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Contract

Community Pharmacy Scheme for On Demand Availability of Drugs for Palliative Care CPS001

NHS Surrey Heartlands ICB

F03: Contract award notice

Notice identifier: 2024/S 000-006920

Procurement identifier (OCID): ocids-h6vhtk-04455e

Published 4 March 2024, 8:20pm

Section I: Contracting authority

I.1) Name and addresses

NHS Surrey Heartlands ICB

Block C, 1st Floor, Dukes Court, Duke Street

WOKING

KT229AE

Email

syheartlandsicb.contracts@nhs.net

Country

United Kingdom

Region code

UKJ25 - West Surrey

NHS Organisation Data Service

QXU

Internet address(es)

Main address

www.surreyheartlands.org

I.4) Type of the contracting authority

Other type

NHS

I.5) Main activity

Health

Section II: Object

II.1) Scope of the procurement

II.1.1) Title

Community Pharmacy Scheme for On Demand Availability of Drugs for Palliative Care
CPS001

II.1.2) Main CPV code

- 85141000 - Services provided by medical personnel

II.1.3) Type of contract

Services

II.1.4) Short description

CPV Code 85149000-5 applies - Pharmacy services, but not including community pharmacy services that are arranged under The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

This is a Primary Care Locally Commissioned Service entitled Community Pharmacy Scheme for the On Demand Availability of Drugs for Palliative Care (ODADPC).

The service provides immediate and consistent access to palliative care medication across Surrey with the ultimate aim of providing the best level of End-of-Life care in the last weeks of a patient's life. The service supports patients to live and die in their place of choice and to reduce inappropriate admissions in the last weeks of life. Early warning is provided to Community Pharmacies from the Palliative Care Consultant, GP, District Nurse or Palliative Care Nurse about the type and volume of drugs the patient is using to enable appointed Community Pharmacies to be prepared for necessary prescriptions.

The ODADPC LCS is not a service commissioned nationally by NHSE, and the service commissioned by Surrey Heartlands ICB is outside of Community Pharmacy's National contract. Therefore, a gap remains which Surrey Heartlands ICB fills using this LCS and which means the service falls within the scope of the PSR.

II.1.6) Information about lots

This contract is divided into lots: No

II.1.7) Total value of the procurement (excluding VAT)

Value excluding VAT: £2,100

II.2) Description

II.2.2) Additional CPV code(s)

- 85149000 - Pharmacy services

II.2.3) Place of performance

NUTS codes

- UKJ25 - West Surrey

II.2.4) Description of the procurement

Surrey Heartlands ICB intends to award a contract to an existing provider under Direct Award Process C for Community Pharmacy Scheme for On Demand Availability of Drugs for Palliative Care.

This is a Primary Care Locally Commissioned Service which provides immediate and consistent access to palliative care medication across Surrey with the ultimate aim of providing the best level of End-of-Life care in the last weeks of a patient's life. The service supports patients to live and die in their place of choice and to reduce inappropriate admissions in the last weeks of life. Early warning is provided to Community Pharmacies from the Palliative Care Consultant, GP, District Nurse or Palliative Care Nurse about the type and volume of drugs the patient is using to enable appointed Community Pharmacies to be prepared for necessary prescriptions.

The ODADPC LCS is not a service commissioned nationally by NHSE, and the service commissioned by Surrey Heartlands ICB is outside of Community Pharmacy's National contract. Therefore, a gap remains which Surrey Heartlands ICB fills using this LCS and which means the service falls within the scope of the PSR.

The contract term is two years with a value of £2,100.00 from 1st April 2024 - 31st March 2026.

