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Not applicable

## **Community Musculoskeletal and Pain Service for NHS Mid and South Essex Integrated Care Board**

NHS Mid and South Essex Integrated Care Board

F14: Notice for changes or additional information

Notice identifier: 2025/S 000-009899

Procurement identifier (OCID): ocds-h6vhtk-04a3c0

Published 18 March 2025, 1:11pm

### **Section I: Contracting authority/entity**

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

NHS Mid and South Essex Integrated Care Board

PO Box 6483

Basildon

SS14 0UG

#### **Email**

[amy.wilson@attain.co.uk](mailto:amy.wilson@attain.co.uk)

#### **Country**

United Kingdom

#### **Region code**

UKH3 - Essex

#### **National registration number**

QH8

**Internet address(es)**

Main address

<https://www.midandsouthessex.ics.nhs.uk/>

Buyer's address

<https://attain.bravosolution.co.uk/>

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## **Section II: Object**

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

#### **II.1.1) Title**

Community Musculoskeletal and Pain Service for NHS Mid and South Essex Integrated Care Board

Reference number

ACE-0755-2024-MSE Integrated MSK

#### **II.1.2) Main CPV code**

- 85100000 - Health services

#### **II.1.3) Type of contract**

Services

#### **II.1.4) Short description**

This Corrigendum is being issued by NHS Mid and South Essex Integrated Care Board to notify the market that the Authority is abandoning the most suitable provider process to award a contract for the Integrated Community Musculoskeletal and Pain Service, previously communicated via publication of a Prior Information Notice (2024/S 000-031036) on 27th September 2024.

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## Section VI. Complementary information

### VI.6) Original notice reference

Notice number: [2024/S 000-031036](#)

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## Section VII. Changes

### VII.1.2) Text to be corrected in the original notice

Section number

Section II

Lot No

N/A

Place of text to be modified

### II.2.4) Description of the procurement

Instead of

Text

For the purposes of this Process, the Authority defines the Most Suitable Provider as the lead economic operator participating in the Process and acting on behalf of a group/consortium of organisations that will come together specifically for the purpose of being assessed by the Authority as most suitably qualified and experienced and technically and professionally capable of collaboratively delivering the Proposed Contract via the groups/consortiums chosen bidding model and legal structure, which will be determined and agreed to best meet the Authority's Specification and requirements. For example, a Special Purpose Vehicle (SPV) or Lead Provider and Sub-Contractor arrangements.

To satisfy the Regulations, the Authority intends to undertake appropriate due diligence to assess the MSP in accordance with Regulation 19 (Basic Selection Criteria) and Regulation 20 (Exclusions) and with reference to the Key Criteria (Regulation 5), ensuring the most suitable provider has the legal and financial capacities and the technical and professional abilities to deliver the Proposed Contract over the term. Additionally, the Authority will hold a series of structured dialogue sessions with the MSP to further assess the MSP against the Key Criteria. As a result of a successful conclusion to such assessment and Process, the Authority intends to make a decision to award the Proposed

Contract to the MSP.

The Authority will observe a minimum of 14 days after the day on which this Notice of Intention is submitted for publication prior to assessing the MSP in accordance with Schedule 5 of PSR.

The Proposed Contract duration is five years from 1st November 2025 until 31st October 2030 with an option to extend for a further three years until 31st October 2033.

The MSP must evidence that it satisfies the basic selection criteria, and:

- is most suitably qualified and experienced and technically and professionally capable of delivering the Proposed Contract through an appropriately structured bidding model and legal status
- has a demonstrable track record of successful integrated delivery of the Service and has the necessary experience in multi-disciplinary integrated care.
- is pro-actively committed to working collaboratively with other providers within the group/consortium to deliver the Service outcomes across MSE in a whole system approach, via shared objectives and governance framework.
- is uniquely placed to deliver the specification, vision, and strategic objectives of the MSE ICS.
- is capable of financially holding and managing the scale of risk through a degree of income risk share.
- is willing and capable of developing mature system relationships (and associated contractual mechanisms) enabling the governing bodies of all participating organisations within any group/consortium to accept any financial risks and potential gains associated with joint working.
- is willing to sign an NHS Standard Contract with the Authority, and / or sign sub-contracts that are back-to-back with such NHS Standard Contract, where relevant to the successful bidding model.

