Government Procurement Agreement (GPA)**

The procurement is covered by the Government Procurement Agreement: No