II.2.5) Award criteria

Quality criterion - Name: The existing provider is satisfying the original contract and will likely satisfy the proposed contract to a sufficient standard / Weighting: 100

Cost criterion - Name: PSR direct award C criteria and Key Criteria as below / Weighting: 100

II.2.11) Information about options

Options: No

II.2.14) Additional information

Direct Award Process C criteria are met for this service:

- (a) Direct Award Processes A or B are not applicable.
- (b) the term of an existing contract is due to expire and a new contract will replace it; contract terms and conditions remain the same bar two non-material adjustments:
 - (i) A small service review financial increase from £1,000 paid annually to providers to £1,050 per year per provider over a two-year term.
 - (ii) A new contract clause to state if the service is de-commissioned stock not used after 3 months of de-commissioning will be reimbursed by the commissioner up to the total original pack quantity as specified in the "minimum quantity held" within the service specification and contract.
- (c) the considerable change threshold is not met
- (d) Surrey Heartlands ICB believes the current provider is satisfying the existing contract to a sufficient standard according to the contract and taking into account the key criteria and basic selection criteria.
- (f) This will not be a framework agreement.

Basic Selection Criteria, of equal importance, is applicable to the existing and proposed contracts .

Assessment against Key Criteria undertaken in order of importance i.e. Key criteria 1 and 2 are weighted equally as most important followed by key criteria 3 and 4 being weighted equally, followed by key criteria 5

1 Improving access, reducing health inequalities and facilitating choice ensuring accessibility to services and treatments for all eligible patients, improving health inequalities and ensuring that patients have choice in respect of their health care

- Service is specifically designed to support patients to live and die in their place of choice.
- Choice and accessibility is provided to healthcare professionals from a location close to

a patient's home.

- Choice reduces inappropriate admissions in the last weeks of life and ensures a consistent and equal treatment approach for all.
- Spot checks are performed during the contract period.
- The proposed contract will replicate the existing contract. It is anticipated that performance will be maintained at the current high level of delivery or be enhanced.

2 Integration, collaboration and service sustainability

the extent to which services can be provided in

- (i) an integrated way (including with other health care services, health-related services or social care services),
 - (ii) a collaborative way (including with providers and with persons providing health-related services or social care services), and
 - (iii) a sustainable way (which includes the stability of good quality health care services or service continuity of health care services), so as to improve health outcomes
- Service is utilised by health care professionals collaboratively with patients, social care, carers, families and others involved in the care plan.
 - Service providers maintain strong collaborative working relationships with the individuals above.
 - Stock and dates are checked regularly and replaced when required. The service can be relied upon by healthcare workers and recipient patients.
 - Service supports integrating community pharmacy into neighbourhoods as a partner in delivering services collaboratively.

3 Quality & Innovation

the need to ensure good quality services and the need to support the potential for the development and implementation of new or significantly improved services or processes that will improve the delivery of health care or health outcomes

- The pharmacy contractor will maintain appropriate records to ensure effective ongoing service delivery.

- The pharmacy contractor is required to submit an annual audit return form.
- The pharmacy will review its standard operating procedures and the referral pathways for this service on a two-year basis.
- The pharmacy is required to demonstrate that pharmacists and staff involved in the provision of the service have undertaken CPD relevant to this service.

4 Value

the need to strive to achieve good value in terms of the balance of costs, overall benefits and the financial implications of a proposed contracting arrangement

- Evidenced by contracting with a specified number of pharmacies for the guaranteed provision of these medications as opposed to the expense and potential waste of all pharmacies providing supply.
- Financial savings realised from preventing unplanned hospital admission.

5 Social Value

whether what is proposed might improve economic, social and environmental well-being in the geographical area relevant to a proposed contracting arrangement.

- Supporting patients to stay at home enables family members and friends to visit to a greater extent than in a hospital setting, e.g. it is likely that visitors will have less travel miles and time to the patient's home coupled with visitors not having to pay for hospital parking to visit the patient, which could be prohibitive.