The Authority proposes a cost and volume financial model (local prices) in line with national guidance. The potential aggregate contract value (incl. extension term, growth/inflation assumptions, and potential variations) is £164,452,499 (excluding VAT). The financial envelope which acts as an affordability cap for the purposes of the Process is £86,540,287 based on the initial 5-year contract term.

Read

Text

For the purposes of this Process, the Authority defined the Most Suitable Provider as the lead economic operator participating in the Process and acting on behalf of a group/consortium of organisations coming together specifically for the purpose of being assessed by the Authority as most suitably qualified and experienced and technically and professionally capable of collaboratively delivering the Proposed Contract via the groups/consortiums chosen bidding model and legal structure to best meet the Authority's Specification and requirements. For example, a Special Purpose Vehicle (SPV) or Lead Provider and Sub-Contractor arrangements.

To satisfy the Regulations, the Authority undertook appropriate due diligence to assess the MSP in accordance with Regulation 19 (Basic Selection Criteria) and Regulation 20 (Exclusions) and with reference to the Key Criteria (Regulation 5), ensuring the most suitable provider has the legal and financial capacities and the technical and professional abilities to deliver the Proposed Contract over the term. The Authority held a series of structured dialogue sessions with the MSP to further assess the MSP against the Key Criteria.

Under the Regulations, the Authority is legally only able to undertake this Process if it is of the view, considering likely providers and all relevant information available to it at this time, that it is likely to be able to identify the most suitable provider (MSP) without running a competitive process. Unfortunately, it has become clear during the Process that the Authority is unable to identify the most suitable provider this way and as such is unable to conclude the Process or award the Proposed Contract.

As such, the Authority has decided to abandon the Process at Phase 2, prior to submission of the MSPs initial tender response post-dialogue. The Service will instead be re-procured via a competitive process under the Regulations, and when appropriate, the Authority will communicate commencement of such process via relevant Transparency Notices in Find a Tender Service.

Section number

Section II

Lot No

N/A

Place of text to be modified

II.2.14) Additional information

Instead of

Text

This is a Provider Selection Regime (PSR) intended approach 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. The award decision-maker for this process is NHS Mid and South Essex Integrated Care Board (ICB).

Read

Text

This is a Provider Selection Regime (PSR) notice to communicate that this provider selection process has been abandoned and a contract has not been awarded. This process has been abandoned under 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.' The decision-maker for this process being abandoned is NHS Mid and South Essex Integrated Care Board (ICB).

Section number

Section II

Lot No

N/A

Place of text to be modified

II.1.4) Short description

Instead of

Text

This Intended Approach Notice to follow the Most Suitable Provider Process relates to the decision made by NHS Mid and South Essex Integrated Care Board (the Authority) to award a contract for an Integrated Community Musculoskeletal and Pain Service (the Service) via undertaking (and holding themselves bound solely by those Regulations applicable to) the Most Suitable Provider (MSP) process (the Process) as defined by Regulations 6(6) and 10 under the Health Care Services (Provider Selection Regime) Regulations 2023.

Historic commissioning arrangements of the Service have led to health inequalities in

access and delivery of pathways across the Mid and South Essex (MSE) Integrated Care System (ICS). Due to new ways of working, increasing collaboration, and communication across primary, community and secondary care, implementing the Service will ensure there is equitable provision and pathways for all MSE residents.

Working with stakeholders the Authority developed a new community pathway for people aged 16 years+, based on the East of England Musculoskeletal (MSK) Pathway Improvement Framework, the Best MSK high impact recommendations and adhering to the Getting It Right First Time (GIRFT) pathway. This new model of care will provide integration across the Best MSK pathway including Single Point of Access (SPoA), clinical triage, physiotherapy, orthopaedics, spinal, rheumatology, pain management, surgical interventions and therapies across MSE. It will assess and treat more patients outside of acute services and deliver improved outcomes, quality and patient experience of care.