Section IV. Procedure

IV.1) Description

IV.1.1) Type of procedure

Award of a contract without prior publication of a call for competition in the cases listed below

- The procurement falls outside the scope of application of the regulations

Explanation:

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award. The publication of this notice marks the start of the standstill period. Representations by providers must be made to the relevant authority by [Add date]. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

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

The procurement is covered by the Government Procurement Agreement: No

Section V. Award of contract

A contract/lot is awarded: Yes

V.2) Award of contract

V.2.1) Date of conclusion of the contract

26 February 2024

V.2.2) Information about tenders

Number of tenders received: 1

The contract has been awarded to a group of economic operators: No

V.2.3) Name and address of the contractor

Day Lewis Haslemere Healthcare LLP T/A Haslemere Pharmacy

2 Peterwood Way

Croydon

CR0 4UQ

Country

United Kingdom

NUTS code

- UKJ25 - West Surrey

NHS Organisation Data Service

FAX02

The contractor is an SME

No

V.2.4) Information on value of contract/lot (excluding VAT)

Initial estimated total value of the contract/lot: £2,100

Total value of the contract/lot: £2,100

Section VI. Complementary information

VI.3) Additional information

This is a Provider Selection Regime (PSR) intention to award notice. The awarding of this contract is subject to the Health Care Services (Provider Selection Regime) Regulations 2023. For the avoidance of doubt, the provisions of the Public Contracts Regulations 2015 do not apply to this award. The publication of this notice marks the start of the standstill period.

Representations by providers must be made to decision makers by 13 March 2024. This contract has not yet formally been awarded; this notice serves as an intention to award under the PSR.

Award decision makers are:

Members of the Medicines Optimisation Board approved recommendation to Commissioning, Contracting and Commercial Committee on 17th January 2024.

Members of Commissioning, Contracting and Commercial Committee approved recommendation to the Executive Team on 12th February 2024.

Surrey Heartlands Executive Team approved route to market on 26th February 2024.

No conflicts of interest were identified amongst members of the committees above.

The PSR allows for five provider selection processes when awarding contracts. Direct Award Processes A and B are inappropriate for this service.

The following Direct Award Process C criteria are met for this service:

PSR Direct Award Process C criteria

(a) the relevant authority is not required to follow Direct Award Process A or Direct Award Process B. These processes are not applicable for this service.

(b) the term of an existing contract is due to expire, and the relevant authority proposes a new contract to replace that existing contract at the end of its term. New contracts are to be awarded on expiration. Contract terms and conditions remain the same bar two non-material small adjustments:

(i) A small service review financial increase from £1,000 paid annually to providers to £1,050 per year per provider over a two-year term. This is not considered material under

the Provider Selection Regime 2023.

(ii) A new clause is added to the LCS contract to state that if the service is de-commissioned from a provider, any stock not used after 3 months of de-commissioning will be reimbursed by the commissioner up to the total original pack quantity as specified in the "minimum quantity held" column within the service specification and contract. This minor change means that the considerable change threshold is not met.

(c) the considerable change threshold is not met

(d) the relevant authority is of the view that the existing provider is satisfying the existing contract to a sufficient standard according to the detail outlined in the contract and also taking in account the key criteria and applying basic selection criteria Existing providers are satisfying current contract terms. All Pharmacies in Surrey are aware of this service and there is provision to express interest in providing it. No new providers have expressed interest in the contracts and so it is proposed to continue contracting with those currently doing so. All Pharmacies currently proving the service are considered able to satisfy the proposed contract.

(e) the relevant authority is of the view that the existing provider will likely satisfy the proposed contract to a sufficient standard taking into account the key criteria and applying the basic selection criteria

(f) the procurement is not to conclude a framework agreement. This will not be a framework agreement.