In applying the Process, the Authority has considered the five Key Criteria and has identified the Service and proposed contracting model will support the MSK core purposes of reducing unwarranted variation, sharing best practice, improving access, outcomes and experience of patients, enabling best lifelong MSK health within all communities, and improving quality and patient safety. Additionally, it aligns with the ICS four purposes to improve outcomes in populations health and healthcare, tackle inequalities in outcomes, experience and access, enhance productivity and value for money and help the NHS support broader social and economic development.

In applying this Process, the Authority has undertaken appropriate pre-market engagement to update its knowledge of relevant providers including understanding their ability to deliver the Service to the relevant local population and connections with other parts of the MSE ICS. Through clinical congress with stewards across the system, it is of the view, taking into account likely providers and all relevant information available to it at this time, that it is likely to be able to identify the MSP without running a competitive process.

Further details can be found at sections II.2.4) , II.2.14) and VI.3).

Read

Text

This Corrigendum replaces the Intended Approach Notice to follow the Most Suitable Provider Process communicated by NHS Mid and South Essex Integrated Care Board (the Authority) to award a contract for an Integrated Community Musculoskeletal and Pain Service (the Service) via undertaking (and holding themselves bound solely by those Regulations applicable to) the Most Suitable Provider (MSP) process (the Process) as defined by Regulations 6(6) and 10 under the Health Care Services (Provider Selection Regime) Regulations 2023.

Historic commissioning arrangements of the Service have led to health inequalities in access and delivery of pathways across the Mid and South Essex (MSE) Integrated Care System (ICS). Due to new ways of working, increasing collaboration, and communication across primary, community and secondary care, implementing the Service will ensure there is equitable provision and pathways for all MSE residents.

Working with stakeholders the Authority developed a new community pathway for people aged 16 years+, based on the East of England Musculoskeletal (MSK) Pathway Improvement Framework, the Best MSK high impact recommendations and adhering to the Getting It Right First Time (GIRFT) pathway. This new model of care will provide integration across the Best MSK pathway including Single Point of Access (SPoA), clinical triage, physiotherapy, orthopaedics, spinal, rheumatology, pain management, surgical interventions and therapies across MSE. It will assess and treat more patients outside of acute services and deliver improved outcomes, quality and patient experience of care.

In applying the Process, the Authority considered the five Key Criteria and identified the Service and proposed contracting model would support the MSK core purposes of reducing unwarranted variation, sharing best practice, improving access, outcomes and experience of patients, enabling best lifelong MSK health within all communities, and improving quality and patient safety. Additionally, it aligned with the ICS four purposes to improve outcomes in populations health and healthcare, tackle inequalities in outcomes, experience and access, enhance productivity and value for money and help the NHS support broader social and economic development.

The Authority undertook appropriate pre-market engagement to update its knowledge of relevant providers including understanding their ability to deliver the Service to the relevant local population and connections with other parts of the MSE ICS. Through clinical congress with stewards across the system, it was of the view, considering likely providers and all relevant information available to it at the time, that it was likely to be able to identify the MSP without running a competitive process. However, the Authority has since made a decision to abandon the most suitable provider process at Phase 2 – Invitation to Participate in Dialogue.

Further details can be found at sections II.2.4) , II.2.14) and VI.3)

Section number

Section VI

Lot No

N/A

Place of text to be modified

### VI.3) Additional information

Instead of

Text

In accordance with Regulation 21 of the PSR the Authority is maintaining a Conflicts of Interest Register for this Process and any conflicts / how they are managed will be published alongside the confirmation of the decision to select the MSP in due course.

In accordance with Regulation 13 of PSR, Modification of contracts during their term, the Services covered by the arrangement may change and expand over the Contract Term. Examples of areas that could be varied into the Contract for future delivery include but are not limited to additional shared care pathways (including prescribing) with acute or primary care .

Any queries regarding this Process should be directed to the Named Contact in this Notice and the email address provided herein.

Read

Text

In accordance with Regulation 21 of the PSR the Authority has maintained a Conflicts of Interest Register for this Process and any conflicts / how they are managed will be published alongside the confirmation of any future contract award decision for the Service.

Any queries regarding this Process or the abandonment of such should be directed to the Named Contact in this Notice and the email address provided herein.