PSR Direct Award Process C evidence of competence

Basic Selection Criteria - of equal importance

- Physical pharmacy based in Surrey Heartlands
- To hold list A - Opening Days of the Week Mon - Sat
- To hold list B - Opening Days of the Week Mon - Sun
- Location - To hold list B - One pharmacy per Place

Assessment against Key Criteria in order of importance

Note: Key criteria 1 and 2 are weighted equally as most important for this service, followed by key criteria 3 and 4 being weighted equally, followed by key criteria 5

1. Improving access, reducing health inequalities and facilitating choice ensuring

accessibility to services and treatments for all eligible patients, improving health inequalities and ensuring that patients have choice in respect of their health care

- This service is specifically designed to support patients to live and die in their place of choice.
- Choice and accessibility is provided to healthcare professionals seeking to obtain palliative care drugs from a location close to a patient's home.
- Allowing people choice reduces inappropriate admissions in the last weeks of life and ensures a consistent and equal treatment approach for all.
- Spot checks are performed during the contract period to ensure the pharmacies are holding all the drugs they are commissioned to hold within the service specification. The spot check involves phoning the pharmacy to confirm which drugs and the quantity to ensure continuity of access to these specialist medicines when they are required.
- The terms and conditions of the proposed contract will replicate the existing contract. It is anticipated that performance will be maintained at the current high level of delivery or be enhanced.

2. Integration, collaboration and service sustainability

the extent to which services can be provided in

(i) an integrated way (including with other health care services, health-related services or social care services),

(ii) a collaborative way (including with providers and with persons providing health-related services or social care services), and

(iii) a sustainable way (which includes the stability of good quality health care services or service continuity of health care services), so as to improve health outcomes

- The service is utilised by health care professionals working in the community collaboratively with patients, social care, carers, families and others involved in their care plan.
- The service providers maintain strong collaborative working relationships with the individuals mentioned above.
- Medication is held, in date, by stated Pharmacies. Stock and dates are checked regularly and replaced when required. The service can be relied upon by healthcare workers and recipient patients. (Spot checks undertaken by the ICB Medicines

Optimisation team).

- Any issues with access to palliative care drugs are shared with the Surrey Heartlands Palliative Care Group to look at seeking resolutions and preventing recurrence.
- This service supports integrating community pharmacy into neighbourhoods as a partner in delivering services collaboratively for the benefit of the local population.

3. Quality & Innovation

the need to ensure good quality services and the need to support the potential for the development and implementation of new or significantly improved services or processes that will improve the delivery of health care or health outcomes

- The pharmacy contractor will maintain appropriate records to ensure effective ongoing service delivery.
- The pharmacy contractor is required to submit an annual audit return form to seek the following information:
 - o Which drugs, including quantity of items, dispensed under this scheme
 - o Any reasons for non-supply (giving details) or details of any other issues experience
 - o In cases of non-supply details of other community pharmacies contacted and
 - o Which community pharmacy was able to fulfil the prescriptions.
- Any issues with access to palliative care drugs are shared with the Surrey Heartlands Palliative Care Group to look at seeking resolutions and preventing recurrence.
- The pharmacy will review its standard operating procedures and the referral pathways for this service on a two-year basis.
- The pharmacy is required to demonstrate that pharmacists and staff involved in the provision of the service have undertaken continuing professional development (CPD) relevant to this service.

4. Value

the need to strive to achieve good value in terms of the balance of costs, overall benefits and the financial implications of a proposed contracting arrangement

- Evidenced by contracting with a specified number of pharmacies for the guaranteed

provision of these medications as opposed to the expense and potential waste of all pharmacies obtaining all drugs within the service specification.

- There are financial savings made from preventing an unplanned hospital admission.

5. Social Value

whether what is proposed might improve economic, social and environmental well-being in the geographical area relevant to a proposed contracting arrangement.

- This service allows patients to be managed in their own homes in the last days / weeks of life and therefore enables family members and friends to visit to a greater extent than if in a hospital setting, e.g. it is likely that visitors will have less travel miles and time to the patient's home compared with needing to visit in hospital, coupled with visitors not having to pay for hospital parking to visit the patient, which could be prohibitive.

Written representations should be sent to syheartlandsicb.contractsadmin@nhs.net.

VI.4) Procedures for review

VI.4.1) Review body

Surrey Heartlands ICB

Woking

GU21 5BH

Country

United Kingdom